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Partnering with Providers and Integrating Health Education and Health Management: Two Major Initiatives to Improve Asthma Care

IEHP is embarking on a mission to improve asthma care at the practitioner and Member level by rolling out two initiatives:

1. Asthma Pay for Performance (P4P) – starting September 1, 2005, IEHP has implemented an Asthma P4P program for practitioners. Components in place initially include Member asthma rosters available on-line or by mail that stratify asthmatic patients assigned to the PCP, and payment for asthma visits using an Asthma Progress Note that can be submitted on-line or by fax. The Asthma Progress Note is designed to facilitate the meeting of all national clinical practice guidelines for asthma care. Future components will include an on-line "Asthma Button" that will provide the practitioner with all available clinical and service information regarding individual asthma Members, including medication use, ED visits, immunization status (e.g.: flu shot), etc.

2. Our second initiative is truly integrating Health Education and Health (Disease) Management at the Plan to enhance our ability to provide a continuum of self management information and interventions regarding asthma to our Members. Our goal is to combine the expertise of Health Education staff in developing curricula, assessing Member's readiness for change and developing self management programs with the expertise of Health Management staff in clinical assessment, disease process knowledge and clinical education to positively impact our Members health status and to ensure the Members receive information and interventions that will work for them.

We are combining the two units physically, programmatically and philosophically. Integrated processes will include materials development, curriculum, Member intake, care plan creation and referral/development of interventions. The continuum looks like:

Written Materials	Web Based Interventions	Self Paced Member Programs	Individual Group	One on One Coordinator Level	One on One RN Level	RN Home Visit	Care Management
Brochures	In development	Hypertension	"Classes"	Telephonic Contact	Telephonic	In person	Assigned CM
Action Plans		Healthy Heart	Asthma		Assessment	Assessment	
			Diabetes		Education	Education	
			Weight Management				
			Smoking Cessation				
			Living with a Disability				

Our evaluation of success will include practitioner measurements such as the Asthma HEDIS measure, measured compliance with national clinical practice guidelines (through review of submitted Asthma Progress Notes), and Member measurements such as ED utilization for asthma, self reported health status through surveys, and Member satisfaction with interventions.