

***ACHIEVING HEALTH EQUITY AND DISPARITY REDUCTION:
PREVENTION AND COST SAVINGS INITIATIVES***
**MINORITY DISPARITY REDUCTION INITIATIVES: IMPROVING
HEALTH OUTCOMES IN MARYLAND DEPARTMENT OF HEALTH'S
PRIORITY FOCUS AREAS**

ASTHMA PREVENTION AND MANAGEMENT

Clifford S. Mitchell, MS, MD, MPH
Director, Environmental Health Bureau
Maryland Department of Health
December 6, 2018



MARYLAND
Department of Health

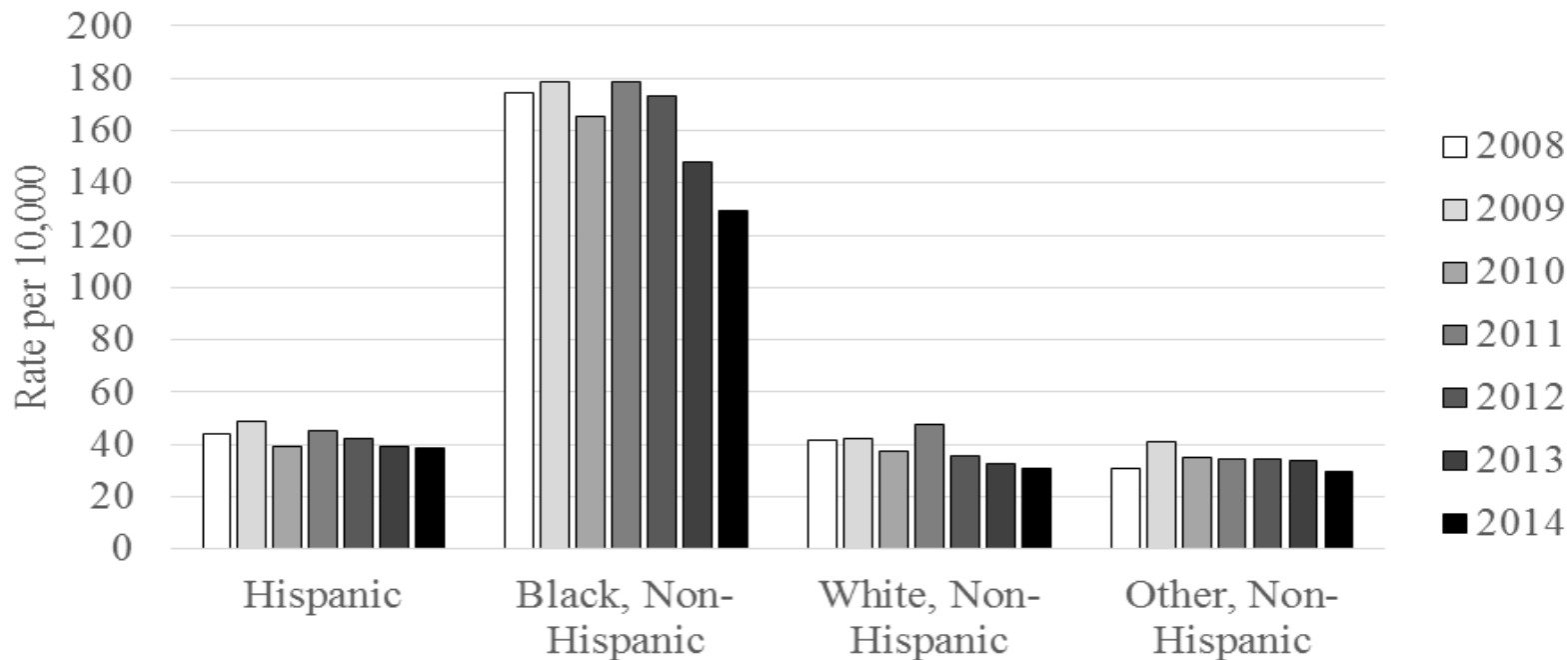
Asthma in Maryland

- ❖ The lifetime prevalence of asthma in adults (ever been told that they have asthma, based on 2015 BRFSS) is:
 - White – 13.3%
 - Black or African-American – 14.8%
 - All Hispanic – 12.0%
 - Other Race – 11.1%

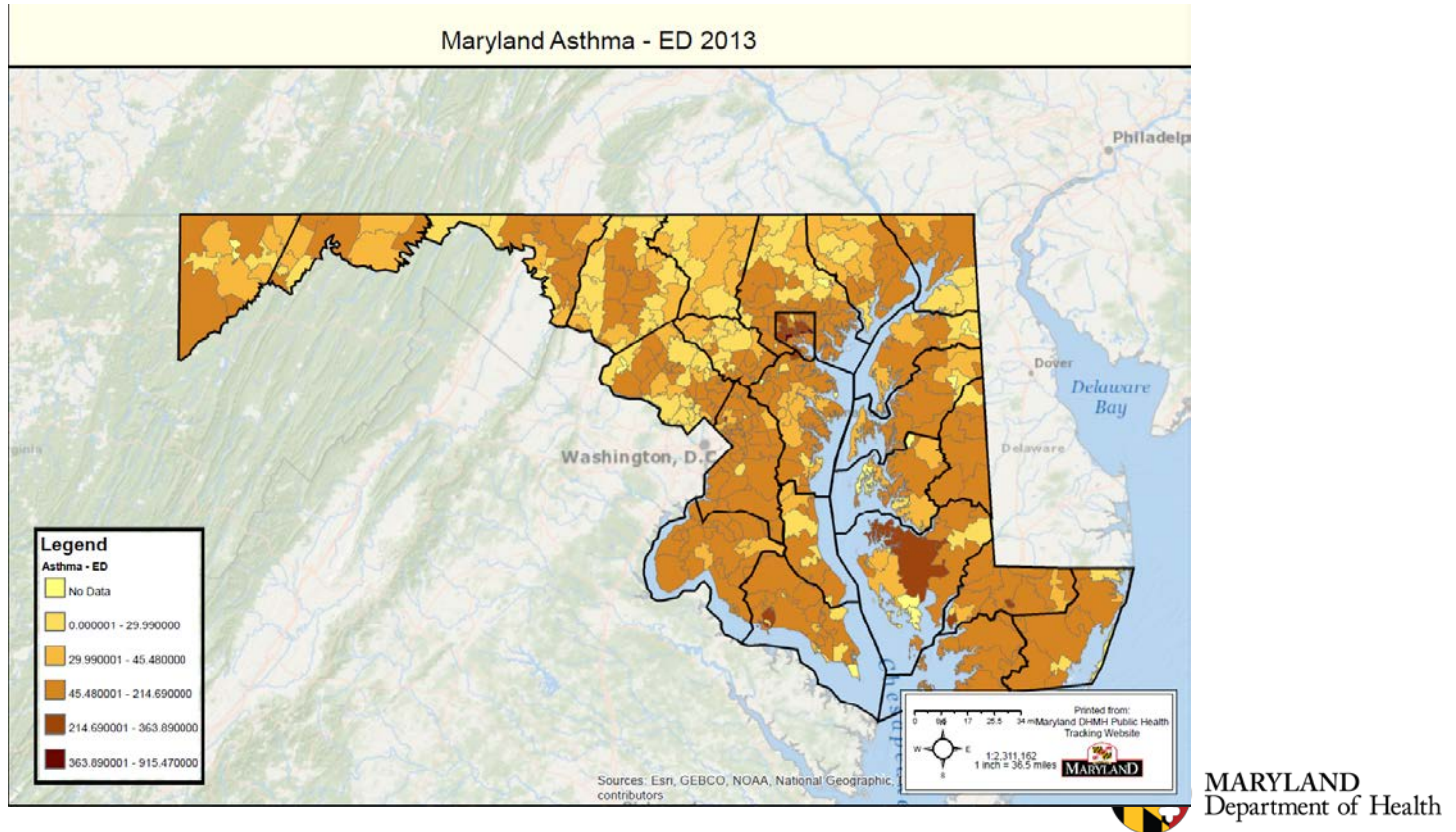
- ❖ The age-adjusted death rate (2006-2016) for Black or African-American Marylanders (2.3/100,000) is 3 times higher than for White Marylanders (0.8/100,000) (Source: CDC Wonder)

Asthma in Maryland has Significant Disparities

Figure 1. Asthma Emergency Department Visit Rates by Race and Ethnicity, Maryland, 2008-2014



Geographic Variability in Asthma



Maryland Children's Health Insurance Program (CHIP) Health Services Initiative (HSI) State Plan Amendment (SPA)

- ❖ 2015: Maryland Medicaid, Environmental Health Bureau (EHB), start to develop CHIP administrative funds from Centers for Medicare and Medicaid Services (CMS) to support two new initiatives:
 - Healthy Homes for Healthy Kids
 - Childhood Lead Poisoning Prevention and Environmental Case Management
- ❖ January 2017: Medicaid submits the Health Services Initiative State Plan Amendment (HSI SPA) to CMS to leverage CHIP funds
- ❖ June 2017: HSI SPA approved

Childhood Lead Poisoning Prevention and Environmental Case Management

- ❖ Expansion of county level programs to provide environmental case management and in-home education programs with the aim of reducing the impact of lead poisoning and asthma on low-income children.
- ❖ The program will be conducted by environmental case managers and community health workers seated in Local Health Departments (LHDs) and conducted in nine counties.

Program 2: Overview

When names of child(ren) with elevated BLL or asthmatic concerns are referred to LHD, LHD staff will check the Medicaid enrollment status of the child. If child is *not* enrolled in Medicaid, LHD staff will assist with application *and ...*

...LHD will verify if the child needs help due to:

1. Asthma
2. Elevated lead levels
3. Both

LHD staff will refer to Environmental Case Manager and CHW to conduct home visit(s);

Team will take durables and train parents/guardians to ensure environmental hazards are reduced in the home.

For child with elevated BLL, team will conduct home visits etc., but also refer to DHCD to abate the home and enroll child into Program #1.

Program 2: Eligibility

Children (0-18 years) must be:

- (1) Enrolled in Medicaid or CHIP *or* eligible for Medicaid / CHIP but not yet enrolled;
- (2) Reside in one of nine specific counties in Maryland*;
- (3) Have a diagnosis of moderate to severe asthma[✱] **AND / OR** a BLL of $\geq 5\mu\text{g/dL}$;

*Participating jurisdictions include: Baltimore City, Baltimore County, Charles County, Dorchester County, Frederick County, Harford County, Prince George's County, St. Mary's County, and Wicomico County.

[✱] Utilizes standard clinical definitions of moderate to severe asthma by age group.

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[✳] Utilizes standard clinical definitions of moderate to severe asthma by age group.

Program #2: Services

- Funding for LHDs to hire and train environmental case managers and CHWs to provide environmental case management, and educational support to the parents and guardians of low-income children with asthma and/or lead poisoning.
- Home visiting program (3-6 visits)

Home Visits and Case Management

- ❖ Initial environmental assessments conducted by CHWs, based on the assessments currently employed by BCHD CAP staff and will
 - Focus on triggers for asthma and risk for lead poisoning
 - Aligned with “healthy homes assessments”
 - Not considered an “in-home assessment” eligible for Medicaid reimbursement

Required Durables for Home Visits

Asthma Durables	Lead Durables
HEPA Vacuum	HEPA Vacuum
Bucket	Bucket
Mop	Mop
Sponges	Sponges
Mouse traps	Micro-fiber cleaning cloths
Cockroach traps / baits	Soap
Dust mite covers for mattress	
Medication storage containers	
Spacers (for inhalers)	
Caulk	
Copper Mesh	
Sticky Traps	
Soap	

Referral Sources for Children with Asthma

- Health care providers
- Hospitals
- School-based health personnel
- Social service agencies
- Parents/guardians

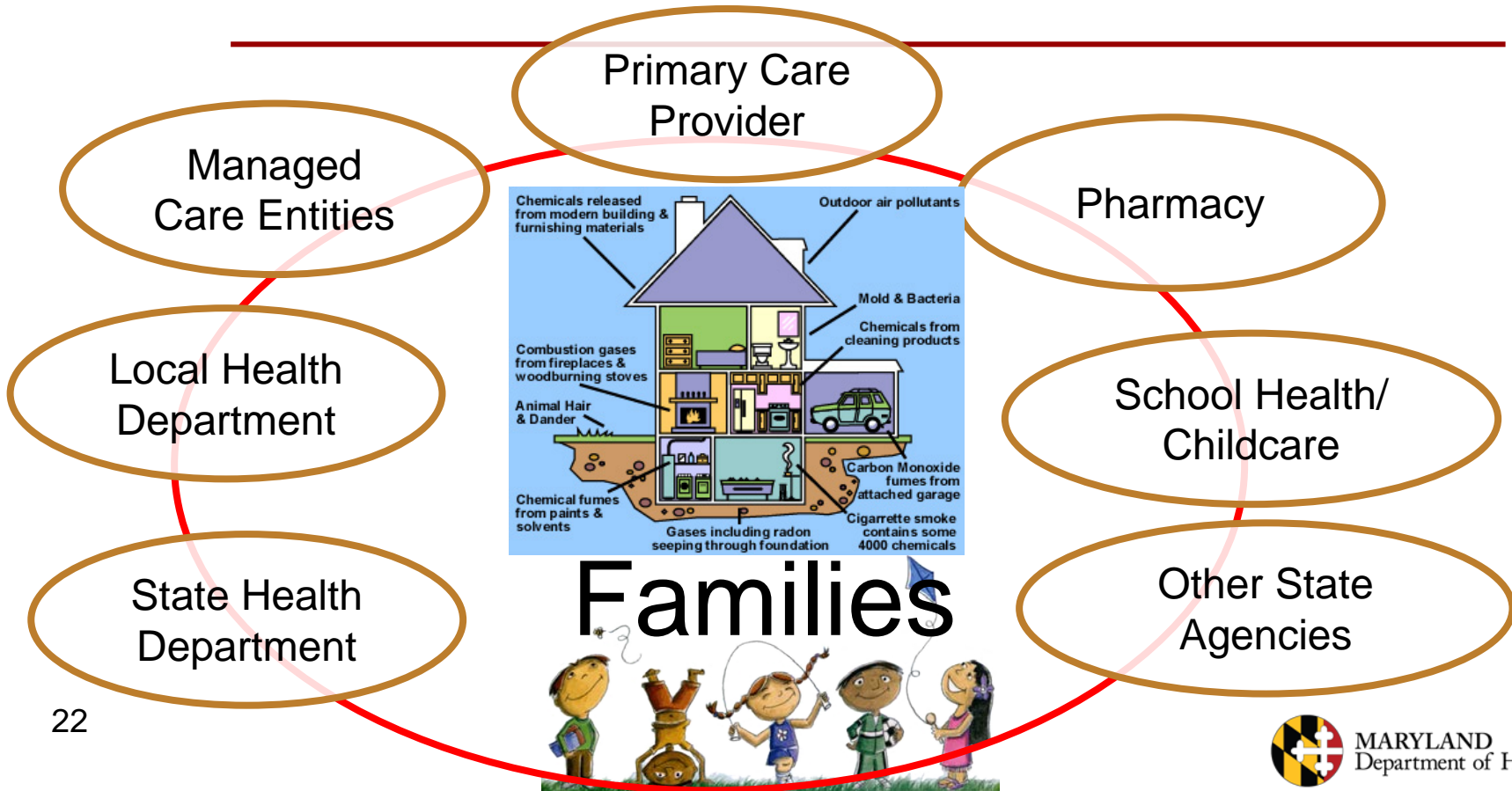
To make a referral:

1-866-703-3266

Or contact your local
participating health
department*

*Baltimore City, Baltimore County, Charles County, Dorchester County, Frederick County, Harford County, Prince George's County, St. Mary's County, and Wicomico County.

A Community Centered Medical Home





Maryland Department of Health
Prevention and Health Promotion Administration

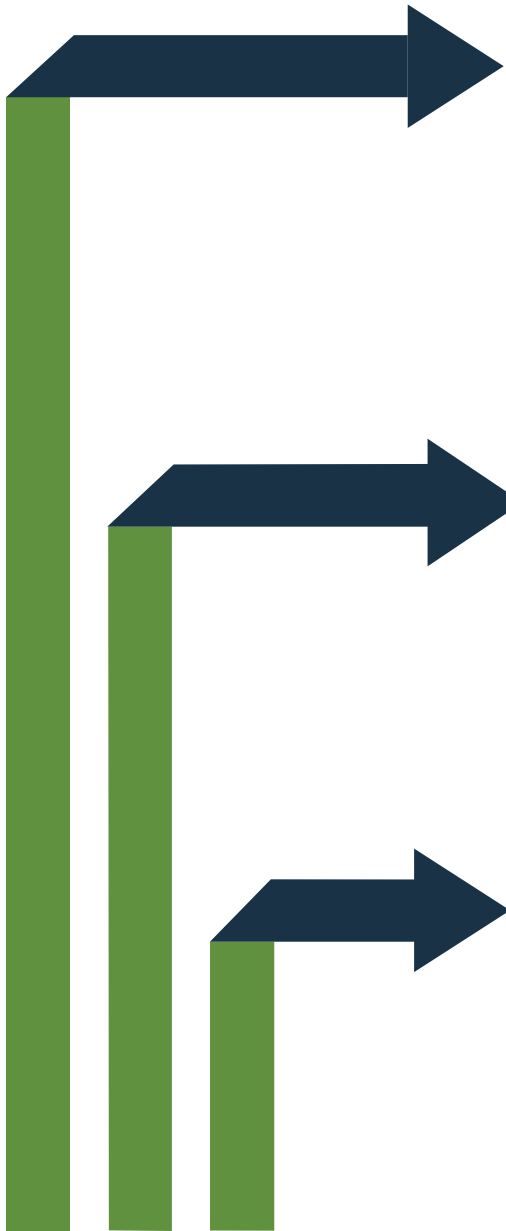
<https://phpa.health.maryland.gov>

St. Mary's County Asthma Control Program



ST. MARY'S COUNTY
HEALTH DEPARTMENT

Objectives




- Provide an overview of the evidence-based public health practice of the home visiting model for youth with asthma.
- Discuss the evolution of community partnerships to increase program referrals and focus on the minority population.
- Review program's development to include utilization of Community Health Workers.

Evidence-Based Public Health Recommendation

Use home-based, multi-trigger, multi-component interventions with an environmental focus for children and adolescents with asthma

Guide to Community Preventive Services. Asthma control: home- based, multi-trigger, multi component interventions. www.thecommunityguide.org/asthma/multicomponent.html. Last updated: 02/23/2015

Asthma Control Program Objectives



ST. MARY'S COUNTY
HEALTH DEPARTMENT

DOES YOUR CHILD HAVE ASTHMA?

If so, schedule a **FREE HOME VISIT**
with a nurse and receive:

- MATTRESS AND PILLOW COVERS ✓
- SPACER FOR INHALER OR MASK FOR NEBULIZER ✓
- INFORMATION TO HELP MANAGE YOUR CHILD'S ASTHMA ✓
- TIPS FOR AN ASTHMA-FRIENDLY, HEALTHY HOME ✓

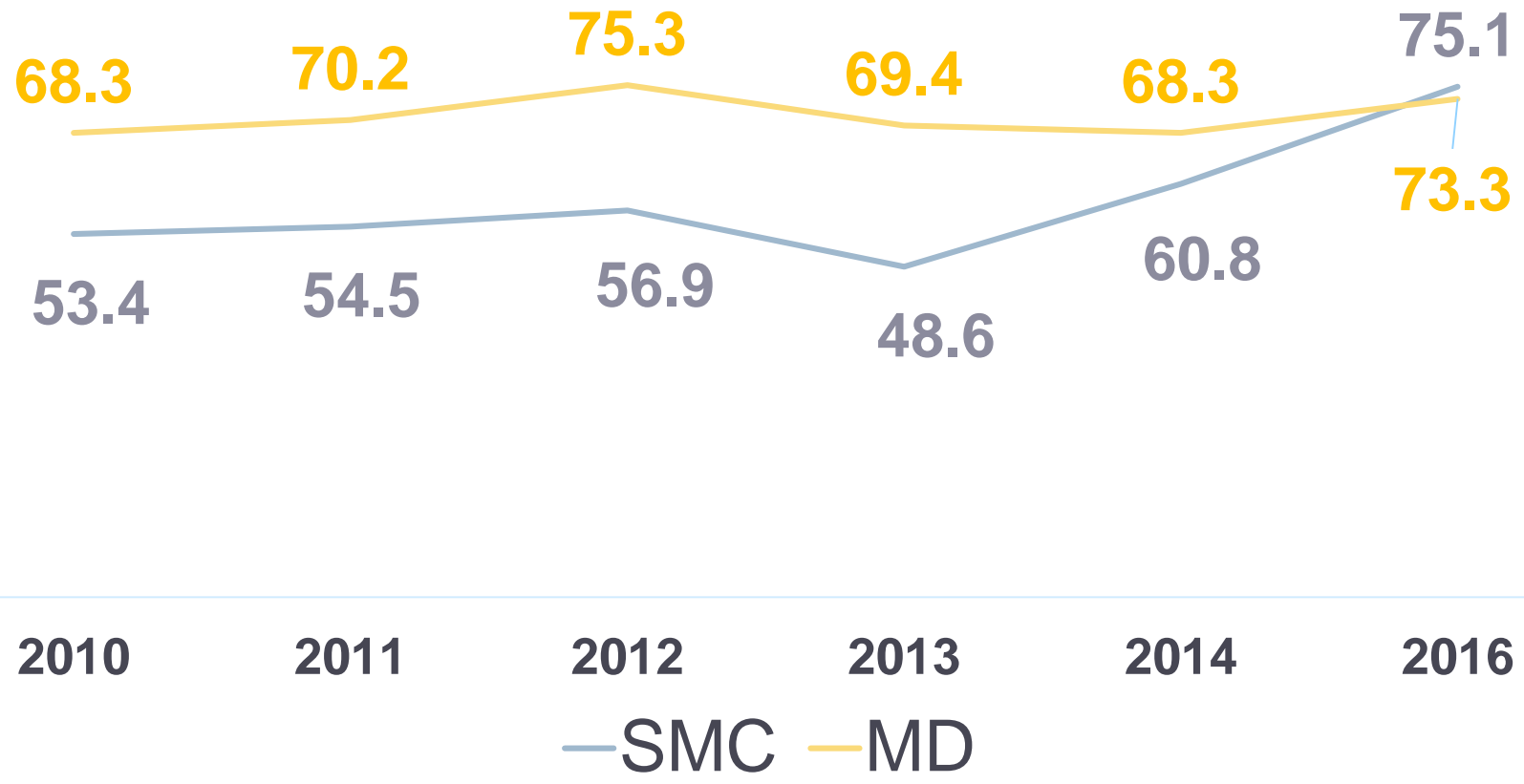
FREE
for
St. Mary's County
residents
AGES 2-18
with asthma

CALL 301-475-4330
*to talk to our asthma nurse at St. Mary's County Health
Department for more information or to schedule an appointment*

www.smchd.org
21580 Peabody Street,
Leonardtown, MD. 20650

- Reduce exposure to indoor asthma triggers
- Decrease asthma-related ED visits, hospitalizations, and missed school days
- Promote general asthma education to children and their families
- Increase use of asthma action plans by health professionals and patients
- Provide assessment information to primary care providers, school nurses and parents

ED Visits Due to Asthma (per 100,00)



Maryland Health Services Cost Review Commission (HSCRC), Research Level Statewide Outpatient Data Files
Retrieved from <http://dhmh.maryland.gov/ship/Pages/home.aspx>

Partnerships & Referrals

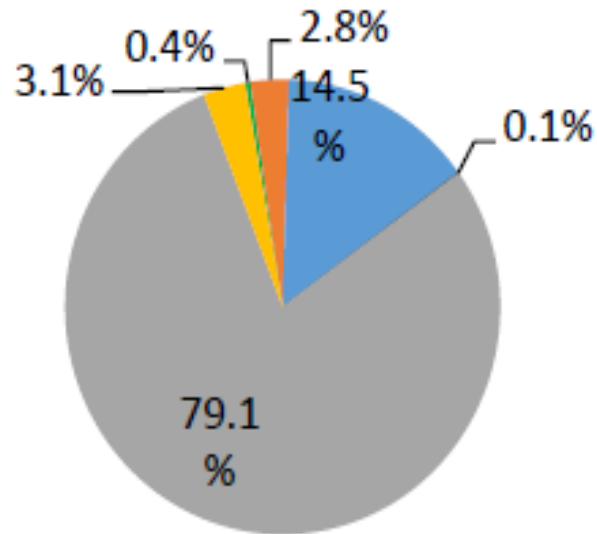
- St. Mary's County Public Schools
 - School Nurses
 - Pupil Personnel Workers
 - Parent Liaisons
- MedStar St. Mary's Hospital
 - Emergency Department Referrals
- Housing Authority
- Local Providers
- MDH Office of Minority Health and Health Disparities
- MDH Environmental Health Bureau

Engaging Minority Communities

- Referrals from families
- Strong Partnership with local Minority Outreach Coalition
 - Juneteenth
 - Community Wellness Day
 - Sub-grantee for youth tobacco prevention
- Partner with local NAACP
 - Back to School Fair
- Referrals from WIC and MCHP
- Partnership with local Housing Authority
- Faith-Based Organizations
- Head Start Program

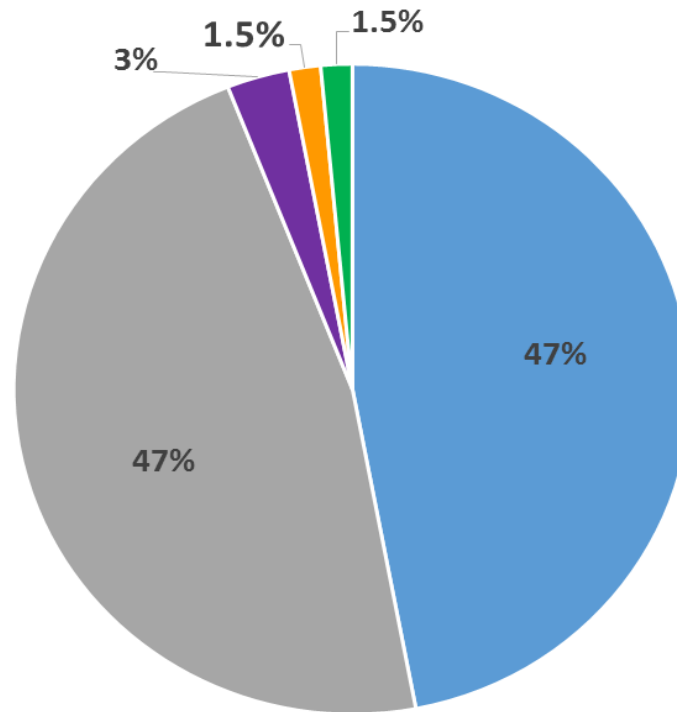
Asthma Program Race and Ethnicity

St. Mary's County



- AI/AN
- ASN
- BLK/AA
- NH/PI
- WHT
- Multi

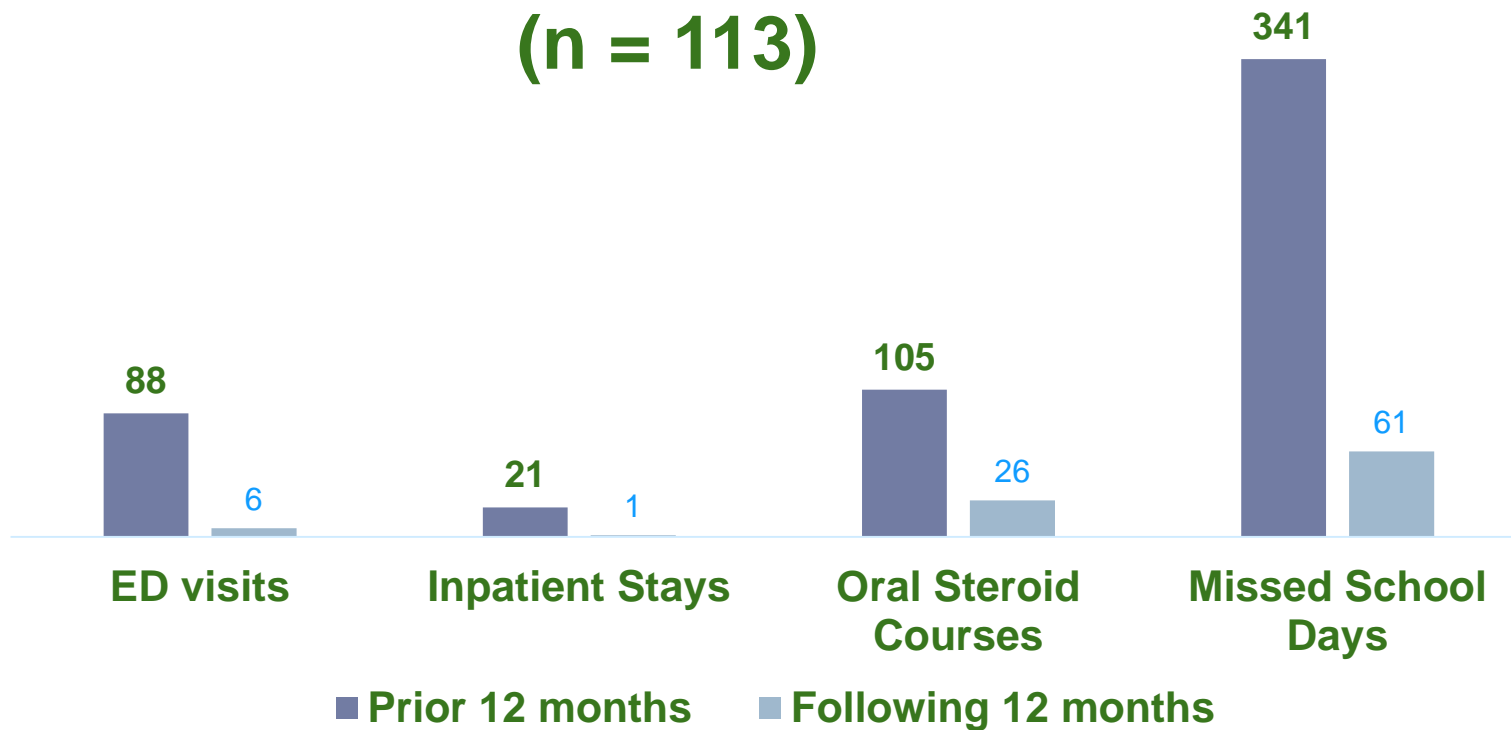
St. Mary's County Asthma Program



- BLK/AA
- Hispanic/Latino
- American Indian
- WHT
- Asian

SMC Asthma Home Intervention

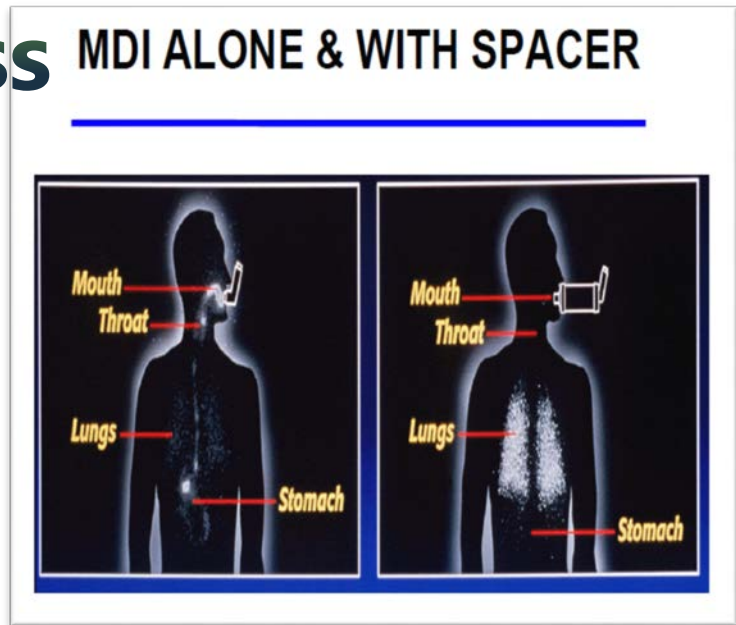
Completion of One Year
Post-Home Visit (n=71)
(n = 113)



Home Visiting

Process MDI ALONE & WITH SPACER

- Intake paperwork
- Document medication
- Asthma education material:
 - Asthma Action Plan
 - Airway Model
 - MDI alone & with Spacer
 - Safe Cleaning Methods
 - Asthma Rules of 2
 - Asthma Triggers & How to Avoid them
 - Safe Sleeping Zone
- Home environmental assessment




MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE | American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®
Maryland Chapter

ASTHMA ACTION PLAN

Check Asthma Severity: Mild Intermittent Mild Persistent Moderate Persistent Severe Persistent

Personal Best Peak Flow: _____
Desired Peak Flow Range: _____

Patient's Name: _____ Doctor's Name: _____ Doctor's Office Phone Number: _____ Emergency Contact after Hours: _____	DOB: _____ Patient's Guardian's Name: _____ Patient's Guardian's Phone Number: _____ Contact Phone: _____	 <p>RED means Danger (Zoned on High level of danger)</p> <p>YELLOW means Caution (Zoned on Mid persistent yellow medicines)</p> <p>GREEN means Go (Zoned on Low persistent medicines)</p>
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GREEN Zone: You have all of these:

- Breathing is good.
- No cough or wheeze.
- Sleep through the night.
- Can work and play.

CAUTION (Yellow): You have any of these:

- First sign of a cold.
- Exposure to a known trigger.
- Cough.
- Mild wheeze.
- Tight chest.
- Cough at night.

RED Zone: Your asthma is getting worse fast.

- Medicine is not helping within 15-20 minutes.
- Breathing is hard and fast.
- Noise comes out of ribs when you breathe.
- Lips are blue.
- Fingernails are blue.
- Trouble walking or talking.

Medicine: _____ How much: _____ When to take it: _____

Comments: _____

Trigger List:

- Chalk dust
- Cigarette smoke
- Dust/Poll.
- Dust or dust mites
- Stuffed animals
- Carpet
- Exercise
- Mold
- Open alert sign
- Pets
- Perf.
- Plants
- Flowers, cut grass, pollen
- Strong odors
- perfume, cleaning products
- Sudden temperature change
- Wet smoke
- Foods
- Other: _____

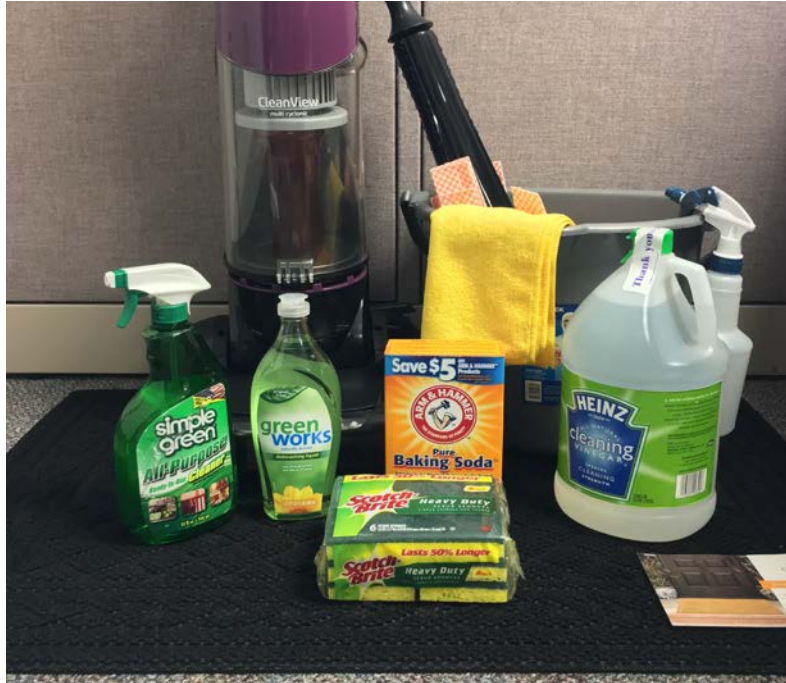
GET HELP FROM A DOCTOR NOW! If you cannot contact your doctor, go directly to the emergency room. DO NOT WAIT.

Adapted from: NACI (2004) and Pediatric Allergy/Immunology and Allergy Clinician of New Jersey. www.theallergyalliance.org www.MarylandAsthma.org www.hhs.gov

©2008 Form Number: 4021 White Copy-Patient Pink Copy-School Yellow Copy-Doctor

For additional forms, please call: 410-759-1940


Minor to Moderate Remediation



Challenges

- Establishing trust
- Asthma not the priority
- Appointment Cancellations
- General Housekeeping/Hoarding
- Inconsistent Medication Use
- Mental Health
- Opioid Epidemic
- Unsafe Living Conditions





“Achieving Health Equity and Disparity Reduction: Prevention and Cost Saving Initiatives”

Improving Health Through Housing and
Community Development

Carol Bryant Payne

Baltimore Field Office Director

U.S. Department of Housing and Urban Development

November 6, 2018





HUD Mission

Create strong, sustainable inclusive
communities and quality
affordable housing for all





HUD's Strategic Plan

Agency Priority Goals

- 1) Promote economic opportunity for HUD-assisted residents
- 2) Protect families from lead-based paint and other health hazards
- 3) Using housing as a platform to improve health



Florence Nightingale

“The connection between health and the dwelling of the population is one of the most important that exists.”



Cited in Lower, S, BMJ,
1991, 303, 838-840



HUD Activities to Create Asthma Friendly Housing

Office Lead Hazard Control Health Homes

- Healthy Homes Grants
- Smoke-Free Housing/Change Is In The Air
- Asthma Summits

Public-Private Partnerships

- Maryland Department of Health and Mental Hygiene
- Department of Energy/Weatherization
- Local Jurisdictions
- Green Healthy Homes Initiatives





Housing and Community Development

- Choice Neighborhoods Grants
 - Planning and Implementation Grants
 - Perkins Homes
 - Poe homes

- Rental Assistance Demonstration (RAD)
 - Public housing conversions to private market
 - City View @ McCollough Homes
 - Booth Street 1 & 2



O'Donnell Heights Asthma Pilot

Partners

- Housing Authority Baltimore City
- Green Healthy Homes Initiative
- Baltimore City Health Department
- Baltimore Public Works
- Morgan State University

Strategy

- Integrated Pest Management
- HEAL Campaign
- Maintenance
- Resident Education
- Community Health Model





Resources

- ❑ HUD Office Lead Hazard Control/Peter Ashley
- ❑ Maryland Department of Health Mental Hygiene
- ❑ Housing Authority Baltimore City
- ❑ Green Healthy Homes Initiative
- ❑ Local Code Enforcement
- ❑ Community Development Block Grant/HOME
 - Low Income Housing Rehab Programs
- ❑ Weatherization Assistance Programs/DOE





Resources

- Utilizing the Community Health Worker Model to Communicate Strategies for Asthma Self-Management and Self-Advocacy Among Public Housing Residents, Sinai Urban Health Institute
- Maryland Community Health Worker Association
- HHS/Federal Interagency Health Equity Team (FIHET)
CHW Workgroup: georgia.simpson@hhs.gov
jason.y.amirhadji@hud.gov
- Stop/Pests in Housing, IPM Resource





Contact

Peter Ashley peter.j.ashley@hud.gov

Carol Payne carol.b.payne@hud.gov

www.hud.gov



