Public Health Department

Family Health Program/Environmental Svcs.

5102.01 Asthma Home Visiting Procedure

Refers to a Policy: \boxtimes Yes, Policy # <u>6702</u>

No No

<u>Purpose</u>

Dakota County Public Health staff provides in-home health and environmental assessments to children in Dakota County with asthma. Individual intervention is based on information learned in the in-home assessment and includes education on asthma and strategies to reduce or eliminate triggers.

According to the Minnesota Department of Health's "Asthma in Minnesota; A Strategic Plan 2021-2031" Asthma is the third most commonly diagnosed chronic disease in Minnesota, following only hypertension and high cholesterol. In addition, the 2019 Dakota County School Nurse Survey revealed that 9% of public-school students are diagnosed with asthma. The goal of this program is to reduce environmental asthma triggers in the home and improve the quality of life for children living with asthma.

Target Population and qualifications:

- Children 0-18 diagnosed with asthma
- Live in Dakota County
- Will complete 1-4 visits for diagnosis of asthma without financial eligibility

Procedure

Public Health Intake:

- Complete <u>Public Health Intake Process</u>
- Assign referrals directly to assigned Asthma nurse in PH-Doc
- Assign referral reason "Asthma" to each referral in PH-Doc

Asthma Public Health Nurse:

- Monitor PH-Doc for assigned Asthma referrals
- Make two contact attempts by either phone, text, or email as indicated on referral of client preference. If no response to contact attempts send a letter by mail to equal 3 total contact attempts.
- If unable to reach client after 3 contact attempts close referral out in PH Doc.
- If client reached schedule initial home visit either in-person or virtually.
- Open and complete the "Asthma Task" in PH-Doc for new referrals
- Document assessments and interventions under the child's chart in PH-Doc using applicable assessment forms.
- Document a visit contact note under the parent's chart in PH-Doc and copy to child's chart.
- PHN to attempt completion of an initial assessment visit, an equipment education & distribution visit, and 2 follow up visits (at 6- & 12-month intervals).
- Visit frequency may be increased or decreased based on family's needs and PHN judgement.
- Case may be closed after completion of the 12 month visit per PHN discretion and based on family needs.

Billing:

• Public Health Nurses utilize third party reimbursement to maintain the program. Services are divided into the following codes:

<u>Child Visits</u>. Visits are billed to the child using ICD Code J45.21.

- Frame/SAN: PHN Home Visit Child
 - Childhood Asthma- Initial Visit- billed as HCPC- S9123
 - Childhood Asthma- Follow-up Visit- billed as HCPC- S9123
 - Childhood Asthma- Equipment-billed as HCPC- S9123
 - Childhood Asthma- Education- billed as HCPC- S9441
- Initial, Follow-up and Equipment visits billed to the child at S9123 where asthma education was completed <u>AND</u> visit length is greater than 31 minutes qualify for the use of the S9441 code in addition to S9123.

<u>Parent Visits</u>: Visits are billed to the parent using ICD Code Z71.89 for when education is provided to the parent.

Frame/SAN: PHN Home Visit - Parent

Equipment Distribution:

- Equipment distributed as part of program may include, but not limited to:
 - Hepa Vacuum cleaner
 - Large air purifier
 - Small air purifier
 - \circ Pre-filter for large air purifier
 - Mattress encasements
 - Pillow encasements
 - o Dehumidifier
 - Holding Chamber
- Equipment distribution requires financial eligibility.
- Equipment is subject to individual needs, eligibility, and program funding.
- Assemble vacuum using Phillips # 2 screwdriver
- As appropriate bring all boxes and packaging back to office after distribution to recycle

<u>Virtual Visits:</u> Video or phone visits may be utilized on an as needed basis, per client request, or as required by supervisory staff. This applies to initial, follow up, and equipment visits.

- \circ Video visits may be completed using approved platforms on county devices.
- Visits are billed to the child still using ICD Code J45.21
- HCPC codes remain the same, the accounting technician will change the place of service code when processing the billing.
 - Childhood Asthma- Initial Visit- billed as HCPC- S9123
 - \circ Childhood Asthma- Follow-up Visit- billed as HCPC- S9123
 - Childhood Asthma- Equipment-billed as HCPC- S9123
 - Childhood Asthma- Education- billed as HCPC- S9441
- $_{\odot}$ For the parent use ICD Code Z71.89 for when education is provided.
- For Child visits choose the Frame/SAN: PHN Home Visit-Child and then add the additional San only option for video visits or phone visits.
- For the Parent visits open the Frame/SAN: PHN Home Visit-Parent and then add the San only option for video or phone visit.

Uninsured Clients:

• Clients are not billed for Dakota County services, if they do not have health insurance, or their health insurance does not cover these home visits services are covered by a combination of county levy money and grant funds.

Outreach:

- Complete Asthma Program Outreach to generate Asthma referrals.
- Document all outreach in PH Doc Community Events-event search
 - Select organization or group where outreach completed
 - Right click on file, select tasks, click new task icon, select CTC community outreach

Authority & Reference

<u>Minnesota Department of Health Asthma Home-Based Services</u>

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