

Population Health Collaborative Quality Initiatives Fact Sheets Specialist Value-Based Reimbursement 2025



Fact Sheet Pack

CQIs and POs should feel free to use the following fact sheets in discussing value-based reimbursement with your practitioners. The following fact sheets are for specialist VBR effective dates of 03/01/2025 – 2/28/2026, unless specified otherwise on the fact sheet.

[Inspiring Health Advances in Lung Care](#)

[Michigan Back Collaborative](#)

[Michigan Collaborative for Type 2 Diabetes](#)

[Michigan Mental health Network for Implementation and Dissemination](#)

Collaborative Quality Initiatives Fact Sheet Value-Based Reimbursement 2025 Specialist VBR



Inspiring Health Advances in Lung Care (INHALE)

The Value Partnerships program at Blue Cross Blue Shield of Michigan (BCBSM) develops and maintains quality programs to align practitioner reimbursement with quality-of-care standards, improve health outcomes and control health care costs. Practitioner reimbursement earned through these quality programs is called value-based reimbursement (VBR). The VBR Fee Schedule sets fees at greater than 100% of the Standard Fee Schedule. VBR opportunities are available to PGP practitioners who participate in the Inspiring Health Advances in Lung Care (INHALE) Collaborative Quality Initiative and that meet specific eligibility criteria. The coordinating center clinical leaders, jointly with Blue Cross, set quality and performance metrics for the VBR. Each Collaborative Quality Initiative, or CQI, uses unique measures and population-based scoring to receive BCBSM VBR. The CQI VBR is applied in addition to any other VBR the specialist may be eligible to receive. The CQI VBR applies only to reimbursement associated with commercial PPO BCBSM members. This is an annual incentive program.

INHALE is a population-health based CQI that was started in 2022. There are participation-based and performance-based components of the INHALE VBR described in this fact sheet as summarized in the table below

Table	VBR	Reward Period	Practitioner Type	Participant Cohort VBR measures apply to: Cohort 1 or 2*
Table 1.	103% Participation measures for 2025 INHALE VBR for Specialists (SCPs)	03/01/2025 – 02/28/2026	Allergists, pulmonologists, and pediatric pulmonologists	1 & 2
Table 2.	102% Performance measures for 2025 SCP VBR	09/01/2025 – 08/31/2026	Primary care physicians, pediatricians	1
		03/01/2025 – 02/28/2026	Allergists, pulmonologists, and pediatric pulmonologists	1
Table 3.	102% Performance measures for 2025 Tobacco Cessation SCP VBR	03/01/2025 – 02/28/2026	Allergists, pulmonologists, and pediatric pulmonologists	1

*Cohort 1 defined as POs that joined INHALE prior to CY2024; Cohort 2 defined as POs that joined INHALE during CY2024

Population-Based Scoring Methodology

The CQI coordinating center (*not* the physician organization) determines which practitioners have met the appropriate performance targets and notifies Blue Cross. Each physician organization will notify practitioners who will receive CQI VBR, just as the PO does for other forms of specialist VBR.

Participants can only receive VBR for one CQI, even if they are participating in more than one CQI, with the following exceptions:

- 1) Practitioners that participate in one of the four population-health based CQIs - INHALE, MCT2D, MIBAC, MIMIND – can receive the related VBR in addition to other CQI VBR
- 2) Practitioners can receive 102% VBR for tobacco cessation in addition to other CQI VBR, but can only receive one tobacco cessation VBR, even if they are eligible for it through multiple CQIs. The tobacco cessation VBR is limited to one reward per practitioner but can be earned in addition to other CQI VBR.

If a practitioner is eligible for rewards through multiple CQIs (those that are not one of the population-health CQIs), the practitioner will be awarded the highest level of CQI VBR.

VBR reward opportunities for 2025 INHALE SCP VBR

INHALE CQI participating practitioners are eligible to earn up to 107% VBR of the standard fee schedule. The practitioner can earn any one of the following VBR permutations.

- **To be eligible for 102% VBR, practitioners:**
 - must meet one of the performance measures listed in the table below (measures 8 or 9)
- **To be eligible for 103% VBR, practitioners:**
 - must meet 11 out of 16 points listed in the table below (measures 1 through 7)
- **To be eligible for 104% VBR, practitioners:**
 - must meet both performance measure listed in the table below (measures 8 **and** 9)
- **To be eligible for 105% VBR, practitioners:**
 - must meet 11 out of 16 points listed in the table below (measures 1 through 7)
 - must meet one of the performance measures listed in the table below (measures 8 or 9)
- **To be eligible for 107% VBR, practitioners:**
 - must meet 11 out of 16 points listed in the table below (measures 1 through 7)
 - must meet BOTH of the performance measures listed in the table below (measures 8 **and** 9)

Note: Pulmonologist participating in INHALE must be designated as such in the PGIP snapshot file. If a SCP is dually designated in the snapshot, Pulmonology must be the primary designation.

Table 1. INHALE Specialist VBR – Measurement Criteria

	Measure	Responsibility	Measurement Date	Target/ Assessment	Points	Category
PARTICIPATION = 103%						
1.	Submit the names of Clinical Champion and Practice Liaison	Practice	01/01/2024 – 08/31/2024	Not Completed Completed	0 2	Participation
2.	Practice Clinical Champion or designee attendance at Spring and Fall INHALE Regional Meetings	Practice Clinical Champion	01/01/2024 – 08/31/2024	No Attendance Attend 1 mtg Attend 2 mtgs	0 2 4	Participation
3.	PO Admin Leads, PO Clinical Champions, & PO Primary Contacts attend annual Collaborative Wide Meeting	PO	01/01/2024 – 08/31/2024	No Attendance Attend	0 2	Participation
4.	All participating adult/peds SCPs in each practice attend 1 of 4 planned INHALE speaker sessions, live or on demand in 2024	Practice	01/01/2024 – 08/31/2024	<50% Attend 50%-80% Attend >80% Attend	0 1 2	Participation
5.	Complete Practice Resource Assessment survey	Practice	01/01/2024 – 08/31/2024	Not Completed Completed	0 2	Participation
6.	Practice Clinical Champion completes Inhaled Medication Learning Module on the INHALE Learning 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*	
* The participation score must meet a threshold of 11/16 points to be considered for the INHALE VBR reward.						
PERFORMANCE = 102%						
2025 INHALE SCP VBR Performance Measure						
8.	Pediatric asthma, adult asthma, and COPD patients ≥2yrs receiving Inhaler Education**	All Providers	01/01/2024 – 10/31/2024	5% Increase in patients receiving Inhaler Ed	5%	Performance
9.	Pediatric/adult asthma and COPD smokers ≥13yrs receiving tobacco cessation counseling^	All Providers	01/01/2024 – 08/31/2024	5% Increase in patients receiving TC counseling	2%	Performance
**Participation requirements AND Inhaler education measures must be met to receive the total of 105% offered by INHALE. ^Tobacco Cessation is an additional 2% which is in addition 5% offered by INHALE. NOTE: If provider has dual designation, must have pulmonology as primary in PGIP Snapshot to qualify for VBR.						

Details on Performance measures 8 and 9

Table 2. Performance Measure for 102% 2025 SCP VBR		
<ul style="list-style-type: none"> VBR Measurement period: 01/01/2024 – 10/31/2024 Reimbursement period: 03/01/2025 – 02/28/2026 		
Measure	Measure details (PO Level Measure)	Target Performance
Pediatric asthma, adult asthma, and COPD patients aged 2 years and older receiving inhaler education	<p>Scoring methodology: – measure at the PO level combining patients attributed to primary care physicians (PCP) and specialty care physicians (SCP)</p> <p>Measure population: All BCBSM PPO, BCN and Medicare Advantage patients with COPD, adult asthma, and pediatric asthma aged 2 years and older who are attributed to participating INHALE PCPs and SCPs within the PO</p> <p>Numerator: Number of patients in the predefined denominator population who received Inhaler Education Counseling based on the designated CPT code 94664.</p> <p>Denominator: Number of patients in the predefined population.</p>	5% increase in the percentage of patients receiving Inhaler Education in the target performance period compared to the baseline period

Table 3. 102% Tobacco Cessation VBR measure		
<ul style="list-style-type: none"> VBR Measurement period: 01/01/2024—08/31/2024 Reimbursement period: 03/01/2025– 02/28/2026 		
Measure	Measure details (PO Level Measure),	Target Performance
Pediatric asthma, adult asthma, and COPD smokers aged 13 years and older receiving tobacco cessation counseling	<p>Scoring methodology: – measure at the PO level combining patients attributed to primary care physicians (PCP) and specialty care physicians (SCP)</p> <p>Measure population: All BCBSM PPO, BCN and Medicare Advantage patients with COPD, adult asthma, and pediatric asthma aged 13 years and older who are active smokers, as determined by ICD-10 codes, and attributed to participating INHALE PCPs and SCPs within the PO</p> <p>Numerator: Number of patients in the predefined denominator population who received Tobacco Cessation Counseling based on the designated CPT codes.</p> <p>Denominator: Number of patients in the predefined population (Disease + Smoker). Smoking status is determined by relevant ICD-10 codes.</p>	5% increase in the percentage of patients receiving Tobacco Cessation Counseling in the target performance period compared to the baseline period

VBR Selection Process

To be eligible for INHALE CQI SCP VBR, practitioner(s) must:

- Meet the participation requirements listed above
- Pulmonologist participating in INHALE must be designated as such in the PGIP snapshot file. If a SCP is dually designated in the snapshot, Pulmonology must be the combined specialty
- For SCP VBR: Physicians must be on the Summer 2024 and Winter 2025 snapshots
- Performance measure component: all practitioners have data contributed to the CQI's registry during the measurement period

Are practitioners participating in CQIs eligible for other specialist VBR?

Yes. Specialists are eligible to receive additional VBR if they meet the stated criteria. See the *Specialist VBR fact sheets* for specialty-specific information.

About INHALE

Purpose

- Improve of patient outcomes through addressing inequalities in care and promoting high-value health care for children and adults with asthma and adults with chronic obstructive pulmonary disease (COPD)
- Engage and empower providers across the state to accelerate the acquisition of knowledge of evidence-based guidelines, bridging knowledge gaps and providing a practical framework for implementation of these guidelines.
- Improve the early identification of high-risk patients and increase awareness and recognition of the risks of exacerbations, poor adherence and overuse of both oral corticosteroids and short-acting beta agonists.

Current Focus Areas

- Appropriate use of spirometry as a tool for accurately diagnosing asthma and COPD.
- Reducing over-reliance on short-acting beta-agonists (SABA) and over-exposure to oral corticosteroid overuse (OCS) as a means of improving disease control, reducing exacerbations, and long-term adverse effects.
- Education for both providers and patients on inhaler use; recognition of good disease control and measures to reduce acute exacerbations.

About the coordinating center

Michigan Medicine serves as the coordinating center for INHALE to collect and analyze comprehensive clinical data from participating hospitals to identify specific care components associated with better patient outcomes. It uses these analyses to examine practice patterns, generate new knowledge linking processes of care to outcomes, and identify best practices and opportunities to improve quality and efficiency. The center also supports participants in establishing quality improvement goals and in disseminating and implementing best practices, from local to broader communities. Coordinating center leadership:

Program director: Dr. Njira Lugogo
Program co-director: Dr. Michael Sjoding
Program manager: April Proudlock, BBA, RN

For clinical or operational questions, please reach out to the coordinating center at inhale-support@med.umich.edu

For reward related questions, please reach out to BCBSM CQI administration at CQIprograms@bcbsm.com

Collaborative Quality Initiatives Fact Sheet Value-Based Reimbursement 2025 Specialist VBR



Michigan Back Collaborative (MIBAC)

The Value Partnerships program at Blue Cross Blue Shield of Michigan (BCBSM) develops and maintains quality programs to align practitioner reimbursement with quality-of-care standards, improve health outcomes and control health care costs. Practitioner reimbursement earned through these quality programs is called value-based reimbursement (VBR). The VBR Fee Schedule sets fees at greater than 100% of the Standard Fee Schedule. VBR opportunities are available to PGIP practitioners who participate in the Michigan Back Collaborative (MIBAC) Collaborative Quality Initiative and that meet specific eligibility criteria. The coordinating center clinical leaders, jointly with Blue Cross, set quality and performance metrics for the VBR. Each Collaborative Quality Initiative, or CQI, uses unique measures and population-based scoring to receive BCBSM VBR. The CQI VBR is applied in addition to any other VBR the specialist may be eligible to receive. The CQI VBR applies only to reimbursement associated with commercial PPO BCBSM members. This is an annual incentive program.

MIBAC is a population-health based CQI that was started in 2021. All current measures are participation-based. These participation-based measures are described in this fact sheet as summarized in the table below:

Table	VBR	Reward Period	Specialist Practitioner Type
Tables 1 & 2	Participation measures for 2025 MIBAC VBR for Specialists (SCPs)	3/1/2025-2/28/2026	Chiropractors

Population-Based Scoring Methodology

The CQI coordinating center (*not* the physician organization) determines which practitioners have met the appropriate performance targets and notifies Blue Cross. Each physician organization will notify practitioners who will receive CQI VBR, just as the PO does for other forms of specialist VBR.

Participants can only receive VBR for one CQI, even if they are participating in more than one CQI, with the following exceptions:

- Practitioners that participate in one of the four population-health based CQIs - INHALE, MCT2D, MIBAC, MIMIND – can receive the related VBR in addition to other CQI VBR

If a practitioner is eligible for rewards through multiple CQIs (those that are not one of the population-health CQIs), the practitioner will be awarded the highest level of CQI VBR.

VBR reward opportunities 2025 MIBAC SCP VBR

MIBAC CQI participating specialists are eligible to earn MIBAC CQI VBR up to 105% of the standard fee schedule. The practitioner can earn any one of the following VBR permutations.

For Chiropractors starting before November 1, 2024:

- **To be eligible for 102% VBR**, participants must achieve participation requirements in Table 2
 - Must meet 25 out of 60 points in Table 2
- **To be eligible for 103% VBR**
 - Participants must achieve the requirements listed in Table 1 below.
- **To be eligible for 105% VBR**
 - Participants must achieve requirements in Tables 1 and 2 below.

For Chiropractors starting on November 1, 2024:

- **To be eligible for 105% VBR**
 - Participants must meet 80 out of 100 points in the applicable Table 1

MIBAC VBR Measures (refer to the following page)

To be eligible for MIBAC VBR, specialists must meet the following measurement criteria listed in Tables 1 and/or 2 below, organized by their MIBAC QI start date.

Michigan Back Collaborative Quality Initiative (MIBAC CQI) VBR Scorecard

MIBAC 2025 Chiropractor VBR

Chiropractors participating in QI prior to 2024

VBR Measurement Period: 11/1/2023 - 10/31/2024

VBR Reimbursement Period: 3/1/2025 - 2/28/2026

The tables below are separate sets of requirements, and the total VBR possible is 5% if targets in both tables are met. Therefore, you are able to earn one amount (2% or 3%) if you only meet the requirements for one of the tables.

Table 1: Requirements for MIBAC 2025 3% VBR

Measure #	Weight	Measure Description	Points (Bold = maximum points per measure)
1	25%	Attend MIBAC Program Meeting (s) - synchronous virtual or on-demand virtual with post test	
		Attend 1 MIBAC Program Meeting/Year	25
		No meeting attendance	0
2	25%	Chart Review - Must complete two tasks (if requested by the CC) 1) Schedule a chart review (includes chart review, follow up chart review or extended follow up process with chart review) within 10 business days of request by email (the Coordinating Center will provide 2 notifications) 2) Attend chart review (1 no-show allowed) within review period Full points awarded if not requested during the measurement period	
		Chart review, follow up chart review or extended follow-up process with final chart review completed at 85% or greater	25
		Chart review not completed at 85% or greater and/or not scheduled	0
3	25%	Patient Enrollment	
		Enroll 10 or more patients in MIBAC QI, <u>and</u> 5 patients complete a baseline survey set	25
		Less than 10 patients enrolled or less than 5 baseline surveys completed	0
4	25%	Respond to CC communications within 3 business days and provide requested information within 10 business days	
		Respond to CC communications within the requested time frame	25
		Did not respond to CC communications within the requested time frame	0
Total Points Possible			100
Total Points Earned			
Point Threshold for 3% VBR eligibility			100
Eligible for 3% VBR			Yes or No

Table 2: Requirements for MIBAC 2025 2% VBR - Earn 25 points from any of the options below

Measure #	Weight	Measure Description	Points (Bold = maximum points per measure)
1	25%	Education - Clinical QURE Vignettes (on demand between set dates)	
		Complete 8 MIBAC QURE cases	25
		Complete 4 MIBAC QURE cases	15
		Complete 0-3 MIBAC QURE cases	0
2	25%	STarT Back Risk Stratification - Patient completes the STarT Back in the clinic before or during the meeting with the Chiropractor. The Chiropractor grades the STarT Back and reviews it with the patient. The Chiropractor documents the score and applies appropriate treatment based on the Modified Treatment Plan (follow clinical judgement, document deviations from the recommended treatment(s).	
		STarT Back utilization for 5 eligible patients	10
		STarT Back utilization for 0-4 patients	0
3	25%	Patient Enrollment	
		Enroll 15 patients (5 or more in addition to the 10 required in table 1)	25
		Enroll 0-14 patients (including the 10 required in table 1)	0
Total Points Possible			60
Total Points Earned			
Point Threshold for 2% VBR eligibility			25
Eligible for 2% VBR			Yes or No

Michigan Back Collaborative Quality Initiative (MIBAC CQI) VBR Scorecard

MIBAC 2025 Chiropractor VBR

Chiropractors starting QI on March 1, 2024

VBR Measurement Period 3/1/2024 - 10/31/2024

VBR Reimbursement Period: 3/1/2025 - 2/28/2026

The tables below are separate sets of requirements, and the total VBR possible is 5% if targets in both tables are met. Therefore, you are able to earn one amount (2% or 3%) if you only meet the requirements for one of the tables.

Table 1: Requirements for MIBAC 2025 3% VBR (must meet all measures)

Measure #	Weight	Measure Description	Points (Bold = maximum points per measure)
1	25%	Meetings	
		Attend 1 MIBAC Program Meeting/Year (synchronous virtual or on-demand virtual with post-test)	25
		No meeting attendance	0
2	25%	Chart Review - Must complete two tasks (if requested by the CC) 1) Schedule a chart review (includes chart review, follow up chart review or extended follow up process with chart review) within 10 business days of request by email (the Coordinating Center will provide 2 notifications) 2) Attend chart review (1 no-show allowed) within review period (Full points awarded if participant not selected for review within the measurement period)	
		Chart review, follow up chart review or extended follow-up process with final chart review completed at 85% or greater	25
		Chart review not completed at 85% or greater and/or not scheduled	0
3	25%	Patient Enrollment	
		Enroll 5 or more patients in MIBAC QI, <i>and</i> 3 patients complete a baseline survey set	25
		Less than 3 patients enrolled or less than 5 baseline surveys	0
4	25%	Communication	
		Respond to CC communications within 3 business days, and provide requested information within 10 business days	25
		Not responsive to communications	0
Total Points			
Point Threshold for 3% VBR eligibility			100
Eligible for 3% VBR			Yes or No

Table 2: Requirements for MIBAC 2025 2% VBR - Earn 25 points from any of the options below

Measure #	Weight	Measure Description	Points (Bold = maximum points per measure)
1	25%	Education	
		Complete 8 MIBAC QURE cases	25
		Complete 4 MIBAC QURE cases	15
		Complete 0-3 MIBAC QURE cases	0
2	25%	STarT Back Risk Stratification Patient completes the STarT Back in the clinic before or during the meeting with the Chiropractor. The Chiropractor grades the STarT Back and reviews it with the patient. The Chiropractor documents the score and applies appropriate treatment (follow clinical judgement, document deviations from the recommended treatment(s)).	
		STarT Back utilization for 5 eligible patients	10
		STarT Back utilization for 0-4 patients	0
3	25%	Patient Enrollment	
		Enroll 10 patients (5 or more <i>in addition to the 5 required in table 1</i>)	25
		Enroll 0-9 patients (<i>including the 5 required in table 1</i>)	0
Total Points Possible			60
Total Points			
Point Threshold for 2% VBR eligibility			25
Eligible for 2% VBR			Yes or No

Michigan Back Collaborative Quality Initiative (MIBAC CQI) VBR Scorecard			
MIBAC 2025 Chiropractor VBR Chiropractors starting Q1 November 1, 2024 VBR Measurement Period: 11/1/2024 - 10/31/2025 VBR Reimbursement Period: 3/1/2025 - 2/28/2026			
Requirements for MIBAC 2025 5% VBR for New Chiropractors			
Measure #	Weight	Measure Description	Points (Bold = maximum points per measure)
1	20%	Meeting attendance: -Onboarding training with the Coordinating Center (60 minutes live-virtual) is offered twice per month in October and November, 2024. -Program updates meeting is offered twice per year in March and September with live-virtual or on-demand option with a passing score on the post test).	
		Attend one onboarding training session and one MIBAC program update meeting	20
		Attend onboarding training session only (no program update meeting	10
		No meeting attendance for training session or program update meeting	0
2	20%	Patient Surveys/Patient-Reported Outcomes Successfully encourage eligible patients to complete sets of baseline surveys (surveys currently consist of screening questions, STarT Back, PROMIS PI, and the general health questionnaire), and submit to MIBAC within 2 business days of the initial visit.	
		At least 20 sets submitted	20
		At least 15 but less than 20 sets submitted	15
		At least 10 but less than 15 sets submitted	10
		Less than 10 sets submitted	0
3	20%	Education - Clinical QURE Vignettes (on demand between set dates)	
		Complete 8 MIBAC QURE cases	20
		Complete 4 MIBAC QURE cases	10
		Complete 0-3 MIBAC QURE cases	0
4	20%	Risk-Stratification Live-Virtual Clinician Training: Attend and participate in one 30-minute training session about the STarT Back screening tool and the Modified Treatment Plan (scheduled every-other month from November 2024 - September 2025). Active participation is defined as on-camera, responsive to questions, and completes at least 2 live poll questions during the session).	
		Attended and actively participated	20
		Training not attended	0
5	20%	Submit fully complete participation agreements, BAAs, and accurate contact information to the Coordinating Center by the requested date(s).	
		Documents submitted within the requested time frame	10
		Documents not submitted within requested time frame	0
		Respond to CC communications within 3 business days and provide requested information within 10 business days	
		Respond to CC communications within the requested time frame	10
		Did not respond to CC communications within the requested time frame	0
Total Points Possible			100
Total Point Earned			
Point Threshold for 2026 VBR participation eligibility			80
Eligible to participate in 2026 MIBAC VBR			Yes or No

VBR Specialists Selection Process

To be eligible for MIBAC CQI PCP or SCP VBR practitioner(s) must:

- Be in a PGIP PO or in BCBSM's book of business
- Meet the participation requirements listed above
- PGIP PO Chiropractors:
 - Must be designated as such in the PGIP snapshot file. If a SCP is dually designated in the snapshot, chiropractor must be the combined specialty.
 - For 2025 SCP VBR: Physicians must be on the Summer 2024 and Winter 2025 snapshots

Are practitioners participating in CQIs eligible for other specialist VBR?

Yes. Specialists are eligible to receive additional VBR if they meet the stated criteria. See the *Specialist VBR fact sheets* for specialty-specific information.

About MIBAC

Purpose

MIBAC is a statewide quality improvement collaborative with a mission to ensure patients with low back pain receive the best possible care.

Current Focus Area

The current focus is on identifying and socializing best practices in chiropractic care to treat uncomplicated low back pain and identifying strategies to reduce unnecessary imaging in the first 28 days of an episode.

The goals of Michigan Back Collaborative Quality Initiative (MIBAC CQI) are to achieve the following for patients seeking chiropractic care for low back pain statewide

- Identify, refine and disseminate effective care patterns
- Improve outcomes for patients: optimize the value of spine care through diagnostic and treatment stewardship
- Foster a collaborative and supportive atmosphere for chiropractors to promote professional satisfaction

About the coordinating center

Henry Ford Health serves as the coordinating center for MIBAC that supports participants in establishing quality improvement interventions, trainings, and in disseminating and implementing best practices, from local to broader communities. Center leadership:

Program director:	Dr. Steven Fried, MD
Program co-director:	Ritu Zacharias, MD
Program co-director:	Alia Basierbe, DC
Program co-director:	Chiropractor TBD
Program manager:	Diane Walkerdine, MPT, MBA

For clinical or operational questions, please reach out to the coordinating center at mibac@hfhs.org

For reward related questions, please reach out to BCBSM CQI administration at CQIprograms@bcbsm.com

Collaborative Quality Initiatives Fact Sheet Value-Based Reimbursement 2025 SCP VBR



Michigan Collaborative for Type 2 Diabetes (MCT2D)

The Value Partnerships program at Blue Cross Blue Shield of Michigan (BCBSM) develops and maintains quality programs to align practitioner reimbursement with quality-of-care standards, improve health outcomes and control health care costs. Practitioner reimbursement earned through these quality programs is called value-based reimbursement (VBR). The VBR Fee Schedule sets fees at greater than 100% of the Standard Fee Schedule. VBR opportunities are available to PGIP practitioners who participate in the Michigan Collaborative for Type 2 Diabetes (MCT2D) Collaborative Quality Initiative and that meet specific eligibility criteria. The coordinating center clinical leaders, jointly with Blue Cross, set quality and performance metrics for the VBR. Each Collaborative Quality Initiative, or CQI, uses unique measures and population-based scoring to receive BCBSM VBR. The CQI VBR is applied in addition to any other VBR the specialist may be eligible to receive. The CQI VBR applies only to reimbursement associated with commercial PPO BCBSM members. This is an annual incentive program.

MCT2D is a population-health based CQI that was started in 2021. All current measures are participation-based. There are participation-based and performance-based components of the MCT2D VBR described in this fact sheet as summarized in the table below:

Table	2025 VBR	Reward Period	Specialist Practitioner Type	Participant Type VBR measures apply to:
Table 1.	MCT2D SCP VBR scorecard measures for Nephrologists – New Practices	3/1/2025-2/28/2026	Nephrologists	New*
Table 2.	MCT2D SCP VBR scorecard measures for Nephrologists – Continuing Practices	3/1/2025-2/28/2026	Nephrologists	Continuing**
Table 3.	MCT2D SCP VBR scorecard measures for Endocrinologists – New Practices	3/1/2025-2/28/2026	Endocrinologists	New*
Table 4.	MCT2D SCP VBR scorecard measures for Endocrinologists – Continuing Practices	3/1/2025-2/28/2026	Endocrinologists	Continuing**

*"New practices" refers to practices that joined MCT2D beginning CY2024.

**"Continuing practices" refers to practices that joined MCT2D prior to CY2024.

Population-Based Scoring Methodology

The CQI coordinating center (*not* the physician organization) determines which practitioners have met the appropriate performance targets and notifies Blue Cross. Each physician organization will notify practitioners who will receive CQI VBR, just as the PO does for other forms of specialist VBR.

Participants can only receive VBR for one CQI, even if they are participating in more than one CQI, with the following exceptions:

- 1) Practitioners that participate in one of the four population-health based CQIs - INHALE, MCT2D, MIBAC, MIMIND – can receive the related VBR in addition to other CQI VBR
- 2) Practitioners can receive 102% VBR for tobacco cessation in addition to other CQI VBR, but can only receive one tobacco cessation VBR, even if they are eligible for it through multiple CQIs. The tobacco cessation VBR is limited to one reward per practitioner but can be earned in addition to other CQI VBR.

If a practitioner is eligible for rewards through multiple CQIs (those that are not one of the population-health CQIs), the practitioner will be awarded the highest level of CQI VBR.

VBR reward opportunities 2025 MCT2D SCP VBR

MCT2D CQI participating specialists are eligible to earn MCT2D CQI VBR up to 105% of the standard fee schedule. The practitioner can earn the following VBR:

- **To be eligible for 105% 2025 MCT2D SCP VBR, MCT2D SCP practitioners (nephrologists and/or endocrinologists):**
 - Must meet 80 out of 100 points in Table 1, 2, 3, or 4 depending on if they are a new or continuing practice and specialist type.

MCT2D VBR Scorecard Measures

To be eligible for MCT2D VBR, specialist practitioners (nephrologists and/or endocrinologists) must meet the following criteria in one of the measurement scorecards listed in Tables 1 through 4 below:

Table 1. 2025 MCT2D SCP VBR Scorecard for Nephrologists – New Practices			
<ul style="list-style-type: none"> • VBR Measurement period: 1/1/2024- 11/30/2024 • VBR reward period: 03/01/2025 – 02/28/2026 • Must meet 80-point threshold 			
MCT2D VBR participation requirements	Responsibility	Assessment	Points
Submit name of clinical champion and practice liaison. Clinical champion must be a nephrologist.	Clinical Champion	Name and email of clinical champion and practice liaison entered into the MCT2D portal.	5
Complete the practice change readiness assessment	Clinical Champion	Practice change readiness assessment submitted via the MCT2D admin portal.	20
Participate in an onboarding call with the MCT2D nephrology program directors.	Clinical Champion	Meeting attended.	10

Attend the Spring 2024 regional meeting. Attendees: PCP practices, nephrology practices, endocrinology practices.	Clinical Champion	Meeting attended.	15
Attend the Fall 2024 nephrologist clinical champion meeting.	Clinical Champion	Meeting attended.	15
Complete brief self-reflection exercise on the quality initiatives (Coordinating Center will distribute a template)	Each physician	Self-reflection exercise submitted via the MCT2D admin portal.	20
Respond to requests from the coordinating center and your physician organization related to MCT2D related work in a timely way (either 3 days or as specified)	Practice	Tracked by the MCT2D coordinating center.	5
Present on your site's implementation of the quality improvement initiatives at a collaborative meeting, regional meeting, or conference call, if requested	Practice	Tracked by the MCT2D coordinating center.	10

Table 2. 2025 MCT2D SCP VBR Scorecard for Nephrologists – Continuing Practices			
<ul style="list-style-type: none"> • VBR Measurement period: 1/1/2024- 11/30/2024 • VBR reward period: 03/01/2025 – 02/28/2026 • Must meet 80-point threshold 			
MCT2D VBR participation requirements	Responsibility	Assessment	Points
Attend in-person Spring regional meeting. Attendees: PCP practices, nephrology practices, endocrinology practices.	Clinical Champion	Meeting attended.	15
Attend nephrology clinical champion meeting. Attendees: Nephrology clinical champions only	Clinical Champion	Meeting attended.	15
Develop a process change plan for your practice to increase prescribing of guideline directed therapy for patients with type 2 diabetes or increase urine albumin testing and submit a plan to the MCT2D coordinating center.	Clinical Champion	Plan submitted on the MCT2D admin portal.	10
Report on progress of process change to coordinating center and share with other clinical champions at the Fall Nephrology Clinical Champion meeting.	Clinical Champion	Nephrology clinical champion attends meeting and completes report out on project. Coordinating center to note completion.	15
Work with your physician organization to choose at least one primary care practice within your PO that is participating in MCT2D. Work together to identify one aspect of care coordination that can be improved, and develop a plan for process improvement, for example,	Clinical Champion	Report out at fall regional meetings	25

partnering to develop an improved referral/hand off process.			
Respond to requests from the coordinating center and your physician organization related to MCT2D related work in a timely way (either 3 days or as specified)	Clinical Champion	Tracked by the MCT2D coordinating center.	10
Present on your site's implementation of the quality improvement initiatives at a collaborative meeting, regional meeting, or conference call, if requested	Clinical Champion	Tracked by the MCT2D coordinating center.	10

Table 3. 2025 MCT2D SCP VBR Scorecard for Endocrinologists – New Practices			
<ul style="list-style-type: none"> • VBR Measurement period: 1/1/2024- 11/30/2024 • VBR reward period: 03/01/2025 – 02/28/2026 • Must meet 80-point threshold 			
MCT2D VBR participation requirements	Responsibility	Assessment	Points
Submit name of clinical champion and practice liaison. Clinical champion must be a nephrologist.	Clinical Champion	Name and email of clinical champion and practice liaison entered into the MCT2D portal.	5
Complete the practice change readiness assessment.	Clinical Champion	Practice change readiness assessment submitted via the MCT2D admin portal.	20
Attend the MCT2D medication and CGM training session (1 hour total, virtual).	Clinical Champion	Meeting attended.	10
Attend the Spring 2024 regional meeting. Attendees: PCP practices, nephrology practices, endocrinology practices.	Clinical Champion	Meeting attended.	15
Attend the Fall 2024 endocrinologist clinical champion meeting.	Clinical Champion	Meeting attended.	15
Complete reflective learning communication, co-management, and coordination with PCP practices.	Each physician	Self-reflection exercise submitted via the MCT2D admin portal.	20
Respond to requests from the coordinating center and your physician organization related to MCT2D related work in a timely way (either 3 days or as specified)	Practice	Tracked by the MCT2D coordinating center.	5
Present on your site's implementation of the quality improvement initiatives at a collaborative meeting, regional meeting, or conference call, if requested	Practice	Tracked by the MCT2D coordinating center.	10

Table 4. 2025 MCT2D SCP VBR Scorecard measures for Endocrinologists – Continuing Practices

- VBR Measurement period: 1/1/2024- 11/30/2024
- VBR reward period: 03/01/2025 – 02/28/2026
- Must meet 80-point threshold

MCT2D VBR participation requirements	Responsibility	Assessment	Points
Attend in-person Spring regional meeting. Attendees: PCP practices, nephrology practices, endocrinology practices.	Clinical Champion	Meeting attended.	15
Attend endocrinology clinical champion meeting. Attendees: Endocrinology clinical champions only	Clinical Champion	Meeting attended.	15
Develop a process change plan for your practice to increase prescribing of guideline directed therapy for patients with type 2 diabetes or increase urine albumin testing and submit a plan to the MCT2D coordinating center.	Clinical Champion	Plan submitted on the MCT2D admin portal.	10
Report on progress of process change to coordinating center and share with other clinical champions at the Fall Endocrinology Clinical Champion meeting.	Clinical Champion	Nephrology clinical champion attends meeting and completes report out on project. Coordinating center to note completion.	15
Work with your physician organization to choose at least one primary care practice within your PO that is participating in MCT2D. Work together to identify one aspect of care coordination that can be improved, and develop a plan for process improvement, for example, partnering to develop an improved referral/hand off process.	Clinical Champion	Report out at fall regional meetings	25
Respond to requests from the coordinating center and your physician organization related to MCT2D related work in a timely way (either 3 days or as specified)	Clinical Champion	Tracked by the MCT2D coordinating center.	10
Present on your site's implementation of the quality improvement initiatives at a collaborative meeting, regional meeting, or conference call, if requested	Clinical Champion	Tracked by the MCT2D coordinating center.	10

VBR Specialists Selection Process

To be eligible for MCT2D CQI PCP or SCP VBR practitioner(s) must:

- Meet the participation requirements listed above.
- Nephrologists and endocrinologists participating in MCT2D must be designated as such in the PGIP snapshot file. If a SCP is dually designated in the snapshot, endocrinologist or nephrologist must be the combined specialty.
- For 2025 SCP VBR: Physicians must be on the Summer 2024 and Winter 2025 snapshots
 - Performance measure component: have contributed data to the CQI's data registry during the measurement period (01/01/2024 – 08/31/2024)

Are practitioners participating in CQIs eligible for other specialist VBR?

Yes. Specialists are eligible to receive additional VBR if they meet the stated criteria. See the *Specialist VBR fact sheets* for specialty-specific information.

About MCT2D

- Professional CQI launched January 2021
- Original purpose: to improve quality of care for patients with type 2 diabetes using evidence-based strategies to prevent or slow disease progression.
- Collects data using the automated Population Health CQI Registry:
- Includes clinical and claims data from BCBSM PPO, BCN, BCBSM MA, BCN MA
- Working on adding additional sources such as all payer clinical data and Medicaid claims data
- Dashboards include information on BMI, HbA1C, medications, CGM prescriptions, and other variables, with goals to expand the information displayed.
- Data analysis will compare performance of participating practices to their peers in the collaborative and to the collaborative as a whole.

Purpose

Shifting the paradigm of type 2 diabetes care through dissemination of best practices and partnering to remove barriers to care.

Current Focus Areas

- Increasing guideline directed medication prescribing.
- Supporting low carbohydrate diet.
- Promoting the use of continuous glucose monitors.

About the coordinating center

Michigan Medicine serves as the coordinating center for MCT2D and is responsible for analyzing comprehensive clinical and claims data from the participating physician organizations. It uses these analyses to examine practice patterns, to generate new knowledge linking processes of care to outcomes, and to identify best practices and

opportunities to improve quality and efficiency. The coordinating center further supports participants in establishing quality improvement goals and assists them in implementing best practices. MCT2D leadership:

Program director: Lauren Oshman, MD, MPH
Program co-director: Heidi Diez, PharmD
Program manager: Jackie Rau, MHSA, PMP
Associate Program Manager: Jake Reiss, MHSA

For more information on the CQI and measures, please contact the MCT2D coordinating center at ccteam@mct2d.org.

For reward related questions, please reach out to BCBSM CQI administration at CQIprograms@bcbsm.com

Collaborative Quality Initiatives Fact Sheet Specialist Value-Based Reimbursement 2025



Michigan Mental health Improvement Network for implementation and Dissemination (MI-MIND)

The Value Partnerships program at Blue Cross Blue Shield of Michigan (BCBSM) develops and maintains quality programs to align practitioner reimbursement with quality-of-care standards, improve health outcomes and control health care costs. Practitioner reimbursement earned through these quality programs is called value-based reimbursement (VBR). The VBR Fee Schedule sets fees at greater than 100% of the Standard Fee Schedule. VBR opportunities are available to PGIIP practitioners who participate in the Michigan Mental Health Innovation Network for Clinical Design (MI Mind) Collaborative Quality Initiative and that meet specific eligibility criteria. The coordinating center clinical leaders, jointly with Blue Cross, set quality and performance metrics for the VBR. Each Collaborative Quality Initiative, or CQI, uses unique measures and population-based scoring to receive BCBSM VBR. The CQI VBR is applied in addition to any other VBR the specialist may be eligible to receive. The CQI VBR applies only to reimbursement associated with commercial PPO BCBSM members. This is an annual incentive program.

MI Mind is a population-health based CQI that was started in 2022. All current measures are participation-based. The participation-based components of the MI Mind VBR described in this fact sheet as summarized in the table below:

Table	VBR	Reward Period	Specialist Practitioner Type	Participant Cohort VBR measures apply to:
Table 1.	Participation measures for MI Mind SCP VBR for Specialists (SCPs)	03/01/2025 - 02/28/2026	Psychologists, Psychiatrists	Cohort 2022 (1) Cohort 2023 (1) Cohort 2024 (2)

**Cohort 1 defined as POs that joined MI Mind prior to CY2024; Cohort 2 defined as POs that MI Mind during CY2024*

Population-Based Scoring Methodology

The CQI coordinating center (*not* the physician organization) determines which practitioners have met the appropriate performance targets and notifies Blue Cross. Each physician organization will notify practitioners who will receive CQI VBR, just as the PO does for other forms of specialist VBR.

Participants can only receive VBR for one CQI, even if they are participating in more than one CQI, with the following exceptions:

- 1) Practitioners that participate in one of the four population-health based CQIs - INHALE, MCT2D, MIBAC, MIMIND – can receive the related VBR in addition to other CQI VBR
- 2) Practitioners can receive 102% VBR for tobacco cessation in addition to other CQI VBR, but can only receive one tobacco cessation VBR, even if they are eligible for it through multiple CQIs. The tobacco cessation VBR is limited to one reward per practitioner but can be earned in addition to other CQI VBR.

If a practitioner is eligible for rewards through multiple CQIs (those that are not one of the population-health CQIs), the practitioner will be awarded the highest level of CQI VBR.

VBR reward opportunities 2025 MI Mind SCP VBR

MI Mind CQI participating specialists are eligible to earn MI Mind CQI VBR up to 105% of the standard fee schedule. The practitioner can the following VBR :

- **To be eligible for 105% 2025 MI Mind SCP VBR, MI Mind SCP practitioners must meet the following participation criteria:**

MI Mind VBR Measures

To be eligible for MI Mind VBR, specialists must meet the following measurement criteria listed in Tables 1 through below:

Table 1. MI Mind VBR measure for 2025 SCP
<ul style="list-style-type: none"> • VBR Measurement periods: <ul style="list-style-type: none"> ○ 2025 SCP VBR: 9/1/2023-8/31/2024 • Reimbursement period: <ul style="list-style-type: none"> ○ 2025 SCP VBR: 03/01/2025– 02/28/2026

Requirements	Time frame
Form a team to work with MI Mind center and identify a clinical champion, administrative lead, data lead, and quality assurance lead	Within 30 days
Recruit Primary Care and Behavioral Health practices for MI Mind based on inclusion criteria for pilot	Within 180 days
Submit and return all Site Participation Agreements	Within 90 days
Communicate MI Mind information to practices	Ongoing
Develop and distribute patient education materials and toolkits to practices as provided by the coordinating center	Ongoing
Participate in training for clinicians and staff on the clinical suicide prevention pathway	Annually
Begin implementation of clinical suicide prevention pathway as developed by the coordinating center	Within 1 year
Partner with the coordinating center to develop data-sharing methods to report on required data elements such as patient-reported outcomes, clinical outcomes, social determinants of health, and quality improvement process measures.	Within 1 year
Maintain and submit a log of quality improvement interventions at the site level	Within 1 year
Participate in Learning Collaboratives and attend MI Mind team meetings	Quarterly

VBR Specialists Selection Process

To be eligible for the MI Mind CQI PCP or SCP VBR practitioner(s) must:

- Meet the participation requirements listed above.
- Behavioral Health Specialists participating in MI Mind must be designated as such in the PGIP snapshot file. If a SCP is dually designated in the snapshot, Psychiatry or Clinical or Clinical Psychologist- Fully Licensed must be the combined specialty.

For 2025 SCP VBR: Physicians must be on the Summer 2024 and Winter 2025 snapshots

Are practitioners participating in CQIs eligible for other specialist VBR?

Yes. Specialists are eligible to receive additional VBR if they meet the stated criteria. See the *Specialist VBR fact sheets* for specialty-specific information.

About MI Mind

Established in 2022, the Michigan Mental Innovation Network for Clinical Design (MI Mind) is a statewide partnership with providers, health systems, and suicide prevention experts working together to reach shared goals: improving suicide prevention, care, and access to key behavioral health services in the state of Michigan.

MI Mind offers providers evidence-based suicide prevention practices backed by training, information, support, and evaluation with a long-term goal of furthering research, innovation, and advances in clinical care.

Our mission is to engage psychiatrists, psychologists, and primary care physicians in the use of care pathways to significantly reduce suicides in Michigan.

There are 10 POs participating for the 2024-2025 cohort; 2026 recruitment will commence in early 2025.

Purpose

The aim of MI Mind is to improve suicide prevention and access to behavioral health across the state of Michigan. This CQIs aims to engage PGIP provider organizations and affiliated practitioners.

Current Focus Areas

- Implementation of the Zero Suicide model - Developed at Henry Ford and adopted nationally as part of the National Strategy for Suicide Prevention, as well as globally in more than twenty countries.
- Leverage a series of evidence-based suicide prevention practices, including screening and intervention.
- Train clinical staff in suicide prevention practices within all participating POs.
- Evaluate implementation processes, outcomes, and costs to inform PO participants.

About the coordinating center

Henry Ford serves as the coordinating center for MI Mind and is responsible for collecting and analyzing comprehensive clinical data from the participating hospitals. It uses these analyses to examine practice patterns, generate new knowledge linking processes of care to outcomes, and identify best practices and opportunities to improve quality and efficiency. The coordinating center further supports participants in establishing quality improvement goals and assists them in implementing best practices. MI Mind Leadership:

Program Director: Brian Ahmedani, PhD, LMSW

Program Director: Cathrine Frank, MD

Program Manager: Heather Omdal, MPH

For more information on MI Mind, please contact the MI Mind Coordinating Center mimind@hfhs.org.

For reward related questions, please reach out to BCBSM CQI administration at CQIprograms@bcbsm.com.

2025 Specialist Population Health CQI VBR Opportunities
SCP VBR effective 03/01/2025 - 02/28/2026

CQI Abbreviation	CQI Name	Eligible Specialties	5% VBR (SCP VBR)	2% Tobacco Cessation VBR
INHALE	Inspiring Health Advances in Lung Care	Allergy Pulmonology Primary Care (Adult and Pediatrics)	✓	✓
MCT2D	Michigan Collaborative for Type 2 Diabetes	Endocrinology Nephrology Primary Care (Adult, no Pediatrics)	✓	
MI Mind	Michigan Mental Innovation Network and Program Design	Psychiatry Psychology Primary Care (Adult, no Pediatrics)	✓	
MIBAC	Michigan Back Collaborative	Chiropractic Primary Care (Adult, no Pediatrics) Chiropractic	✓	
Updated 10-6-2024				