

MISHC TAVR 2025 VBR Metrics

	Measures	Measurement Period	Target Performance
1	Increase referral to cardiac rehabilitation after TAVR	1/1/2024 – 6/30/2024	≥90%
2	Increase rate of mean gradient documentation at TAVR 1 year follow up	1/1/2024 – 6/30/2024	≥75%
3	Site-specific measure	1/1/2024 – 6/30/2024	Site-specific

MISHC scoring methodology

- MISHC TAVR uses a site level scoring model to measure performance.
- The site average must meet the target for 2 of 3 measures for practitioners to be eligible for VBR. Eligible practitioners may receive up to 103% of the Standard Fee Schedule.
- Practitioners may receive an additional 102% of the Standard Fee Schedule for performance >1 CQI (BMC2 PCI or MSTCVS-QC; total = 105%).
- The measurement period uses 2024 data and will be paid out in 2025.

CQI VBR selection process

For a practitioner to be eligible for CQI VBR, they must:

- Meet the performance targets set by the coordinating center
- Be a member of a PGIP physician organization for at least one year
- Have contributed data to the CQI's clinical data registry for at least two years, including at least one year of baseline data

A physician organization nomination isn't required for CQI VBR. Instead, the CQI coordinating center will determine which practitioners have met the appropriate performance targets and will notify Blue Cross. Each physician organization will notify practitioners who will receive CQI VBR, as it does for other specialist VBR.