

LETTER OF AGREEMENT

This LOA between _____ (“**health center**”) and Asthma Ready® Communities (“**ARC**”) and will begin _____(date) and end 12/31/26.

The purpose of this agreement is to expand access to telehealth services for rural asthma patients, ensuring asthma care best practices at participating primary care clinics. The aim is to reduce asthma burden and costs, while lowering patient risks and improving their outcomes.

This Letter of Agreement outlines responsibilities for:

- Health system
- Individual site
- Individual site Asthma Day point person
- Asthma Ready Communities

Health system agrees to:

1. Complete and return the “Request for Asthma Risk Reports to Support Clinical and Preventive Services” to Asthma Ready Communities so they can run an Asthma Risk Panel Report© for your health system.
2. Identify individual clinic sites and corresponding point person(s).
3. Encourage and support individual clinic participation in the Asthma ECHO series through Missouri Telehealth Network ECHO Programⁱ.
4. Use Asthma Action Plan templates provided by ARC for all Asthma Day participants.
5. Provide NuvoAir care-at home program for highest risk children (assistance identifying risk provided by ARC).
6. Provide spirometers to individual sites so they can conduct in-clinic spirometry to identify patients eligible for at-home asthma care program.
7. Purchase video based self-management education software to deliver asthma related topics directly to families via smart phones and tablets.
8. Update/integrate EHR to support asthma care best practice (EHR consultant provided by ARC).
9. Review annual Asthma Risk Panel Report© with ARC to evaluate changes in outcomes and discuss additions and adjustments as needed.

Individual site agrees to:

1. Identify Nurse Care Manager or other point person and respond to ARC Asthma Day Coordinator in timely manner to set up initial introduction call.
2. Identify appropriate individuals to participate in the Asthma ECHO series through Missouri Telehealth Network ECHO Programⁱⁱ.
3. Host Asthma Days with ARC staff to address the needs of high-risk kids.
4. Ensure appropriate medication (albuterol and ipratropium) is on hand support the bronchodilator protocol for spirometry at Asthma Days (guidelines and amounts provided by ARC).
5. Follow Asthma best practice guidelines in scheduling telehealth and in person follow-up visits, (6 weeks, 3 months, 6 months, 9 months, 12 months and every 3 months thereafter).
6. Enroll eligible children in Primary Care Health Home (PCHH) initiative for asthma services - if site is PCHH.
7. Review monthly patient progress reports for patients enrolled in NuvoAir care at home program.

8. Perform in-clinic spirometry on indicated patients in the Asthma Risk Panel Report© to identify patients eligible for at-home asthma care program.
9. Deliver video based self-management education on asthma related topics to families indicated on the Asthma Risk Panel Report© via smart phone or tablet using Patient Education Genius to track access.
10. Ensure Nurse Care Manager (or other point person) and local school nurses have video cameras and collaborate with ARC asthma educator to conduct “asthma check-up” days at school at least twice a year.

Individual site Asthma Day point person agrees to:

1. Support implementation of Asthma Days, in coordination with ARC, to enroll high-risk patients (the number and length of Asthma Days will be based on Asthma Risk Panel Report© findings).
 - a. Ensure dedicated staff for Asthma Days (at minimum 1 provider, 1 nurse care manager, and 1 support staff (e.g., medical assistant or licensed practical nurse)
 - b. Ensure dedicated rooms for Asthma Days (at minimum 2 rooms).
2. Extend Asthma Day invitations to patients identified as high-risk by ARC, confirm attendance / reach out to alternates as needed, and provide reminders and instructions (sample letters provided by ARC).
3. Ensure plan for medication availability during Asthma Days (guidelines and amounts provided by ARC)
4. Complete pre-visit information on Asthma Day Intake forms for all patients invited to Asthma Day. Includes demographics, health history, and claims data for past year (Cyber Access instructions provided by ARC).
5. Distribute gift cards to attendees at check-out (gift cards provided by ARC) with 6-week telehealth and 3 month in-clinic appointments.
6. Complete the Child Asthma Risk Assessment Tool (CARAT) at the next health home touch following Asthma Day and refer for asthma environmental assessment through Asthma Bridge as needed (CARAT form & Asthma Bridge Referral info provided by ARC).
7. Conduct virtual meetings with local school nurse(s) to support general asthma education as well as individual treatment plans for specific children (ARC staff will help facilitate).

ARC agrees to:

1. Support Asthma Days
 - Provide Asthma Risk Panel Report© and review of findings for individual clinical sites.
 - Identify patients eligible to attend Asthma Days.
 - Conduct or supervise spirometry tests and provide results to the health center.
 - Provide in-person training and support for staff on asthma care best practices.
 - Provide Asthma Action Plan templates for all Asthma Day participants.
 - Assist in completing Asthma Action Plans and prescriptions for all patients that attend.
 - Provide hard copies of Asthma Action Plans, PRAPARE, and intake forms.
2. Provide supplies for patients that attend.
 - Two AeroChamber spacers for inhalers to help ensure the medicine properly reaches the lungs.
 - Other asthma supplies as needed such as a nebulizer, nasal rinse kit and peak flow meters.
3. Provide visa gift cards as incentives for families to attend Asthma Days.
4. Assist health center in identifying high risk children appropriate for NuvoAir’s at-home program.
5. Provide health center with monthly patient progress reports (Asthma Control Monitors©ⁱⁱⁱ) for all children enrolled in NuvoAir’s at-home program.

6. Provide annual Asthma Risk Panel Report[©] and meet with health center to evaluate change in outcomes and discuss additions and adjustments as needed.
7. Provide an electronic health record consultant to support enhancements/changes and ensure local documentation system is optimized for asthma care by telemedicine and in-clinic appointments.
8. Provide one scheduled tele-mentoring session⁵ with clinicians at participating sites (9 –12 months after Asthma Day), to review challenging cases and check-in on telehealth adoption and be available as needed for asthma consultation.
9. Provide on-site support to school nurse(s) to facilitate video teleconferencing between health center and school(s). Will provide school nurse(s) with necessary equipment and materials (e.g. Asma1, wall posters).

Name, Chief Medical Officer

Ben Francisco, Director

Health Center

Asthma Ready Communities

Signature

Signature

ⁱ Show-Me ECHO’s Asthma ECHO offers 3 workforce development programs to improve asthma care across Missouri. Asthma 1, 2, and 3 build upon one another to establish knowledge foundations, develop skill sets, and increase ability to provide exceptional asthma care. These development programs prepare and educate healthcare professionals and community members to implement expert asthma care for their unique patients and practice. Sessions are offered on Tuesdays from noon to 1pm throughout the year. To view schedule and register visit <https://showmeecho.org/clinics/asthma-echo/>. Participants will receive CME credit.

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ⁱⁱⁱ A graphic summary of lung function, medication adherence, inhalation technique, and wellbeing measures