

ACO & Hospital Quality and Equity Incentive Programs:

Performance Improvement Projects (PIPs),

Key Contact Form & Mid-Year Planning Report

Due September 30, 2023

Instructions: This PIP Key Contact Form & Mid-Year Planning Report deliverable should be completed collaboratively by ACOs and Hospitals of approved partnerships (partner exempt entities should also complete this deliverable). However, each entity should submit its own deliverable to account for completion.

This report should be submitted to EOHHS by **September 30, 2023**, via OnBase, with the document name: ACO/HospitalAbbreviation_PIPMidYearReport_MMDDYYYY. Please rename the file with the hospital's or ACO's abbreviations and submission date. Note: submission is a 2-step process. After uploading the deliverables onto OnBase, you must also click "submit" to finalize the submission.

Please send any questions to the MassHealth Health Equity Team at Health.Equity@mass.gov.

Key Contacts Updates:

Please review the PIP contacts your entity and other members of your approved partnership(s) (as applicable) have submitted to date to MassHealth. Modify and list key contacts of your entity <u>as needed</u> in the table below to ensure MassHealth has the most up-to-date and coordinated information (if no changes, please leave blank):

Executive Sponsor and Email/Contact Information	Clinical Lead and Email/Contact Information	Project Manager and Email/Contact Information	Other Supporting Personnel, Role for PIPs, and Email/Contact Information

Mid-Year Planning for PIP 1:

Please provide a brief narrative (suggested 500 words or less) with the following information (for partnered entities, the content of this narrative may be the same or very similar):

- Summarize any efforts (e.g., meetings, conversations, time allotted, etc.) by partnered entities or partner exempt entities to identify PIP 1 topic and potential measure areas, especially in the context of entity's health equity goals. Please adhere to the PIP topic guidance from MassHealth (Appendix A and/or B) in identifying topic and measure areas.
- Report any anticipated challenges around planning and implementing PIP 1.

Response:

Appendix A: PIP Topic Guidance for Acute Hospitals

General Implementation Sequence:

PIPs are referred to as PIP1 and PIP2 based on the following sequence of anticipated implementation:

- PIP 1: Planning and baselining in PY1 (CY23), implementation in PY2 (CY24), closeout in PY4 (CY26).
- PIP 2: Planning and baselining in PY2 (CY24), implementation in PY3 (CY25), closeout in PY5 (CY27).

Year	PIPs	Anticipated Report Due	Anticipated Due Date
PY1	PIP 1	Mid-year Planning Report	9/30/2023
		Baseline/Planning Report	12/31/2023
PY2	PIP 1	Remeasurement 1 Report	9/30/2024
PY2	PIP 2	Mid-year Planning Report	9/30/2024
F12		Baseline/Planning Report	12/31/2024
PY3	PIP 1	Remeasurement 2 Report	9/30/2025
PY3	PIP 2	Remeasurement 1 Report	9/30/2025
PY4	PIP 1	Closure Report	12/31/2026
PY4	PIP 2	Remeasurement 2 Report	9/30/2026
PY5	PIP 2	Closure Report	12/31/2027

Deliverables and Reporting:

Description of Elements in Reports:

- <u>The PIP Planning/Baseline Reports</u> include but are not limited to the following items: Shared acute hospital/ACO equity statement, PIP aim, objectives and goals, baseline performance data, data sources and collection methodology, data sharing plans between ACOs and acute hospitals, barrier identification, proposed interventions, and tracking measures.
- <u>The Remeasurement 1 Report</u> incorporates feedback from ongoing technical assistance regarding PIP implementation. The Remeasurement 1 Report is used to assess PIP methodology, progress towards implementing interventions, and performance towards achieving the health equity goals established in the Baseline Report.
- <u>The Remeasurement 2 Report</u> integrates feedback from ongoing technical assistance regarding PIP implementation. The Remeasurement 2 Report is used to assess PIP methodology, progress towards implementing interventions, performance towards achieving the health equity goals established in the Baseline Report and Remeasurement 1 Report, and initial plans for continuation of partnership arrangements and/or interventions beyond the PIP.
- <u>The Closure Report</u> focuses on finalizing project activities, analyzing the impacts of interventions, assessing performance between baseline and remeasurement periods using selected indicators, identifying successes and/or challenges, and planning for continuation of partnership arrangements and/or interventions beyond the PIP.

PIP Topics and Measures:

Overall Guidance:

- It is *strongly encouraged* that PIP 1 focus on <u>Care Coordination</u> using any or a combination of the following measures:
 - Follow-Up After Hospitalization for Mental Illness
 - Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence
 - Follow-Up After Emergency Department Visit for Mental Illness
- For acute hospitals with obstetric delivery services, it is *required* that PIP 2 focus on <u>Preventive</u>, <u>Perinatal</u>, or <u>Pediatric Care</u> using the following measure:
 - maternal morbidity measure (specific measure to be designated by CMS)
- <u>Care for Acute and Chronic Conditions</u> may be used as an alternative domain area using any or a combination of the following measures:
 - Alcohol Use Brief Intervention Provided or Offered
 - Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge
 - Initiation and Engagement of Alcohol, or Other Drug Abuse or Dependence Treatment
 - Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis
 - Asthma Medication Ratio
 - Controlling High Blood Pressure
 - Comprehensive Diabetes Care
- Overall, PIP 1 and PIP 2 must be carried out in distinct domain areas (care coordination; preventive, perinatal, or pediatric care; care for acute and chronic conditions)
- Partnered PIPs should be conducted in coordinated domains among acute hospital and ACO partners
- PIPs may be designed such that progress is monitored using MassHealth-specific or all-payer data

Guidance for acute specialty hospitals:

• An acute specialty hospital may conduct PIP 1 and PIP 2 in domain and measure areas in its slate. PIP topics must be approved by EOHHS

Appendix B: PIP Topic Guidance for ACOs

General Implementation Sequence:

PIPs are referred to as PIP1 and PIP2 based on the following sequence of anticipated implementation:

- PIP 1: Planning and baselining in PY1 (CY23), implementation in PY2 (CY24), closeout in PY4 (CY26).
- PIP 2: Planning and baselining in PY2 (CY24), implementation in PY3 (CY25), closeout in PY5 (CY27).

Year	PIPs	Anticipated Report Due	Anticipated Due Date
PY1	PIP 1	Mid-year Planning Report	9/30/2023
		Baseline/Planning Report	12/31/2023
PY2	PIP 1	Remeasurement 1 Report	9/30/2024
PY2	PIP 2	Mid-year Planning Report	9/30/2024
F 1 2		Baseline/Planning Report	12/31/2024
PY3	PIP 1	Remeasurement 2 Report	9/30/2025
PY3	PIP 2	Remeasurement 1 Report	9/30/2025
PY4	PIP 1	Closure Report	12/31/2026
PY4	PIP 2	Remeasurement 2 Report	9/30/2026
PY5	PIP 2	Closure Report	12/31/2027

Deliverables and Reporting:

Description of Elements in Reports:

- <u>The PIP Planning/Baseline Reports</u> include but are not limited to the following items: Shared acute hospital/ACO equity statement, PIP aim, objectives and goals, baseline performance data, data sources and collection methodology, data sharing plans between ACOs and acute hospitals, barrier identification, proposed interventions, and tracking measures.
- <u>The Remeasurement 1 Report</u> incorporates feedback from ongoing technical assistance regarding PIP implementation. The Remeasurement 1 Report is used to assess PIP methodology, progress towards implementing interventions, and performance towards achieving the health equity goals established in the Baseline Report.
- <u>The Remeasurement 2 Report</u> integrates feedback from ongoing technical assistance regarding PIP implementation. The Remeasurement 2 Report is used to assess PIP methodology, progress towards implementing interventions, performance towards achieving the health equity goals established in the Baseline Report and Remeasurement 1 Report, and initial plans for continuation of partnership arrangements and/or interventions beyond the PIP.
- <u>The Closure Report</u> focuses on finalizing project activities, analyzing the impacts of interventions, assessing performance between baseline and remeasurement periods using selected indicators, identifying successes and/or challenges, and planning for continuation of partnership arrangements and/or interventions beyond the PIP.

PIP Topics and Measures:

Overall Guidance:

- It is *strongly encouraged* that PIP 1 focus on <u>Care Coordination</u> using any or a combination of the following measures:
 - Follow-Up After Hospitalization for Mental Illness

- Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence
- Follow-Up After Emergency Department Visit for Mental Illness
- For ACOs partnering with a hospital that provides obstetric delivery services, it is *required* that PIP 2 focus on <u>Preventive</u>, <u>Perinatal</u>, or <u>Pediatric Care</u> using any or a combination of the following measures:
 - maternal morbidity measure (specific measure to be designated by CMS; may be the required PIP focus pending input from CMS)
 - Prenatal and Postpartum Care
- <u>Care for Acute and Chronic Conditions</u> may be used as an alternative domain area using any or a combination of the following measures:
 - Initiation and Engagement of Alcohol, or Other Drug Abuse or Dependence Treatment
 - Asthma Medication Ratio
 - Controlling High Blood Pressure
 - Comprehensive Diabetes Care
- Overall, PIP 1 and PIP 2 must be carried out in distinct domain areas (care coordination; preventive, perinatal, or pediatric care; care for acute and chronic conditions)
- Partnered PIPs should be conducted in coordinated domains among acute hospital and ACO partners

Rubric

Domain	Criteria	Reviewer Comments	Met, Partially Met, Did Not Meet (Partially Met and Did Not Meet Requires Resubmission)
As needed, entities modify key contacts across roles listed in the table and provide contact information			
Entities provide a narrative for mid-year planning that includes, in sufficient detail, elements of the prompt			