**PIP Notification Form**

CCO: **Choose an item.**

Submission Date: **Click here to enter a date.**

Focus Area (1 of 7): **Choose an item.**

Category: **Choose an item.**

**SPECIFIC**

**Problem:** *(description of the reasons for selecting this project – why is this project important, what data/analyses support prioritizing this project, how will the project impact members, root cause analysis)*

Click here to enter text.

**AIM Statement** *(description of desired improvement should be time-specific, measurable and include the target population)***:** Click here to enter text.

**Description of PIP** *(brief description of the who, when, what of the project)***:** Click here to enter text.

**Population:**

* Target Population: Click here to enter text.
* Population size *(please address how this topic addresses a significant portion of the enrollees (or a specified sub-portion of enrollees)*: Click here to enter text.
* Population description: Click here to enter text.

MEASURABLE

**Measure(s) to Improve** *(add rows as needed)***:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Measure | Improvement Target | Project Goal | Baseline | Baseline date | National Standard | Data Source |
| Measure #1 | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Choose an item. |

*Additional Data Sources (e.g. other sources for goals or standards):*

Click here to enter text.

ATTAINABLE

**What previous attempts have been made to address this problem:**

Click here to enter text.

**RELEVANT**

**Alignment (please select all that apply):**

[ ]  CHIP / CHA

[ ]  CCO Incentive Metrics Program

[ ]  Health Equity Initiatives

[ ] Quality and Transformation Plans

[ ] CCO Strategic Plan

[ ] OtherClick here to enter text.

**How does this topic reflect CCO enrollee characteristics including demographics, prevalence of disease, and the potential consequences of disease:** Click here to enter text.

**TIME**

**PIP Implementation Date:** Click here to enter a date.