

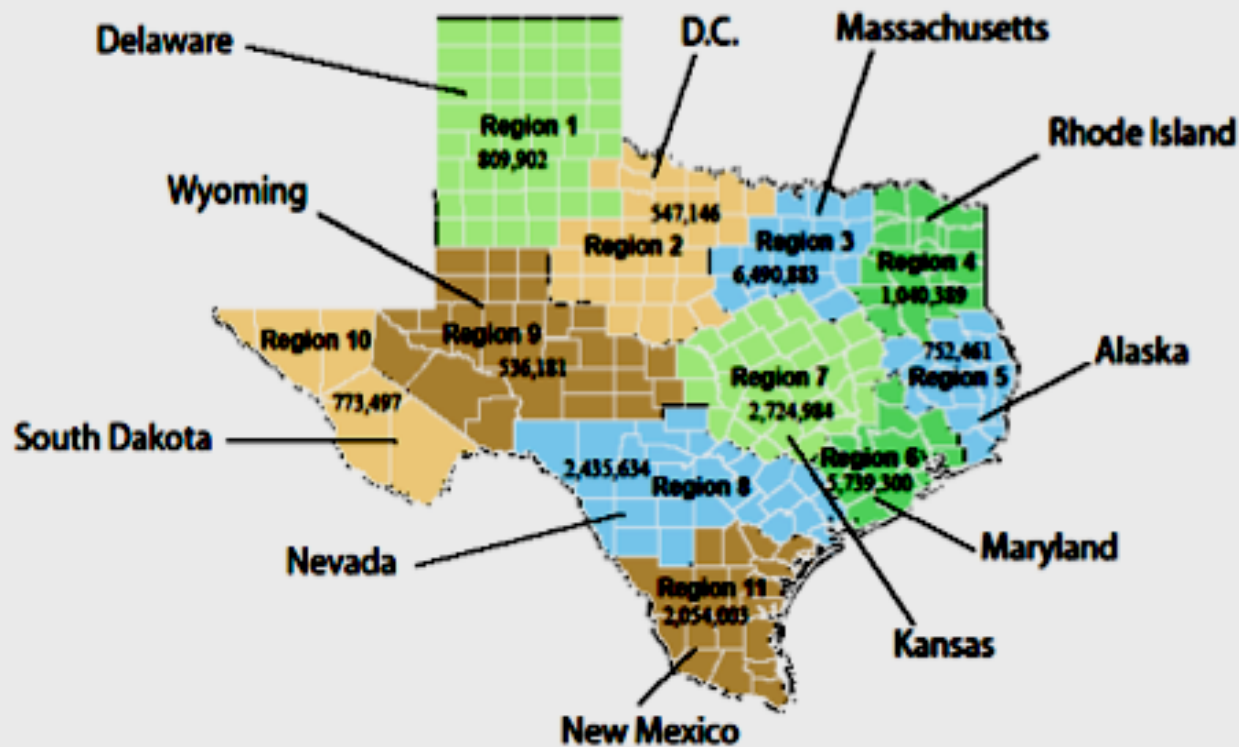


Asthma-Related State Initiatives and Policy: How the Coalitions Can Influence Big Government

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HHSC Regional Map of Texas

Map: Health Service Regions with 2007 population estimates and states with comparable populations



Texas has an area of 261,797 square miles and ~25M people.

The Texas Asthma Control Program


- In 2000, Texas Department of Health, now the Texas Department of State Health Services (DSHS), and the American Lung Association (ALA) held a joint meeting to bring together a group of diverse asthma professionals from across the state to address the burden of asthma in Texas.
- This group identified issues and developed strategies and action items to address them.
- This committee became the first board of directors of the Asthma Coalition of Texas (ACT)



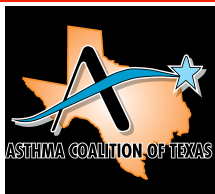
The Texas Asthma Control Program

- In 2001, Texas developed the Texas Asthma Plan, with the support of DSHS and the help of a CDC grant.
- The Office of the State Epidemiologist submitted a successful application to CDC to develop a state-level program.
- The TACP was tasked with:
 - decreasing asthma morbidity
 - reducing severity of symptoms
 - decreasing the number of ED asthma visits
 - decreasing asthma mortality in Texas

DSHS and the Asthma Coalition of Texas

- Prior to 9/1/06, DSHS had been able to sole-source contract with ACT to conduct asthma plan activities.
 - In 2005, TAP was required to issue a competitive RFP
 - Still, ACT submitted a successful SFY07 application and was awarded a 2-year contract that began 9/1/06 through 8/31/08, then was renewed for another year through 8/31/09.
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- A primary function has been to host and plan the annual statewide ACT asthma conference.
 - ACT continues to be a vital partner as TX implements asthma interventions in the state, as are all our local coalitions.

The Work of the Asthma Coalition of Texas



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- Unlike the governmental agency that it originally served, the ACT has been able to “lobby” the legislature and work more directly with other stakeholders (industry, home health, professional orgs, etc.)
- E.g., ACT has been supporting a state legislator in anti-smoking legislation.
- Due to 501c3 status, this cannot amount to more than a certain % of activities.
- As state employees, we cannot “advocate” or lobby but we may participate as members of a state program to align our messages, materials, and best-practice recommendations, and provide support to outside stakeholders (ACT) through data exchange, etc.

Members of the Asthma Coalition of Texas*

1. **Central Texas Asthma Coalition** - contact: Steve Conti
sconti@seton.org
2. **Coastal Bend Asthma Initiative** - contacts: Janie Pequeno,
Janie.Pequeno@dchstx.org and Julie Teat, jteat@valencehealth.com
3. **North Texas Asthma Consortium** - contact: Anne Crowther,
anne.crowther@childrens.com
4. **East Texas Asthma Coalition** - contact: Paul Sharkey,
Paul.Sharkey@uthct.edu
5. **El Paso Asthma and Allergy Coalition** - contact: Yvonne Banegas,
negasrt@sbcglobal.net
6. **McAllen Asthma Coalition** – contact Genny Carrillo, MD,
gcarrillo@srph.tamhsc.edu
7. **Mid Rio Grande Border Health Education Center** - contact: Gladys
Keene, mrgbahec@stx.rr.com
8. **South Texas Asthma Coalition** - contact: Debra Long,
debra.long@christushealth.org
9. **Texas Gulf Coast Asthma Coalition** - contact: Brenda Reyes,
brenda.reyes2@cityofhouston.net
10. **New coalition in Lubbock** forming for pediatric asthma

*The local organizations operate independently and form a loose affiliation.

The Asthma Coalition of Texas

ACT galvanized the effort that lead to changes in the PDL for the TX Vendor Drug Program by:



- **Developing a consensus for change among TPS, TMA, TAP, PHARMA and HHSC.**
- **Exerting key influence that led to the Smoke-Free Texas initiatives sponsored in the legislature.**
- **Developing and disseminating a unique and highly acclaimed Provider Toolkit.**
- **Training asthma educators for certification**
- **Developing continuing- education and dialogue with health plans through the individual plans**
- **Highly effective education programs like Radical Randy and the Flags school-based program.**

How the Coalitions Can Influence Big Government

Current DSHS asthma plans:

- Developing feedback forms/questionnaires for office patients and folks at health fairs regarding the information on asthma given to them by providers, tools for self-assessment and self-management, evaluating whether patients and providers are using existing tools, etc.
- Planning a school nurse survey asking about their sporadic use of Asthma Action Plans (via the Texas Education Agency). Goal would be to standardize the associated forms and the action plans among all the schools and districts.
- Working toward developing resources for teachers of children with special healthcare needs – a legislative requirement.
- DSHS serves as a source of information on grants (state and federal) and provides funds to send local coalition members to meetings (state and/or national).

Tools of the Texas Asthma Control Program

DSHS evidence-based materials that will be used to educate targeted audiences during the 5-year grant period include:

- **IAQ Tools for Schools Kit (EPA)**, in English and Spanish.
- The **American Lung Association's (ALA) Asthma-friendly Schools Toolkit** (English/Spanish).
- The **ALA Open Airways for Schools (OAS) program** (English/Spanish) Consisting of six 40-minute lessons taught by a trained facilitator, the OAS program is designed to keep children in school and out of the hospital.
- **Asthma 101: What You Need to Know** (English/Spanish) is another educational program developed by the ALA to address the growing demand for basic asthma education. This one-hour program is delivered by trained health educators, and is designed for anyone entrusted with the care of children.
- In addition, the **National Center for Health Housing Healthy Home Training module** (English and Spanish) will be used to educate students, families and promotoras. A *healthy home* is a home designed, constructed, maintained, or rehabilitated in a manner that supports the health of residents.

How the Coalitions Can Influence Big Government

The DSHS and plans for the ACT:

- DSHS awards small grants for specific activities in communities and targets areas of interest or need throughout the state.
- ACT is considered a major stakeholder and is on the committee for revising\updating of the State Asthma Plan, begun in February 2009.
- ACT serves in a program evaluator role.
- State would like ACT to become more high-profile and for ACT to become the go-to organization for the state stakeholders.

How the Coalitions Can Influence Big Government

The Disease Management Program at HHSC Medicaid \CHIP would like to work with the state asthma plan, through DSHS, in order to:

- **Collaborate with the public health side to develop uniform materials (asthma action plans or other items/messages to benefit providers and patients)**
- **Align and support programmatically, as much as possible, and share information/data on Medicaid asthmatics**
- **Exchange knowledge on best-practice care management for asthmatics**
- **Encourage or require our Medicaid vendors (with new procurements) to utilize certain interventions such as hiring certified asthma instructors or RTs for education and care management**

How the Coalitions Can Influence Big Government

- Items which the Disease Management folks may be able to work with ACT may include:
 - Utilizing indoor air quality evaluation for asthmatic patients
 - Concept of certified asthma educators for the program
- The Medicaid Enhanced Care (Disease Management) Program has not ever presented its asthma data to the ACT or the DSHS TX Asthma Program.
- Also, several managed care disease management programs have not yet been brought in to share their info, so there is plenty of room for “partnering.”

How the Coalitions Can Influence Big Government

- My recommendations\thoughts for DSHS – Texas Asthma Plan:
 - Given that the ACT has been the only real contact and support that most local folks and stakeholders have, there needs to be active outreach and contact with TMA, TPS, TAFP, MCO's, drug companies, schools of respiratory therapy, and most of the local coalitions.

How the Coalitions Can Influence Big Government

- Recommendations\thoughts for Asthma Coalition of Texas:
 - What about partnering with American Lung Association, et al? (Or is it all about competition for funding sources?)
 - What about direct partnering with managed care disease management entities?
 - Develop strong community-based and\or faith-based partnerships (for example, “Not One More Life”).
 - Were ACT restructured as a 501c4, like a state council (e.g., Texas Diabetes Council or the Cardiovascular and Stroke Council), it could likely have a broader and direct impact on state policy and actual legislation (more policy active).
 - Legislative priorities and action items should be generated for the various coalitions at the end of the annual Texas meeting.

How the Coalitions Can Influence Big Government

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