

# MEET INHALE

## CQI Introduction and Guidebook

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**INHALE**  
Inspiring Health Advances in Lung Care

Support for INHALE is provided by Blue Cross Blue Shield of Michigan as part of the BCBSM Value Partnerships program. BCBSM's Value Partnerships program provides clinical and executive support for all CQI programs. To learn more about Value Partnerships, visit [valuepartnerships.com](http://valuepartnerships.com). The opinions, beliefs, and viewpoints expressed by INHALE do not necessarily reflect the opinions, beliefs, and viewpoints of BCBSM or any of its employees.

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**Our vision is a world where everyone  
can *breathe* deeply and *live* fully.**



# INHALE OVERVIEW

## Background

The Inspiring Health Advances in Lung Care (INHALE) collaborative aims to improve patient outcomes, promote best practices, close gaps in care, and champion high-value healthcare for all asthma and COPD patients in Michigan.



A nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association

INHALE hopes to engage and empower Primary Care, Specialty Care and Physician Organizations across the state

- to improve patient outcomes and address inequalities with regard to care, and
- to promote high-value health care for:
  - children and adults with asthma, and
  - adults with chronic obstructive pulmonary disease



### Physician Organizations (POs):

POs will be the primary partners in INHALE and will facilitate practice participation in the program.

## Participation



**Practices:** Primary and Specialty care practices will put forth effort to implement INHALE quality initiatives into their patient care.

## Strategic Initiatives



### Advancing Therapeutic Optimization

Reduce reliance on inappropriate and harmful medication, promote pulmonary rehabilitation, and ensure appropriate biologic prescribing



### Promoting Transformative Education

Empower healthcare providers and organizations through continued education, best practice sharing, and partnership building



### Championing Optimal Health for All

Increase focus on social influencers of health to close gaps in care and improve the health of all groups



### Delivering Operational Excellence

Strengthen existing processes and structures to improve the overall efficiency and impact of collaborative activity



# MEET THE TEAM

## Program Directors



**Dr. Njira Lugogo**  
Program Director



**Dr. Michael Sjoding**  
Program Co-Director

## Coordinating Center



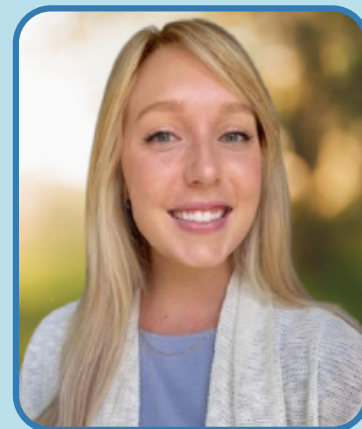
**April Proudlock**  
Program Manager



**Carrie Miller**  
Quality Improvement  
Specialist



**Karla Stoermer- Grossman**  
Clinical Site Coordinator



**Brenna Dressler**  
Project Manager



**Qi Zhu**  
Data Analyst



**Kelly Shelton**  
Administrative Assistant



**Meghan Spiroff**  
Strategic Partner &  
Engagement Specialist



**Raul Desiderio**  
Database Analyst



# INHALE GENERAL TIMELINE



## February

Recruitment opens for Onboarding and Continuing POs/Practices to add primary care practices/providers to INHALE.



## May

Collaborative Wide meeting for PO Admins and PO Clinical Champions.



## September

VBR measurement begins.

Newly enrolled sites begin participation in INHALE.

PCP VBR awarded.



## March

SCP VBR awarded.

Spring Regional meetings with participating practices.



## August

VBR measurement time period ends.



## October

Fall Regional meetings with participating practices.

Please ensure that the PO and Practices review the year specific timelines for more precise due dates.

\*\*This timeline is subject to change based on BCBSM directives.



# PARTICIPATION BENEFITS

**INHALE strives to change the treatment paradigm on a population level by partnering with providers across Michigan.**



Access to a data dashboard with availability to view patient specific data and measure trends.

Improved patient outcomes through the implementation of quality initiative measures.



Learn from and collaborate with other PCPs and SCPs on Asthma and COPD care.

Access to free CME and MOC learning opportunities on a broad range of topics.



Advocacy for guideline based care for Asthma and COPD.

Opportunities to have one-on-one consultations with a pharmacist on a specific patient case or general issues.



Formulary guides, notification of coverage changes and medication discontinuations.

Access to a robust resource library with information for providers and their patients.





# DATA DASHBOARD

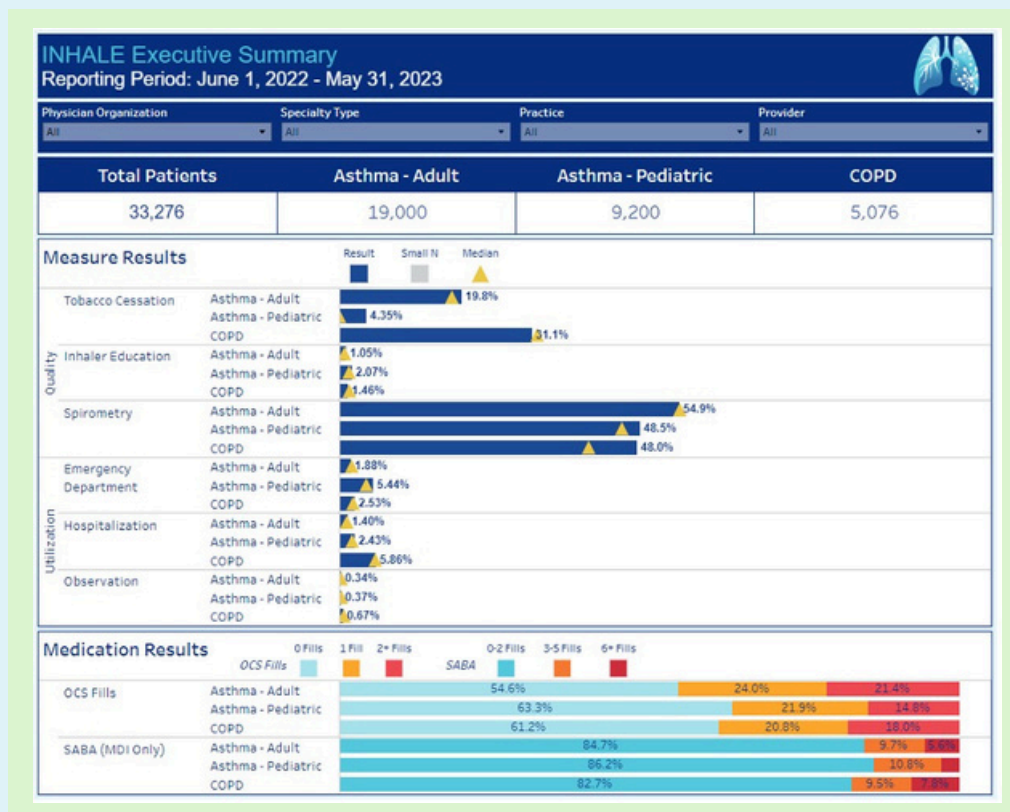
## Michigan Data Collaborative CQI Data Hub

Michigan Data Collaborative (MDC) aggregates clinical data sourced from the claims data from participating practices for the initial phase of the dashboard reports. Over time, additional sources of information, such as EHR data and Social Determinants Of Health information, will be integrated into the data hub.

## INHALE Data Dashboard

MDC provides dashboards sourced from the data hub for participating INHALE organizations. The MDC dashboards contain meaningful measures determined by INHALE clinicians and expert staff. Through MDC's iterative design process, ongoing updates will accommodate new data and reporting options. Measures are searchable by Provider Organization (PO), Practice, and Provider. Access is secured based on user credentials.

## EXAMPLE DASHBOARD

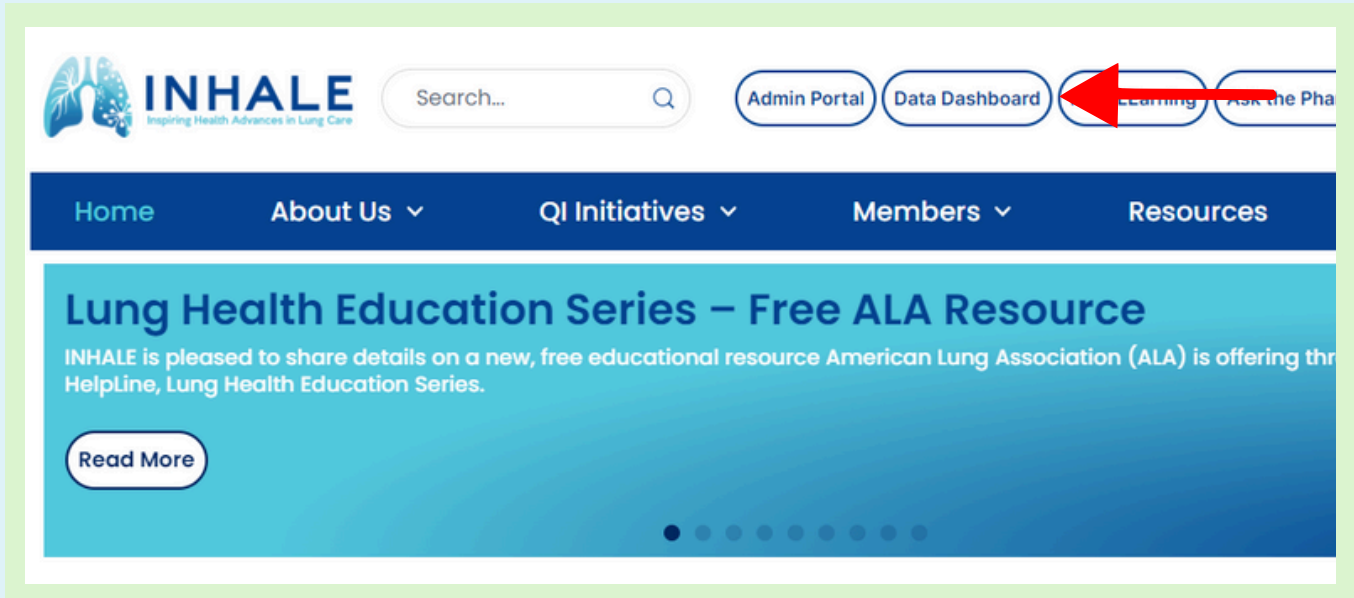


## DATA FLOW



# DATA DASHBOARD

## ACCESSING YOUR INHALE DATA DASHBOARD



1. Go to [INHALECQI.org](https://INHALECQI.org) and click the Data Dashboard button on the top of the page
2. You will be redirected to the MDC website
3. Click on "passwords"
4. You will need to create a user account by emailing [mdc-accounts@med.umich.edu](mailto:mdc-accounts@med.umich.edu) to request access to the INHALE Dashboards. When you receive your username and password, follow the setup steps found in the [Access and Setup Guide](#)
5. Review the [INHALE CQI User Guide](#) to familiarize yourself with how to use the dashboard.



### USER ACCOUNT HELP

[MDC-Accounts@med.umich.edu](mailto:MDC-Accounts@med.umich.edu)

### FOR ALL OTHER QUESTIONS

[MichiganDataCollaborative@med.umich.edu](mailto:MichiganDataCollaborative@med.umich.edu)



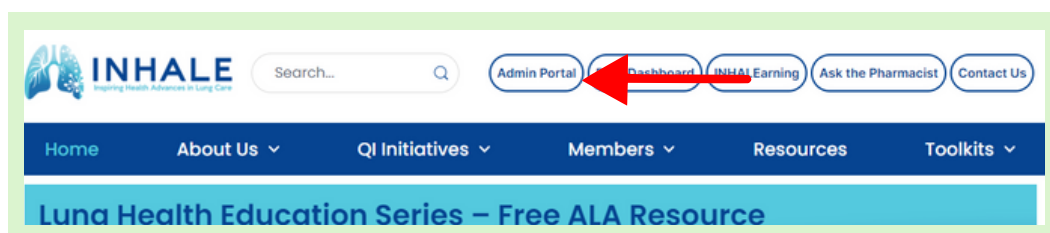


# ADMIN PORTAL

## INHALE ADMIN PORTAL

The INHALE Admin Portal was built to house all of the VBR related items, such as the scorecards and various tasks. Currently, PO level admins have access to the portal in order to track each of their practice's and provider's progress towards VBR for that year. All participants can also access each of the forms/surveys that are linked to those tasks without having to login and can share them for completion.

## ACCESSING THE INHALE ADMIN PORTAL



**New portal users:** accounts will be generated and an email with instructions will be sent. Once the account has been created, PO admins will have full access to everything they need to track VBR.

**Existing portal users:** log in using their username and password to access the portal.

Note: Practices can access all forms/documents necessary to complete VBR activities via the menu bar without having to log in.

## NAVIGATING THE PORTAL

### Admin Dashboard

#### INHALE 2026 Task Summaries

##### PO Tasks

0 / 11 PO  
Attend the 2024 Collaborative Wide Meeting  
Due: Aug 31, 2024, 11:59 p.m.

0 / 11  
Submit PO Communications  
Due: Aug 31, 2024, 11:59 p.m.

##### Practice Tasks

1 / 140 Practice  
Assign a Clinical Champion  
Due: Aug 31, 2024, 11:59 p.m.

1 / 140 Practice  
Assign a Practice Liaison  
Due: Aug 31, 2024, 11:59 p.m.

20 / 140 Practice  
Attend the Spring 2024 Regional Meeting  
Due: Aug 31, 2024, 11:59 p.m.

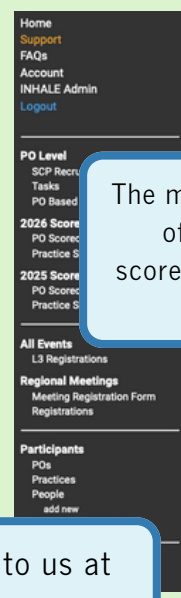
16 / 140 Practice  
Inhaled Medication Learning Module on the INHALE Learning Platform  
Due: Aug 31, 2024, 11:59 p.m.

26 / 140 Practice  
Complete Practice Assessment Survey (old)  
Due: Aug 31, 2024, 11:59 p.m.

##### Provider Tasks

177 / 541 Provider  
Attend 1 of 4 planned speaker sessions, live or on-demand - Provider  
Due: Aug 31, 2024, 11:59 p.m.

The Admin Dashboard gives you a snapshot of your progress for the VBR year.



The menu bar holds all of the relevant scorecards, forms and tasks.

If you or your team are having difficulties using the portal, please reach out to us at [inhale-support@med.umich.edu](mailto:inhale-support@med.umich.edu) to request a tutorial



# ROLES AND RESPONSIBILITIES:

## PO LEVEL

### PO Admin Lead

Time  
commitment:  
**~5-10% FTE**

The **PO Administrative Lead** is responsible for operations of the program, maintaining general oversight over the PO's participation in INHALE, including the PO's participating practices.

#### Responsibilities

1. Ensure required documents are reviewed and signed (e.g. the participation agreement, data use agreement)
2. Form a team at your PO (e.g. coordinating with the Clinical Champion) and serve as your PO's primary contact with the INHALE Coordinating Center
3. Participate in INHALE PO monthly calls and yearly meetings.
4. Maintain PO and practice level contacts in the Admin Portal.
5. Share INHALE information (such as newsletters, upcoming meetings, etc.) from the INHALE Coordinating Center with participating practices.

### PO Clinical Champion

Time  
commitment:  
**5% FTE**

The **PO Clinical Champion** is responsible for disseminating performance/QI/educational information to sites and helping to advance best practices.

#### Responsibilities

1. Participate in yearly meetings.
2. Participate in PO Monthly calls, as needed (optional, but encouraged).
3. Share INHALE information (such as newsletters, upcoming meetings, etc.) from the INHALE Coordinating Center with participating practices.
4. Support the recruitment of participating sites, in collaboration with your PO Medical Director.



# ROLES AND RESPONSIBILITIES:

## PRACTICE LEVEL

### Practice Clinical Champion

Time  
commitment:  
**10-12 hours a  
year**

The Practice Clinical Champion is the INHALE lead at the practice level, acting as the main contact between PO and the practice. The Clinical Champion has additional responsibilities that other clinicians in the practice do not.

#### Responsibilities

1. INHALE point of contact at the practice level for the PO/INHALE
2. Collaborate with the PO Clinical Champion and PO Admin Lead to share INHALE tools/resources/information within the practice
3. Share INHALE's quality improvement objectives within practice, including sharing data when applicable
4. Support and encourage practice providers participating in INHALE to achieve targets
5. Complete various engagement/learning activities as specified yearly.
6. Represent practice at Spring and Fall Regional Meetings (2 hr/each)
7. Provide feedback and input when requested

Clinical champions may be either a MD, DO, PA, NP, PharmD, RN or RN Care Manager.

### Practice Liaison

Time  
commitment:  
**<5% FTE**

The **Practice Liaison** is a non-clinical role who supports the administrative component of INHALE.

#### Responsibilities

1. Ensure any required documents are reviewed and signed
2. Provide general oversight over the practice's participation
3. Form a team at their practice and serve as the primary contact for the Physician Organization and Coordinating Center
4. Ensure that all participation requirements are met
5. Disseminate information (such as upcoming meetings, important dates, etc.) from the Physician Organization and Coordinating Center

**Ideal Candidates:** Office manager or equivalent role

\*\*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 Physician Organization and INHALE Coordinating Center.



# ROLES AND RESPONSIBILITIES: PRACTICE LEVEL

## Practice Physicians


Time commitment:  
**3-4 hours a year**

Physicians participating in INHALE are eligible to earn 105% VBR on most BCBS PPO claims.

### Responsibilities


1. Incorporate INHALE initiatives into their practice to improve the quality of care of asthma and COPD patients.
2. Meet the physician level VBR activities.

Specific scorecard information for the current year can be found in the [Members > Current Members > VBR section](#) of the INHALE website.



INSpiring Health Advances in Lung Care (INHALE) Collaborative Quality Initiative Continuing PCPs and SCPs  
VBR Measurement Period: 09/01/2024 - 08/31/2025  
VBR Reimbursement Period: PCPs - 09/01/2026 - 08/31/2027, SCPs - 03/01/2026 - 02/28/2027

| Measure # | Weight | Measure Description   | Points |
|-----------|--------|---|--------|
| 1         | 25%    | Practice Clinical Champion attend Fall and Spring Regional Meetings                         |        |
| 2         | 10%    | Practice Clinical Champion on INHALE Admin Portal and submits the survey                    |        |
| 3         | 15%    | All INHALE participating practices complete (L3) live or on-demand and self-paced education |        |
| 4         | 15%    | Practice Clinical Champion attend Education Intervention.                                   |        |



INSpiring Health Advances in Lung Care (INHALE) Collaborative Quality Initiative Onboarding PCPs and SCPs  
VBR Measurement Period: 09/01/2024 - 08/31/2025  
VBR Reimbursement Period: PCPs - 09/01/2026 - 08/31/2027, SCPs - 03/01/2026 - 02/28/2027

| 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%    | Ensure practice level clinical champions and practice liaisons are identified and added to the admin portal (including email addresses)                          |        |
|           |        | >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      |



# ROLES AND RESPONSIBILITIES: MEETINGS

## Required Meetings Breakdown

| Meeting Type            | Audience Required   | Frequency   | Purpose  |
|-------------------------|---|---|--|
| Collaborative Wide (CW) | <ul style="list-style-type: none"> <li>PO Admin Lead</li> <li>PO Clinical Champions</li> </ul>                                      | <ul style="list-style-type: none"> <li>Once per year</li> <li>Typically in the spring</li> </ul>                      | To learn about and prioritize the collaborative's initiatives with the PO leads.                                       |
| Regional                | <ul style="list-style-type: none"> <li>Practice Clinical Champions</li> <li>Practice Liaisons (optional, but encouraged)</li> </ul> | <ul style="list-style-type: none"> <li>Twice per year</li> <li>Fall and Spring</li> </ul>                             | To collaborate on best practices, discuss programmatic initiatives, gain knowledge and provide feedback to the INHALE. |
| PO Monthly Calls        | <ul style="list-style-type: none"> <li>PO Admins</li> <li>PO Clinical Champions (optional, but encouraged)</li> </ul>               | <ul style="list-style-type: none"> <li>Offered twice monthly</li> <li>Attendance required at one per month</li> </ul> | To update PO admins on programmatic changes and upcoming events, meetings and/ or due dates.                           |

## ATTENDANCE POLICIES

- PO Clinical Champions and PO Admins are required to attend the once yearly CW meeting for at least 75% of the meeting duration. A proxy may be requested but must be approved by the Coordinating Center. If a proxy attended on behalf of the Practice Clinical Champion for a previous meeting, the substitution is not valid for all meetings. You must obtain approval for a proxy for each individual meeting. Failure to do so, could be a loss of VBR points.
- Practice Clinical Champions are required to attend both Fall and Spring Regional meetings. Dates will be provided at least 45 days in advance. Practice Liaisons 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 of a virtual meeting, 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.



# TOOLS AND RESOURCES:

## RESOURCE LIBRARY

Nearly 100 free provider and patient tools and resources, developed and curated by the INHALE team.



Download from our resource library. Save your bookmarks. Share easily with patients.

The library was designed to be viewed in multiple ways: sorting options, grid vs table view, and categories all make it easy to find the resource you need.

Documents can be bookmarked, viewed and downloaded for easy sharing with colleagues and patients.

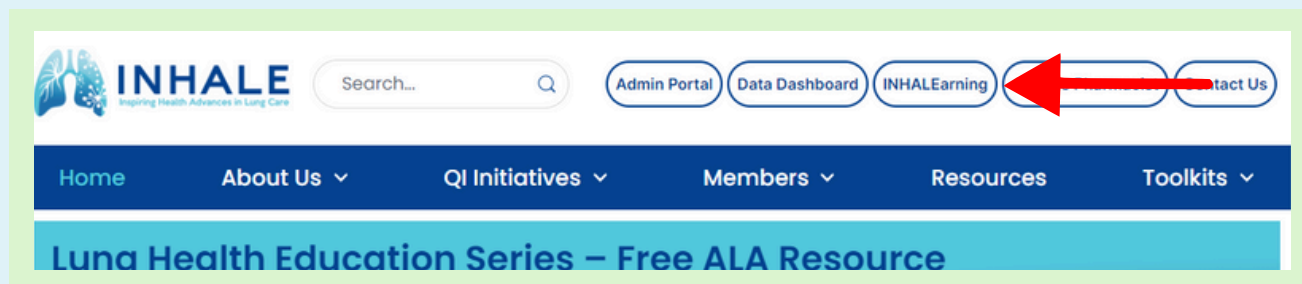




# TOOLS AND RESOURCES:

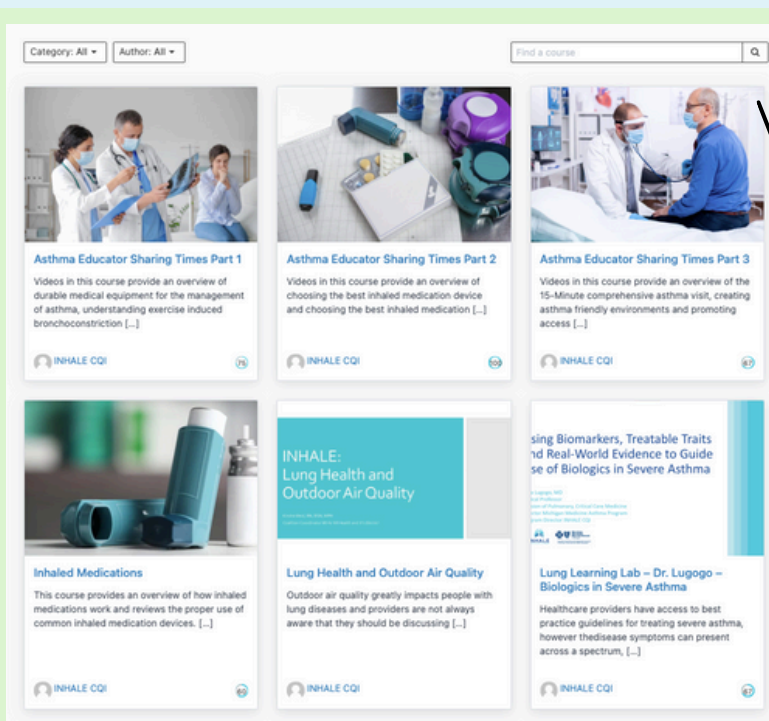
## INHALEARNING PLATFORM

### INHALEarning - EDUCATION PLATFORM



INHALE is committed to providing ongoing learning opportunities for the medical professionals who care for patients with Asthma and COPD. By logging in and completing INHALEarning activities, you can earn CME credit while staying up to date with the latest asthma and COPD guidelines and research.

The INHALEarning platform will be used to track the completion of various participation requirements for VBR with INHALE. For questions about these requirements and how you are to complete them, please reach out to the INHALE Coordinating Center team at [inhale-support@med.umich.edu](mailto:inhale-support@med.umich.edu).



#### Current Learning Opportunities

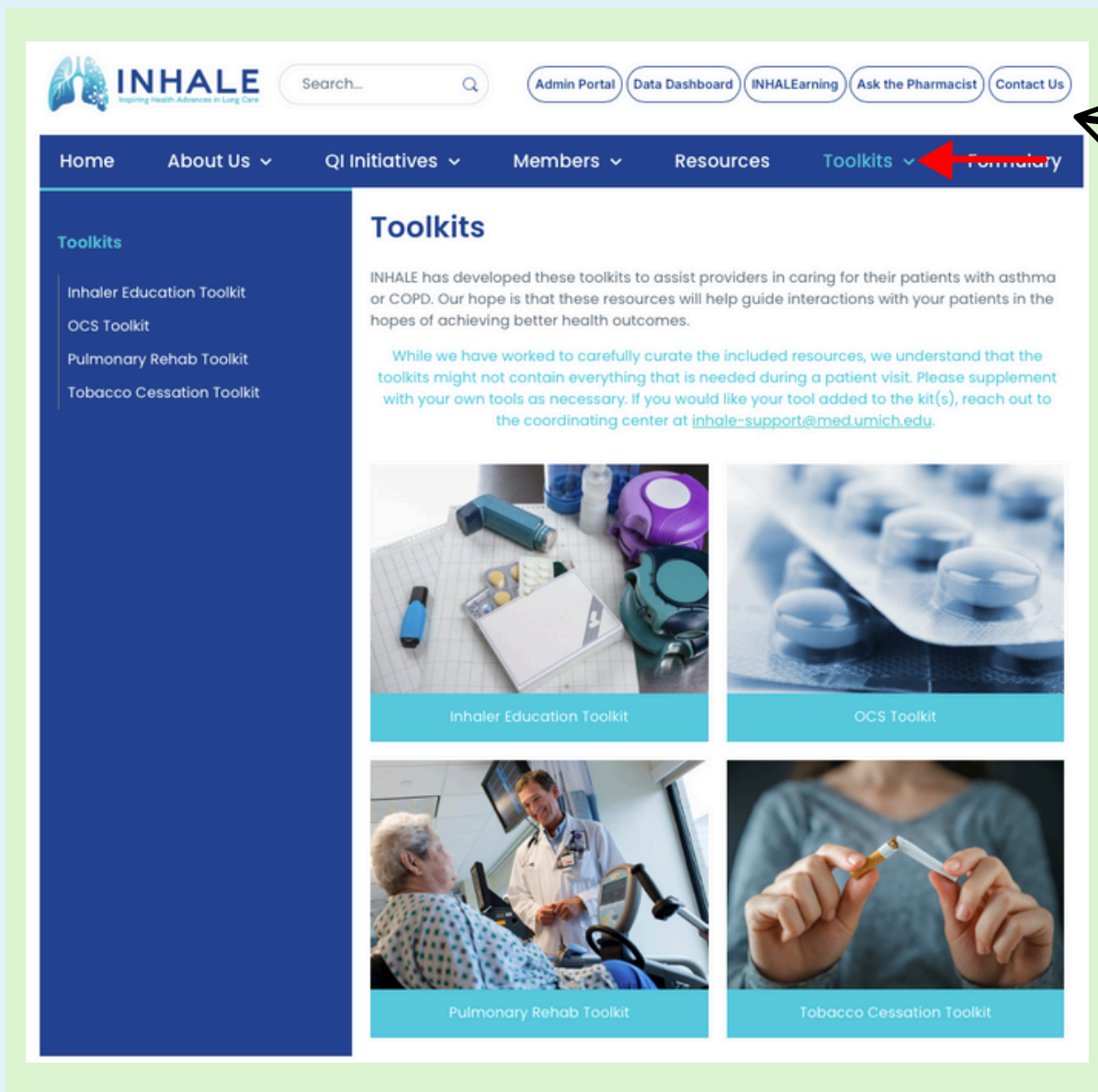
- Inhaled Medications overview
- Lung Health and Outdoor Air Quality
- Biologics in Severe Asthma
- GOLD 2024 Updates
- Bronchoscopic Lung Volume Reduction
- Pulmonary Function Testing
- And more!!



# TOOLS AND RESOURCES:

## TOOLKITS

INHALE has developed toolkits to assist providers in caring for their patients with Asthma or COPD. Our hope is that these resources will help guide interactions with your patients to achieve better health outcomes.



Each toolkit contains items such as provider and patient materials, videos, guidelines and the latest research. The team at INHALE will continuously work to keep these and our resource library up to date in the hopes that it will serve as a one stop shop for providers across Michigan and for patients with asthma and/or COPD.



# BOARDS AND COMMITTEES

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## PATIENT ADVISORY BOARD

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At the center of our work is a group of patients and caregivers who meet six times a year to discuss and share their experiences. Our PAB members meet others and work with the INHALE team to:

- Help us understand the issues facing people with Asthma and COPD
- Brainstorm ideas for how to better support patients and their communities
- Give input on tools and services
- Work together with other patients, families and caregivers
- Help us make programs and services that work for patients with Asthma or COPD
- Discuss data and share ideas about using data to improve care
- Work with the community to help people understand how best to take care of their lungs

## EXECUTIVE COMMITTEE

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Launched in the Summer of 2024, the INHALE Executive Committee members provide input and critical feedback that will assist with decision making by the Coordinating Center Leadership team on aspects of the quality improvement process including but not limited to:

- Data
- Governance
- Regulatory decisions
- Measures
- Patient engagement and education initiatives

## PEDIATRIC COMMITTEE

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As one of the few CQIs that addresses the pediatric population, this group will contribute and advise INHALE on the treatment of pediatric patients and their unique experience.



# BOARDS AND COMMITTEES OVERVIEW

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## DATA AND PUBLICATION COMMITTEE

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INHALE has launched a data and publications committee that will focus on:

- reviewing data
- establishing guidelines for publishing
- assisting in special project requests
- and much more!



If you or someone you know is interested in joining any of these committees, please email [INHALE-support@med.umich.edu](mailto:INHALE-support@med.umich.edu)

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# INHALE PARTNERSHIPS



Michigan Data  
Collaborative



The Michigan Data Collaborative (MDC) is a healthcare data organization at the University of Michigan. They support care delivery transformation initiatives across the state of Michigan by providing solutions for data collection, aggregation and visualization, measure calculation, and reporting. MDC produces dashboards to support the mission of INHALE.



The Asthma Initiative of Michigan's (AIM) work is accomplished through grants from the Centers for Disease Control and Prevention (CDC) and other organizations, and through the many hours of work with our partners. Their website, GetAsthmaHelp.org, features current asthma information for health care professionals and people with asthma. Sign up to receive weekly-ish news emails with the latest asthma learning opportunities, resources and research.



HBOM works with other CQIs to help their participating POs, hospitals, practices, and providers to make the healthy choice the easy choice. They are proud to be a part of the CQI network, more than 20 statewide collaboratives focused on improving health care and outcomes for patients in Michigan and across the nation.



The goal of MVC is to improve the health of Michigan through sustainable, high-value healthcare. Working in conjunction with INHALE and the many specialty-specific Collaborative Quality Improvement (CQI) programs in BCBSM's Value Partnership Program, MVC aims to understand variation in healthcare use, identify best practices, and lead interventions for improving care before, during, and after hospitalization. The program improves healthcare quality across Michigan through rigorous performance feedback, empirical identification of best practices, and collaborative learning.



MSHIELD's mission is to empower CQIs to lead the future of quality improvement which achieves whole health for all people by integrating social care and clinical care, using data to drive health equity, and fostering a culture of anti-racism. INHALE has partnered with MSHIELD to embrace that mission together.



# CONTACT INFORMATION

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We hope you find this guidebook valuable for helping your practices and providers onboard into INHALE . If you have any questions or require further assistance, please don't hesitate to contact us.



[inhale-support@med.umich.edu](mailto:inhale-support@med.umich.edu)



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**INHALE**  
Inspiring Health Advances in Lung Care