



KERN HEALTH SYSTEMS POLICY AND PROCEDURES			
<b>Policy Title</b>	Asthma Treatment and Management	<b>Policy #</b>	3.36-P
<b>Policy Owner</b>	Utilization Management	<b>Original Effective Date</b>	3/31/2006
<b>Revision Effective Date</b>	8/20/2024	<b>Approval Date</b>	01/07/2025
<b>Line of Business</b>	<input checked="" type="checkbox"/> Medi-Cal <input type="checkbox"/> Medicare <input type="checkbox"/> Corporate		

## I. PURPOSE

- A. To define the responsibilities of Kern Health System (KHS) in providing, arranging, and reimbursing asthma treatment and management services for qualifying members in accordance with DHCS Medi-Cal covered benefits.

## II. POLICY

- A. KHS will arrange and ensure asthma treatment and services are provided to members in accordance with current nationally recognized medical criteria and recommendations.
- B. KHS will comply with the Department of Health Care Services (DHCS) benefit requirements for Asthma Preventive Services (APS) for qualifying members. These services comprise of clinic-based asthma self-management education, home-based asthma self-management education and in-home environmental trigger assessments for eligible beneficiaries of any age, as medically necessary, subject to applicable utilization controls. Pursuant to Title 42 of the Code of Federal Regulations, Section 440.130(c), asthma preventive services must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice under state law.
- C. KHS will not require prior authorization for Community Health Worker (CHW) services as preventive services for the first twelve (12) units of services in accordance with DHCS Medi-Cal billing and Claims payments.
  - 1. For members requiring more than twelve (12) units of services a written Plan of Care must be written by one or more licensed providers, except for members receiving emergency services.

- D. The KHS Community Based Services Department will oversee the process for CHWs providing Asthma support and remediation services in accordance with applicable departmental policies and procedures. Please refer to P&P 11.29 Titled “Community Health Workers.”

### **III. DEFINITIONS**

TERMS	DEFINITIONS
N/A	

### **IV. PROCEDURES**

#### **ACCESS**

- A. Asthma treatment and management services may be accessed through the PCP to include any necessary specialty care as outlined in KHS Policy and Procedure #3.22-P: Referral and Authorization Process.
- B. Asthma preventive health benefits by a Community Health Worker will be covered in accordance with DHCS requirements.

#### **COVERED SERVICES**

- A. KHS covers all medically necessary care, equipment, and supplies for the treatment and management of asthma. KHS coverage includes primary care, specialty care and asthma equipment and supplies when medically necessary for the management and treatment of pediatric asthma and adult asthma and in accordance with KHS division of financial responsibility.
1. Quantities of equipment and supplies may be limited if the limitations do not inhibit appropriate compliance with treatment as prescribed by the member’s treating practitioner.
  2. Pediatric and adult asthma medications are not covered by KHS. They are covered through Medi-Cal RX.
- B. KHS Covers Asthma Preventive Services Community Health Worker services.
1. CHW services are preventive health services as defined in Title 42 Code of Federal Regulations (CFR) Section 440.130, (c), as preventive health services delivered by a CHW to prevent disease, disability, and other health conditions or their progression; to prolong life; and to promote physical and mental health.

2. CHW services are considered medically necessary for members with one or more chronic health conditions, who are at risk for a chronic health condition or environmental health exposure who face barriers in meeting their health or health related social needs and/or who would benefit from preventive services.
3. Eligible Populations are individuals with poorly controlled asthma as defined by:
  - a. Emergency department visit or hospitalization,
  - b. Two sick or urgent care visits in the past 12 months,
  - c. Or a score of 19 or lower on the Asthma Control Test,
  - d. Licensed health care provider has documented that the service will likely avoid asthma-related hospitalizations, emergency department visits, or other high-cost services.
4. Services provided by CHWs may include:
  - a. **Health Education:** Promoting a member's health or addressing barriers to physical and mental health care, such as through providing information or instruction on health topics. Health Education content must be consistent with established or recognized health care standards and may include coaching and goal setting to improve a member's health or ability to self-manage their health conditions.
  - b. **Health Navigation:** Providing information, training, referrals, or support to assist Members to access health care, understand the health care delivery system, or engage in their own care.
  - c. **Screening and Assessment:** Providing screening and assessment services that do not require a license and assisting a member with connecting to appropriate services to improve their health.
  - d. **Individual Support or Advocacy:** Assisting a member in preventing the onset or exacerbation of a health this may include peer support as well if not duplicative of other covered benefits.
5. Services may be provided to a parent or legal guardian of a Medi-Cal beneficiary under the age of twenty-one (21) for the direct benefit of the beneficiary, in accordance with a recommendation from a licensed provider.

C. Asthma Remediation Services are a covered benefit and include the following provisions:

- a. These services provide physical modifications to a home environment to ensure the health, welfare, and safety of the individual by enabling the individual to function in their home, with the goal to prevent acute asthma episodes that could result in the need for emergency services and hospitalization.
- b. Examples of Asthma Remediation Services
  - i. Allergen impermeable mattress and pillow dust covers.
  - ii. High-efficiency particulate air (HEPA) filtered vacuums.
  - iii. Integrated Pest Management (IPM) services
  - iv. De-humidifiers
  - v. Air filters
  - vi. Other moisture controlling interventions.
  - vii. Minor mold removal and remediation services
  - viii. Ventilation improvements
  - ix. Asthma-friendly cleaning products and supplies.

## V. ATTACHMENTS

Attachment A:	N/A
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## VI. REFERENCES

Reference Type	Specific Reference
All Plan Letter(s) (APL)	DHCS APL-24-006 Community Health Worker Services Benefit; dated May 13, 2024-supercedes APL-22-016.
Regulatory	Medi-Cal Community Supports, or In Lieu of Services (ILOS), Policy Guide July 2023
Other	DHCS Medi-Cal Provider Manual Part 2 Community Health Worker Preventive Services

## VII. REVISION HISTORY

Action	Date	Brief Description of Updates	Author
Revised	2024-08	Policy was due for an annual review, a purpose statement and a revision to reference policy 11.29-P, Community Health Worker were added.	UM
Revised	2017-01	Review and minor revision provided by Health Services Department.	
Effective	2006-02	Policy created to comply with AB2185 (2004) which was effective 1/1/05. KHS coverage included all elements of AB2185 prior to its effective date. Policy reviewed against DHS Contract 03-76165 (Effective 5/1/2004).	

## VIII. APPROVALS

Committees   Board (if applicable)	Date Reviewed	Date Approved
Choose an item.		

Regulatory Agencies (if applicable)	Date Reviewed	Date Approved
Choose an item.		

<b>Chief Executive Leadership Approval *</b>		
<b>Title</b>	<b>Signature</b>	<b>Date Approved</b>
Chief Executive Officer		
Chief Operating Officer		
Chief Medical Officer		
Chief Financial Officer		
*Signatures are kept on file for reference but will not be on the published copy		



## Policy and Procedure Review

**KHS Policy & Procedure:** Asthma Treatment and Management

**Last approved version:** 2017

**Reason for revision:** Policy was due for an annual review, a purpose statement and a revision to reference policy 11.29-P, Community Health Worker were added.

Director Approval		
Title	Signature	Date Approved
Christine Pence Senior Director of Health Services		
Dr. Maninder Khalsa Medical Director of Utilization Management		
Amisha Pannu Senior Director of Provider Network		
Nate Scott Senior Director of Member Services		

Date posted to public drive: \_\_\_\_\_

Date posted to website ("P" policies only): \_\_\_\_\_