

**Gathering of Asthma Information Project Management Plan
May 1, 2005**

<p>Objective #1: Analyze and distribute Medicaid data on emergency relief drug usage versus maintenance drug usage. Strategy #1: Distribute the results to consortium members as well as primary care providers, who will in turn disseminate the information to asthma patients.</p>				
Lead Person	Collaborating Agencies	Steps to be Taken for Implementation	Status of Steps	Resources/Budget
<p>Kristin Wilson, Theresa Prosser, Rick Kurz</p> <p>Rick Kurz and Theresa Prosser</p>	<p>MO Medicaid & Heritage (consultant) Sharon Worrell – Heritage Jane Zimmer – MDSS, Medicaid or CMS or UM SPH</p>	<p>Evaluate the feasibility and cost (if any) to write a program to analyze annually Medicaid data for the ratio of controller inhaler to beta agonist inhaler use.</p> <ul style="list-style-type: none"> ▪ Identify a data provider (e.g., Heritage, CMS, UM SPH (RK)) ▪ Generate a list of controllers and a list of beta agonist inhalers. (TP) ▪ Finalize proposal to track prescriptions by zip code by drugs of patient for 2001 through 2004 (RK) <ul style="list-style-type: none"> ▪ Compare St. Louis to Kansas City data on the inhaler ratio (RK, TP) ▪ Use data to evaluate the outcomes of consortium interventions. (i.e. track change in inhaler ratio over time) (RK, TP) 	<p>Proposal for the Medicaid data has been refined and alternative sources identified. An investigation of the alternative sources is being conducted.</p>	<p>Cost to Heritage or other agencies (CASL funded for \$10,000)</p>

Objective #2: Use the committee as a data collection entity for the consortium, a review body, and a distribution mechanism for outcome data from CASL members and partners.

Lead Person	Collaborating Agencies	Steps to be Taken for Implementation	Status of Steps	Resources/ Budget
Kurz, Hendrix	Committees, components, other agencies	Develop an approach for analyzing and consolidating data for the consortium and its partners	PSAT and activity log data has been reported to the Consortium Board and the Consortium members. Next steps for the use of the data will be discussed at the next Board meeting.	

Objective #4: Develop and collate information on the members of the Consortium and prepare a marketing plan.

Strategy #1: Identify existing information

Strategy #2: Identify needed information

Lead Person	Collaborating Agencies	Steps to be Taken for Implementation	Status of Steps	Resources/ Budget
<p>Kurz</p> <p>Kurz, Hendrix</p> <p>Kurz, Hendrix Kurz, Hendrix, committee members</p>	<p>All Consortium members and staff</p>	<ul style="list-style-type: none"> ▪ Define a consortium member as defined in the by-laws ▪ Prepare a consortium member profile ▪ Collect the profile for all members ▪ Develop a format for presenting the profile, e.g., by committee. 	<p>Initial data to be collected in conjunction with PSAT.</p>	

Objective #5: Collect information for a fatal asthma registry.

Strategy #1: Develop a working relationship with national program

Strategy #2: Develop a working relationship with Washington University sponsor with regard to project implementation

Lead Person	Collaborating Agencies	Steps to be Taken for Implementation	Status of Steps	Resources/ Budget
Sumita Markan-Aurora	Washington University, Dr. Robert Strunk	<ul style="list-style-type: none">▪ Prepare a budget for the project (e.g., personnel, data collection costs, etc.)		\$12,000 Funds provided by the Fatal Asthma Registry (Carlos Camargo, MD)
		<ul style="list-style-type: none">▪ Review the data collection instruments of the national program▪ Establish contact with MDHSS and establish a data availability timeline▪ Collect data based on MDHSS data and other sources		