EQR PROTOCOL 3 – Validation of Performance Improvement Projects (PIPs)

Attachment A: PIP Review Worksheet

PERFORMANCE IMPROVEMENT PROJECT VALIDATION WORKSHEET

Use this or a similar worksheet as a guide when validating MCO Performance Improvement Projects. Answer all questions for each activity. Refer to the protocol for detailed information on each area.

ID of evaluator:	Date of evaluation: / /
Demographic Information	
MCO Name or ID:	
Project Leader Name:	
Telephone Number:	
Name of Performance Improvement Project:	
Dates in Study Period:	/ to/
Type of Delivery System (check all that are applicable)	Staff Model Network Direct IPA IPA Organization MCI PIHP PCCM Other
	Number of Medicaid/CHIP Enrollees in MCONumber of Medicaid/CHIP Enrollees in StudyTotal Number of MCO Enrollees in Study
Number of MCO primary care physicians Number of MCO specialty physicians	
Number of physicians in study (if applicable)	

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0786. The time required to complete this information collection is estimated to average 1,591 hours per response for all activities, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Baltimore, Maryland 21244-1850

ACTIVITY 1: ASSESS THE STUDY METHODOLOGY

Step 1: Review the Selected Study Topic(s)

	Component/Standard	Υ	Ζ	N/A	Comments		
1.1.	Was the topic selected through data collection and analysis of comprehensive aspects of specific MCO enrollee needs, care, and services?						
1.2.	Is the PIP consistent with the demographics and epidemiology of the enrollees?						
1.3.	Did the PIP consider input from enrollees with special health needs, especially those with mental health and substance abuse problems?						
1.4.	Did the PIP, over time, address a broad spectrum of key aspects of enrollee care and services (e.g., preventive, chronic, acute, coordination of care, inpatient, etc.)?						
1.5.	Did the PIP, over time, include all enrolled populations (i.e., special health care needs)?						
Ste	Step 2: Review the Study Question(s)						
	Component/Standard	Υ	N	N/A	Comments		
2.1.	Was/were the study question(s) measurable and stated clearly in writing?						
Step 3: Review the Identified Study Populations							
	Component/Standard	Υ	Ν	N/A	Comments		
3.1.	Did the study use objective, clearly defined, measurable indicators (e.g., an event or status that will be measured)?						
3.2.	Did the indicators track performance over a specified period of time?						
3.3.	Are the number of indicators adequate to answer the study question; appropriate for the level of complexity of applicable medical practice guidelines; and appropriate to the availability of and resources to collect necessary data?						

Step 4: Review Selected Study Indicator(s	<u>s)</u>					
Component/Standard	Υ	N	N/A	Comments		
4.1. Were the enrollees to whom the study question and indicators are relevant clearly defined?						
4.2. If the entire population was studied, did its data collection approach capture all enrollees to whom the study question applied?						
Step 5: Review Sampling Methods						
Component/Standard	Υ	N	N/A	Comments		
5.1. Did the sampling technique consider and specify the true (or estimated) frequency of occurrence of the event, the confidence interval to be used, and the acceptable margin of error?						
5.2. Were valid sampling techniques employed that protected against bias? Specify the type of sampling or census used:						
5.4. Did the sample contain a sufficient number of enrollees?						
Step 6: Review Data Collection Procedures						
Component/Standard	Υ	N	N/A	Comments		
6.1. Did the study design clearly specify the data to be collected?						
6.2. Did the study design clearly specify the sources of data?						
6.3. Did the study design specify a systematic method of collecting valid and reliable data that represents the entire population to which the study's indicators apply?						
6.4. Did the instruments for data collection provide for consistent and accurate data collection over the time periods studied?						
6.5. Did the study design prospectively specify a data analysis plan?						
6.6. Were qualified staff and personnel used to collect the data?						

Step 7: Review Data Analysis and Interpretation of Study Results

Step 7: Review Data Analysis and Interpre	etati	on	of Stud	ly Results	
Component/Standard	Υ	Ν	N/A	Comments	
7.1. Were reasonable interventions undertaken to address causes/barriers identified through data analysis and QI processes undertaken?					
7.2 Are the interventions sufficient to be expected to improve processes or outcomes?					
7.3 Are the interventions culturally and linguistically appropriate?					
Step 8: Assess Improvement Strategies					
Component/Standard	Υ	N	N/A	Comments	
8.1. Was an analysis of the findings performed according to the data analysis plan?					
8.2. Were numerical PIP results and findings accurately and clearly presented?					
8.3. Did the analysis identify: initial and repeat measurements, statistical significance, factors that influence comparability of initial and repeat measurements, and factors that threaten internal and external validity?					
8.4. Did the analysis of study data include an interpretation of the extent to which its PIP was successful and follow-up activities?					
Step 9: Assess Whether Improvement is '	'Rea	al" I	mprove	ement	
Component/Standard	Υ	Ν	N/A	Comments	
9.1. Was the same methodology as the baseline measurement used when measurement was repeated?					
9.2. Was there any documented, quantitative improvement in processes or outcomes of care?					
9.3. Does the reported improvement in performance have "face" validity (i.e., does the improvement in performance appear to be the result of the planned quality improvement intervention)?					

Component/Standard	Υ	Ν	N/A	Comments
9.4. Is there any statistical evidence that any observed performance improvement is true improvement?				
Step 10: Assess Sustained Improvement				
Component/Standard	Υ	Ζ	N/A	Comments
10.1. Was sustained improvement demonstrated through repeated measurements over comparable time periods?				
ACTIVITY 2: VERIFYING STUDY FINDINGS (OPTIONAL)				
Were the initial study findings verified upon repeat measurement?				
ACTIVITY 3: EVALUATE OVERALL VALIDITY AND RELIABILITY OF STUDY RESULTS: SUMMARY OF AGGREGATE VALIDATION FINDINGS AND SUMMARY				
Check one: High confidence in reported PIP results Confidence in reported PIP results Low confidence in reported PIP results Reported PIP results not credible				

END OF DOCUMENT