

**Project Background:** Approximately 22 million Americans have asthma, of whom six million are children. Since 1991, the National Heart, Lung and Blood Institute's [National Asthma Education and Prevention Program \(NAEPP\) Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma \(EPR-3\)](#) and similar expert documents, including the [Guide to Community Preventive Services](#), have defined evidence-based best practices for what is needed to reduce the disease burden for patients living with asthma.

Asthma rates are disproportionately high in low-income and minority populations, especially among African Americans and Puerto Ricans. Low-income children and adults are more likely to be hospitalized for asthma than those with higher incomes. Children with Medicaid were almost 50 percent more likely to receive care in the emergency department than those not on Medicaid. Adding to the challenges Medicaid enrollees face, this population is more likely to have low health literacy, making it more difficult for them to manage their asthma or other chronic diseases.

Numerous studies and pilot programs have demonstrated that adherence to guidelines-based care results in better patient outcomes. In 2015, the American Lung Association launched its Asthma Care Coverage Project to determine to what extent seven key elements of guidelines-based care, detailed below, are being covered by state Medicaid programs.

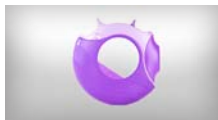
**Icon legend:** ✓ = Covered    ▼ = Coverage varies by plan    ✗ = Not covered    N/A = Not Applicable

**Quick Relief Medications:** Fast acting or quick relief medications are taken to provide immediate relief from the narrowing of airways in lungs and other acute symptoms of asthma.



Quick Relief Medications	Covered?	Barriers?
<b>SABA</b>		
Albuterol Sulfate	✓	Yes
Levalbuterol	▼	Yes
<b>Anticholinergics</b>		
Ipratropium	✓	No
Ipratropium with Albuterol	✓	No

**Controller Medications:** Control medications that need to be taken daily on a long-term basis to control persistent asthma.



Controller Medications	Covered?	Barriers?
<b>Inhaled Corticosteroids</b>		
Budesonide (Nebulized)	✓	Yes
Beclomethasone	▼	No
Ciclesonide	▼	Yes
Flunisolide	▼	Yes
Fluticasone propionate	▼	No
Mometasone furoate	✓	No
<b>Systemic Corticosteroids</b>		
Methylprednisolone	✓	No
Prednisolone	✓	No
Prednisone	✓	No
<b>LABA</b>		
Formoterol fumarate	▼	Yes
Salmeterol xinafoate	✓	Yes
<b>Combined Medications</b>		
Fluticasone propionate and Salmeterol	▼	Yes
Mometasone furoate and Formoterol fumarate	✓	Yes
Budesonide and Formoterol fumarate	▼	Yes
<b>Cromolyn</b>		
Cromolyn	▼	Yes
<b>Leukotriene Receptor Antagonists</b>		
Montelukast	✓	Yes
Zafirlukast	▼	Yes
<b>5-Lipoxygenase Inhibitor</b>		
Zileuton	▼	Yes
<b>Methylxanthines</b>		
Theophylline	▼	No
<b>Immunomodulators</b>		
Omalizumab	▼	Yes

**Devices:** An additional appliance/accessory sometimes used to properly administer asthma medication. (Please note: there is a distinction between spacers and valved-holding chambers. The data collected focuses only on valved-holding chambers and not spacers).



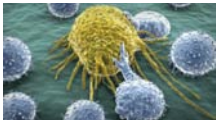
<b>Devices</b>	<b>Covered?</b>	<b>Barriers?</b>
Nebulizer	✓	Yes
Peak-flow meter	✓	Yes
Valved-holding chambers	✓	Yes

**Allergen Testing:** An assessment of sensitivity to allergens with skin or in vitro (blood) testing for patients with persistent asthma.



<b>Allergen Testing</b>	<b>Covered?</b>	<b>Barriers?</b>
Skin testing	✓	Yes
In vitro testing	✓	Yes

**Allergen Immunotherapy:** For asthma patients with known allergen sensitivities (determined by an allergen test) and whose symptoms cannot be controlled by medication.



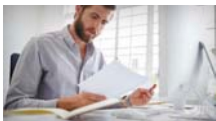
<b>Allergen Immunotherapy</b>	<b>Covered?</b>	<b>Barriers?</b>
	✓	Yes

**Home Visits:** Home visits and interventions are comprised of three components: education, assessment and intervention. Interventions address the home environment, at least two components and at least two other asthma triggers (smoke, mold, pests, pets, etc.).



<b>Home Visit and Intervention</b>	<b>Covered?</b>	<b>Barriers?</b>
	✓	No

**Self-Management Education:** Providing education and instructions on ways to self-monitor asthma symptoms. (Please note: disease management programs are not considered here as self-management education).



<b>Self-Management Education</b>	<b>Covered?</b>	<b>Barriers?</b>
	✓	No

As part of the Asthma Care Coverage Project, the American Lung Association also tracks barriers, or impediments to guidelines-based care. More information about the barriers tracked as part of this Project can be found at [Lung.org/asthma-care-coverage](http://Lung.org/asthma-care-coverage).

Data Last Updated: 6/8/16

For more information, please visit [Lung.org/asthma-care-coverage](http://Lung.org/asthma-care-coverage) or contact us at [Asthmacare@lung.org](mailto:Asthmacare@lung.org).