

Insights

Helping Health Plans Improve Asthma Outcomes



We want to give more children the freedom to run and play while breathing easily.

Asthma currently affects [over six million children](#) across the U.S., making it one of the most widespread chronic childhood diseases. When provided with proper treatment, educational materials and environmental management, children diagnosed with asthma can lead full and healthy lives, excelling on school sports teams and even going on to become successful athletes. Take figure skater Kristi Yamaguchi, who was diagnosed with asthma as a child and then went on to win an Olympic gold medal.

Unfortunately, not all children consistently receive the preventative care needed to keep their asthma symptoms in check. Florida is a state that knows this problem too well. Their Medicaid program helps ensure that many children have coverage for the care they need; yet, many preventative treatments and services are underutilized. And as a result, asthma induced emergency room visits—an indicator of poorly controlled asthma care in a population—[continue to increase](#) and are accompanied by substantial racial disparities. Non-Hispanic black children are [almost twice as likely to have asthma](#) as non-Hispanic white children, and are four times more likely to receive asthma care from an emergency department.

These numbers need to change, which is why NICHQ and the Florida Department of Health (FDOH) are working directly with eight of Florida's health plans in a quality improvement [Learning and Action Network](#) (LAN). Together, they seek to reduce pediatric asthma emergency department visits by applying evidence-based best practices and leveraging strategies based on successful work in other states.

“Health plans can play a major role in improving children’s asthma outcomes because they have the opportunity to provide access to highly effective interventions,” explains NICHQ Senior Project Manager Sandra Widland, MPH. “We have access to the best practices available for reducing pediatric asthma emergency room visits. The next step is testing these strategies within each plan and seeing what sticks to the wall. Over the course of the project, plans can connect with one another and share their successes and lessons-learned, helping them get the most out of the learning process.”

If successful, the LAN will improve overall health for children with asthma and lessen the burden of asthma for children, families and the health plans. NICHQ wants to empower other states and organizations to leverage similar partnerships as they work to improve asthma care. Keep reading to find advice on how to engage health plans in an asthma improvement effort.

Ensure that project leadership includes faculty with direct experience:

Health plan professionals have their own jargon, develop unique pain points and are working within their own system of stakeholders and with their own organizational constraints. Because of this, it's often helpful to engage a faculty member who has achieved similar improvement in similar organizations or settings. Having a faculty member with shared experiences lets you better connect with and support the health plan teams over the course of the initiative.

Ideal faculty have direct experience implementing the changes and using the measures, which can help teams navigate challenges and leverage opportunities along the way. They can offer suggestions and encouragement, be a sounding board when developing the project approach, and help assure the feasibility of the proposed process and expectations.

Learn more about creating successful teams in our [Essentials of Collaboration](#) online course. You'll gain skills to break down silos, align activities and work productively together.

Simplify measurements whenever possible:

Because of regulatory obligations, health plans are tasked with tracking and reporting on a considerable number of metrics. Rather than add to their work load, align your improvement measures with ones they are already tracking so they can streamline their efforts. And when you do need to add new measures, help teams understand the value of small samples, where they only collect enough data to inform the work of the collaborative. Without this helpful tip, health plans may think they need to replicate the more robust measurements required by their regulatory agency.

Make time for individual team communication:

While faculty can help facilitate mutual trust, developing relationships with health plan teams is also critical. Schedule check-ins either in-person or virtually.

“We consider these calls a quick pulse-check where participants can share what they are working on and learning so we can offer guidance and suggestions based on known methods and the work of others,” says Project Director and Improvement Advisor Fran Griffin, RRT, MPA. “We find that these are especially helpful to accelerate learning and improvement.”

Work within their existing system:

Health plans must navigate a complex approval process when communicating with their consumers. Familiarize yourself with the health plans’ regulatory agency, and schedule quarterly calls and regular email updates. It’s helpful to understand when it might be difficult to perform rapid small tests of change, a [prerequisite for quality improvement efforts](#), and adjust your approach accordingly.

Similarly, don’t reinvent the wheel, says Griffin. “Seek out examples from similar efforts and consider how they achieved results. With evidence-based improvement science, we can adopt what is known to work and help health plans avoid potential pitfalls and capitalize on existing bright spots.”

Over the next eight months, NICHQ’s project team will continue to work collaboratively with health plan teams as they accelerate their pace of testing changes and share learning to improve health and quality of care for children with asthma. Stay informed as the work progresses by [signing up for our mailing list](#).