



Montana Asthma Advisory Group Meeting

April 15th, 2011

Bozeman, MT



Save the Date!

2011 MAAG meetings

- August 26th, November 16th

Becoming an Asthma Educator and Care Manager Course

- April 22nd, 1-7pm in Missoula

Asthma Educator Webinars

- August 25th from noon-1 pm

IPM School Training through MSU Extension

- Wednesday, May 18th, Free of charge

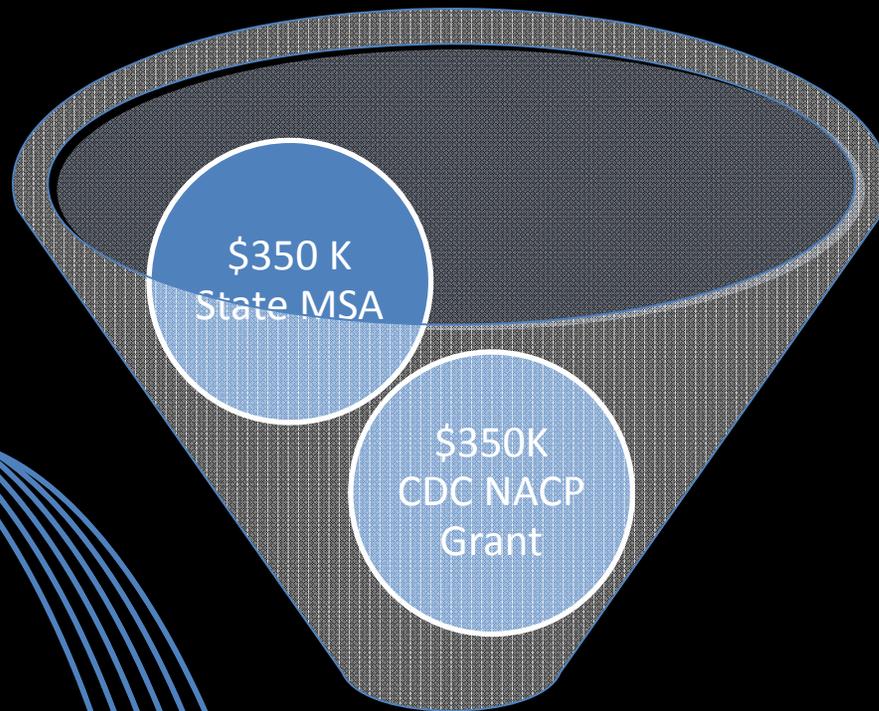


Announcements

- New medical consultant for MACP-
Dewey Hahlbohm, PA-C, AE-C
- Farwell to Matthew Herington, Health Educator
- Three home visiting sites funded
- 5 AHEAD sites signed on, 5 ACMS sites running
- Now recruiting AHEAD protocol and ACMS
sites-contact Jeanne Cannon 444-4592



Legislative Updates



Montana Asthma Control Program Budget
(\$700 K Annually)



Funding Cycles

- State MSA funding reviewed by state legislature every two years (2009, 2011 etc)
- CDC grant-awarded in September, 2009, 5 year funding cycle (intended to run through August, 2014)



The Good News

- MSA funding: Voter initiative I-146, passed in 2002 by 65% of Montana voters
- Supports use of MSA funds for tobacco prevention, chronic disease and other health initiatives
- 2011 legislature has not cut funding for chronic disease programs



2011 Federal budget

- House passes HR 1
 - *Cuts* to CDC, EPA, NIH
- Senate fails to pass bills to continue at 2010 levels or HR 1
- No major cuts to National Asthma Control Program for Federal 2011 budget
- Determines our Year 3 CDC budget (one year of funding starting in Sept 2011)

2012 CDC budget



**DEPARTMENT
of HEALTH
and HUMAN
SERVICES**

**Fiscal Year
2012**

Centers for Disease Control
and Prevention

*Justification of
Estimates for
Appropriation Committees*



2012 CDC budget

- National Center for Environmental Health asked to reduce overall budget by \$100 million
- President's budget creates new, "Healthy Homes and Community Environments" program
 - Integrates National Asthma Control Program with Healthy Homes/Lead Poisoning Prevention Program (HH/LPPP)



Healthy Homes and Community Environments Program

- 2 year transition
- Budget set at \$32.6 million
- \$33 million (51%) cut from FY 2010
- Historic lowest funding level
- Would affect our program starting in Sept. 2012



Healthy Homes and Community Environments Program

- Merge current asthma programs into new “Healthy Homes and Community Environments”
- Reduce state/territorial asthma grants
 - From 36 to 15
 - Projected 225 public health jobs lost



Healthy Homes and Community Environments Program

- Reduce Healthy Homes/Childhood Lead Poisoning Prevention Services
 - Reduce HH funded recipients from 40 to 34
 - End big city lead control programs
 - Fewer homes inspected
 - Reduced data collection



Implications

- Depending on outcome of 2011 negotiations, MACP could receive a funding cut starting in September
- If 2012 budget is passed as is, will have to competitively re-apply for one of 15 spots for funding starting in September 2012
- Will continue to operate MACP using state funds regardless of federal outcomes



Healthy Homes and Lead Prevention

- Montana is not one of the currently funded states for lead prevention
- CDC just released an RFP for three years of funding for healthy homes and lead prevention
- The MACP and DPHHS did apply for this grant (should hear in September if we will receive funding)



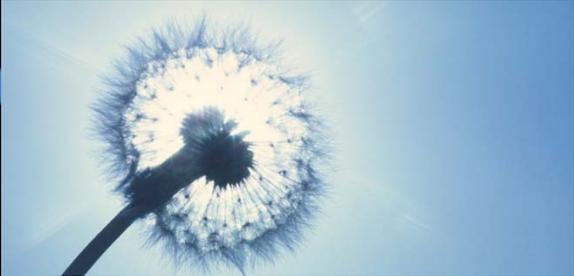
Protecting our program

- Have state funding to provide sustainability
- Applied for Healthy Homes and Lead Prevention Funding
- Continuing successful MACP programs and ensuring robust evaluation to remain competitive if we are forced to reapply for fewer spots



Take aways

- As evidenced by 2011 negotiations, 2012 budget is not a settled issue
- Montana legislators have powerful positions on appropriations committees and care about the impact of these funding cuts in Montana
- Our partners can advocate on behalf of the MACP
- National organizations (AAFA and ALA) are working on behalf of the NACP



Key Messages



Montana Asthma Data Factsheet

The Problem

Asthma is a serious chronic condition that affects thousands of children and adults. If properly treated and controlled through self management, asthma should not limit a person's daily activities or cause troublesome symptoms. However, nearly half (49.3%) of adults and 34% of children with current asthma in Montana report asthma symptoms indicating that their asthma is not well or very poorly controlled.¹

- An estimated 75,000 people in Montana have current asthma.²
- About 26% of adults and 36% of children with asthma reporting missing at least 1 day of work or school in the last year, respectively.¹
- About 40% of adults and children with asthma report limiting their activities because of their asthma.¹
- Not all adults with asthma report knowing the signs and symptoms of an asthma attack (65.5%), having been taught how to respond to an attack (78.8%), or having an asthma action plan to help make treatment decisions (26.3%).¹
- About 10% of adults with asthma report being unable to see a doctor for their asthma due to cost.¹

Asthma hospitalizations cost about \$5 million in



Key Messages

- See fact sheet
- Asthma is a critical problem and CDC's National Asthma Control Program has measurably reduced costs and improved outcomes
- Asthma interventions are a "win-win"
- CDC's National Asthma Control Program helps people control their asthma
- Cuts will squander public health gains



Recommendations

- HHS should reconsider integrating these programs in collaboration with important stakeholders, not under pressure from appropriations process
- **Recommendations –**
 - Fund NACP at 2010 levels.
 - Reconsider program integration.
 - Direct states to reimburse for asthma self management education, other proven control strategies for Medicaid patients.



What you can do

- Follow the rules of the road
- Watch for information from Carrie Nyssen, ALA
- Special thanks to Charlotte Collins from AAFA for these slides