



Commonwealth OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE

December 21, 2005

CIRCULAR LETTER NUMBER: C-ES-12-1757-2005

TO ALL HEALTH SERVICES ORGANIZATIONS AND DISABILITY INSURERS
AUTHORIZED TO WRITE HEALTH INSURANCE IN PUERTO RICO

**SURVEY OF HEALTH INSURERS REGARDING ACTIVITIES TO PROMOTE
RESPIRATORY HEALTH OF PERSONS WITH ASTHMA**

Dear Sirs and Madams:

The Habilitation Services Division of the Department of Health is gathering information on the activities carried out by insurers to promote the respiratory health of persons with asthma, who are beneficiaries of a health care plan.

The Division has requested the collaboration of the Office of the Commissioner of Insurance, hereinafter "the OCI," for the purpose of obtaining this information from the Disability Insurers and Health Services Organizations that are authorized to write health insurance in Puerto Rico. All Insurers and Organizations notified herein must submit the requested information to the OCI **on or before January 10, 2005**. The form is available on our Web page www.ocs.gobierno.pr under the Circular Letters links. This information shall be filled out and returned to our mailing address and by email to estadisticas@ocs.gobierno.pr.

If you have any questions regarding this request for information, please contact the Statistics Unit at 787-722-8686, extension 2244.

Strict compliance with the provisions of this letter is required.

Very truly yours,

SIGNED

Dorelisse Juarbe-Jiménez
Commissioner of Insurance

**Department of
Assistant Secretary for Prevention and Control of Disease
Habilitation Services Division
Telephone Nos. (787) 274-5672/6861/5660**

**Survey of Health Insurance Companies on Activities
to Promote Respiratory Health of
Persons with Asthma
“Gente Saludable 2010”**

NAME OF THE COMPANY: _____

NAME OF THE PERSON WHO COMPLETED THE QUESTIONNAIRE:

TITLE: _____

DIRECT TELEPHONE NUMBER: _____

FAX: _____

E-MAIL: _____

INTERNET ADDRESS: _____

INSTRUCTIONS:

Answer the following questions as precisely as possible. The information that we gather will help us to gain knowledge of the activities that have been carried out and measure progress in the prevention and reduction of morbidity and mortality due to asthma in Puerto Rico. The period of time covered by the report is July 2004 to June 2005.

In this questionnaire data is also requested on hospitalizations and visits to emergency rooms due to asthma, distributed in three age groups: under 5 years old, 5-64, and 65 and older. This data will help us to identify trends in the utilization of services and morbidity due to asthma. This data is requested for calendar years 2002, 2003, and 2004.

Thank you for participating in this survey. Your information is very valuable.

QUESTIONNAIRE ON ACTIVITIES

1. Have you distributed the guidelines for the management and control of asthma in **children** to the primary physicians?

YES (Complete the following table)

NO (Go to **Question 2**)

Date (month and year)	Number of primary physicians	Department Responsible at the Insurance Company	Comments

2. Have you distributed the guidelines for the management and control of asthma in **adults** to the primary physicians?

YES (Complete the following table)

NO (Go to **question 3**)

Date (month and year)	Number of primary physicians	Department Responsible at the Insurance Company	Comments

8. Is follow-up done on primary physicians and other health professionals to evaluate compliance with the guidelines for the management and control of asthma?

YES NO

9. Does the insurer have a database on:

- a. patients with asthma? YES NO
- b. utilization of services? YES NO

10. Does the insurer analyze the data from the previous question (#9)?

YES NO

11. Does the insurer determine the educational needs about asthma for the patients and their families?

YES How? _____
 NO

12. Have you carried out educational activities for the patients with asthma and their families?

YES (Complete the following table)
 NO (Go to **Question 13**)

Activity	Date (month and year)	Population impacted	Number of participants	Place	Resource	Department Responsible at the Insurance Company

13. Does the insurer have printed educational materials on asthma for patients with asthma?

___ YES (Complete the following table)

___ NO (Go to **Question 14**)

Kind of educational materials	Population to which it is directed	Method distribution	Date on which distributed (month and year)	Department Responsible at the Insurance Company

14. Does the insurer require that physicians classify patients with asthma by level of severity?

___ YES

___ NO (Go to the **Question 16**)

15. What criteria does the physician use to classify patients by level of severity?

Questions related to the utilization of the asthma guidelines:

16. Does the insurer have any mechanism to know if the persons with asthma...

	YES	NO	KIND OF MECHANISM(S)	Percentage of persons (if survey please write "n" and the number of persons that answered affirmatively)
16a... receive a written plan from the provider about appropriate management of asthma?				
16b... receive instructions on how to use prescribed inhalers appropriately?				
16c...receive education on how to recognize the signs and symptoms of asthmatic episodes and how to respond to them appropriately, including the instructions for using the peak flow meter with patients that use daily therapy?				
16d...receive a medication regime that prevents the need for more than one canister of short-acting inhaled beta agonist per month for relief of symptoms?				
16e...receive follow-up medical care for long-term management after hospitalization for asthma?				
16f... receive assistance to evaluate and reduce exposure to environmental risk factors in the home, at school, and at work?				

17. Does the insurer carry out any other activity related to asthma?

**QUESTIONNAIRE ON UTILIZATION DATA FOR PATIENTS
WITH HEALTH INSURANCE**

To measure the utilization of services by patients with asthma who have health insurance, the following information is requested for calendar years 2002, 2003, and 2004:

I. Number of hospitalizations due to asthma

Age group	Number of hospitalizations for asthma		
	2002	2003	2004
Under 5 years old			
5-64			
65 and older			

II. Number of visits to emergency rooms due to asthma

Age group	Number of visits to emergency rooms due to asthma		
	2002	2003	2004
Under 5 years old			
5-64			
65 and older			

III. Number of insureds with asthma

Age group	Number of insureds with asthma		
	2002	2003	2004
Under 5 years old			
5-64			
65 and older			

IV. Number of insureds

Age group	Number of insureds		
	2002	2003	2004
Under 5 years old			
5-64			
65 and older			

Please respond by email on or before December 15, 2005 to:

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