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Partnership between schools and allergist enables asthma treatment without grant money

Researchers from Tulane University School of Medicine analyzed operating costs of a partnership between school-based health centers (SBHCs) and a local allergist providing asthma care for students. Results showed the program was sustainable and cost-neutral and did not rely on grant funding. Findings were presented in a poster during the American College of Allergy, Asthma & Immunology (ACAAI) Annual Meeting in November 2021 and reported by *Healio*.

Grants often cover some or all costs

“Most models for community-based asthma treatment rely on grant funding to cover some or all of their operating costs. [However, if grants end without being renewed,] the effects on the community can be detrimental,” *Healio* was told by researcher Katherine Rilett, MD, a resident in internal medicine and pediatrics at Tulane University School of Medicine.

In the study, an allergist whose services were paid for by grant funding rotated among school-based health centers at two high schools and one combined high school/middle school. At each SBHC, for one half-day each week, the allergist identified and treated children with asthma. Each student’s insurance (Medicaid, in most cases) was billed for services. However, the SBHCs did not collect copays and children who were underinsured received treatment free of charge.

When this grant ended

When grant funding for the program expired, “the partners agreed that the program was valuable and they did not want students to lose asthma care.” Instead, over a 6-month period, the partners investigated and negotiated contracting for the allergist’s services. During that time, the allergist provided free care for the students. Ultimately, the partners agreed the allergist would continue providing asthma care for one half-day each week, at an hourly rate. The contract covered student care between 2016 and 2020. At the end of the 2019 academic year, the researchers reviewed the program’s financial records.

The result: A cost-neutral system

“The results after reviewing these records show that the insurance reimbursements for E&M [evaluation and management] and CPT [current procedural terminology] codes would have provided a completely cost-neutral system. Reimbursements equaled the hourly rate of the allergist,” said Rilett.

The results also showed that “in this specific partnership, the cost of adding an allergist as a licensed EMR [electronic medical record] user yielded a small financial loss for the school system.” However, obtaining the allergist’s services free of charge for 6 months offset that loss. In the future, the researchers want to determine how the partnership could overcome the EMR fee and keep costs neutral.

Relaunching this partnership

The 2020 shutdown, due to the COVID-19 pandemic, caused schools to change to virtual learning. However, Rilett and her colleagues hope the partnership can be relaunched now that schools are again in session, in person. “Health care access in school decreases time away from school due to illness or appointments and should lead to decreased absences, improved performance and decreased dropout rates,” she explained. “Partnership between an allergist and SBHCs can be a sustainable and cost-neutral community endeavor.”

References

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Successful asthma education and support program expands in Bronx schools

A community-based program to help manage children's asthma, developed with and successfully piloted in four Bronx schools, is expanding in up to 40 public, charter and parochial schools across the Bronx. It will enroll 416 students, aged 4-12 years old. The five-year study, named "Evaluation of the Asthma Management Program to Promote Activity for Students in Schools" (Asthma-PASS), is supported by a \$4.2 million grant from the United States National Institutes of Health (NIH) to Albert Einstein College of Medicine and the Children's Hospital at Montefiore (CHAM).

The announcement was made by Montefiore-Einstein and discussed in a *Healio* interview with the program's lead researcher, Marina Reznik, MD, MS, Vice Chair for Clinical and Community-based Research, CHAM and Einstein, and Professor of Pediatrics at Einstein. The Montefiore-Einstein release noted that, to date, Reznik has "conducted 10 community-based asthma interventions, enrolling approximately 3,000 children and/or caregivers and collaborating with several community-based organizations."

Why the Bronx?

Among New York City's five boroughs, the Bronx has the highest rate of asthma, up to 25% in some neighborhoods, as well as the highest overall rate of asthma hospitalizations and deaths in New York, according to research from Montefiore-Einstein. "The Bronx population is at increased burden from the disease, warranting an urgent need for intervention and support," Reznik told *Healio*. "Multicomponent programs that include patient

education about asthma, its triggers and disease self-management could improve asthma control and other outcomes."

Piloting the program

The components of the Asthma-PASS program "were developed in collaboration with the Bronx schools, teachers, parents and community members to best fit the needs of New York City students with asthma," said Reznik. The program was piloted at four Bronx elementary schools and results showed an increase in symptom-free days, "especially for children who had persistent and uncontrolled asthma."

She explained that it was not possible to identify a single reason for the improvement. Instead, she attributed the positive results to a combination of the program components. She noted those factors included support by community health workers, education that increased child and parental knowledge and confidence in managing asthma, improved physical activity, an asthma awareness week, an asthma workshop for school staff, a decrease in the stigma that children with asthma may experience and teachers' increased comfort in handling children's asthma symptoms in the classroom.

"During the pilot Asthma-PASS study, we were blown away by the creative ways children learned and shared information about asthma during the awareness week," said Reznik. "I look forward to seeing new ways and ideas that teachers and students will develop and work on during the future asthma awareness weeks in the upcoming study, she added."

Methods for the expanded study

Reznik explained that the goal of the expanded study is to reduce asthma symptoms among high-risk urban school children. The program will focus on educational and physical activities to improve

asthma and limit hospitalizations and exacerbations.

In the *Healio* interview, she provided a brief description of the study methods, "The schools will be randomly assigned to either the Asthma-PASS intervention or the asthma management comparison group. All enrolled families, regardless of their assigned group, will receive asthma education and COVID-19 support from a CHW. All schools will continue to offer ongoing classroom and school-based opportunities for physical activity."

"Schools randomly assigned to Asthma-PASS will receive an asthma workshop for school personnel and hold an asthma awareness week. Families of students attending schools with Asthma-PASS will also work with a CHW to address care coordination needs or concerns about physical activity."

"Once the final assessment is completed for the students attending Asthma-PASS schools, we will offer the asthma workshop and asthma awareness week activities to the asthma comparison group schools." Several outcomes between the participants in two groups such as asthma control, symptom-free days and physical activity will be compared.

Anticipated impact of COVID-19

In the *Healio* interview, Reznik expressed concerns about the potential impact of the COVID-19 pandemic on the new study because "building a relationship with the schools and families and earning the trust of the community is important in studies such as this." During the pilot study, the researchers frequently visited the schools to meet with teachers, students, families and other personnel. Now because the pandemic is limiting access to the schools, those components will have to be conducted remotely.

Importance of addressing asthma

Reznik and her colleagues “hope that the Bronx schools continue to see the importance of addressing asthma in students because uncontrolled asthma is also a risk factor for COVID-19 morbidity.” She believes the expanded study “would provide critical new knowledge on the effectiveness of the Asthma-PASS intervention that could help improve asthma outcomes among Bronx children with asthma during the COVID-19 pandemic or any future epidemics.” She also anticipates the program, “if effective in this large-scale study, would be of interest to other inner-city communities with a high prevalence of pediatric asthma.”

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