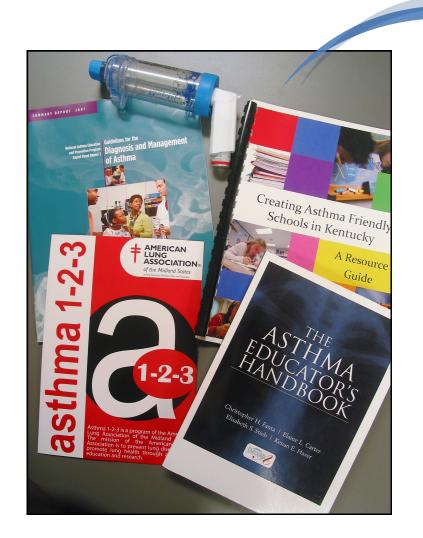
Kentucky State Plan For Addressing Asthma 2016-2018



A Strategic Plan for Improving Asthma Diagnosis, Treatment and Self-Management Through System Level Interventions





WORKING TOGETHER TO REDUCE THE BURDEN OF ASTHMA

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Executive Summary



"The Kentucky Asthma Partnership recognizes that the heterogeneity of asthma mandates a comprehensive approach which includes a specific focus on asthma education, linkages to quality asthma care, and the championing of policy and legislation that support asthma control. The KAP will continue to identify strategies and support the development of resources necessary to improve statewide asthma outcomes. The future of the KAP is bright and limitless as we continue to educate, raise awareness, expand membership, identify new partners and broaden our reach and influence throughout Kentucky.

> — Dr. Douglas Lotz KAP Chair

The burden of asthma is significant in Kentucky and manifests itself in the form of poor health outcomes and high costs related to uncontrolled and poorly managed disease. The 2016 Kentucky State Plan for Addressing Asthma was created to address this disease burden and lay the foundation for significant and measurable differences in the lives of Kentuckians who suffer from asthma.

Asthma is a disease that affects the lungs and causes wheezing, coughing and shortness of breath due to airflow obstruction. There is no cure for asthma however the symptoms can be controlled with appropriate medical care and proper patient self-management. If not managed properly, asthma can have a dramatic effect on quality of life and daily functioning, including the ability to work or attend school. Missed work days and missed school days caused by asthma also represent a significant financial burden for the state.

To address the burden of asthma in Kentucky, the Kentucky Department for Public Health (KDPH) developed a public-private partnership called the Kentucky Asthma Partnership (KAP). The KAP has been meeting continuously since 2006 with the goal of being the collaborative driving force behind the reduction of mortality and morbidity of asthma in Kentucky. KAP partners work to accomplish these goals by:

- Increasing public awareness of asthma and related issues
- Identifying and eliminating disparities that affect the health outcomes of people with asthma
- Providing education about asthma and asthma management
- Serving as a link between the community, asthma care and other supportive resources
- Increasing school/community management of asthma
- Utilizing asthma data to prioritize goals and activities
- Building a strong, diverse partnership
- Serving as a catalyst for activities of other organizations that are promoting the health and well-being of all Kentuckians with asthma.

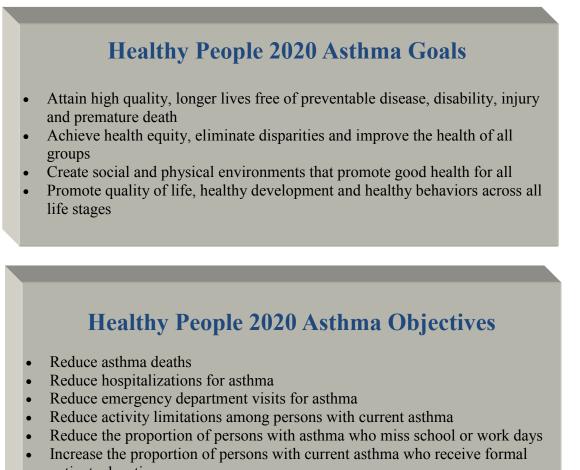
This three year plan is built on the effort and accomplishments of the 2009 Kentucky State Plan for Addressing Asthma and is the result of strategic planning by many key stakeholders including medical providers, public health leaders and other community partners. This plan is designed to maximize the resources of the Kentucky Asthma Partnership member organizations and individuals who provide asthma care. The plan's objectives and strategies are directed to the people who suffer from asthma, their family members, caregivers, employers, health care providers and to the general population.

Using the 2016 Kentucky State Plan for Addressing Asthma, the Kentucky Asthma Partnership and the Kentucky Asthma Management Program and its partners will continue working toward success in reducing the disease burden related to asthma.

The goals and objectives contained in this plan were developed through a rigorous strategic planning process and are aligned with CDC national standards and Healthy People 2020 Objectives.

Healthy People 2020

Healthy People 2020 includes four overarching goals and eight asthma-related objectives that serve as a framework for each state to use in planning public health programming.



patient education
Increase the proportion of persons with current asthma who receive asthma care according to National Asthma Education and Prevention Program (NAEPP) guidelines

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The Burden of Asthma in Kentucky

Asthma Prevalence and Mortality

In Kentucky in 2014, 11.9 percent of adults have asthma compared to 8.9 percent in the United States. Asthma is also one of the most common chronic diseases among children, and in Kentucky 10.6 percent of children under age 18 have asthma. Over 10 million U.S. children under 18 years of age have been diagnosed with asthma in their lifetime. In Kentucky in 2014, there were twice as many deaths of females from asthma as males. During 2014, there were no deaths from asthma for children under the age of 18, but approximately half of the deaths for asthma were for persons between the ages of 25-64.



Economic Burden

Asthma contributes to substantial economic burden in Kentucky each year. The U.S. Centers for Disease Control estimates that in 2014 asthma cost Kentucky \$399 million in direct medical costs and \$46 million in indirect costs associated with missed school days, missed work days and early death. In 2014, there were 19,678 emergency department visits with a primary diagnosis of asthma amounting to total billed charges of over \$42 million. Also in 2014, there were 5,111 hospitalizations with a primary diagnosis of asthma with total billed charges of over \$150 million. The average length of an asthma hospital stay was 4.5 days with an average charge of \$29,446. About 23 percent of these charges were billed to Medicaid and 28.5 percent of the patients were covered by Medicaid.

Risk Factors

Tobacco Use and Secondhand Smoke

Smoking and exposure to secondhand smoke is a risk factor for the development of asthma. In 2014, 26.1 percent of Kentucky adults were current smokers. Among Kentucky adults who are current smokers, 31 percent also have asthma.

Low Educational Attainment

Kentucky adults with less than a high school education report more than twice the rate of current asthma (19 percent), compared to adults with a college degree (7.4 percent). Lower levels of education may contribute to a lack of understanding about asthma including risk factors and treatment.

Obesity

Emerging evidence shows that obese and overweight individuals, especially females, have a higher prevalence of asthma. In Kentucky in 2014, the asthma rate among obese adults was 15 percent, while the rate among normal weight adults was 10 percent.

Disparities

Children, Women, African-Americans

While asthma occurs in all demographic sectors in Kentucky, the disease disproportionately affects children, women (14.7 percent as opposed to 9.0 percent of men in 2014) and African-Americans (13.2 percent as opposed to 11.8 percent of Caucasians in 2014).

Poverty

Asthma prevalence in Kentucky is 1.5 times higher among those with lower levels of income (16.2 percent in 2014) compared to those with the highest income (10 percent in 2014). Poverty may cause increased exposure to asthma triggers due to substandard housing and may keep individuals from being able to mitigate these triggers.



KENTUCKY HAS ONE OVERARCHING GOAL: Reduce the burden of asthma in Kentucky

Objectives:

- Enhance infrastructure to maximize the reach, impact, efficiency and sustainability of comprehensive asthma control services in Kentucky
- Assure the availability of and access to National Heart, Lung and Blood Institute (NHLBI) Expert Panel Report 3 (EPR-3) guidelines-based medical management and pharmacotherapy for people with asthma
- Increase access to self-management education and environmental trigger identification and reduction

The Next Three Years

In planning for the future of asthma control in the state, the Kentucky Asthma Partnership and its members adopted a CDC framework that includes four domains implemented in other chronic disease programming. Strategies to meet the state's asthma goal and objectives will be framed within these four domains:

• Epidemiology and Surveillance

Gather, analyze and disseminate data and information and conduct evaluation to inform, prioritize, deliver and monitor programs and population health

• Environmental and Policy Approaches

Promote health and support and reinforce healthful behaviors statewide — in homes, schools, worksites and communities

• Health Systems Interventions

Improve the effective delivery and use of clinical and other preventive services Including reducing or eliminating risk factors and reducing acute episodes, hospital admissions and emergency department use

• Community/Clinical Linkages

Engage public and private partnerships that will ensure access to evidence-based comprehensive asthma management and access to quality community resources

Conceptual Framework for Asthma Control in Kentucky

Environmental **Epidemiology** and **Community/Clinical Health System** Surveillance and Policy Linkages Interventions **Approaches** Gather, analyze and Promote NHLBI EPR-3 Increase access to Support recruitment to disseminate statewide Guidelines to providers environmental home the Kentucky Asthma asthma data and health systems assessments and asthma Partnership trigger reduction Use asthma data to drive Promote team-based strategies Increase access to asthma program planning, evaluacare and Patient self-management classes tion, decision making, Promote and support Centered Medical funding and health com-Homes state and local smoke-Support public-private munication free laws and Tobaccopartnerships to improve Free Schools policies Provide training for staff asthma management Use Kentucky asthma who provide asthma data to identify disparate education Support and promote Develop referral methods populations asthma friendly schools Promote use of decision policy Develop a database of Evaluate strategies and support tools in EHRs, community resources interventions quality improvement Explore payment strateprojects in clinics, gies for comprehensive Promote Community schools, hospitals, and asthma management Health Worker initiatives provider offices

Outcomes

Adherence to treatment plan including medications

Reduced exposure to environmental triggers

Decreased emergency department visits

Decreased hospitalizations

Decreased mortality from asthma

Increased quality of life for people with asthma and their caregivers

Reduce asthma disparities across the state



Overall Outcome

Reduced asthma related morbidity and mortality in Kentucky

Enhance Infrastructure...





Watch KET's *Easing the Burden of Asthma* http://video.ket.org/video/2365375743/

The Kentucky Asthma Partnership and Kentucky Asthma Management Program in the Department for Public Health promote asthma awareness in Kentucky throughout the year. In 2014, KAP members David Mannino, MD, Chair of the Preventive Medicine and Environmental Health Division at the University of Kentucky, Beth VanCleave, a Registered Nurse and Asthma Educator-Certified at Kosair Children's Hospital, and Connie White, MD, Senior Deputy Commissioner at the Kentucky Department for Public Health, served as panelists for a program on asthma produced by Kentucky Educational Television. James Sublett, MD, co-founder of Family Allergy and Asthma and then president of the American College of Allergy, Asthma and Immunology also participated via remote feed from Louisville. Also pictured is Health Three60 host Renee Shaw, left. (Photographs courtesy of Kentucky Educational Television)

The Kentucky Asthma Management Program collaborates with the Asthma Educator Association, the American Lung Association of Kentucky, Norton Healthcare and Kosair Children's Hospital as well as other partners to provide asthma educator training each year. This course prepares nurses, respiratory therapists and others to sit for the National Asthma Educator Certification Exam which will increase access to quality asthma education in the state.





KDPH is a National Center for Healthy Housing (NCHH) Training Center partner and supports this effort through a collaborative relationship with Montgomery County Health Department and the NCHH. Healthy Homes Specialists are trained to conduct home assessments and provide education on trigger reduction. The Kentucky Healthy Homes Training Center provides three Healthy Homes courses including the Essentials of Healthy Homes, Healthy Homes for Community Health Workers (CHW) and the Healthy Homes Rating System course. Over 100 Healthy Homes Specialists have been credentialed and over 120 CHWs have received training. (Photograph courtesy of Kentucky Educational Television.)

Objective No. 1:

Enhance infrastructure to maximize the reach, impact, efficiency and sustainability of comprehensive asthma control services in Kentucky

Strategies					
Epidemiology and Surveillance	Environmental and Policy Approaches	Health System Interventions	Community/Clinical Linkages		
Maintain and enhance existing statewide asthma surveillance system Increase visibility and access to data among partners to support state, regional and local asthma initiatives Collaborate with the KDPH Envi- ronmental Public Health Tracking Network (EPHTN) to provide envi- ronmental data related to asthma Support targeted dissemination of surveillance findings to key stake- holders, physicians, patients and the general public Identify disparate populations and develop topical fact sheets to increase awareness of these dispari- ties and to drive program planning to eliminate the disparities Use surveillance information to inform decision making and to guide program planning and health com- munication and asthma awareness activities Evaluate asthma interventions and activities in Kentucky for effective- ness and efficiency	Maintain a Healthy Homes Training Center and provide training to increase the number of credentialed Healthy Homes Specialists in Kentucky and to educate Community Health Workers (CHWs) and others Collect information from agencies and organizations and develop a database of resources to assist with remediation of environmental hazards related to asthma Collaborate with public health and other partners to establish public health grants to create asthma-friendly schools, child care centers, communities and home environments Promote the NHLBI Coordinated Federal Action Plan to Reduce Racial and Ethnic Asthma Disparities Support a survey of managed care organizations and other insurers in the state to deter- mine their current practice of payment for asthma manage- ment Develop an annual Governor's proclamation to increase awareness of asthma activities in the state Develop asthma media toolkits for local and state partners	Support the development of public health and health care linkages in order to provide comprehensive asthma control services Promote adherence to NHLBI EPR-3 evidence- based guidelines for those providing asthma care Collaborate with the Ken- tucky Primary Care Associa- tion and Kentucky Hospital Association to encourage Federally Qualified Health Centers (FQHC)s, rural health clinics and hospitals to participate in asthma quality improvement projects Promote reimbursement for comprehensive asthma control services including self- management education, care coordination and Healthy Homes assessments Collaborate with the Ken- tucky Department of Educa- tion, FQHCs, child care organizations, local health departments and other part- ners to assure a competent asthma education workforce by providing training for cer- tified asthma educators and CHWs Provide training to staff in health systems on topics of cultural competency, health literacy, health equity and social determinants of health	Maintain the Kentucky Asthma Partnership and continue to re- cruit strategic partners to pro- mote statewide planning and coordination of asthma activi- ties, websites, social media and resources Develop and implement a mar- keting campaign for the Kentucky Asthma Partnership that includes branding of the organization and promotion of services provided Seek 501(c)3 non-profit status for the Kentucky Asthma Part- nership Increase the visibility and out- reach of the Kentucky Asthma Management Program as a resource and provider of technical assistance Develop and implement a pilot project Kentucky-Asthma Inte- grated Resources (K-AIR) with Managed Care Organizations, local health departments, pro- viders and community resource using care coordination, home assessments and trigger reduc- tion, Community Health Work- ers (CHWs), certified asthma educators and public health staff		

Assure Guidelines-Based Care...

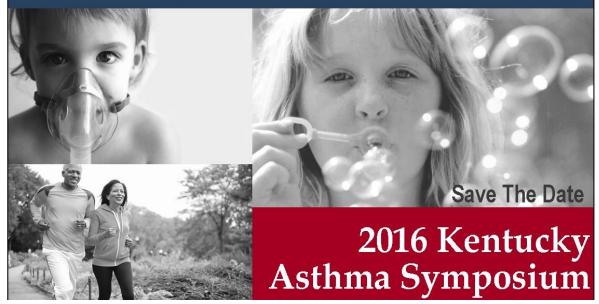
Kentucky Asthma Partnership (KAP) members promote the use of the National Heart, Lung and Blood Institute (NHLBI) Expert Panel Report-3 (EPR-3) Guidelines for the Diagnosis and Management of asthma through awareness activities, training and academic detailing. These guidelines provide clinicians with a definition and pathophysiology of asthma as well as implications for long-term management of asthma, managing exacerbations and trigger reduction in the home.





KAP partners support programs that educate asthma patients about the importance of finding a provider who adheres to these the NHLBI EPR-3 Guidelines. The partnership supports provider education through an annual asthma symposium as well as meetings and educational webinars throughout the year. KAP members also participate in a wide variety of activities designed to promote asthma self-management education, flu shots for asthma patients, trigger reduction, appropriate use of the emergency department and other components of asthma management as defined by the NHLBI guidelines.

Kentucky Asthma Partnership

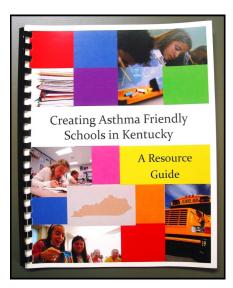


Objective No. 2:

Assure the availability of and access to NHLBI EPR-3 guidelines based medical management and pharmacotherapy for people with asthma

	Strate	egies	
Epidemiology and Surveillance	Environmental and Policy Approaches	Health System Interventions	Community/Clinical Linkages
Utilize KyBRFS Asthma Call Back survey for self-reported data to determine quality of life issues and self-management needs in the state Utilize existing HEDIS data from managed care organizations to determine a baseline Utilize Uniform Data Set (UDS) data from HRSA website Develop and implement a survey of usage and barriers to usage in collaboration with partners in KAP. Work with the Kentucky Primary Care Association (KyPCA) to administer the survey to FQHCs Review existing Managed Care Organization (MCO) plans for comprehensive asthma care coverage Review and analyze billing through Medicaid for asthma education Review hospitalization and emergency department data from the Office of Health Policy Utilize Kentucky School Nurse Association Survey on barriers to asthma care as guidance to guide strategic planning for school based needs issues	Support quality improvement activities at the provider level including Patient Centered Medical Home certification Support reimbursement from payers for comprehensive asthma management including testing, medications, and self- management education Utilize existing clinical experts in the state for training and educational opportunities on at least a quarterly basis in collaboration with the KAP Increase access to certified asthma educators in Kentucky by continuing to offer a review course at least once a year Develop fact sheets based on the data and adherence to guidelines Support Return on Investment studies and disseminate these reports Support adoption of standardized data collection at schools through Infinite Campus Support access to school nurses or at a minimum access to annual school staff training for support staff, coaches and others through the American Lung Association 1-2-3 classes	Support opportunities to educate providers on NHLBI EPR-3 guidelines and the most recent updates in treatment options by holding an annual asthma sym- posium and periodic educational meetings and webinars Enhance quality improvement processes by promoting the use of decision-support tools, the use of decision-support tools, the use of EHRs for care coordination and mechanisms for reporting quality process and outcome measures Promote the use of team-based care in medical homes to im- prove coordination and cultural competence of asthma care Develop learning and action network for hospitals similar to other quality improvement disease projects in the state by working with the Kentucky Hospital Association Support training on basic coding and billing for asthma visits in order to standardize the process Review usefulness of the Ken- tucky Health Information Exchange as a means to share information more consistently Increase providers and health systems knowledge of home environmental triggers and how they can assist people with asthma to make basic modifica- tions	Develop an education/ marketing toolkit to guide state and local partners in providing asthma education and/or promotion of asthma awareness in their communities Develop a database of asthma resources in the state and plac links on the KAMP and KAP websites Coordinate with providers and the Kentucky Immunization Program to promote flu and pneumonia vaccination aware ness and activities Coordinate with Kentucky Pharmacy Association and local pharmacists to develop a plan for asthma education and medication therapy manage- ment for asthma Implement a model of compre- hensive asthma care service provision (K-AIR) that pro- vides a linkage to guidelines- based clinical care, asthma education and care coordina- tion using Community Health Workers Promote the Kentucky Quit- Line to assist adults with smoking cessation and assist them with linking to local classes and medication

Increase Access to Education...



A key component in providing EPR-3 guidelines-based asthma care is patient selfmanagement education including the control of environmental factors that may affect asthma. The Kentucky Department for Public Health and KAP partners have been instrumental in providing safer, more asthma-friendly school environments for Kentucky children.

KAP partners were instrumental in the publication of "Creating Asthma Friendly Schools in Kentucky," a resource booklet to guide school administrators, staff and other personnel in integrating asthma-friendly policies and procedures into the school environment.

Working with partners such as the American Lung Association of the Midland States, the Kentucky Asthma Management Program makes Asthma 1-2-3 facilitator training available to local public health department, school and child care staff.

KAP partners promote 100% Tobacco Free Schools policies and are active in advocating for a statewide smoke-free law for public facilities. Over 50 percent of the school districts in Kentucky have a 100% Tobacco Free Schools policy in place.

EVERYBODY | ALL THE TIME | EVERYWHERE



Several projects in Kentucky have focused on creating linkages between asthma patients and guidelines-based care including asthma self-management education and identification and reduction of asthma triggers. Some of these programs use Community Health Workers (CHWs) to provide care coordination that includes facilitation of health care access and community resources that can reduce barriers to care related to the social determinants of health. KAP members were instrumental in having asthma self-management education payment included in the Medicaid Preventive Fee Schedule.

Tobacco 100% Free Schools

Objective No. 3: Increase access to self-management education and environmental trigger identification and reduction

Strategies					
Epidemiology and Surveillance	Environmental and Policy Approaches	Health System Interventions	Community/Clinical Linkages		
Surveillance Utilize KyBRFS Asthma Call Back data for baseline to determine mine needs in the state Administer and analyze annual survey of school nurses in collaboration with the Kentucky School Nurse Association to determine barriers to good self-management education and environmental trigger identification and reduction Review the annual Asthma and Allergy Foundation School Honor Roll for the state to determine what policies Kentucky does not have in place	Support a statewide smoke-free law and local jurisdiction policy by educating decision-makers about the adverse effects of secondhand smoke on people with asthma Support and promote Kentucky 100% Tobacco Free Schools policy across the state Support and promote green cleaning and idling policies on school and childcare campuses Revise the "Creating Asthma Friendly Schools in Kentucky" resource guide	Promote the use of school nurses to provide clinical asthma ser- vices and education for children with asthma and their families Identify and evaluate strategies to improve communication be- tween school staff, providers and students and their caregivers Increase the consistency of patient discharge instructions for asthma management provided in inpatient settings and emergency departments Collaborate with MCOs and payers to provide outreach and education to adults and children	Linkages Work with the KDPH Office of Health Equity to provide cultural competency, health equity and health literacy subject matter expertise and ensure use of appropriate tool Work with the EPHTN to pro- vide evidence-based infor- mation on their website, tweets and other social media Provide training for school staff including nurses, support staff and coaches Collaborate with medical/lega partnerships to educate the KAP stakeholders		
Work with Medicaid and MCOs to inform health care providers about asthma education coding and billing on the Medicaid Preventive Fee Schedule Collaborate with the Kentucky Health Information exchange to explore what information related to asthma self-management is available Explore use of EPHTN data and website to correlate strategic data and messaging Work with the Kentucky Energy and Environment Cabinet to de- termine how many homes in the state are using wood stoves or other methods of heating that may trigger asthma exacerbations	Collaborate with the Kentucky Division of Child Care and the Kentucky Department of Educa- tion to require annual asthma education for all child care providers using an approved curriculum Support reimbursement for home assessments and trigger reduction for environmental risk factors Facilitate collaborations with existing asthma projects in the state to determine replicability Work with the Centers for Disease Control and Prevention to include an asthma module in the Worksite Scorecard for use by employers in the state	 with asthma Collaborate with providers, schools and other community partners to develop referral pathways for K-AIR Collaborate with the University of Kentucky School of Nursing on interventions and projects for migrant workers to reduce exposure to environmental triggers and work related asthma Collaborate with hospitals to utilize community benefit funds to provide increased access to free or low cost asthma self-management education, home visits and trigger reduction Collaborate with the Kentucky Commission on Children With Special Health Care Needs to find the most fragile children and provide quality asthma education to the caregiver and needed services 	Increase the number of child care sites that have received training on asthma and trigger reduction interventions Incorporate Healthy Homes assessments into asthma self- management education Develop a database of resources to assist with remediation of environmental triggers found in the home Develop, implement and evaluate the K-AIR project in pilot sites in Kentucky Provide asthma education and resources to the staff in the statewide parenting support program: Health Access Nurturing Development Services (HANDS) Integrate Worksite Wellness training to include asthma and trigger reduction		



"The Kentucky Asthma Partnership works very hard to raise awareness of the burden of asthma in Kentucky and to promote the amazing work its partners do every day to improve health outcomes for children and adults with asthma. We have some of the best practices in the nation ongoing in Kentucky, including the Healthy Homes initiative, and excellent medical care. We will continue to advocate to make Kentucky the state with the best asthma outcomes." -Dr. Julia Richerson Vice Chair

Conclusion

This strategic plan builds on extensive asthma initiatives already in place in state and local health departments, provider offices, hospitals, universities, managed care organizations and schools across Kentucky. This plan is designed to enhance these initiatives and to create change at the systems level designed to lead to improved asthma outcomes in the Commonwealth.

To reduce the burden of asthma in Kentucky, we must continue to develop infrastructure at both the state and local levels to enhance the capacity to implement the innovative strategies contained in this state plan.

Through continued partnership development we will create mechanisms to disseminate the plan throughout the state, provide a forum for communication and networking between partners to enhance idea sharing and to foster a culture of collaboration that will allow us to accomplish this work.

Evaluation and sustainability efforts will be integral components of this asthma strategic plan and will drive the initiatives outlined in the work plan.

Through the successful completion of these strategic objectives, the Kentucky Asthma Partnership will be well positioned to dramatically reduce the burden of asthma in Kentucky and enhance the quality of life for both the people living with asthma and for those who care for them.



WORKING TOGETHER TO REDUCE THE BURDEN OF ASTHMA

Acknowledgments

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Kentucky Health Center Network Kentucky Office of Health Policy **Kentucky School Nurses Association Kosair Children's Hospital** Lake Cumberland District Health Department Lexington/Fayette County Health Department Lincoln Trail District Health Department **Louisville Air Pollution Control** Louisville Metro Public Health and Wellness **Meda Pharmaceuticals** Merck & Co. **Montgomery County Health Department** Pari Respiratory Equipment, Inc. **Passport Health Plan Pike County Health Department Purchase District Health Department Smoke-Free Kentucky** Southcentral KY Community and Technical College University of Kentucky College of Nursing University of Kentucky College of Public Health **University of Louisville Department of Pediatrics** University of Louisville School of Public Health Walgreens WellCare Health Plans, Inc. Western Kentucky University