



Division of Developmental Disabilities

POLICY NOTIFICATION

Early Notification Transmittal Date: April 1, 2026

Public Comment Transmittal Date: May 6, 2026

NOTIFICATION

DDD is proposing *changes to the following policy* :

AdSS Medical Policy Manual - 980 Performance Improvement Projects

This document has been **Revised** to align with Division and AHCCCS Policy 980 updates, including:

- New DES logo added.
- Added, removed, and updated definitions in the Definition Section.
- Policy restructured and revised to enhance clarity, flow, and further alignment with language found within the Centers for Medicare and Medicaid Services Performance Improvement Projects.
- Removed outdated and duplicative language.
- "Line of Business" changed to "program."
- Section referring to AHCCCS 980 Attachment A was removed. Attachment A has been reserved.
- Language added and revised to clarify Division and AHCCCS requirements.
- Language revised to reflect that for each newly identified PIP, a Self-Selected PIP Initiation Notification and associated PIP Methodology document for review and approval must be submitted at least 90 days prior to initiation.
- Minor edits to meet policy requirements.

PUBLIC COMMENT TIMELINE

Dates: Public comment will be open for 30 days beginning May 6, 2026, and closing June 5, 2026, 11:59 pm, Arizona time.

Instructions: (Complete instructions are located on the Division's [webpage](#))

- Comments may be submitted online by clicking [here](#).
- Do not include any information that is confidential, covered under HIPAA, or inappropriate for public disclosure.
- If access to the online form is not available or if you have questions, please email the DDD Policy Unit at DDDpolicy@azdes.gov.

980 Performance Improvement Projects

Revision Dates: (TBD), 4/9/2025, 5/8/2024, 6/7/2023, 9/15/2021

Review Dates: 9/23/2025, 11/18/2024, 11/6/2023

Effective Date: October 1, 2019

References: 42 CFR 438.320; 42 CFR 438.330, Section F3, Contractor Chart of Deliverables

Purpose

This policy applies to the Division of Developmental Disabilities' (Division) Administrative Services Subcontractors (AdSS) and delineates the purpose, design, implementation, and reporting of Division and AHCCCS-mandated or ~~and~~ AdSS self-selected Performance Improvement Projects (PIPs).

Definitions

- ~~1. "Baseline Data" means data collected at the beginning of a PIP that is used as a starting point for measurement and the basis for comparison with subsequent remeasurement(s) in demonstrating significant and sustained improvement.~~
- ~~2. "Benchmark" means the process of comparing a practice's performance with an external standard to motivate engagement in Quality improvement efforts and understand where~~

~~performance falls in comparison to others. Benchmarks may be generated from similar organizations, Quality collaboratives, and authoritative bodies.~~

3. “External Quality Review” means the analysis and evaluation by an External Quality Review Organization of aggregated information on Quality, timeliness, and access to the health care services that are furnished to Medicaid Members as specified in 42 CFR 438.320.
4. ~~“Developmental Disability” or “DD” means as defined in A.R.S. § 36-551.~~
5. ~~“Grievance” means a Member’s expression of dissatisfaction with any matter, other than an adverse benefit determination.~~
6. “Measurable” means the ability to determine definitively whether or not a quantifiable Objective has been met, or whether progress has been made towards a positive Outcome.
7. “Member” means the same as “Client,” a person receiving developmental disabilities services from the Division, as defined in A.R.S. §36-551.
8. “Methodology” means the planned documented process, steps, activities, or actions taken to achieve a goal or Objective, or to

progress towards a positive Outcome.

9. ~~“Monitoring” means the process of auditing, observing, evaluating, analyzing, and conducting follow-up activities, and documenting results via desktop or on-site review.~~
10. “Objective” means a measurable step, generally one of a series of progressive steps, to achieve a goal.
11. “Outcomes” means changes in Member ~~patient~~ health, functional status, satisfaction, or goal achievement that result from health care or supportive services.
12. “Performance Improvement Project” or “PIP” means a planned process of data gathering, evaluation, and analysis to determine interventions or activities that are projected to have a positive Outcome. A PIP includes measuring the impact of the interventions or activities toward improving the quality of care and service delivery. Performance Improvement Projects (PIPs) are designed to achieve significant improvement, sustained over time, in health Outcomes and Member satisfaction, and include the elements outlined in 42 CFR 438.330(2). A PIP may also be referred to as a Quality Improvement Project (QIP).
13. “Performance Improvement/Quality Improvement” means the

approach used to improve services or Outcomes through the continuous improvement of processes to prevent or reduce the likelihood of issues. This is generally accomplished by identifying areas of opportunity and testing new solutions/interventions to address the underlying causes of persistent/systemic issues or to overcome identified barriers.

14. "Plan Do Study Act (~~PDSA~~) Cycle" or "PDSA Cycle" means a scientific method for testing a change ~~or intervention~~, designed to result in improvement in a specific area. The cycle is completed by planning the change/~~intervention~~, trying it, observing the results, and acting on what is learned. When these steps are conducted over a relatively short time period, ~~i.e., over days, weeks, or months~~, the approach is known as Rapid Cycle Improvement.
15. "Plan Do Study Act (~~PDSA~~) Method" or "PDSA Method" means a four-step model to test a change that is implemented. Going through the prescribed four steps, utilizing one or more PDSA Cycles, guides the thinking process into breaking down the task into steps and then evaluating the outcome, improving on it, and testing again.

16. "Quality" ~~means,~~ as it pertains to external Quality review, ~~means~~ the degree to which a managed care organization ~~an MCO~~ increases the likelihood of desired Outcomes of its Members through:
- a. Its structural and operational characteristics.
 - b. The provision of services that are consistent with current professional, evidence-based knowledge.
 - c. Interventions for performance improvement.
17. "Statistically Significant" means a judgment of whether a result occurs because of chance ~~change~~. When a result is Statistically Significant, it means that it is unlikely that the result occurs because of chance or random fluctuation. There is a cutoff for determining Statistical Significance. This cutoff is the significance level. If the probability of a result, ~~the significance value,~~ is less than the cutoff, ~~the significance level,~~ the result is judged to be Statistically Significant. Statistical significance is calculated utilizing the chi square Methodology, and a Statistically Significant result is defined as a p value less than or equal to 0.05.
18. "Validation" means the review of information, data, and

procedures to determine the extent to which they are accurate, reliable, free from bias and in accordance with standards for data collection and analysis.

Policy

A. Performance Improvement Project Requirements

1. The AdSS shall participate in Division and AHCCCS-Mandated Performance Improvement Projects (PIPs) and conduct self-selected PIPs.
2. The AdSS shall consider comprehensive aspects of Member needs or a focused subset of the population when developing Quality assessments and PIPs.
3. The AdSS shall participate in performance measures and PIPs that are mandated by the Centers for Medicare and Medicaid Services (CMS).

B. Performance Improvement Project Design

1. The AdSS shall conduct PIPs, including any PIPs required by the Division, AHCCCS, and CMS, that focus on either clinical or non-clinical areas.
 - a. ~~Clinical focus topics may include:~~

- ~~i. Primary, secondary, or tertiary prevention of acute conditions;~~
 - ~~ii. Primary, secondary, or tertiary prevention of chronic conditions;~~
 - ~~iii. Primary, secondary, or tertiary prevention of behavioral health conditions;~~
 - ~~iv. Care of acute conditions;~~
 - ~~v. Care of chronic conditions;~~
 - ~~vi. Care of behavioral health conditions; and~~
 - ~~vii. Continuity and coordination of care.~~
 - ~~b. Non clinical focus topics may include:~~
 - ~~i. Availability, accessibility, and adequacy of Contractor's service delivery system;~~
 - ~~ii. Cultural competency of services;~~
 - ~~iii. Interpersonal aspects of care, Quality of provider or Member encounters; and~~
 - ~~iv. Appeals, Grievances, and other complaints.~~
2. The AdSS shall identify and implement clinical and non-clinical focused PIPs that are meaningful to the Division line of business ~~the population(s) served~~ and based on self-identified

opportunities for improvement, and will be supported by:

- a. Root cause analyses;
 - b. External and internal data;
 - c. Surveillance of trends; or
 - d. Other information available to the AdSS.
3. The AdSS shall adhere to 42 CFR 438.330 and CMS External Quality Review (EQR) protocols when developing PIPs. The AdSS shall ensure the volume of the eligible population included within the denominator would account for meaningful improvement and allow for the AdSS to appropriately adhere to the protocol specified in AHCCCS' AMPM 980—Attachment A.
4. The AdSS shall ensure, when selecting the self-selected PIP topics, that the volume of the eligible population included within the denominator would account for meaningful improvement and allow the AdSS to appropriately adhere to the CMS External Quality Review (EQR) PIP protocols. The AdSS shall adhere to 42 CFR 438.330 and CMS External Quality Review (EQR) protocols when developing PIPs.
5. The AdSS shall design PIPs to ~~correct identified system issues or~~ achieve significant improvement in of health Outcomes ~~or~~

~~Member satisfaction~~ that is sustained over time through:

- a. Measurement of performance using objective Quality indicators;
- b. Implementation of interventions to achieve improvement in the access to and quality of care;
- c. Evaluation of the effectiveness of the interventions based on indicators collected as part of the PIP; and
- d. Planning and initiation of activities for increasing or sustaining improvement in accordance with 42 CFR 438.330(d)(2).

6. The AdSS shall conduct self-selected PIPs that:

- a. Focus on both clinical and non-clinical aspects of care; and
- b. Focus on both Title XIX and Title XXI Members.

~~adhere to and align with the protocol specified in AMPM Policy~~

~~980 – Attachment A, when selecting, designing, developing, and implementing mandated and self-selected PIPs~~

7. The AdSS shall have at least one active PIP in a given year:

- a. A single PIP that focuses on both clinical and non-clinical aspects of care; or

- b. Two active PIPs, one focusing on clinical and one focusing

~~on non-clinical aspects of care, utilize the same methodology throughout the lifecycle of the PIP.~~

8. The AdSS shall adhere to the CMS EQR PIP protocols when selecting, designing, developing, implementing, and analyzing performance for self-selected PIPs. ~~may identify and implement multiple self-selected PIPs, keeping the number of PIP indicators contained within a single PIP to four or fewer.~~
9. The AdSS shall develop a formal self-selected PIP Methodology document outlining the Methodology that will be used throughout the lifecycle of the PIP, including the identification of the PIP:
 - a. Topic or Purpose;
 - b. Timeline;
 - c. Aim Statement;
 - d. Population(s) including any applicable exclusions;
 - e. Sampling Methodology;
 - f. Variables and Indicators;
 - i. Limit the number of PIP indicators to four or fewer within a single PIP;
 - g. Data Collection and Validation Methodology; and
 - h. Data Analysis and Interpretation of Results Plan.

10. The AdSS shall implement innovative and evidence-based interventions to improve performance based on root cause analysis and an evaluation of barriers. Interventions shall consider unique factors such as:
 - a. Division membership;
 - b. Ensuring fair health care access;
 - c. Provider network; and
 - d. Geographic Area (GSA) served.
11. The AdSS shall use the Plan Do Study Act (PDSA) Method to test interventions quickly and refine them as necessary.
12. The AdSS shall utilize at least two several PDSA Cycles within the PIP lifespan.
13. The AdSS shall implement the PDSA Cycles in as short a time frame as practical, based on the PIP topic and associated timeline.
14. The AdSS shall include the following steps in the PDSA Cycle:
 - a. Plan: Plan the change(s) or intervention(s), including a plan for collecting data. State the Objective(s) of the intervention(s).
 - b. Do: Try out the intervention(s) and document any

problems or unexpected results.

- c. Study: Analyze the data and study the results. Compare the data to predictions and summarize what was learned.
- d. Act: Refine the change(s) or intervention(s), based on what was learned, and prepare a plan for retesting the intervention(s).
- e. Repeat: Continue the cycle as new data becomes available until improvement is achieved.

15. The AdSS shall include all PDSA Cycles conducted as part of a Division, ~~an~~ AHCCCS-Mandated, or ~~and~~ AdSS self-selected PIP within the AdSS' PIP Report submissions.

C. Performance Improvement Project Timeframes

1. The AdSS shall do the following for Division and AHCCCS-Mandated PIPs, ~~the AdSS shall do the following:~~
- a. ~~Initiate mandated PIPs on the date established by the Division or AHCCCS.~~
 - b. Collect and analyze baseline data at the beginning of the PIP.
 - c. Use annual measurements to evaluate performance; the Division or AHCCCS may require interim measurements.

- d. Compare annual remeasurements to baseline results and previous remeasurement results ~~Implement innovative or evidence-based interventions to improve performance during the Intervention year.~~
- e. Report at the intervals indicated within the associated PIP Methodology in cases where the Division or AHCCCS elects to implement Rapid Cycle PIPs ~~Base interventions to improve performance on an evaluation of barriers and root cause analysis.~~
- f. Continue to participate in the PIP until the AdSS demonstrates Statistically Significant and sustained improvement for each included PIP indicator, or as directed by the Division or AHCCCS. ~~Consider any unique factors for implementing interventions to improve performance such as:~~
- ~~i. The AdSS' membership;~~
 - ~~ii. Health equity considerations;~~
 - ~~iii. The provider network; and~~
 - ~~iv. The geographic area(s) served.~~
- f. Continue the additional remeasurement year(s)/period(s)

if one or more PIP indicator does not demonstrate significant and sustained improvement prior to the end of remeasurement year/period two for those PIP indicators until Statistically Significant improvement is demonstrated.

~~Utilize annual measurements to evaluate performance; the Division or AHCCCS may require interim measurements.~~

~~g. Report at the intervals indicated within the associated PIP Methodology, in cases where the Division or AHCCCS elects to implement Rapid Cycle PIPs.~~

~~h. Continue to participate in the PIP until the AdSS demonstrate significant and sustained improvement for each included PIP indicator, or as directed by the Division or AHCCCS.~~

~~i. Continue the additional remeasurement year(s)/period(s) if one or more PIP indicator does not demonstrate significant and sustained improvement prior to the end of remeasurement year or period two for those PIP indicator(s) until significant improvement is demonstrated.~~

2. The AdSS shall do the following for AdSS self-selected PIPs, ~~the AdSS shall do the following:~~

- a. Implement Rapid Cycle PIPs where applicable and appropriate.
- b. PIP methodology and design remain consistent throughout the PIP life cycle and align ~~Align self-selected PIP timelines with those indicated~~ within the associated PIP Initiation Notification submitted to and approved by the Division.
and
- c. Continue participation in the PIP until the AdSS demonstrates Statistically Significant and sustained improvement for each included PIP indicator, or as approved by the Division when Statistically Significant and sustained improvement has not been demonstrated.
- d. Continue remeasurement year/period if one or more PIP indicator does not demonstrate Statistically Significant and sustained improvement prior to the end of remeasurement year/period two, the PIP indicator shall be continued for additional remeasurement year(s)/period(s) until Statistically Significant and sustained improvement is demonstrated.
- e. Identify and implement a separate and distinct

self-selected PIP that is active and within a baseline, intervention, remeasurement one, or remeasurement two measurement period during the same timeframe/reporting period as the additional remeasurement year/period three.

D. Data Collection Methodology

1. The AdSS shall align ~~the their~~ data collection methodology, including project indicators, procedures, and timelines, with the guidance and direction provided for all Division and AHCCCS-Mandated PIPs.
2. The AdSS shall evaluate their performance on the PIP indicators based on systematic, ongoing collection and analysis of accurate, valid, and reliable data, as collected and reported by AHCCCS or as validated by the AHCCCS External Quality Review Organization (EQRO) through the Performance Measure Validation process.
3. The AdSS shall ensure collected data are accurate, valid, and reliable through internal processes for self-selected PIPs that are not based on standardized performance measures.
4. The AdSS shall align all Division and AHCCCS-Mandated or self-selected PIPs with the associated AHCCCS PIP methodology.

5. The AdSS shall adhere to any Division or AHCCCS guidance and direction.

E. Inter-Rater Reliability

1. The AdSS shall, for PIPs that are not based on standardized performance measures, as well as performance measures not included within the Division Contract, ~~the AdSS shall:~~
 - a. Submit specific documentation to verify that indicator criteria were met in accordance with AHCCCS instruction;
 - b. Have qualified personnel collect data; and
 - c. Implement inter-rater reliability if more than one person is collecting and entering data.
2. The AdSS shall verify that data collected from multiple parties or individuals for PIP indicators is consistent and comparable through an implemented inter-rater reliability process.
3. The AdSS shall include in the documented inter-rater reliability process ~~shall include:~~
 - a. A detailed description of the AdSS' Methodology for conducting inter-rater reliability including:
 - i. Initial training and retraining, if applicable;
 - ii. Oversight;

- iii. Validation of data collection; and
 - iv. Other activities deemed applicable.
 - b. The required minimum score that each individual shall obtain in order to continue participation in the data collection and reporting process;
 - c. A mechanism for evaluating individual accuracy scores and any subsequent accuracy scores, if applicable; and
 - d. The actions taken if should an individual does not meet the established accuracy score.
4. The AdSS shall monitor and track the inter-rater reliability accuracy scores and associated follow-up activities.
5. The AdSS shall provide evidence of implementation of the inter-rater reliability process as well as the associated monitoring upon Division and AHCCCS request.

F. Measurement Of Significant Improvement

1. The AdSS shall implement interventions to achieve and sustain Statistically Significant improvement, followed by sustained improvement for one consecutive year or period, for each PIP indicator.

2. ~~The AdSS shall initiate interventions that result in significant improvement, sustained over time, in its performance for each of the PIP indicators being measured.~~
3. The AdSS shall show evidence of improvement through ~~in~~ repeated measurements of the PIP indicators specified for each active PIP in alignment with the requirements outlined within the Data Collection Methodology section of this policy.
4. The AdSS shall demonstrate significant improvement when improvement in the PIP indicator rate(s) from the baseline year/period to the first remeasurement year/period is Statistically Significant:
 - a. Intervention year/period PIP indicator rates are not considered when determining Statistically Significant improvement.
 - b. When Statistically Significant improvement between the baseline year/period and the first remeasurement year/period is not demonstrated, significant improvement may be demonstrated when improvement in the PIP indicator rate(s) from the baseline measurement year/period to the second remeasurement year/period is

Statistically Significant.

5. The AdSS shall demonstrate sustained improvement when it:
 - a. Establishes how the significant improvement can be reasonably attributable to the interventions implemented by the AdSS due to efforts occurring as part of the PIP and its associated interventions, versus another unrelated reason; and
 - b. Maintains or increases the improvement in performance for each PIP indicator for at least one remeasurement year or remeasurement period after the significant improvement in performance is first achieved.

G. Performance Improvement Projects Reporting Requirements

1. The AdSS shall refer to the Resources, AHCCCS Guides, Manuals, Policies, AHCCCS QM/PI Reporting Templates and Checklists, section of the AHCCCS website to locate the associated tools to use, ~~the AdSS shall utilize~~, as outlined in this section, when preparing and submitting the required PIP deliverables.
2. The AdSS shall align the PIP deliverable submissions ~~shall align~~

with the requirements outlined in the AdSS ~~The Division Contract; This policy;~~ and the PIP Deliverable Submission Overview tool and instructions found on the AHCCCS QM/PI Reporting Templates & Checklists webpage.

3. The AdSS shall ensure the ~~contain the Division line of business-specific data in~~ PIP deliverable submissions contain:
 - a. Division line of business-specific data, reflective of the AdSS' performance during the current and all previous reporting periods, as applicable, in alignment with the associated PIP methodology and timelines;
 - b. Baseline, ~~this shall include baseline,~~ intervention, and remeasurement period rates and results; ~~and Results that are utilized as the basis for analysis, both quantitative and qualitative; and~~
 - c. The selection/modification of interventions;
 - d. Measurable outcomes of established interventions and project objectives, and the results of statistical testing; and
 - e. Assessment of the improvement strategies, including an evaluation of the effectiveness for each intervention.

- i. Initial PIP deliverable submissions shall use the most current data available at the time of submission that is used for purposes of the AHCCCS External Quality Review Organization (EQRO) Performance Measure Validation activities.
- ii. Final PIP deliverable submissions and subsequent resubmissions shall include EQRO validated rates, as described in the Data Collection Methodology section of this policy, for the current and previous reporting periods.
- f. Subpopulation data and disparity analyses with the identification of targeted interventions to be implemented specific to findings.
- g. Subpopulation data analysis of PIP indicator rates that includes members with special health care needs to include:
 - i. Early and Periodic Screening Diagnosis and Treatment;
 - ii. Maternal (pregnant and postpartum members);
 - iii. Behavioral health category and diagnosis; and

iv. Children's Rehabilitation Services designated Members.

4. The AdSS shall utilize the AHCCCS PIP Report Template applicable to the population and the Division line of business being reported.
5. The AdSS may utilize one PIP Report Template throughout the PIP lifecycle.
6. The AdSS shall complete and submit a PIP Addendum, if the AHCCCS PIP Report Template has undergone any updates since the AdSS baseline period reporting, as part of its PIP Report submission to capture any checklist items or requirements not included in the PIP Report Template utilized to report baseline year results to AHCCCS.
7. The AdSS shall incorporate into its PIP Deliverable submissions any AHCCCS EQRO requirements not currently included within the AHCCCS PIP Report Template.
8. The AdSS shall complete the required Next Steps section and related subsections for any PIP report intended to serve as the AdSS' final PIP report submission.
9. The AdSS shall complete and submit an AHCCCS PIP

Intervention & Analysis Template as a companion document to its PIP report submission.

10. The AdSS shall adhere to the instructions found in the template and ensure the most current template available on the AHCCCS QM/PI Reporting Templates & Checklists webpage is utilized for all submissions.
11. The AdSS shall submit PIP reports and AHCCCS PIP Intervention & Analysis Templates as specified in the Contract and in alignment with AHCCCS or AHCCCS EQRO instructions.

~~The AdSS shall ensure the inclusion of subpopulation data and disparity analyses within its PIP reporting, with the identification of targeted interventions to be implemented specific to findings, in alignment with the AHCCCS PIP Report and PIP Intervention and Analysis Template instructions. Resubmission may be required if the Division, AHCCCS or AHCCCS EQRO PIP Checklist requirements are not met. The AdSS shall conduct subpopulation data analysis of PIP indicator rates that includes members with special health care needs. This includes but is not limited to: Early and Periodic Screening Diagnosis and Treatment (EPSDT), maternal (pregnant and postpartum members), behavioral~~

~~health category/diagnosis, and CRS designated members, as appropriate and applicable to the PIP's eligible population(s).~~

12. ~~The AdSS shall, for Division and AHCCCS-Mandated PIPs:~~
- a. ~~The AdSS shall Submit PIP reports for all Division and AHCCCS-Mandated PIPs as specified in Contract.~~
 - b. ~~The AdSS shall Report rates and results reflective of Title XIX and Title XXI reporting as applicable to the Division line of business in alignment with the AHCCCS PIP Methodology.~~
 - c. ~~The AdSS shall Indicate if the interventions apply are applicable to Title XIX, Title XXI, or both ~~Title XIX and Title XXI.~~~~
 - d. ~~The AdSS shall submit a final PIP report and the completed AHCCCS PIP Intervention and Analysis Template, as specified in Contract, following the year in which significant and sustained improvement is demonstrated.~~
 - e. ~~The AdSS shall evaluate significant and sustained improvement based on PIP indicator rates that have been validated by AHCCCS' EQRO or rates that are considered as the AHCCCS official PIP indicator rates, as specified in~~

~~the Division Contract and the associated AHCCCS PIP Methodology.~~

- f. ~~The AdSS may utilize its remeasurement year (period 2) or subsequent year, if required, PIP report to serve as the AdSS' final PIP report submission content upon the following:~~
- ~~i. The AdSS having met the Division Contract and policy criteria related to significant and sustained improvement to support PIP closure; and~~
 - ~~ii. The sections required as part of the final PIP report have been completed.~~
- g. ~~The AdSS shall meet the AHCCCS PIP Checklist requirements and receive Division approval of PIP submissions pending:~~
- ~~i. Receipt of the final PIP indicator rates that have been validated by AHCCCS EQRO; and~~
 - ~~ii. Confirmation the AdSS is meeting Division Contract and policy criteria for each PIP indicator related to significant and sustained improvement to support PIP closure.~~

- d. The AdSS shall keep Division and AHCCCS-Mandated PIPs open until formal notification of approval for PIP closure from the Division is received.
 - ~~i. The AdSS shall resubmit their final PIP report if the AHCCCS PIP Checklist requirements are not met.~~
14. The AdSS shall, for AdSS self-selected PIPs:
- a. ~~The AdSS shall Submit a Contractor Self-Selected PIP Initiation Notification and associated PIP Methodology document for each newly identified PIP 90-days prior to initiation for Division review and approval, as specified in Contract.~~
 - b. ~~The AdSS shall Submit PIP reports for each AdSS self-selected PIP active during the previous calendar year, as specified in Contract.~~
 - c. ~~The AdSS shall Clearly indicate if the PIP indicator rates and results are reflective of combined or separate Title XIX and Title XXI reporting as applicable for the Division line of business and associated PIP topic.~~
 - d. ~~The AdSS shall Indicate if the interventions apply are applicable to Title XIX, Title XXI, or both ~~Title XIX and Title~~~~

XXI.

- e. If applicable, self-selected PIP Deliverable submissions may be subject to PIP Validation through an AHCCCS EQRO. ~~The AdSS shall submit a final self-selected PIP report with the completed AHCCCS PIP Intervention and Analysis Template, as specified in Contract, following the year/period in which significant and sustained improvement is demonstrated.~~
- f. ~~The AdSS shall evaluate significant and sustained improvement based on PIP indicator rates that have been validated by AHCCCS EQRO or rates that are considered as the AHCCCS official performance measure rates, as specified in Contract.~~
- g. ~~The AdSS shall evaluate significant and sustained improvement based on the AdSS' internally collected and validated data for self-selected PIPs that are not based on AHCCCS required performance measures reflective of calendar year performance.~~
- h. ~~The AdSS shall utilize its remeasurement year/period two, or subsequent year/period if required, PIP report to serve~~

~~as their final PIP report submission contingent upon the following:~~

~~i. The AdSS has met the Division contract and policy criteria related to significant and sustained improvement to support PIP closure; and~~

~~ii. The sections required as part of the final PIP report have been completed.~~

~~i. The AdSS shall keep self-selected PIPs open until the AdSS has met the criteria for each included PIP indicator, related to significant and sustained improvement.~~

f. The AdSS shall Submit a PIP Closure Request for each PIP they are requesting to close when the criteria related to significant and sustained improvement for each included PIP indicator have been met, for the Division's review and approval, as a separate stand-alone deliverable.

g. Indicate the rationale for closing a PIP in cases where the criteria related to Statistically Significant and sustained improvement have not been met to support PIP closure for each included PIP indicator.

~~The AdSS shall meet the AHCCCS PIP Checklist~~

~~requirements and receive Division approval of the PIP pending:~~

- ~~i. Receipt of the final PIP indicator rates, the rates validated by AHCCCS EQRO or rates that are considered as the AHCCCS official performance measure rates, in cases where the PIP indicators are based on standardized performance measures and the PIP measurement periods reflective of calendar year performance; and~~
- ~~ii. Confirmation the AdSS is meeting Contract and policy criteria for each PIP indicator related to significant and sustained improvement to support PIP closure.~~

~~h. The AdSS shall Keep self-selected PIPs open until receiving formal notification approval from the Division or AHCCCS EQRO. the AdSS has met the criteria for each PIP indicator related to significant and sustained improvement as defined above.~~

- ~~i. The AdSS shall submit a PIP Closure Request for each self-selected PIP the AdSS is requesting to~~

- ~~close, for Division review and approval; and~~
- ii. ~~The AdSS shall indicate the rationale for closing a PIP for each included PIP indicator in cases where the AdSS has not met criteria related to significant and sustained improvement to support PIP closure.~~
- iii. ~~The AdSS shall close the PIP when formal notification of approval for PIP closure has been received from the Division.~~
- m. ~~The AdSS shall resubmit their final PIP report if the AHCCCS PIP Checklist requirements are not met.~~

Signature of Chief Medical Officer