

INHALE Adult and Pediatric Pulmonology and Allergy Specialty Care Physicians (SCP) 2025 VBR Measures

it the names of Clinical Champion and Practice Liaison ce Clinical Champion attendance at Spring and Fall INHALE conal Meetings Imin Leads, PO Clinical Champions, & PO Primary Contacts d annual Collaborative Wide Meeting rticipating adult/peds SCPs in each practice attend 1 of 4 ed INHALE speaker sessions, live or on demand in 2024	Practice Practice Clinical Champion PO Practice	01/01/2024 - 08/31/2024 01/01/2024 - 08/31/2024 01/01/2024 - 08/31/2024 01/01/2024 - 08/31/2024	Not Completed Completed No Attendance Attend 1 mtg Attend 2 mtgs No Attendance Attend	0 2 0 2 4 0 2	Participation Participation Participation
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			<50% Attend 50%-80% Attend >80% Attend	0 1 2	Participation
ete Practice Resource Assessment survey	Practice	01/01/2024 - 08/31/2024	Not Completed Completed	0 2	Participation
ce Clinical Champion completes Inhaled Medication ing Module on the INHALearning Platform	Practice Clinical Champion	01/01/2024 — 08/31/2024	Not Completed Completed	0 2	Participation
7. BONUS Points: Complete one INHALE Engagement Activity: Case summary, resource library feedback, best practice document, patient experience feedback, Executive Committee nomination	Practice	01/01/2024 — 08/31/2024	Not Completed Completed	0 2	Participation
			Total	Possible pts: 16*	
participation score must meet a threshold of 11/16 points to b	e considered for th	e INHALE VBR reward.			
SCP VBR Performance Measure					
tric asthma, adult asthma, and COPD patients ≥2yrs ing Inhaler Education**	All Providers	01/01/2024 - 08/31/2024	5% Increase in patients receiving Inhaler Ed	5%	Performance
tric/adult asthma and COPD smokers ≥13yrs receiving co cessation counseling [^]	All Providers	01/01/2024 — 08/31/2024	5% Increase in patients receiving TC counseling	2%	Performance
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2025 Specialist VBR Explanation

General Expectations Respond to requests from INHALE's Coordinating Center (CC) and your PO regarding INHALE related work in a timely manner (3 business days or as specified).

If a practice is sending data to MiHIN, ensure all data fields are correctly populated. If a practice is not sending data to MiHIN, make a reasonable effort to submit the data.

Measure 1: <u>Practice Liaison</u> is defined as the person responsible for the operations of the program. This involves ensuring required documents are reviewed and signed, in addition to having general oversight of the practice's participation. They are responsible for forming the team at the practice and serving as the primary contact for the PO and for INHALE's (CC). The administrative lead is responsible for ensuring all participation requirements are met and for disseminating information (upcoming meetings, newsletters, important dates, etc) from the PO and CC.

<u>Practice Clinical Champion</u> is responsible for disseminating performance/QI/educational information to relevant members of the practice and helping to advance best practices. The Clinical Champion attends regional meetings and shares what they have learned from the meetings and educates their practice. The Clinical Champion also participates in training programs required by the PO and CC. This role is not exclusive to a physician but is required to be a licensed medical care provider (RN, NP, RT, etc)

The Practice Liaison and Clinical Champion may be the same person. A Practice Liaison/Clinical Champion should be designated for each practice unless otherwise approved by the PO and INHALE's CC.

Measure 2: The Fall 2023 Regional meeting will meet the Fall meeting requirement for this VBR Timepoint.

Measure 7: Engagement Activities

- ➤ Case Summary: Submit a patient case summary on a specific patient with asthma/COPD which describes challenges, decision making, resources, outcomes to provide a high quality asthma/COPD outcome. A short form will be provided to submit a patient case. The summary should take 15-20 minutes to complete. Case summaries should be germane to INHALE initiatives.
- ➤ Resource Library/Document Feedback: Provide written feedback or meet directly with CC staff on current resources available on the INHALE website, including the resource library, documents, or education modules.
- ➤ **Best Practice Documentation:** Submit a brief description of an initiative undertaken at a practice to improve asthma/COPD care. A short form will be provided to document the details.
- ➤ Patient Experience Feedback: Connect the CC with a patient with asthma/COPD that is willing to share their experience with the disease and/or provide feedback on patient-facing INHALE resource initiatives and long-term INHALE goals.
- Nominate a Clinical Champion: Nominate a provider in your Practice to participate on the INHALE Executive Committee.

Measure 8: Performance is calculated at the PO level, combining all BCBSM PPO, BCN, and Medicare Advantage patients with COPD (adult) and asthma (adult/peds \geq 2yrs) as defined by the INHALE eligibility attributed to PCPs and SCPs participating in INHALE.

Scoring: For INHALE POs with participating PCPs and SCPs, performance is calculated at the PO level using both PCP and SCP attributed patients. If an eligible patient is attributed to both a PCP and SCP within the same PO, the patient is only counted once in the measure. The measure is met for attributable patients if ANY provider (participating SCP, PCP, or non-participating provider) provides inhaler education at least once during the measurement year.

Reward Eligibility: Providers who participate in BCBSM's Physician Group Incentive Program (PGIP) and INHALE are eligible for reimbursement in accordance with the Value Based Reimbursement (VBR) Fee Schedule. The VBR Fee Schedule sets fees at greater than 100% of the Standard Fee Schedules. The following Fee Schedules apply for participation in INHALE:

- ➤ INHALE Participation + Inhaler Education = 105%
- ➤ Tobacco Cessation = 102%

Inhaler Education VBR is applied to BCBSM PPO commercial claims only. PCMH Designation is a requirement for INHALE PCP VBR. VBR is applied to codes similarly to all other BCBSM related PCP VBR.

Claims Code: CPT Code for Inhaler Education is CPT 94664*. A Modifier 59 must be added to the CPT 94664. Modifier 59 indicates that a procedure is separate and distinct from another procedure on the same date of service. The modifier should not be added to an E/M code if a medically necessary E/M service is provided on the same day as the nebulizer or inhaler education. G-codes and 94664 are able to be billed during the same visit.

Measure 9: Provide Tobacco Cessation counseling at least once in the measurement year to patients (asthma patients ≥13 yrs, or COPD patients ≥40 yrs) who are identified as a tobacco user by ICD-10 diagnosis code. The 2% VBR uplift is not additive, meaning that POs that already receive the VBR through another CQI (i.e. MiBAC) will not get an additional 2%.

Reimbursement: SCP reimbursement for participation year 2024 is March 1, 2025 to February 28, 2026.