The California Accountable Communities for Health Initiative (CACHI) was established to spearhead efforts to modernize our health system and build a healthier California. To realize this vision, CACHI utilizes a model known as Accountable Communities for Health (ACH), where multiple sectors align goals and collaborate to address the leading health issues facing our communities.

**PROBLEM:** Significant Asthma Risk Factors Contribute to the Second Highest Rate of Asthma Hospitalizations in California

Imperial County is a rural region in the southeastern corner of California, bordering Mexico to the south, Arizona to the east, Riverside to the north and San Diego to the west. Though Imperial County is a beautiful, unique combination of desert, mountains, agriculture and developed renewable energy sites. Unfortunately, Imperial County also has distinct challenges, disparities and health inequities. Impoverished conditions have created high unemployment and a high dependency on Medi-Cal, with a majority of the population, over 95,000 residents, enrolled. The county holds the second highest youth asthma hospitalization rate in the state and has high rates of obesity. Several risk factors contribute to higher rates of asthma, such as smoking, obesity, poverty and adverse environmental conditions, most of which are prevalent factors in the community.

Although there is no cure for asthma, symptoms can be managed with proper medical treatment, self-care, education and by avoiding allergens. Since so many residents are Medi-Cal participants, it quickly became clear to local leaders that any efforts to reduce chronic disease, link sectors and address social determinants of health would need to begin with innovative approaches to improve the local health care system.

**SOLUTION:** Implement the First-Ever Asthma Community-Clinical Linkages Projects

In 2014, the Imperial County Board of Supervisors created an independent agency, the Imperial County Local Health Authority (LHA) Commission, to help the county implement a state mandate to bring Medi-Cal managed care to rural counties. The Commission is comprised of thirteen leaders from the public and private sectors, representing various sectors of the health system, the public, Medi-Cal beneficiaries and businesses.

The LHA takes an active role in executing multi-sector interventions to address several health issues identified through an ongoing partnership with Medi-Cal managed care health plans and with priorities identified in the Community Health Improvement Plan (CHIP). Of those priorities, asthma was selected as the first health systems change investment.

The LHA adopted the Accountable Communities for Health (ACH) model to help achieve the collaborative efforts necessary to reduce the prevalence of asthma. With a grant from the California Accountable Communities for Health Initiative (CACHI), the LHA was able to hire backbone support staff that was also supported by the Imperial County Public Health Department. Through a contract with the local initiative health plan, the LHA established a Wellness Fund that braids county, CACHI, and other public and private funds to help advance the LHA’s mission to work with community residents and stakeholders in both public and private sectors to implement health care system changes.

It receives significant results-based funds that include per member per month fees (approximately $90,000) and 20% annual revenue sharing (about $1 million per year).

**ACH IN ACTION:** Launching the Asthma Community-Clinical Linkages Project

The LHA committed $1.5 million over three years to comprehensively address asthma and create the Asthma Community-Linkages Project. The county’s two hospitals implemented a standardized protocol for asthma-related ED discharges and established a clinical pathways protocol that requires an action plan by a respiratory therapist, the scheduling of a primary care appointment within 72 hours and a follow-up by an integrated care team that includes home intervention and home education. As a result, doctors are now more accountable and responsive. Repeat ED admittances for asthma-related issues have significantly reduced.

By funding community-based organizations, like Comite Civico del Valle, Inc. and El Centro Regional Medical Center, the ACH was also able to provide in-home care for asthma patients. Staff were sent out into patients’ homes, not just to offer treatment and training, but also to analyze and improve the patient’s asthma environment. The ACH also focused on schools in their quest to reduce the severity and frequency of asthma-related hospital visits.

**NEXT STEPS:** Moving Beyond Asthma

The ACH is expanding its Portfolio of interventions to further address its other priorities, including 5150 Mental Health Management and Adverse Childhood Experiences (ACES), as well as further develop innovations to improve the county’s Medi-Cal Managed Care system and reduce chronic disease.

Learn more at [www.localhealthauthority.org](http://www.localhealthauthority.org).