INHALE CLINICAL NEWSLETTER

Newsletter Highlights

Pulmonary Rehab
....

Pharmacist's Corner
....

Billing Code Updates
....

Data Trend Charts
....

Patient Advisory Board Update
....

EPIC Queries Tip Sheet
....

Health Equity Corner
....

May 2025 Lung Learning Labs

Pulmonary Rehabilitation

We enjoyed seeing many of you at our Spring Regional Meetings where we discussed Pulmonary Rehabilitation (PR). PR is a program of guided educational classes and supervised exercise sessions for people with chronic breathing difficulty, including chronic obstructive pulmonary disease (COPD). PR is designed to help patients better understand their breathing and learn how to live better with their condition. PR has been found to increase survival, alleviate tiredness and dyspnea, improve emotional function, increase the ability to do daily activities and increase health-related quality of life reducing the need for health care. These benefits are relatively extensive and substantial clinically. Rehabilitation acts as an important component of COPD management and helps to improve the quality of life and training linked to health.

Who should be referred for PR:

- COPD:
  - GOLD stages II-IV COPD
  - Patients with higher level of daily symptoms (GOLD Group B)
  - Patients with moderate to severe exacerbations (GOLD Group E)
- All other non-COPD pts:
  - FVC or FEV1 or DLCO: ≤ 65%
  - Not smoking or trying to quit

INHALE has great resources in our Pulmonary Rehabilitation Toolkit which can be found here

Pulmonary Rehab Toolkit

This toolkit contains a variety of resources to assist providers in understanding pulmonary rehabilitation. We encourage you to browse the tools and see how it can help improve the quality pulmonary rehab education for your patients.

If you have a resource that should be included, please email the INHALE coordinating center at inhale-support@med.umich.edu.

- Pulmonary Rehabilitation Location Finder >
- Provider Tools >
- Patient Education >
- Journals & Research Articles >

Additional Resources:

- Live Better Program Directory
- American Association of Cardiovascular and Pulmonary Rehabilitation: Program Directory
- Reimbursement Toolkit
- AARC Certificate Course
- What to do when PR is unavailable
- PR Infographic

Pharmacist's Corner

Medication Access Tools

Medication access remains a top priority for the INHALE team. We are working hard to ensure patients and providers have the appropriate tools necessary to ensure adequate access to safe and effective medications for asthma and COPD.

It is important to note that medication formularies are determined by a patient's prescription insurance plan, which, many times, differs from their medical insurance plan. Patients may or may not have a separate card for each plan, so be sure to confirm their prescription insurance coverage information at each visit. Given the complexity of navigating coverage, key resources for navigating cost barriers are below.

- RxAssist: Comprehensive directory of Patient Assistance Programs (PAPs). PAPs are offered by pharmaceutical companies and provide medications at low or no cost for eligible patients.
- NeedyMeds: Information on various PAPs and discount programs/coupons for prescription inhalers and other medications.
- GoodRx or OptumPerks: Links to coupons for prescription medications, which can often help reduce the cost of inhalers at pharmacies.
- MMIT application: Comprehensive resource that is updated nightly with formulary data, providing potential alternatives and details of whether the medication requires step-therapy or prior authorization.
- Prior Authorizations (PA) Tips and Tricks Document: Highlights strategies for improving efficiency and accuracy with processing PAs.

Ask the Pharmacist: 1:1 Consult with a PharmD

Nada Farhat, PharmD, BCPS, BCACP is a board-certified clinical pharmacist specialist practicing at Michigan Medicine. Services offered include:

- Explore clinical scenarios and answer patient specific clinical questions (note: PHI not permitted)
- Review online educational resources available to patients and providers
- Discuss INHALE CQI operational logistics relevant to your practice site
- Develop strategies to operationalize transitions of care at your practice
- Open forum for other clinical questions or specific INHALE related topics

For additional questions, MICMT and INHALE are partnering to provide clinical pharmacist consult services with Nada Farhat, PharmD, BCPS, BCACP. This service is provided FREE to practices and POs participating in the INHALE CQI. Nada serves on the INHALE education workgroup and can help provide resources and guidance specific to your practice site. Please sign up at the link here: https://micmt-cares.org/consultation-services
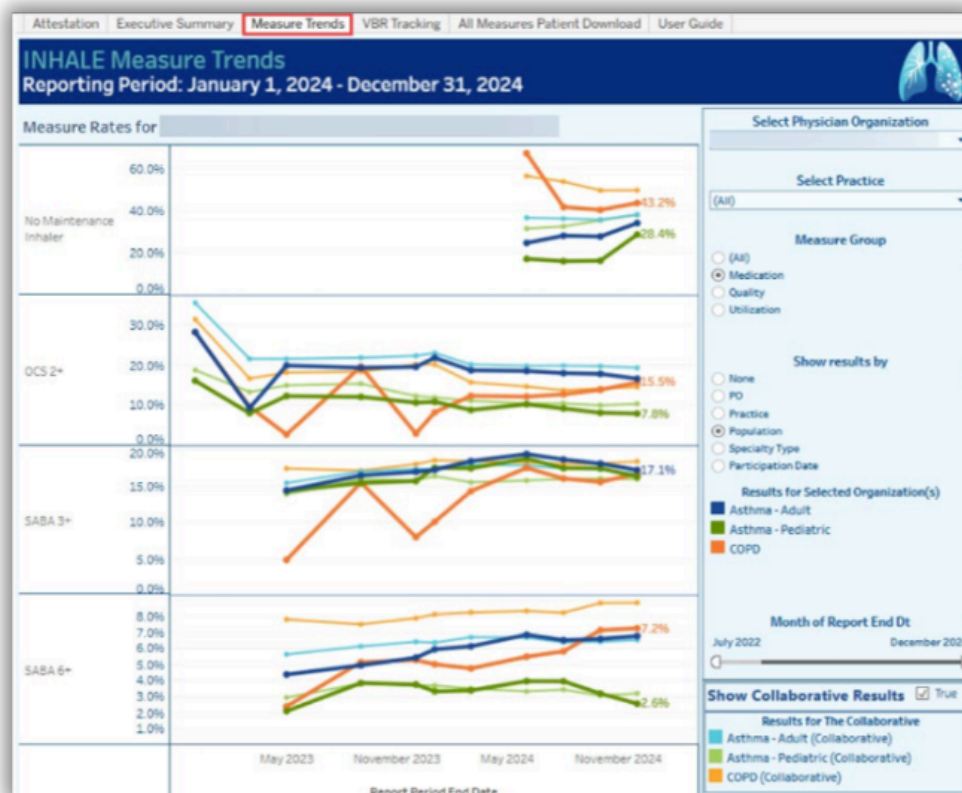
Billing Code Updates

It has been brought to our attention that CPT 94664 Inhaler Education has been getting denials with Blue Care Network (BCN). It appears that, due to an internal issue with BCBSM, a new edit that was put in the system may be causing some claims to be rejected, even with modifier 59. There will be a fix put in place to correct this in April so that claims submitted with the 59 modifier will be paid. In the interim, if there are other issues with rejections of CPT 94664, they can be appealed and should be paid after review.

Data Trend Charts

New INHALE Measure Trend Display

- Track trends for ALL dashboard measures over time
  - Note: VBR measures are also tracked separately for the Sep 2024 – Aug 2025 measurement period, limited to providers that joined INHALE prior to Sep 2024
- Select a single **Measure Group** (e.g., Medication) or All
- View results by patient population or other subgroupings
- Use the sliding date selector under **Month of Report End Dt** to limit the view to desired time period
- Overall collaborative results can be included in the graph for benchmarking
- Please refer to the **User Guide** tab for more information

Patient Advisory Board Update

Updates from the INHALE Patient Advisory Board

The INHALE Patient Advisory Board (PAB) was formed in November 2023 and recently completed the first year of service. At the November 2024 meeting, the PAB reflected on their accomplishments, future goals, and areas for improvement.

2024-2025 Accomplishments:

- Established PAB with 8 Advisors
- Established Group Norms and Agreement
- Determined 2024-2025 goals of:
  - Patient Education
  - Developing Patient Tools
- Selected 2 Patient Co-Chairs
- PAB Advisor participated on a pediatric panel at the 2024 Fall Regional Meeting
- PAB Advisor was a featured speaker at the 2025 Spring Regional Meeting

Helped Finalize:

- OCS/SABA Overuse Graphic
- SMART Adult Asthma Action Plan
- SMART Pediatric Asthma Action Plan
- COPD Action Plan
- Reviewed materials in the Resource Library

2025 Goals:

- Finalizing Patient Toolkits
- Developing additional educational tools
- Continued Patient Advocacy

The PAB is welcoming additional patients, please share this link with any interested patients.

EPIC Queries for severe asthmatics that may qualify for biologics

TIP SHEET:
Create queries and alerts of patients with severe uncontrolled asthma in the Epic electronic health record (EHR) system

PATIENT QUERY INSTRUCTIONS

A Patient Query allows a user to run searches and generate lists of patients meeting specific clinical and/or demographic criteria. The resulting list of patients can be used for clinical evaluation, outreach, etc. To create and run the Patient Query, the user will need superuser or administrator level access.

Criteria for the Patient Query

- Age: 6 years and older *AND*
- Diagnosis of severe asthma:
  - Asthma International Classification of Diseases (ICD)-10 code: J45 *AND*
  - Filled 2 or more bursts of systemic corticosteroids *OR* maintenance oral corticosteroids *OR* 1 hospitalization for asthma *AND*
  - Filled maximally dosed inhaled corticosteroid plus an additional asthma controller medication within the past 12 months

Astra Zeneca has created a tip sheet for creating queries and alerts in the EPIC electronic health record (EHR) for:

- Patients over 6 with severe uncontrolled asthma not currently treated with a respiratory biologic
- Alerts to identify patients over 6 with severe uncontrolled asthma who may be candidates for a respiratory biologic
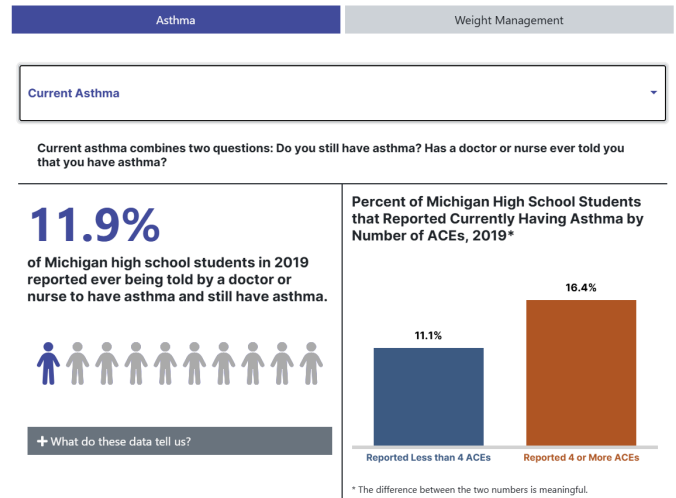
Please note this is only for the EPIC platform

Health Equity Corner
Michigan Adverse Childhood Experiences (ACEs) Data Dashboard

Adverse Childhood Experiences (ACEs) are potentially traumatic or stressful experiences before the age of 18 such as physical violence or mental illness, among others. Multiple ACEs can contribute to chronic stress and decreased health outcomes over the lifespan. There is a correlation between ACEs and asthma. The Michigan ACE dashboard includes current and "ever" asthma as data points. Support and resources for are also included on the website.

CLICK HERE to explore the dashboard

Asthma	Weight Management

Current Asthma

Current asthma combines two questions: Do you still have asthma? Has a doctor or nurse ever told you that you have asthma?

11.9%
of Michigan high school students in 2019 reported ever being told by a doctor or nurse to have asthma and still have asthma.

➕ What do these data tell us?

Percent of Michigan High School Students that Reported Currently Having Asthma by Number of ACEs, 2019*

- 11.1% — Reported Less than 4 ACEs
- 16.4% — Reported 4 or More ACEs

* The difference between the two numbers is meaningful.

Dashboard Example

May 2025 Lung Learning Labs

May 6th, 2025 12:00pm-1:00pm
At the 3rd session of the Lung Learning Lab - Dr. Wanda Phipatanakul will discuss the Role of Biologics in Pediatric Asthma

REGISTER NOW →

May 13th, 2025 12:00pm-1:00pm
At the 4th session of the Lung Learning Lab - Dr. Meilan Han will discuss the Burden of Early COPD.

REGISTER NOW →
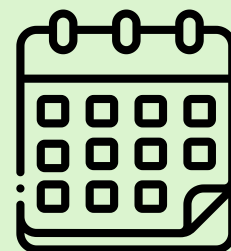
SAVE THE DATE

Fall Regionals (in-person, locations TBD)
September 18th, 2025 6-8pm
September 30th, 2025 6-8pm
October 8th, 2025 6-8pm
October 14th, 2025 6-8pm
October 16th, 2025 6-8pm

Please view other events in our Events Section

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INHALE
Inspiring Health Advances in Lung Care