Dear managed care leader,

Asthma home visiting services are a tried and true method for improving member health outcomes, lowering health care utilization costs, improving patient care, and reducing health care disparities. Yet, far too many people with poorly controlled asthma don’t have access to these key interventions.

You can change that.

The purpose of this tool is to support your managed care organization (MCO) with improving asthma management among your members by ensuring the provision of asthma home visiting services. If a home visiting program sounds daunting, it’s not, and fortunately you don’t have to figure this out on your own as there are a number of existing tools and best practices to help you incorporate these services.

In this tool, we highlight the numerous benefits of asthma home visiting services, from their ability to achieve triple aim goals to supporting quality improvement initiatives to addressing more “upstream” health determinants.

We also walk you through an abundant number of opportunities you can take advantage of to make your support for asthma home visiting services as easy and as efficient as possible, including some best practice examples from the field.

MCOs are fundamental to California’s health care system. While at the local and state levels there are numerous efforts to support people suffering from poorly controlled asthma, we can’t do it without you. You’re a key part of solving the asthma puzzle, and we look forward to working with you.

— Regional Asthma Management and Prevention (RAMP)

“Asthma home visiting services make a real difference in the lives of our members. They improve member health and reduce more costly medical interventions. By meeting members where they live, asthma home visiting services reflect our desire to be a valuable asset to the communities we serve. As participants of the safety net, the Alliance is committed to expanding these benefits to more homes throughout Alameda County. I’m proud of our support for asthma home visiting and the improved quality of care that comes along with providing these vital services.”

— Scott Coffin, Chief Executive Officer, Alameda Alliance for Health
A home visit in action

Asthma home visiting services vary in the number of visits and specific activities; here’s a snapshot of what a program can look like.

Julia is an asthma home visitor working for a community-based organization in a neighborhood with a high burden of asthma. With support from a Medi-Cal managed care organization, Julia visits Marco and his parents in their home. Marco is seven, and recently went to the emergency department for asthma — his second trip in the past year. Julia hopes to connect with the family to support them as they learn how to better manage Marco’s asthma. Over the course of 3–5 visits over 6–12 months, she’ll provide education and work with the family to address any environmental triggers in the home. It helps that Julia is fluent in Spanish, the family’s primary language. Julia will also serve as a helpful liaison to Marco’s primary care team, helping him get access to any other care he needs.

What should asthma home visiting services look like in California?

**Asthma home visiting services** include asthma education, home environmental asthma trigger assessments and home environmental trigger remediation provided by qualified professionals.

**Asthma education** means providing information about basic asthma facts, the use of medications, self-management techniques and self-monitoring skills, and actions to mitigate or control environmental exposures that exacerbate asthma symptoms.

**Environmental asthma trigger assessment** means the identification of environmental asthma triggers commonly found in and around the home, including allergens and irritants. This assessment guides the self-management education about actions to mitigate or control environmental exposures as well as remediation activities.

**Home environmental trigger remediation** means conducting specific actions to mitigate or control environmental exposures. Most home visiting programs provide minor to moderate environmental asthma trigger remediation. Examples include providing and putting on dust-proof mattress and pillow covers, providing products such as high-efficiency particulate air vacuums, asthma-friendly cleaning products, dehumidifiers and small air filters, and utilizing integrated pest management including performing minor repairs to the home’s structure, such as patching cracks and small holes through which pests can enter.
During the first visit, Julia talks with the family about how they’re managing his asthma, and listens to their barriers and challenges. She provides basic asthma education — describing, for example, what happens to the lungs during an asthma attack — that reinforces messages provided by Marco’s doctors. She helps the family members address the barriers they’ve identified. For example, if he gets his two inhalers confused, she may put stickers on them indicating which is the rescue inhaler and which is the controller medication.

During the second visit, after having already established trust and rapport, Julia and the family conduct an environmental assessment to identify asthma triggers. Julia provides education about ways to reduce exposure to those triggers. For example, Marco’s dad smokes, so Julie suggests that he smoke outside using a plastic smoking jacket she provides for short-term help; she also provides him with smoking cessation resources for a longer-term solution. She also checks to see if the family is having any difficulties following the doctor’s directions for medications, and to see if any new issues have arrived.

A month later, for the third visit, Julia returns with a HEPA vacuum. The family’s entire apartment is carpeted, so this type of vacuum will help reduce dust, a common asthma trigger. She also brings asthma-friendly cleaning supplies to replace the bleach-based products the family was using.

During this visit, the mom mentions that a neighbor has experienced a bad cockroach infestation, and they’ve seen a few in their kitchen. Julia provides some advice on what the family can do, and provides gels and other traps that will help capture some of the cockroaches without the use of pesticide sprays. She also provides some materials to help patch a few holes under the kitchen sink through which the pests are likely entering. On her final visit, the family reports that Marco has been doing great, his symptoms have improved, and the entire family feels more confident about the future.