



# MassHealth Community Behavioral Health Center (CBHC) Quality and Equity Incentive Program (QEIP)

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|--------------------------------|---|
| <b>Program:</b>                | CBHC QEIP                                   |
| <b>Performance Year:</b>       | 3   |
| <b>Measure:</b>                | Equity Improvement Intervention             |
| <b>Deliverable:</b>            | PIP Baseline Report                         |
| <b>Submission Portal:</b>      | OnBase                                      |
| <b>Submission Due Date:</b>    | August 31, 2026                             |
| <b>File Naming Convention:</b> | CBHCAbbreviation_PIPBaselineReport_YYYYMMDD |

## Summary

The Equity Improvement Intervention measure is a Condition of Participation for the CBHC Quality and Equity Program (CQEIP) that promotes Community Behavioral Health Centers (CBHCs) to make meaningful improvements in equity and access to care. For the remainder of the three CQEIP performance years, the CBHCs will design and implement one health equity-focused Performance Improvement Project (PIP).

For the purposes of the CQEIP, PIPs are not assessed based on performance; rather, they are an opportunity for CBHCs to strengthen their quality improvement framework by:

- 1) identifying current processes and opportunities for improvement;
- 2) implementing an intervention;
- 3) evaluating the intervention impact; and
- 4) continuing activities that sustain improvement.

The goals of this PIP Baseline Report deliverable are to:

- 1) confirm key personnel information for main PIP contacts;
- 2) guide CBHCs in designing and implementing their PIP; and
- 3) receive information from CBHCs on the design, timeline and monitoring of their PIP.

A CBHC TIN-billing entity shall submit one report on behalf of its CBHC sites if there are multiple sites.

## Reporting Template

### Introduction

CBHCs should complete the reporting template provided in this document and submit the completed report to EOHHS via OnBase by **August 31, 2026** with the following file naming convention: **CBHCAbbreviation\_PIPBaselineReport\_YYYYMMDD**.

Please rename the file with the CBHC abbreviation 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 reach out to the MassHealth Health Equity Team at [Health.Equity@mass.gov](mailto:Health.Equity@mass.gov) with any questions.

Deliverable Sections:

- Section 1: Entity Background and PIP Information
- Section 2: PIP Goal and Impact
- Section 3: Barriers, Interventions and Monitoring
- Section 4: Timeline
- Appendix A: PIP Reporting Requirements in PY1-5 for CBHCs
- Appendix B: Glossary of PIP Terms
- Appendix C: Diagram of PIP Structure: Barriers, Interventions, and KPIs

## Section 1: Entity Background and PIP Contact Information

### Entity Background

Table 1: Legal Name of CBHC

|   |  |
|---|--|
| <b>Legal Name of CBHC Organization:</b> |  |
|---|--|

### PIP Contact Information

1. Is the contact information you provided in the PY2 PIP Topic Selection and Planning Report still relevant and accurate? Please use an “X” to indicate response
  - Yes (proceed to question 3)
  - No (proceed to question 2)
  
2. If not, please list any changes in the following table. This may include adding or removing any CBHC personnel responsible for planning and implementing this PIP, or changes to their contact information. You may add additional rows, if needed.

Table 2: Contact Information of PIP team at your CBHC

| First and Last Name | Title | Email Address |
|---------------------|-------|---------------|
|                     |       |               |
|                     |       |               |

*Add more rows as needed*

### Section 2: PIP Goal and Impact

3. Provide the problem statement that your PIP will address. Your problem statement should describe the current state at your CBHC and its impact on your members.
  
4. Provide a SMART goal that your CBHC will work towards to address the problem statement. Your SMART goal must be specific, measurable, achievable by Q3 2028, relevant, and time bound.
  
5. Describe the population(s) that this PIP impacts. In your response, describe the following:

- a. How will the PIP address your population’s needs and why is it important to them?
  - b. How does focusing on this population drive progress towards health equity?
6. If you selected Language Availability at First Point of Contact as your PIP topic area in the PY2 deliverable, skip forward to question 7.

If you selected Community Engagement as your PIP topic area in the PY2 deliverable, please indicate the specific community organizations you plan to engage with through this PIP. Please note, as the PIP centers around meaningful partnership with a community organization, your CBHC may partner with no more than two community organizations. In addition, please describe how your CBHC will engage the organization throughout the PIP, including:

- a. How your CBHC solicited input from the organization in the design of the PIP.
- b. How your CBHC will share updates with the organization throughout and following the duration of the PIP.

**Section 3: Barriers, Interventions and Monitoring**

7. Describe the process by which you conducted a barrier or root cause analysis to identify the gap(s) that drives current performance. Examples of commonly used tools to conduct a root cause analysis include a fishbone diagram, the 5 whys, pareto chart, a barrier-failure analysis, etc. Your analysis can include review of literature, feedback from providers, current processes, etc. In the case of member-facing barriers, your analysis must include obtaining direct MassHealth member input.
8. Populate the table below with the barriers you identified as realistically actionable and can be addressed through specific interventions given the structure and timeline of your PIP. At least one barrier must be member-facing, in that it directly impacts MassHealth members. For each barrier, provide a description and the inputs that informed your understanding of the barrier.

*Table 3: Current Barriers and Inputs Identified*

| Barrier   | Description  | Input  |
|---|--|--|
| <b>Barrier 1</b><br><i>This barrier must be member-facing</i> | <i>Describe the barrier your CBHC identified through the barrier or root cause analysis.</i> | <i>Describe the data sources/ inputs you used to identify the barrier.</i> |

|                  |  |  |
|------------------|--|--|
| <b>Barrier 2</b> | <i>Describe the barrier your CBHC identified through the barrier or root cause analysis.</i> | <i>Describe the data sources/ inputs you used to identify the barrier.</i> |
| <b>Barrier 3</b> | <i>Describe the barrier your CBHC identified through the barrier or root cause analysis.</i> | <i>Describe the data sources/ inputs you used to identify the barrier.</i> |

9. Populate the table below. For each barrier identified in question 8, you must have a corresponding intervention you will implement that addresses the barrier. Therefore, at least one intervention must address the member-facing barrier identified in question 8. For each proposed intervention identified, describe its activities, the reasons it will lead to improvement, who will be carrying out the intervention, and resources you will use to implement the intervention.

Note that these Interventions are subject to MassHealth approval.

Table 4: Descriptions of Interventions 1-3

|   |  |
|---|--|
| <b>Intervention 1</b>   |  |
| <i>This intervention must address the member-facing barrier</i> | <i>Describe the intervention</i>   |
| <b>Intervention 1 activities</b>                                | <i>Describe the activities you will conduct as part of the intervention once the PIP is implemented at your CBHC</i> |
| <b>Reason(s) intervention will lead to improvement</b>          | <i>Describe the reasons the intervention will address barrier 1</i>  |
| <b>Team(s) executing the intervention</b>                       | <i>Describe who at your CBHC is responsible for executing and implementing the intervention</i>                      |
| <b>Resources needed to implement the intervention</b>           | <i>Describe the resources you plan to leverage to successfully implement the intervention</i>                        |
| <b>Intervention 2</b>   | <i>Describe the intervention</i>   |
| <b>Intervention 2 activities</b>                                | <i>Describe the activities you will conduct as part of the intervention once the PIP is implemented at your CBHC</i> |
| <b>Reason(s) intervention will lead to improvement</b>          | <i>Describe the reasons the intervention will address barrier 2</i>  |
| <b>Team(s) executing the intervention</b>                       | <i>Describe who at your CBHC is responsible for executing and implementing the intervention</i>                      |

|  |  |
|--|--|
| <b>Resources needed to implement the intervention</b>  | <i>Describe the resources you plan to leverage to successfully implement the intervention</i>                        |
| <b>Intervention 3</b>                                  | <i>Describe the intervention</i>   |
| <b>Intervention 3 activities</b>                       | <i>Describe the activities you will conduct as part of the intervention once the PIP is implemented at your CBHC</i> |
| <b>Reason(s) intervention will lead to improvement</b> | <i>Describe the reasons the intervention will address barrier 3</i>  |
| <b>Team(s) executing the intervention</b>              | <i>Describe who at your CBHC is responsible for executing and implementing the intervention</i>                      |
| <b>Resources needed to implement the intervention</b>  | <i>Describe the resources you plan to leverage to successfully implement the intervention</i>                        |

10. Populate the table below for each intervention identified in question 9. For each intervention, describe one key performance indicators (KPI) you will use to monitor progress for the duration of your PIP.

Note that these KPIs are subject to MassHealth approval. In calendar years 2027 and 2028, you will submit a progress report and closure report to describe progress made on your PIP, including the three interventions and their respective KPIs.

Table 5: Key Performance Indicators Used to Monitor PIP Progress

| <b>Key Performance Indicator 1</b> |   | <i>KPI 1</i> |
|------------------------------------|---|--------------|
| <b>Description</b>                 | <i>Describe the KPI that corresponds to intervention 1</i>  |              |
| <b>KPI Performance Baseline</b>    | <i>Describe baseline KPI performance at the time of the PIP Baseline Report. If this is a new process, please indicate with a 0 value. Otherwise, please indicate with a quantitative value. Your baseline must include units of measurement.</i> |              |
| <b>Performance Target</b>          | <i>Describe target KPI performance at the conclusion of the PIP intervention period with a quantitative value. Your performance target must include units of measurement.</i>   |              |
| <b>Key Performance Indicator 2</b> |   | <i>KPI 2</i> |

|  |   |
|--|---|
| <b>Description</b>   | <i>Describe KPI that corresponds to intervention 2</i>  |
| <b>KPI Performance Baseline</b>  | <i>Describe baseline KPI performance at the time of the PIP Baseline Report. If this is a new process, please indicate with a 0 value. Otherwise, please indicate with a quantitative value. Your baseline must include units of measurement.</i> |
| <b>Performance Target</b>  | <i>Describe target KPI performance at the conclusion of the PIP intervention period with a quantitative value. Your performance target must include units of measurement.</i>   |
| <b>Key Performance Indicator 3</b> <span style="float: right;"><i>KPI 3</i></span> |   |
| <b>Description</b>   | <i>Describe KPI that corresponds to intervention 3</i>  |
| <b>Performance Baseline</b>  | <i>Describe baseline KPI performance at the time of the PIP Baseline Report. If this is a new process, please indicate with a 0 value. Otherwise, please indicate with a quantitative value. Your baseline must include units of measurement.</i> |
| <b>Performance Target</b>  | <i>Describe target KPI performance at the conclusion of the PIP intervention period with a quantitative value. Your performance target must include units of measurement.</i>   |

#### Section 4: Implementation Timeline and Anticipated Limitations

11. Briefly summarize quarterly intervention activities in 1-2 sentences from Q1 2027 through Q3 2028. As you map out the timeline, it is reasonable for activities to span multiple quarters. For example, activities started in Q1 2027 can continue through Q3 2027 while new activities are beginning in Q2 2027.

Table 6: Timeline Chart of Intervention Activities through Q3 2028

|         | Intervention 1 | Intervention 2 | Intervention 3 |
|---------|----------------|----------------|----------------|
| Q1 2027 |                |                |                |
| Q2 2027 |                |                |                |
| Q3 2027 |                |                |                |
| Q4 2027 |                |                |                |
| Q1 2028 |                |                |                |
| Q2 2028 |                |                |                |
| Q3 2028 |                |                |                |

12. Describe anticipated limitations/challenges you anticipate running into as your CBHC implements these interventions.

13. Describe potential solutions your CBHCs may execute to address these anticipated limitations/challenges.



## Appendix A: PIP Reporting Requirements in PY1-5 for CBHCs

### General Implementation Sequence:

PIP: Planning and baselining in PY1 (CY24) through PY3 (CY26), implementation in PY4 and part of PY5 (CY27-CY28), closeout in PY5 (CY28).

### Deliverables and Reporting:

Appendix A Table 1: Reporting Requirements and Due Dates in PY1-5 for CBHCs

| Year | Anticipated Report Due                  | Anticipated Due Date |
|------|---|----------------------|
| PY1  | PIP Assessment and Planning Document    | 11/1/2024            |
| PY2  | PIP Topic Selection and Planning Report | 10/31/2025           |
| PY3  | PIP Baseline Report                     | 8/31/2026            |
| PY4  | PIP Progress Report                     | 10/31/2027           |
| PY5  | PIP Closure Report                      | 9/30/2028            |

### Description of Elements in Reports:

- PIP Topic Selection and Planning Report: Identify topic, target population, PIP aim, and data sources.
- PIP Baseline Report: Barrier analysis and identification, a comprehensive plan that may include baseline performance data, proposed intervention, and intervention tracking measures.
- PIP Progress Report: Assessment of PIP methodology and progress towards implementing interventions, including identifying any updates made to the proposed PIP plan from PY3.
- PIP Closure Report: a comprehensive report focused on finalizing the project, analyzing the impacts of interventions, assessing performance between baseline and closure, identification of any successes and/or challenges, and plans for continuation and potential expansion of interventions beyond the PIP.

## Appendix B: Glossary of PIP Terms

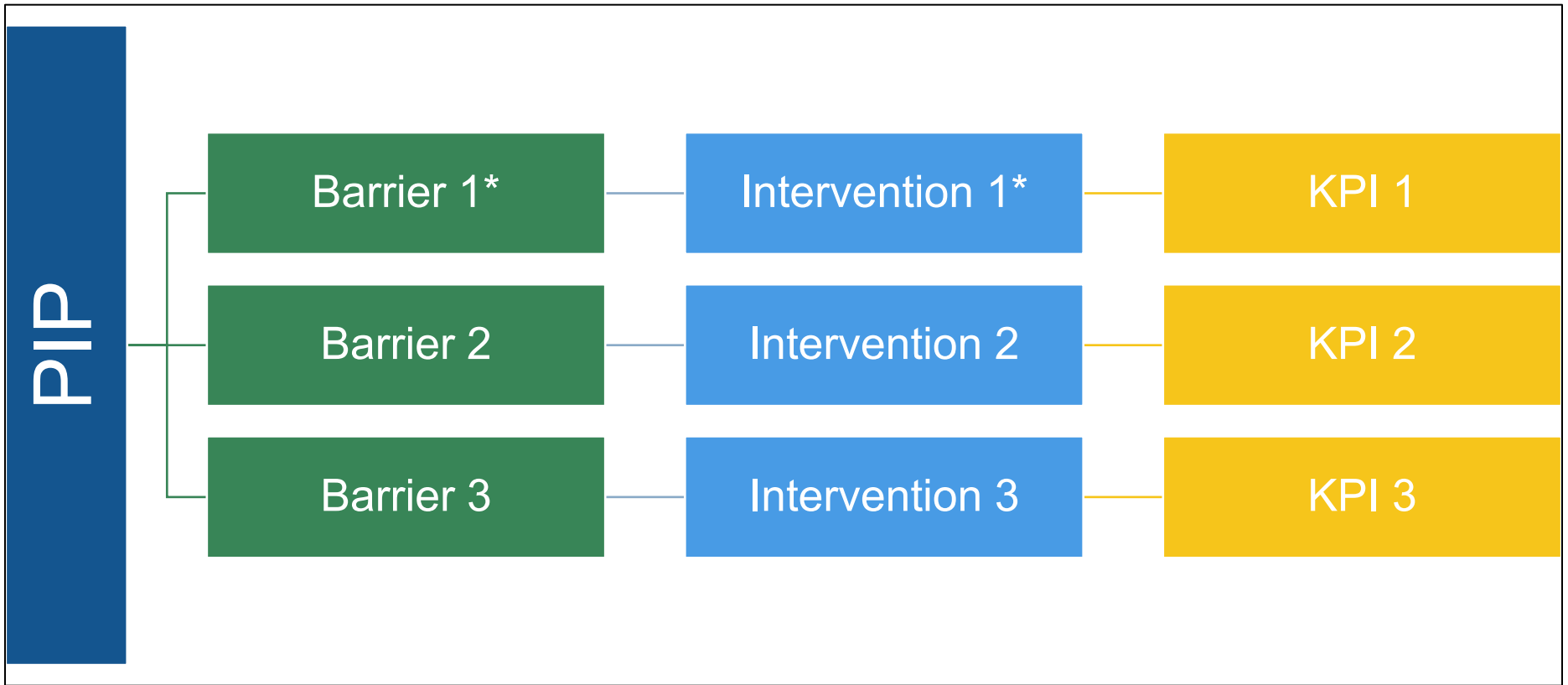
Appendix B Table 1: PIP Terms and Definitions

| PIP Term          | Also known as...   | Purpose  | Definition  |
|-------------------|--|--|---|
| <b>Barrier</b>    | <ul style="list-style-type: none"> <li>• Obstacle</li> <li>• Hurdle</li> <li>• Roadblock</li> </ul>        | To inform meaningful and specific intervention development addressing members/patients, providers, and CBHC staff. | <p>Barriers are obstacles that need to be overcome in order for the CBHC to be successful in reaching the PIP aim or target goals. The root cause(s) of barriers should be identified so that interventions can be developed to overcome these barriers and produce improvement for members/patients/providers/CBHCs.</p> <p>A barrier analysis should include analyses of both quantitative (e.g., survey data) and qualitative (focus groups or interviews) data as well as a review of published literature where appropriate (with objective verification of applicability to your CBHC) to root out the issues preventing implementation of interventions.</p> |
| <b>Baseline</b>   | <ul style="list-style-type: none"> <li>• Starting point</li> </ul>   | To evaluate the CBHC's performance in the year prior to implementation of the PIP.                                 | The baseline rate refers to the rate of performance of a given indicator in the year prior to PIP implementation. The baseline rate must be measured for the period before PIP interventions begin.   |
| <b>Challenges</b> | <ul style="list-style-type: none"> <li>• Limitations</li> <li>• Constraints</li> <li>• Problems</li> </ul> | To reveal challenges faced by the CBHC, and the CBHC's ability to conduct a valid PIP.                             | Limitations are challenges encountered by the CBHC when conducting the PIP that might impact on the validity of results. Examples include difficulty collecting/ analyzing data, or lack of resources / insufficient staffing, etc.   |

| PIP Term                               | Also known as...  | Purpose   | Definition   |
|--|---|---|--|
| <b>Health Equity</b>                   | <ul style="list-style-type: none"> <li>• Equity vision</li> </ul>   | The ultimate goal of the project.   | The opportunity for everyone to attain their full health potential regardless of their social position (e.g., socioeconomic status) or socially assigned circumstance (e.g., race, gender identity/gender expression, ethnicity, disability status, religion, sexual orientation, geography, disability, language, etc.) |
| <b>Intervention</b>                    | <ul style="list-style-type: none"> <li>• Process Update</li> <li>• Targeted Change</li> </ul>                           | To overcome a barrier or obstacle.  | Interventions are purposeful, specific changes that improve or overcome the barriers.  |
| <b>Key Performance Indicator (KPI)</b> | <ul style="list-style-type: none"> <li>• Indicator</li> <li>• Performance Measure</li> <li>• Outcome measure</li> </ul> | To measure or assess performance on the individual interventions                                | Performance indicators evaluate the progress of a PIP annually. They are a valid and measurable gauge, for example, of improvement in delivery processes, or access.   |
| <b>Performance Target</b>              | <ul style="list-style-type: none"> <li>• Performance goal</li> <li>• Aspiration</li> </ul>                              | To establish the desired level of performance in a given KPI.                                   | A target is a measurable target that is realistic relative to baseline performance, yet ambitious, and that is directly tied to the PIP aim and objectives.  |
| <b>Problem Statement</b>               | <ul style="list-style-type: none"> <li>• Current gap</li> <li>• Issue</li> </ul>  | To summarize the current and known pain points in a situation and justify why action is needed. | A problem statement focuses on the processes that drive current performance, including barriers and gaps in knowledge.   |
| <b>SMART Goal</b>                      | <ul style="list-style-type: none"> <li>• Aim</li> <li>• Purpose</li> </ul>  | To state what the Entity is trying to accomplish by implementing their PIP.                     | A SMART goal clearly articulates the purpose or objective of the work being performed for the PIP. It describes the desired outcome in a   |

| PIP Term | Also known as... | Purpose | Definition   |
|----------|------------------|---------|--|
|          |                  |         | manner that is Specific, Measurable, Achievable, Relevant, Time-bound (SMART). |

**Appendix C: Diagram of PIP Structure: Barriers, Interventions, and KPIs**



\*: indicates the member-facing barrier and the intervention addressing that barrier.

