



INspiring Health Advances in Lung Care (INHALE) Collaborative Quality Initiative Onboarding PCPs

VBR Measurement Period: PCPs - 09/01/2024 - 08/31/2025

VBR Reimbursement Period: PCPs - 09/01/2026 - 08/31/2027

105% VBR Measures			
Measure #	Weight	Measure Description	Points
1	25%	Practice Clinical Champion attend Fall and Spring Regional Meetings	
		Attends 2 meetings	20
		Attends 1 meeting	10
		No meeting attendance	0
2	10%	Practice Clinical Champion and Practice Liaison are designated in the INHALE Admin Portal	
		Completed	10
		Not completed	0
3	10%	Practice Clinical Champion completes "Inhaled Medications" learning module on the INHALEarning Platform and submits the survey to mark requirement as completed.	
		Completed	10
		Not completed	0
4	20%	All INHALE participating providers (including the Practice Clinical Champion) attends at least one Lung Learning Lab (L3) live or on-demand and submits the survey to mark requirement as completed.	
		>80% Attend	20
		80% - 60% Attend	10
		< 60% Attend	0
5	10%	Practice Assessment survey completed in INHALE Admin Portal.	
		Completed	10
		Not completed	0

6	10%	Practice Clinical Champion and/or Practice Liaison complete PDSA worksheet on an OCS stewardship or Inhaler Education intervention.	
		Meets rubric for completeness	10
		Mostly meets rubric for completeness	5
		Does not meet rubric for completeness	0
7	5%	One provider from the practice conducts a case review on 1 OCS overuse patient case as identified in the INHALE Data Dashboard and submits the form in the Admin Portal	
		Completed	5
		Not Completed	0
8	15%	Complete 2 of the following engagement activities: 1. Complete a Best Practice form^ 2. Provide a Patient Experience Feedback form^ 3. Present at a Regional or Collaborative Wide meeting/participate as a panel member** ^ 4. Provide feedback on the user experience of the INHALE Data Dashboard^ 5. Provide feedback on the Resource Library^ 6. Participate in a Site Visit**^	
		Completes 2 activities	15
		Completes 1 activity	7
		No activity completed	0
		Optional Bonus	
9	2%	Practice Clinical Champion logs into the data dashboard twice a year and shares practice level data with practice participants.	2
		Total Points Possible	100
		Point Threshold for VBR eligibility	80
102% Tobacco Cessation + VBR Measure			
10	n/a	Tobacco Cessation Counseling: Increase tobacco cessation counseling from measurement year baseline the number of Pediatric/adult asthma (≥13 yrs) and COPD patients (≥40 yrs) receiving tobacco cessation counseling.	
		Increase by 5% or greater	Yes or No

NOTES: *SCP = Allergist, Pulmonologist, Pediatric Pulmonologist. Must be designated in the PGIP PA Tool as one of these specialties. For 3/1/2026- must be on Winter 2025 and Summer 2025 Snapshots + be in PGIP February 2026 to receive VBR. PCPs must be PCMH designated in the PGIP snapshot.

** = As available. Counts as two engagement activities. ^ = Form available in the INHALE Admin Portal



Onboarding Practice Scorecard Legend

Measure #	Description
General Expectations: Respond to requests from INHALE's Coordinating Center and your PO regarding INHALE related work in a timely manner (3 business days or as specified).	
1	Practice Clinical Champion (as designated in the INHALE Admin Portal) is required to attend both Fall and Spring Regional meetings. Dates will be provided at least 45 days in advance. Practice Liaisons (as designated in the Admin Portal) are not required to attend but are strongly encouraged to attend. Clinical Champion must attend a minimum of 75% of the meeting (in-person/virtual) to be counted toward meeting the measure. In the event the meeting is held virtually, cameras remain on and are directed at the attendee for the entirety of the meeting or attendance will not be counted toward the measure. Adherence to any additional requirements specified for participation in a virtual format is required for attendance to count toward the measure. A proxy may be requested to attend on rare occasions and with at least 72 hours notice. If a proxy has attended for the Practice Clinical Champion in the previous measurement year, the substitution may not be granted and loss of VBR points may incur.
2	Provide names and valid email addresses for Practice Clinical Champion and Practice Liaison. Practice Clinical Champion needs to be a clinically licensed professional (MD, DO, PA, NP, RN, RT). Practice Clinical Champion is responsible for disseminating performance/QI/educational information to relevant members of the practice and helping to advance best practices. The Practice Clinical Champion attends regional meetings and shares what they have learned from the meetings and educates their practice. The Practice Clinical Champion also participates in training programs required by the PO and Coordinating Center. Practice Liaisons do not need to be clinically licensed and may be an office manager, QA staff, etc. A Practice Liaison should be designated for each practice unless otherwise approved by INHALE's Coordinating Center.
3	The practice Clinical Champion is required to watch the " Inhaled Medications " Learning module and completes the survey.
4	<u>All practice providers</u> participating in INHALE (including the Practice Clinical Champion) must attend an in-person L3 or view an L3 on-demand during the current measurement period. This is any provider who signed a participation agreement and is working towards the VBR reward from INHALE. In addition to viewing the content, completion of two surveys is required: one is to claim credit for completing the measure for VBR, the other is to claim CME credit. CME Credit is optional, but the survey for viewing the content validates attendance and is not optional for claiming credit for the measure. CME credit will not be counted toward meeting attendance.
5	Practice Assessment Survey is in the INHALE Admin Portal and should be completed by either the Practice Admin Liaison or the Practice Clinical Champion.
6	The Practice Clinical Champion / Practice Liaison will complete the PDSA template and submit to the Admin Portal. INHALE Coordinating Center will review for completeness and provide feedback on the PDSA plan.
7	A provider (Practice Clinical Champion/ Participating INHALE Provider [MD, DO]) from each practice participating in INHALE will identify a patient determined in the OCS overuse measure on the INHALE Data Dashboard and complete a case review form on the Admin Portal.
8	<p>Best Practice Document: Submit a brief description of an initiative undertaken at the practice to improve a measure from the INHALE Data Dashboard. This form is available in the Admin Portal.</p> <p>Patient Experience Feedback Form: Identify a patient from your practice that is willing to share their experience with the living with asthma/COPD or complete feedback on a patient facing INHALE resource. This form is available in the Admin Portal.</p> <p>Present at a Regional/Collaborative Wide: meeting as a presenter or panel member. This may be via volunteering when the Coordinating Center requests participants or by contacting the Coordinating Center and asking to participate. This activity counts for 2 points.</p> <p>Provide feedback on the user experience of the INHALE Data Dashboard: Provide written feedback on the or meet directly with Coordinating Center staff on your first-hand experience with the INHALE Data Dashboard.</p> <p>Provider feedback on the Resource Library: Provide written feedback on resources (Toolkits, inhaler videos, education modules, etc.).</p> <p>Participate in a Site Visit: Either by volunteering or at the request of INHALE, have members from the INHALE Coordinating Center visit on-site at your practice. This visit will require at least 1 hour of time. This activity counts as 2 points.</p>
9 (bonus)	The Practice Clinical Champion will need to obtain a login from MDC to review the INHALE Data Dashboard at least twice a year. The Practice Clinical Champion should be sharing the practice's performance level data with all other INHALE participating providers at their practice(s). The INHALE Coordinating Center can track logins for the INHALE Data Dashboard.
10	Provide tobacco cessation counseling at least once in the measurement year to patients (asthma \geq 13yrs or COPD patients \geq 40 yrs) who are identified as tobacco user by ICD-10 diagnosis code. The 2% VBR uplift is not additive, meaning that providers that already receive VBR through another CQI (MiBAC, MCT2D, etc) will not earn an additional 2%.