Fulfilling MCO contractual obligations related to case management and disease management services

Your MCO is likely already providing sound member support for asthma (including both clinical management and education) as part of your overall health care mission.

Support for member case management generally — and disease management services more specifically — is also a core part of your Medi-Cal managed care contract with the state of California. Whether your disease management program is in-house, or you contract out with a third-party vendor, adding asthma home visiting services will build on your current strengths and help you realize additional improvements in asthma outcomes. Asthma home visiting services may also be a useful resource for supporting basic or complex case management.

High-quality research shows again and again that asthma home visiting services significantly reduce emergency department (ED) visits and associated costs. For example, according to a study by America’s Health Insurance Plans (AHIP), when MCOs provide support in the home for members with poorly controlled asthma, they end up going to the ED and hospital less, and their patient experience is better.

“…when MCOs provide support in the home for members with poorly controlled asthma, they end up going to the ED and hospital less, and their patient experience is better.”
Quality improvement initiatives

As a managed care leader, you’re involved in strengthening the quality of the care your organization delivers, whether it’s changing the type of care delivered or delivering care in a more efficient manner. Given their proven record of success, asthma home visiting services can be an important tool to add to your quality improvement “toolbox.”

HEDIS Measures

The Healthcare Effectiveness Data and Information Set (HEDIS) is one of the health care sector’s most common performance improvement resources. There are two HEDIS measures for asthma:

1. Medication Management for People with Asthma (MMA), which assesses the degree to which members with asthma stay on their medication during a treatment period, and

2. Asthma Medication Ratio (AMR), which assesses whether members are receiving the right ratio of controller medications to total asthma medications.

In California, the AMR is gaining institutional traction; recently the Department of Health Care Services updated its External Accountability Set to replace the MMA with the AMR, which is a better predictor of future asthma exacerbations.

If your asthma HEDIS measures are below Minimum Performance Levels, or you’re simply interested in making a solid score even higher, asthma home visiting services can help you get there. During asthma home visits, home visitors can reinforce key educational messages provided during the clinic visit. These include messages about the importance of following prescribed medication regimens. Additionally, home visitors often excel at identifying barriers to medication compliance and helping the families overcome those barriers. These services can improve the HEDIS outcomes.

Member Satisfaction and the Consumer Assessment of Healthcare Providers and Systems Program (CAHPS)

Launched over twenty years ago, CAHPS serves as a national standard for measuring consumers’ health plan experiences. CAHPS can provide valuable information for consumers, as a tool to navigate the health insurance landscape, and to managed care organizations interested in assessing their own performance.

Effectively implemented, members receiving asthma home visiting services often report high levels of satisfaction with the quality of care received.

For example, L.A. Care’s Disease Management program offers its members asthma home visits through QueensCare Healthcare Centers. One five-year old member with asthma made tremendous progress after completing the home visiting program. At the time of the referral, his mother reported that he was newly diagnosed with asthma and had been to the emergency department 25 times in the last 6 months. How often did customer service at your child’s health plan give you the information or help you needed?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

CAHPS survey sample question
and hospitalized several times over the past year. His mother was especially concerned because her son also has a diagnosis of autism and is unable to verbalize symptoms. His mother was unfamiliar with asthma symptoms and felt overwhelmed by the medications for her son. With the assistance of an asthma home visitor, she became familiar with her son’s asthma triggers and symptoms. Her son’s Asthma Control Test went from a very poorly controlled score of 13 at referral to a controlled score of 23 after completing the asthma home visits. Needless to say, the family was very satisfied with the asthma home visiting services they received.

Veona Rogers, a client from Esperanza Community Housing Corporation, another asthma home visiting program in Los Angeles, shares a similar story: “I can actually say that my children are living a better life because of [the home visitor]. A resource like this can change your entire life. I can honestly say it really works. It really works.”

While there are many factors that go into CAHPS results, asthma home visiting services can help move the needle towards positive outcomes and member satisfaction in the health plan and the quality of its health care.

“\n\nI can actually say that my children are living a better life because of [the home visitor]. A resource like this can change your entire life. I can honestly say it really works. It really works."

— Veona Rogers, client of Esperanza Community Housing Corporation’s home visiting program