

# Spring 2024 INHALE Collaborative Quality Improvement PO/Primary Care Practitioner Agreement



This agreement is between the following parties:

Practitioner or Practice Name:

Physician Organization Name:

Legal entity of participant's practice:

Requirements and Responsibilities for PCP Participation in INHALE Quality Collaborative	
High Level Description	Detailed Description
Submit the name of the Clinical Champion and Practice Liaison to the PO	<p>Each participating practice will be required to designate a Clinical Champion and a Practice Liaison:</p> <ul style="list-style-type: none"> <li>• <b>Clinical Champion</b> is responsible for disseminating performance/QI/educational information to relevant members of the practice and helping to advance best practices. A physician is preferred for this role, but in certain circumstances may be designated to another licensed medical care provider (RN, NP, RT, etc.).</li> <li>• <b>Practice Liaison</b> is defined as the person responsible for the operations of the program.                             <ul style="list-style-type: none"> <li>○ Forms the team at the practice and serves as the primary contact for the PO and the Coordinating Center. Ensures that required documents are reviewed and signed.</li> <li>○ Maintains oversight for the practice's participation requirements including tracking providers in the Admin Portal (attendance at required events, registration for events, etc.).</li> <li>○ Disseminates information (upcoming meetings, newsletters, important dates, etc.) from the PO and Coordinating Center.</li> <li>○ The Practice Liaison can be an administrator or other non-clinical personnel.</li> </ul> </li> </ul> <p>*PO Admins will be responsible for marking the Practice Clinical Champion and Practice Liaison in the INHALE Admin Portal.</p>
Practice Clinical Champion attends INHALE Spring and Fall Regional Meetings	The Clinical Champion will attend INHALE Spring and Fall Regional Meetings with the expectation that pertinent information will be shared with their practice members. Meeting dates will be posted registration through the INHALE Admin Portal will be required.
Participating providers (recruited in 2024) are encouraged, and may be required in the future, to participate in learning activities.	Currently, four Lung Learning Lab (L3) sessions (web-based) are available for watching either live or on demand. Participating providers are encouraged to watch one session but may watch as many as they wish. All participating providers in a practice will be encouraged to register for the session(s) through the Admin Portal. CME will be available.
Complete a Practice Resource Assessment Survey	The Practice Liaison and Clinical Champion will work with their participating providers to complete a Qualtrics survey

	assessing strengths, existing resources, and potential barriers to achieving INHALE initiatives.
Practice Clinical Champion completes the Inhaled Medication Learning Module on the INHALEarning Platform	The Practice Clinical Champion completes the Inhaled Medication Learning Module on the INHALEarning Platform. Access to the Platform should be requested from the PO Admin. The entire Module must be completed to receive credit. CME is available. The Clinical Champion should share information learned with other participating providers. Other providers can request access to the Platform and receive CME for completed modules.

**PCP Scorecard Details for Practices Currently Participating in INHALE  
(see inhalecqi.org Members -> VBR Information section for Scorecard details)**

**For NEW Practices & Providers:**

- Practices recruited by 6/1/2024 are encouraged to complete as many of the participation points as possible.
- Points are not required to receive 2024 VBR.
- New practices/providers will receive 5% Participation VBR starting 9/1/2024 for signing up with INHALE
- Future Participation Requirements will need to be completed to be eligible for VBR.

**2023-2024 Bonus Activities Available for New Practices  
All bonus activities will be submitted through the Admin Portal**

High Level Description	Detailed Description
Complete a Case Summary	Submit a patient case summary on a specific patient with asthma or COPD which describes challenges, decision making, resources, outcomes to provide a positive outcome.
Provide resource library feedback	Provide written feedback on current resources available on the INHALE website, including the resource library, documents, or education modules.
Complete a best practice log	Submit a brief description of an initiative undertaken at your practice to improve asthma or COPD care.
Provide patient experience feedback	Connect the Coordinating Center with a patient with asthma or 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 someone for the INHALE Executive Committee	Nominate a provider in your practice to participate in the INHALE Executive Committee.

**Scoring/Points**

- Practice level participation activities will be scored according to completeness.
- The participation score must meet a threshold of 11 out of the 16 available points to be considered for INHALE VBR. See PCP scorecard on the inhalecqi.org website for details.

**2024 VBR Details  
(for 2023 activities and performance measures)**

- Participation requirements (listed above) for practices participating in 2023 must be met to receive the 105% VBR offered by INHALE. New providers receive 105% VBR for signing up.
- An additional 2% VBR for Tobacco Cessation Counseling performance is available in addition to the 105% uplift for participation if your PO met this measure in 2023.
  - The 2% is not additive, meaning that participating providers already receiving VBR for Tobacco activities through another CQI (i.e. MiBAC) will not get an additional 2%.
- Participating providers will have access to the Michigan Data Collaborative data dashboard. The Practice Clinical Champion and/or Practice Liaison will access and review practice/provider performance on a regular basis.

I have read and understand the requirements and responsibilities stated above for myself as a participating practitioner, as well as those for my administrative site lead. I understand that it is my responsibility to monitor the performance of my practice in collaboration with PO leadership.

I agree to complete the required educational sessions and attend meetings as outlined above.

Practitioner Signature:  Date:

Authorized PO Signature:  Date:

\*\*\*\*\*Please submit this form to your PO leader for submission to the Coordinating Center\*\*\*\*\*