

HCFA Kicks Off 3rd Year of Community Flu Projects

By Jackie Harley and Diane Wade, RD, LD
Closing the Gap, Adult Immunizations Save Lives • November 1998

In 1912, when the great ship Titanic sank, taking over 1,500 lives, Rachel Hollis was 9 years old. Six years later, when she was 15, the 1918 Spanish Flu pandemic swept around the world, taking more than 22 million lives, many of them young people like herself. Ms. Hollis was taken ill with that flu, but she survived. Now, at 95, the Baltimore, Maryland, senior wants to know if it's okay to get her annual flu shot, since she has diabetes and angina. So she asked her doctor, Elijah Saunders, MD.

Dr. Saunders, a cardiologist at University Hospital in Baltimore, said that Ms. Hollis is exactly the kind of patient who *should* get the flu shot. And thanks to Medicare's preventive benefits available to the aged and disabled, Ms. Hollis will be able to afford her shot.

Berena Reed, another survivor of the 1918 flu epidemic and Baltimore resident, takes her flu shot religiously every year because, as she says, it keeps her healthy. But getting to the clinic has become increasingly more difficult.

Because of people like Ms. Hollis and Ms. Reed, the Health Care Financing Administration (HCFA)—the agency responsible for Medicare, Medicaid, and the Child Health Insurance Program—started the Horizons Program to address issues subsequently identified in the President's initiative to reduce racial and ethnic disparities in health. Established in 1996, the Horizons Program forms partnerships to meet the needs of special populations.

One project within the Horizons Program is the Good Neighbor Flu Project. It joins the resources of HCFA's Central Office with Baltimore City's Action for Community Enrichment and Maryland Partnership for Prevention's annual flu-shot campaigns.

HCFA's first neighborly challenge strives to increase the rate of flu shots among the 40,000 African American Medicare beneficiaries residing in Baltimore. The Good Neighbor Flu Project began when HCFA staff, many of whom had parents and grandparents living in Baltimore, realized they should be "good neighbors" by starting in their own backyards to increase the rate of flu shots.

A specific intervention developed by HCFA staff is a video, "Standing in the Safety Zone," which focuses on survivors of the 1918 influenza pandemic. That pandemic killed over 700,000 people in the U.S., and 4,000 people in Baltimore over a three-month period. Featured in the video are Baltimore Mayor Kurt Schmoke and Emmy award-winning actor André Braugher, along with Ms. Hollis and Dr. Saunders.

HCFA knows that racial and ethnic minorities tend to use preventive services at much lower rates than the majority of the community and has committed itself to meeting the Healthy People 2000 goal of 60 percent flu immunizations for Americans aged 65 and older. According to Ms. Reed, the reasons for not getting the shot may be as simple as transportation. She suggested taking the flu shot to her family. When the Good Neighbor Project made that possible, the whole family got the shot.

The importance of the flu shot increases for people like Ms. Hollis, who are at high risk for complications

such as heart disease, diabetes, and other chronic conditions. The flu shot should be given to such patients in early Fall.

The Good Neighbor Flu Project allows HCFA headquarters staff to put their knowledge and skills on health issues to work within Baltimore. For the past two years, HCFA staff have fostered a unique collaboration between the Baltimore City Health Department, the Delmarva Foundation, and HCFA's Boston Regional Office, Morgan State University, UniversityCARE, and the Maryland Partnership for Prevention, to help Medicare beneficiaries fight the flu.

Through the Good Neighbor Flu Project partnership and coalition-building efforts, the additional multi-focused interventions include reaching out to beneficiaries and physicians, and working in acute and ambulatory care facilities.

Provider-focused interventions include providing doctors and other health care workers with tool kits that contained information on flu shots, such as an information page on ordering the flu vaccine, and a flu fact sheet. It also contains information on how to respond to patients' fears about flu shots, provides lists of pharmaceutical companies which supply vaccines, and provides letters to be sent to patients reminding them to get a flu shot.

Beneficiary-focused interventions include working with church ministers and nurses to provide education and accurate information about flu immunizations to their communities. Together, they conduct face-to-face presentations, and use radio, television and local newspaper public service announcements to promote vaccinations. Other activities include participating in wellness and health clinics and other community fairs, conducting focus groups to identify barriers which prevent seniors from getting immunized, and providing beneficiaries with information about flu and reminders to get the flu shot.

The overall success of the project was attributed to partnerships between the various agencies, the recruiting of volunteers from organizations and nursing schools, and the combination of various interventions. Medicare claims data show immunization rates in Baltimore City increased between 1996 and 1997 from 36.7 to 38.5 percent for Whites, and 17.6 to 18.9 percent for Blacks. In addition, the rates of flu shots administered to African American Medicare beneficiaries in Baltimore increased 2.2 percent during the 1997 flu season, compared to the national rate of .7 percent.

Good Neighbor Flu Project activities for 1998 included a major media kickoff, provider and beneficiary education, and the administering of flu shots in 26 flu clinics in Baltimore City's predominately African American neighborhoods.

The Horizons Pilot Project introduced the first interventions focused solely on African Americans since the beginning of the Peer Review Organizations (PRO) Program. The project also established the first, and so far only, contractual arrangements between HCFA and Historically Black Colleges and Universities (HBCUs).



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The pilot project for the Horizons program formed partnerships between eight PROs and twelve HBCUs. PROs are groups of physicians who work with HCFA to protect Medicare beneficiaries and improve the quality of care.

The PROs and HBCUs implemented intervention strategies during the 1996 flu season, targeting 96,090 African American Medicare beneficiaries in their states. During the 1997 flu season, 566,245 African American Medicare beneficiaries in those states were targeted—80 percent of the African American Medicare population in the eight Horizons states.

Various types of provider interventions were developed for physicians, pharmacists, nurses, hospitals, home health agencies, health centers, and rural health clinics. They also worked with churches to

provide information on flu shots, and they educated school-aged children about the importance of grandparents being protected against the flu.

Both the Good Neighbor Flu Project and the Horizons Pilot Project will use lessons learned from the previous two years to increase the rates of flu shots among African American Medicare beneficiaries for the 1998 flu season. In addition, the lessons learned from these projects will undoubtedly contribute to quality improvement efforts focused on the African American population for other clinical conditions.

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