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
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 Asthma - ED 2013

Legend

Asthma - ED

No Data

0.000001 - 9.990000

10.000001 - 49.480000

50.490001 - 214.650000

214.660001 - 363.890000

363.900001 - 915.470000

Sources: EIA, GECO, CAA, National Geodetic Center

Projected from: WGS84 North Central US

1 inch = 26.5 miles

MARYLAND
Department of Health
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\(^{\text{x}}\) AND / OR a BLL of $\geq 5\mu g/dL$;

*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.

\(^{\text{x}}\) Utilizes standard clinical definitions of moderate to severe asthma by age group.
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3. Have a diagnosis of moderate to severe asthma™ AND / OR a BLL of ≥ 5µg/dL;

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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

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

- Managed Care Entities
- Local Health Department
- State Health Department
- Pharmacy
- School Health/Childcare
- Other State Agencies
Maryland Department of Health
Prevention and Health Promotion Administration

https://phpa.health.maryland.gov
St. Mary’s County
Asthma Control Program
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.
Use home-based, multi-trigger, multi-component interventions with an environmental focus for children and adolescents with asthma

Asthma Control Program Objectives

• 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 100,000)

<table>
<thead>
<tr>
<th>Year</th>
<th>SMC</th>
<th>MD</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>68.3</td>
<td>53.4</td>
</tr>
<tr>
<td>2011</td>
<td>70.2</td>
<td>54.5</td>
</tr>
<tr>
<td>2012</td>
<td>75.3</td>
<td>56.9</td>
</tr>
<tr>
<td>2013</td>
<td>69.4</td>
<td>48.6</td>
</tr>
<tr>
<td>2014</td>
<td>68.3</td>
<td>60.8</td>
</tr>
<tr>
<td>2016</td>
<td>75.1</td>
<td>73.3</td>
</tr>
</tbody>
</table>

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

- 79.1%
- 14.5%
- 0.4%
- 0.1%

St. Mary's County Asthma Program

- BLK/AA: 47%
- WHT: 47%
- Hispanic/Latino: 1.5%
- Asian: 1.5%
- American Indian: 3%
SMC Asthma Home Intervention

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

Prior 12 months | Following 12 months
--- | ---
ED visits | 88 | 6
Inpatient Stays | 21 | 1
Oral Steroid Courses | 105 | 26
Missed School Days | 341 | 61
Home Visiting Process

- 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
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
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.”

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

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www.hud.gov