

What EXHALE Can Look Like in a State: An Example from Missouri

For Public Health Professionals Working on Asthma

The Centers for Disease Control and Prevention's (CDC's) National Asthma Control Program (NACP) and its partners help Americans with asthma achieve better health and improved quality of life. NACP developed EXHALE, a set of six strategies that each contribute to better asthma control.

What are the EXHALE strategies?



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Education

on asthma self-management

X-tinguishing

smoking and exposure to secondhand smoke

Home

visits for trigger reduction and asthma self-management education

Achievement

of guidelines-based medical management

Linkages

and coordination of care across settings

Environmental

policies or best practices to reduce asthma triggers from indoor, outdoor, or occupational sources

Each EXHALE strategy is proven to reduce asthma-related hospitalizations, emergency department visits, and healthcare costs

Learn how the Missouri Asthma Prevention and Control Program has carried out EXHALE-related activities to help children and adults with asthma



Centers for Disease
Control and Prevention
National Center for
Environmental Health

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State public health departments, working in close collaboration with state and local partners, have the unique capacity to coordinate the implementation of activities related to all six EXHALE strategies. The **Missouri Asthma Prevention and Control Program (MAPCP)**, in the Missouri Department of Health and Senior Services, is funded by CDC's National Asthma Control Program. Here are some MAPCP accomplishments, listed by strategy:

Education on asthma self-management

MAPCP has offered training opportunities on how to deliver AS-ME. MAPCP has partnered with the University of Missouri and others to train school nurses, pharmacists, and others to deliver AS-ME to people with asthma and their families. For example, MAPCP and its partners obtained approval from school district superintendents to provide online or face-to-face training to school nurses, using [Teaming Up for Asthma Control® \(TUAC\)](#), a program developed with support from CDC in 2010.

These nurses then used materials provided by MAPCP and its partners to deliver AS-ME to students who enrolled (with parental consent). More information about how these activities were conducted, as well as health and economic outcomes, is available in a [peer-reviewed publication](#) and a [white paper](#).

MAPCP has partnered with health insurance plans and provided information on how AS-ME can be reimbursed. MAPCP has partnered with the state Medicaid agency (MO HealthNet) to establish a system to reimburse for AS-ME delivered in people's homes, by submitting a Medicaid state plan amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS).

The SPA also addresses home environmental assessments. MAPCP's contributions to this partnership included data on the health and economic benefits of AS-ME and home environmental assessments, as well as assistance in developing standards for how these strategies would be delivered and which providers would deliver them. CMS approved this SPA in 2016 (available [here](#)). Peggy Gaddy, RRT, MBA, from MAPCP describes her experience working with MO HealthNet in this [webinar](#).

X-tinguishing smoking and exposure to secondhand smoke

MAPCP has worked with partners to increase referrals to tobacco cessation programs. MAPCP has worked with partners, including the Missouri Comprehensive Tobacco Control Program, to increase referrals to guidelines-recommended tobacco cessation treatments for people with asthma, their families, and their caregivers.

Home visits for trigger reduction and asthma self-management education

MAPCP has partnered with health insurance plans and provided information on how home visits for asthma can be reimbursed. MAPCP has partnered with MO HealthNet to establish a system to reimburse for home environmental assessments and in-home AS-ME, by submitting and receiving CMS approval for a Medicaid SPA. The SPA helps MAPCP's partners that deliver home visits to seek reimbursement for their services. More information is available in the description of MAPCP activities related to Education on asthma self-management.

MAPCP has worked with partners to connect people with asthma and their families to existing asthma-related programs and support services. MAPCP and its partners created [AsthmaBridge](#), a website that helps physicians, school nurses, and other healthcare professionals directly connect children with asthma to local AS-ME and home environmental assessments. Also, MAPCP and its partners created [School Nurse Link](#), a website to help school nurses connect with health insurance plans for case management, transportation, and other services.

What EXHALE Can Look Like in a State: An Example from Missouri (continued)

Achievement of guidelines-based medical management

MAPCP has analyzed health insurance claims data to identify asthma medication purchases that did not appear guidelines-based. MAPCP has partnered with MO HealthNet and others to conduct a quality improvement project. Under the project, Medicaid pharmacy claims data were analyzed to identify people with asthma whose medication did not appear to follow guidelines. These individuals' physicians were then notified by mail. In one year, the program increased guidelines-based use of asthma medications and saved the state Medicaid agency approximately \$430,000 in medication costs over 6 months. More information about this project is available in this [brief](#).

MAPCP has worked with healthcare partners to offer training opportunities on how to deliver guidelines-based medical care to people with asthma. MAPCP has partnered with the University of Missouri and others to offer IMPACT Asthma ECHO®, which uses videoconferencing technology to provide online lunch-hour training to healthcare professionals on how to deliver guidelines-based medical care. More information is available [here](#) and [here](#).



What EXHALE Can Look Like in a State: An Example from Missouri (continued)

Linkages and coordination of care across settings

MAPCP has encouraged health insurance plans to expand access to patient-centered medical homes for people with asthma. MAPCP has partnered with MO HealthNet to expand access for children with asthma to MO HealthNet's Primary Care Health Homes Initiative (which focuses on care coordination via selected local healthcare providers), by submitting and receiving CMS approval in 2016 for a Medicaid SPA (available [here](#)). About a year after the SPA was approved, more than 3,000 children with asthma were supported by this new approach to care coordination.

MAPCP has convened partners to facilitate coordinated care for people with asthma and build synergy. MAPCP has partnered with MO HealthNet, Medicaid managed care organizations (MCOs), Missouri School Boards Association, Missouri Primary Care Association, and Missouri School Health Program to form the Care Coordination for School-Aged Children Workgroup. The partnership resulted in the creation of a template parental consent form that allows schools to share health-related information with students' healthcare professionals and health insurance plans. The template is compliant with the Family Educational Rights and Privacy Act (FERPA). Distribution of the customizable form occurs via [School Nurse Link](#), a website that facilitates linkages between school nurses and health insurance plans.

Environmental policies or best practices to reduce asthma triggers from indoor, outdoor, or occupational sources

MAPCP has informed and encouraged partners to consider policies or practices that help people with asthma. MAPCP's partners in public housing have adopted and implemented new smokefree policies for public housing in Kansas City, Joplin, and Columbia (2014–2017). These policies can reduce exposure to secondhand smoke among people with asthma who live in public housing, which can reduce hospitalizations and ED visits for asthma. Also, every year since 2014, the [Missouri Clean Diesel Program](#) in the Missouri Department of Natural Resources has helped school districts increase their number of school buses that run more cleanly. These improvements can reduce air pollution and help children with asthma avoid hospitalizations and ED visits for asthma.

For more information, visit:

<https://www.cdc.gov/asthma/exhale/>

