

## 2.2 Asthma Remediation

Remediation services will be available to Enhanced Population Members having a diagnosis of asthma and meeting the clinical criteria in Table 5-14. Asthma remediation services will entail the provision of remedial services to remove indoor environmental allergens and the provision of supportive products to eliminate or reduce asthma triggers in the Member's home. Remediation services will be tailored to the individual needs of the Member and the primary residence (owner-occupied or rental dwelling) of the Member. Services should address multiple triggers to improve the residence and Member's capacity for asthma self-management. Asthma remediation services will include the following components:

- a. **Asthma Self-Management Education (ASME):** health education tailored to the needs of the Member and family / caregivers to expand asthma knowledge, such as early warning signs and management of worsening symptoms, asthma control and medication adherence, and identification and reduction of asthma triggers. ASME should be conducted in alignment with [national asthma guidelines](#) and support education for a partnership in asthma care. ASME must be provided by a qualified nonphysician health care professional, such as a certified asthma educator specialist (AE-C), respiratory therapist (RT), or specially trained lay health worker (e.g., health educator, community health worker (CHW), etc.), with documented training and demonstrated competency in delivering guidelines-based asthma self-management education and comprehensive home environmental assessments to identify and provide education on reducing asthma triggers. ASME must include an asthma and environmental assessment performed in two separate visits. The ASME provider must notify the Social Care Navigator if the Member has additional care coordination needs outside of the ASME service (i.e clinical follow-up, etc.). The ASME provider can supply asthma supportive products and indoor allergen reduction products and bill them towards the Member's cap.
- **Specifications for each visit are as follows:**
  - **Initial Visit:** must be conducted in-person in the Member's dwelling to provide initial asthma and home environmental assessments and ensure appropriateness of asthma remediation services. The initial visit must identify Member / caregiver knowledge, skills, and needs related to asthma, determine asthma control status by administering and scoring a validated, age-appropriate asthma control screening questionnaire (ACT, C-ACT, TRACK), and identify and provide education on home environmental factors / triggers potentially impacting asthma.
  - **Final Visit:** may be conducted in-person in the Member's dwelling or face-to-face virtually (e.g., video call) and must be no earlier than 45 days post completion of all asthma remediation services. In the rare circumstance where the Member does not allow a final face-to-face visit in-person or virtually, the final visit may be conducted telephonically. The final visit must include asthma and home environmental post-assessments, administration and scoring of a validated age-appropriate asthma control screening questionnaire (ACT, C-ACT, TRACK) to determine changes in asthma control status, reinforcement of ASME education, and reporting on Member's progress and improvements in the home environment.

The Social Care Navigator should make Referrals if necessary for the Member or their family if applicable before the Asthma Remediation service duration period ends.

**b. Dwelling Assessment & Scope of Work (SOW) Development (including SOW Technical Review):**

**b.1 Dwelling Assessment & SOW Development:** A comprehensive dwelling assessment of the primary residence to identify home remediations needed to reduce or eliminate asthma triggers and improve the indoor environment of the dwelling should be conducted by a qualified home improvement contractor with industry-standard credentials in building science and healthy homes principles and incorporate results and relevant environmental findings from the initial ASME visit. The SOW should outline recommended remediation services, supportive products, and associated pricing and must be approved by the Social Care Navigator.

**b.2 SOW Technical Review:** Each SOW should receive an SOW Technical Review by a qualified reviewer with industry-standard credentials in building science and healthy homes principles working independently of the HRSN service provider performing installation of approved Asthma Remediation measures. The SOW Technical Review should ensure clear indication within the SOW when recommended services are considered to be invasive. If the SOW includes invasive measures, written approval from the property owner (landlord in case of a rental) is required to be obtained by Social Care Navigator and/or provider of component c. Home Remediation and Provision of Supportive Products.

**c. Home Remediation and Provision of Supportive Products:** Installation services and supportive products may address ventilation and air quality, removal of asthma triggers, and Integrated Pest Management (IPM). Remediation services and supportive products will be limited to those listed in the table below and which are recommended in the SOW and approved by the Social Care Navigator after component b.2 SOW Technical Review. Member written approval is required to begin installation of approved SOW services. Services requiring invasive measures require written approval from the property owner (landlord, if the residence is rented). Remediation service providers must provide proof of credentials/licensure/industry-accepted certifications and training (including advanced requirements for specialized services such as HVAC, IPM, etc.) AND have experience identifying and remediating asthma-related home environmental triggers. Total costs of services for Asthma Remediation may not exceed per Member cap listed in the HRSN Fee Schedule for duration of Waiver period.

**d. Quality Assurance (QA) Inspection:** within 90 days of service completion, a QA inspection should be conducted in alignment with Building Performance Institute (BPI) and other industry technical standards for QA for a minimum of 10 percent of households where asthma remediation services are provided by the SCN. QA provider should be independent of provider of component c. Home Remediation and Provision of Supportive Products.

**Table 5-22:** Remediation services and supportive products include the provision of:

<b>Asthma Trigger Remediation Services</b>	<b>Asthma Supportive Products</b>
<p><i>Indoor Air Quality</i></p> <p>Provision of:</p> <ul style="list-style-type: none"> <li>• Installation of air conditioner</li> <li>• Ventilation system upgrades / installation / repair               <ul style="list-style-type: none"> <li>○ Whole-house fan</li> </ul> </li> <li>• Heating unit clean and tune, repairs, or replacement</li> <li>• Forced air-furnace filter replacement and provision of (6) additional filters</li> <li>• Installation / repair of exhaust fan (kitchen and bathroom)</li> <li>• Dryer venting and cleaning</li> <li>• Air duct maintenance</li> <li>• Carpet steam cleaning</li> <li>• Insulation</li> <li>• Air sealing</li> <li>• Replacement of air filters in HVAC system</li> </ul>	<p><i>Asthma Friendly Cleaning Supplies</i></p> <p>Provision of:</p> <ul style="list-style-type: none"> <li>• Hygrometer (Humidity gauge)</li> <li>• Microfiber cleaning cloths</li> <li>• Green scrubbers</li> <li>• Cleaning buckets and spray bottle</li> <li>• Microfiber mop</li> <li>• Castile soap</li> <li>• Cleaning vinegar (with recipe for mixing)</li> </ul>
<p><i>Mold Remediation and Moisture Control</i></p> <p>Provision of:</p> <ul style="list-style-type: none"> <li>• Plumbing repairs to support moisture control and water damage               <ul style="list-style-type: none"> <li>○ Repairs to boilers (steam and water)</li> <li>○ Repairs to condensate drain</li> </ul> </li> <li>• Basement water proofing (coatings, drainage systems)</li> <li>• Sump pump repair / replacement</li> <li>• Carpet removal or removal of moldy wet flooring and installation of Asthma-friendly flooring</li> <li>• Dirt floor vapor barrier basement / crawlspace</li> <li>• Cleaning / repair / installation of gutter downspout system and gutter screens</li> <li>• *Mold remediation (less than 10 square feet)</li> <li>• *Mold remediation (greater than 10 square feet)</li> </ul>	<p><i>Indoor Allergen Reduction</i></p> <p>Provision of:</p> <ul style="list-style-type: none"> <li>• Vacuum with HEPA filter and filter replacements</li> <li>• Allergen impermeable pillow and mattress encasement</li> </ul>
<p><i>Integrated Pest Management (IPM)</i></p> <p>Provision of:</p> <ul style="list-style-type: none"> <li>• Sealing or patching cracks or openings in walls, baseboards, and around plumbing</li> </ul>	

<ul style="list-style-type: none"> <li>• Application of environmentally friendly pesticides, baits, and traps (use away from children and according to manufacturer’s instructions)</li> <li>• Airtight food storage containers</li> </ul>	
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*\*\*Remediations may include finishing (e.g., drywall and painting) to return the home to a habitable condition, but do not include aesthetic embellishments.\*\**

**Accessibility and Safety Modifications:** Air conditioners, humidifiers and air filtration devices (limited to mechanical only) will be available to eligible Members eligible for Asthma Remediation. These services will be funded under 2.1 Home Accessibility and Safety Modifications. Members may be assessed and deemed eligible by a Social Care Navigator for additional services under 2.1 Home Accessibility and Safety Modifications, subject to per-Member caps.

**Table 5-23: Asthma Remediation: eligibility and service details**

Asthma Remediation eligibility and service details	
Eligibility	<ol style="list-style-type: none"> <li>1. Meets at least one of the Enhanced Population criteria for Enhanced HRSN Services in Table 5-12 and Social Risk Factors in Table 5-13;</li> <li>2. Meets the clinical criteria in Table 5-14; and</li> <li>3. Eligible Medicaid Managed Care Member must be a resident of a single-family or multi-unit primary residence owned or rented by the Member or a primary caregiver</li> </ol> <p><i>Please refer to <a href="https://www.health.ny.gov/health_care/medicaid/redesign/sdh/scn/index.htm">https://www.health.ny.gov/health_care/medicaid/redesign/sdh/scn/index.htm</a> for the latest eligibility criteria.</i></p>
Service Limitations and Restrictions	<ol style="list-style-type: none"> <li>1. Social Care Navigator must document the qualifying clinical criteria for asthma remediation in the Member’s Social Care Plan.</li> <li>2. Asthma trigger remediation services and supportive products are limited to those that are of direct medical or remedial benefit to the Medicaid Managed Care Member.</li> <li>3. Asthma remediations must be conducted in accordance with applicable state and local building codes</li> <li>4. Services requiring invasive measures will require written approval from property owner (landlord, if the residence is rented)</li> <li>5. Medicaid Managed Care Member must be a resident of a single-family or multi-unit primary residence owned or rented by a primary caregiver or by oneself</li> <li>6. Total costs of services for Asthma Remediation, including Dwelling Assessment &amp; SOW development, SOW Technical Review, home remediation services and supportive products, and QA inspection, as needed, may not exceed per Member cap listed in the HRSN Fee Schedule for duration of Waiver period.</li> <li>7. The ASME provider may need to provide additional education to the Member in-between Initial visit and Final visit. This time must be billed under the 24 units cap for ASME Home Visits.</li> </ol>

<p>Allowable Providers</p>	<ul style="list-style-type: none"> <li>• Contracted asthma remediation service providers that are designated as a non-profit Community Based Organization 501 (c)(3) or 501(c)(4)</li> <li>• Asthma Remediation services may be performed by a contracted for-profit organizations at the SCN Lead Entity’s discretion in absence of an available 501(c)(3) or 501(c)(4) Community Based Organization. See <a href="#">HRSN Network Capacity and Access</a> section for details</li> <li>• Asthma Self-Management Education (ASME) must be provided by a qualified nonphysician health care professional with documented training and demonstrated competency in delivering guidelines-based asthma self-management education and comprehensive home environmental assessments to identify and provide education on reducing asthma triggers.</li> <li>• Asthma Remediation home improvement contractors must have proof of credentials/ licensure and/or industry-accepted certifications and training specific to the services being proposed and demonstrated experience providing home installation improvement services for environmental trigger reduction and expanded health and safety measures such as: ventilation, mold remediation, and IPM – as well as experience identifying and remediating asthma-related home environmental triggers. Asthma remediation that is a physical adaptation to a residence must be performed by an individual holding a New York State Contractor’s License.</li> <li>• IPM services which include pesticide application must be delivered by professionals licensed by the NYS Department of Environmental Conservation.</li> <li>• Component b.1 Dwelling Assessment and SOW Development must be conducted by a qualified home improvement contractor with proof of industry-standard credentials in building science and healthy homes principles.</li> <li>• Component b.2 SOW Technical Review and component d. QA Inspection must be conducted by a qualified reviewer/inspector holding industry-standard credentials in building science and healthy homes principles working independently of the HRSN service provider for component c “Home Remediation and Provision of Supportive Products”.</li> <li>• HRSN Service Providers offering component c. Home Remediation and Supportive Products must have proof of credentials/licensure/industry-accepted certifications and trainings (including advanced requirements for specialized services such as HVAC, IPA, mold remediation, etc.) AND demonstrated experience providing home installation improvement services including identifying and remediating asthma-related home environmental triggers.</li> </ul>
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## **Workflow for Asthma Remediation Service**

The SCN Lead Entity will need to create a unique workflow for Asthma Remediation Services given the multiple service components of asthma self-management education, dwelling assessment, and associated Statement of Work (SOW) requirements, home remediation and provision of supportive products, and QA inspections. In general, the workflow should follow the below steps (see Figure 5-8 for a visual process flow):

1. If the Member is eligible for the Asthma Remediation services, the Social Care Navigator will refer to an ASME provider to complete Asthma Remediation component a.
2. The ASME provider (component a.) will contact the Member to schedule the initial ASME visit. After completion of the initial ASME visit under component a., the ASME provider will report the recommended HRSN services back to the Social Care Navigator and update the SCN IT Platform demonstrating the initial ASME services have been completed.
3. The Social Care Navigator reviews the HRSN service provider's findings and recommendations and confirms completion of initial ASME visit criteria. The Social Care Navigator then proceeds with securing a HRSN service provider to conduct component b.1.
4. The HRSN service provider for component b.1 will conduct the Dwelling Assessment and SOW Development and provide the SOW to the Social Care Navigator.
5. The Social Care Navigator will submit the SOW for Technical Review (component b.2.) to a qualified reviewer holding industry-standard credentials in building science and healthy homes principles working independently of the HRSN service provider for component c.
6. The provider for b.2 conducts the SOW Technical Review, indicates within the SOW which services involve invasive measures, and returns the SOW to the Social Care Navigator.
7. The Social Care Navigator conducts a review of the SOW to ensure all proposed measures are allowable since the HRSN service provider may recommend services that are not covered under the Enhanced HRSN Services. The total cost for asthma remediation services must be at or below the allowable cap amount in the HRSN fee schedule. If above the allowable cap, Social Care Navigator must in consultation with the Technical Reviewer (component b.2), prioritize the appropriate services to authorize for the Member. The Social Care Navigator must enter and create unique referrals for each service included in the approved SOW and document authorized services within the Social Care Plan.
8. The Navigator must ensure Member written approval of approved SOW services to begin remediation services. Any SOW involving invasive measures, as confirmed by the SOW Technical review, also requires written approval from the property owner (landlord if the residence is rented).
9. The Social Care Navigator makes referral to HRSN service provider for component c. Remediation service providers for component c. and/or their subcontractors must provide proof of credentials/licensure/industry-accepted certifications and training (including advanced requirements for specialized services such as HVAC, IPM, etc.) AND have experience identifying and remediating asthma-related home environmental triggers. The HRSN service provider or

subcontractor of component c. proceeds with completing Home Remediation and Provision of Supportive Products as approved in the SOW. The HRSN service provider for component c. may be the same or different entity for component b.1.

10. Provider of component c. completes Home Remediation services and Provision of Supportive Products.
11. For a minimum of 10 percent of households where asthma remediation services are provided (as determined at the discretion of the SCN Lead Entity), component d. QA Inspection should be conducted by a qualified inspector holding industry-standard credentials in building science and healthy homes principles, within 90 days of completion of component c. Provider of component d. must be independent of the HRSN service provider for component c.
12. The HRSN service provider of component c. updates the SCN IT Platform to demonstrate the services have been completed. The Social Care Navigator notifies the ASME provider (component a.) of the completion of services under component c.
13. The ASME provider (component a.), follows up with the Member to schedule and conduct the final ASME visit 45 days after Asthma Remediation services have been completed. The ASME provider updates the SCN IT Platform to demonstrate the final services under component a. have been completed.
14. The Social Care Navigator documents the completed services within the Social Care Plan and follows up with the Member within 5 business days to document their satisfaction.

**Note: If the cost of services is \$2,000 or more, the HRSN service provider must either:**

- a. Obtain at least three bids for any total work of \$2,000 or more and select the lowest price and best value or substantially equivalent bid, if applicable;
- b. If preferred, the SCN Lead Entity can establish a list of preferred contractors through a competitive bidding process to be updated annually, and the HRSN service provider can select a contractor for recommended modifications from this list without soliciting at least 3 bids for each service.

**Figure 5-8: Process flow for asthma remediation services**

