



- 7 key areas in this section
- Ranging from community resources to appropriate referrals for clients
- Common sense
- NHLBI Guidelines

### **Community Resources**

- These are mostly non-clinical
- Each community different know yours!
- College & University Social Worker programs
- United Way: "211"
  https://metrounitedway.org/servlet/eAndar.article/702?gclid=CLTjuL6ou
  NICFY62wAodu74Dwg/
- Typical resources to have on hand should include:
  - Housing & Furniture
  - Transportation
  - Food, clothing



- Salvation Army & others
- Housing County Commission Section 8
- www.Michigan.gov: search for "Helping Hand""
- Habitat for Humanity
- HUD "Healthy Homes" programs
- Landlord/Tenant Collaborations

#### **Transportation**

- Medicaid benefit
- Cab vouchers
- Public transportation (MDOT, SmartBus-Detroit, AATA etc.)
- Go Bus- Grand Rapids
- Search "ADA transportation Michigan" for more resources



- Food and clothing banks by location ie: Salvation Army
- Detroit Farmer's Market "double up food bucks"
- Food Bank Council of Michigan <u>www.fbcmich.org</u>
- Churches, Temples, Mosques, Community Centers
- Area Agency on Aging <u>www.mi-seniors.net</u>



- Utilize programs and resources already in your community
- They will have programs & services that are inperson or on-line. Here are the major players:
  - Asthma & Allergy Foundation of America <u>www.aafa.org</u>
  - American Lung Association <u>www.lungusa.org</u>
  - Allergy & Asthma Network <u>www.aanma.org</u>
  - MI Local Coalitions <u>www.getasthmahelp.org</u>

### Family Support Education Activities continued

- Support Groups (on-line or in-person)
- Local Hospital
- Provide in-services at workplace and school
- Especially important will be:
  - Asthma Action Plan
  - Michigan Compiled Law 380.1179 (inhaler law)
  - Need for Medic-Alert Tags, etc.

## Insurance & Financial Issues

- MI-Child or Medicaid
- County Health Insurance Programs, ie: Wayne County Health
   Authority
- Children Special Health Care Services (CSHCS) via MDCH asthma is a qualifying diagnosis!
- Department of Human Services (formally known as FIA)

### Insurance & Financial Issues continued

- Free or Sliding Scale Clinics access your local clinics Google it!
- Federally Qualified Health Centers:
   <a href="https://findahealthcenter.hrsa.gov/index.html">https://findahealthcenter.hrsa.gov/index.html</a>
- Other regional resources:
  - Tri-County Dental Health: <u>www.dentalhealthcouncil.org</u>
  - HOPE Clinic: http://www.thehopeclinic.org/

### Regional Clinic Resources,

- Community Health Centers via Michigan Primary Care Association: <a href="http://www.mpca.net/?page=locateHC">http://www.mpca.net/?page=locateHC</a>
- MDCH www.michigan.gov & search "Free or Low Cost Primary Care"
- BCBS Resource on how to find insurance:
   <a href="http://www.bcbsm.com/index/health-insurance-help/calculators-tools/topics/buying-health-insurance/askblue.html">http://www.bcbsm.com/index/health-insurance-help/calculators-tools/topics/buying-health-insurance/askblue.html</a>

### Insurance & Financial Issues continued

- Pharmaceutical Support
  - Partnership for Prescription Assistance (PPA):

https://www.pparx.org/

#888.477.2669 (for uninsured & under-insured)

- Together RX Access: <u>www.togetherrxaccess.com</u>
  - #800.250.2839 (only uninsured)
- Clinics, Hospitals & AAFA Chapters often have med assistance programs

# When to Refer to a Specialist

- There are difficulties in achieving or maintaining control of asthma
- Additional education is needed to improve adherence
- Patient requires step 4 care or higher (step 3 care or higher for children 0–4 years of age)
- Consider referral if a patient requires step 3 care (step 2 care for children 0–4 years of age) or if additional testing for the role of allergy is indicated
- Immunotherapy or omalizumab (Xolair) are considered

#### Specialist Referral continued

- Exacerbation requiring hospitalization
- Patient has required more than 2 bursts of oral corticosteroids in 1 year or has an exacerbation requiring hospitalization
- Other conditions complicate asthma or diagnosis; e.g., sinusitis, nasal polyps, aspergillosis, severe rhinitis, VCD, GERD, COPD
- Patient requires confirmation of an occupational or environmental inhalant or ingested substance

#### Specialist Referral continued

— Additionally, patients who have significant psychiatric, psychosocial, or family problems that interfere with their asthma therapy may need referral to an appropriate mental health professional for counseling or treatment (These problems have been shown to interfere with a patients ability to adhere to treatment)

Guidelines for the Diagnosis and Management of Asthma, National Asthma Education and Prevention Program of the National Heart, Lung and Blood Institute, Expert Panel Report, 2007



- Important to keep lines of communication open
- Expand your own network keep it up to date
- Partner with coalitions, project teams & grant funded programs
- Resources ready for clinician education: PACE, MDCH,
   Org's like AAFA, ALA, National Jewish, AAAAI, CHEST, ACAAI

#### **Care Coordination**

- Coordinate between other providers and systems team!
- Ideally, the AE-C works closely with a medical director & an advisory board to establish, maintain, & develop an effective program
- The patient with asthma (and family) is a key member of the team
- Other physicians that may be involved:
  - Primary care physicians
  - Allergists
  - ENT specialists
  - Pulmonologists
  - Pediatricians



- Nurses and Nurse
   Practitioners
- Respiratory Therapists
- Pharmacists
- Physician Assistants
- Pharmaceutical sales reps
- Psychiatrists

- Psychologists
- Medical social workers
- DME providers
- Case managers
- Teachers and employers
- Managed care administrators & Case or Disease Mgt

# Education & Technical Assistance

- Provide education & technical assistance to:
  - Third-party payers
  - Community & health care professionals
  - Work sites
  - Schools
  - Faith-base groups

