

Asthma Among Adult Medicaid Members: Health Seeking Behaviors

Report Highlights

- **Adult Medicaid members experience asthma twice as frequently as the total Montana adult population.**
- **Adult Medicaid members with asthma report delaying care more frequently than people without asthma.**
- **Montana Medicaid covers a wide variety of asthma-related services.**

Upcoming Events

Montana Asthma Advisory Group meeting– August 25th
Helena, MT

Montana Diabetes Annual Conference– October 5th-6th
Bozeman, MT

Montana Asthma Control Program

1400 E Broadway
Helena, Montana 59620-2951
<http://www.dphhs.mt.gov/asthma>

Access to Asthma-related Healthcare

With the expansion of Medicaid in Montana in 2016, the number of newly insured has increased in the state. As of May, 2017, over 77,000 Montanans have newly signed up to receive health insurance. For many people, this may be the first time obtaining health insurance and they may be unaware of benefits or how the healthcare system works. Data show that people accessing health insurance via the Federal Marketplace frequently do not understand common insurance terms like premium, copayment, deductible, etc.¹

About one in ten (11%) US adults aged 18-64 years with a chronic condition reported delaying care due to cost and about the same percentage delayed care due to a non-cost related issue.² The percentage is even higher (17% and 20%, respectively) for those with two or more chronic conditions. Regular healthcare for the maintenance of asthma control is a central point of the Expert Panel Report (EPR) 3's Asthma Guidelines.³ The Guidelines recommend a regular visit with a healthcare provider at least every 6 months and more frequently in the case of uncontrolled asthma or other specific situations. People with asthma should not delay care at the risk of severe exacerbation.

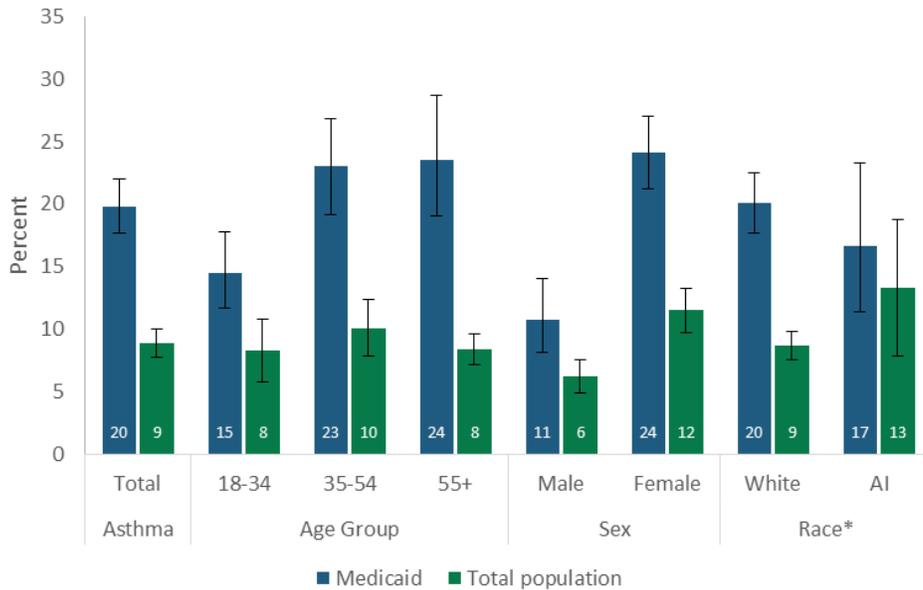
This report examines the prevalence of asthma among adults enrolled in Montana Medicaid compared with the total Montana population and reports common reasons for delaying care among Medicaid members with asthma. Asthma services covered by Montana Medicaid are also reported.

Methods

- To estimate the prevalence of asthma among Montana Medicaid members, the Montana Chronic Disease Prevention and Health Promotion Bureau in partnership with Montana Medicaid, conducted a survey in 2015 of adult Medicaid members about specific health behaviors. Adults aged 18-64 years were asked about health seeking behaviors, experience with chronic disease, access to services including transportation, and housing. This survey was phone based with a final sample of 1,653 completing the survey. This survey precluded Medicaid expansion and did not include any respondents eligible for Medicaid through the Health and Economic Livelihood Partnership (HELP) act, which led to increased access of health insurance via Medicaid for Montanans. Results may not be generalizable to that population.
- The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based survey of noninstitutionalized adults aged 18 years and older who are asked about health risks and behaviors. Current asthma is defined as a "yes" response to "Has a doctor, nurse, or other health professional ever said that you have asthma?" and "Do you still have asthma?"
- To describe services covered by Montana Medicaid, a project in partnership with the American Lung Association and Montana Medicaid assessed covered medications, devices, and services related to asthma in the Spring of 2017. For full explanation of this project go to: www.lung.org/asthma-care-coverage

Asthma Among Adult Medicaid Members

Figure 1. Percent of Montana adults (Medicaid only vs Total Population[‡]) with asthma by selected characteristics



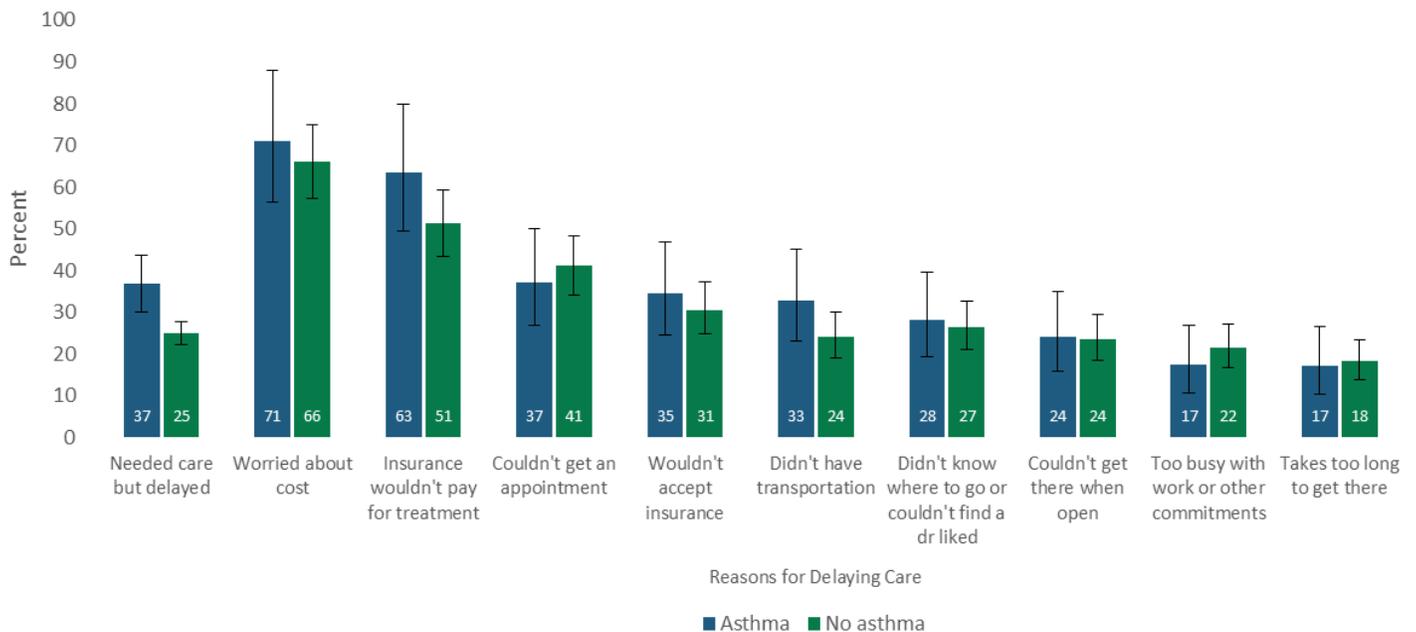
Data source: Chronic Disease Medicaid Survey and BRFSS, 2015

[‡] Total population includes adults enrolled in Medicaid

* Other races are not reported due to statistical unreliability. Due to the high percentage of American Indians who are enrolled in Medicaid, the total population is likely mostly made up of those enrolled in Medicaid.

- The prevalence of asthma is twice as high among adult Medicaid members than the total population of Montana. (Figure 1)
- Asthma was significantly more prevalent among adult Montana Medicaid members aged 35 years and older and females. (Figure 1)
- Over one in three (37%) Montana Medicaid members with asthma said that they needed care but delayed due to various reasons. This percent was significantly higher than those without asthma (25%). (Figure 2)
- The most common reasons reported for delaying care among adult Montana Medicaid members with asthma were being worried about cost and insurance not covering the treatment. These reasons were the same for people without asthma. (Figure 2)

Figure 2. Percent of adult Medicaid members who needed care but delayed by asthma status and reason



Data source: Chronic Disease Medicaid Survey, 2015

Table. Asthma-related medications, devices, and services covered by Montana Medicaid, 2017

	Covered?	Barriers?
SABA		
Albuterol Sulfate	Y	
Levalbuterol	Y	3
Anticholinergics		
Ipratropium	Y	3
Ipratropium with Albuterol	Y	3
Inhaled Corticosteroids		
Budesonide (Nebulized)	Y	
Beclomethasone	Y	
Ciclesonide	Y	3,6
Fluticasone propionate	Y	
Mometasone furoate	Y	
Systemic Corticosteroids		
Methylprednisolone	Y	
Prednisolone	Y	
Prednisone	Y	
LABA		
Salmeterol xinafoate	Y	
Combined Medications		
Fluticasone propionate and Salmeterol	Y	
Mometasone furoate and Formoterol fumarate	Y	
Budesonide and Formoterol fumarate	Y	
Cromolyn		
Cromolyn	Y	
Leukotriene Receptor Antagonists		
Montelukast	Y	
Zafirlukast	Y	
5-Lipoxygenase Inhibitor		
Zileuton	N	
Methylxanthines		
Theophylline	Y	
Immunomodulators		
Omalizumab	Y	
Devices		
Nebulizer	Y	4
Peak-flow meter	Y	4
Valved-holding chambers	Y	1,4
Allergen Testing		
Skin testing	Y	3
In vitro testing	Y	3
Allergen Immunotherapy	Y	3
Home Visit and Intervention	N	
Self-Management Education	Y	
Tobacco Cessation Medications	Y	

Asthma Benefit Coverage

- The table on the left lists many asthma-related medications, durable medical equipment (DME), and services. Most of these items are covered by Montana Medicaid.
- Many items are covered without any barriers to access. The most common barrier is a co-pay (\$4 for generic or preferred, \$8 for others).

These barriers were assessed for this report:

- 1: Age Limit**— indicates a medication is only covered if a patient is under a certain age.
- 2: Age Restriction**— indicates a medication is only covered if a patient is over a certain age
- 3: Copayment**— fee a patient is responsible for in order to get the treatment
- 4: Durable Medical Equipment**— indicates the treatment or medication is only available under the DME benefit
- 5: Eligibility Criteria**— indicates a patient needs to meet certain criteria before the patient receives a treatment or service
- 6: Prior Authorization**— indicates that in order for a patient to receive a treatment or service, it must first be approved by a patient's plan
- 7: Quantity Limit**— limits the amount of services or medication that patient can have during a specified amount of time
- 8: Specialty Visit Limitation**— indicates that services can only be accessed through a specialist and specialty visits are limited to a set number during the course of a year
- 9: Stepped Therapy**— indicates that a treatment or service can be received only after other type of therapy has been tried.

References

1. http://hrms.urban.org/briefs/hrms_literacy.html
2. National Center for Health Statistics Data Brief, No . 275, March 2017 Available at: <https://www.cdc.gov/nchs/data/databriefs/db275.pdf>
3. National Heart, Lung, Blood Institute Expert Panel Report 3 on Asthma Guidelines., 2007 Available at: <https://www.nhlbi.nih.gov/health-pro/guidelines/current/asthma-guidelines>



1400 E Broadway
Helena, MT 59620-2951

RETURN SERVICE
REQUESTED

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE
PAID
HELENA, MT
PERMIT NO. 89

For more information contact:

Sarah Brokaw
(406) 444-9154
sbrokaw@mt.gov

Clinical Recommendations

- Consider specific medications and treatments for Medicaid members that are preferred for payment by Montana Medicaid.
- Discuss with patients the importance of regular asthma care and to not delay care.
- Consult with patients on differences in asthma medications and how and when to use each type.
- Refer patients to a patient navigator to help determine eligibility and/or benefits.
- Access provider assistance at:
<http://medicaidprovider.mt.gov> or
1-800-624-3958.

Report Highlights: Asthma Among Medicaid Members

- **Adult Medicaid members experience asthma twice as frequently as the total Montana adult population.**
- **Adult Medicaid members with asthma report delaying care more frequently than Montana Medicaid members without asthma.**
- **Montana Medicaid covers a wide variety of asthma-related services.**

DPHHS complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-406-444-1386 (TTY: 1-800-833-8503).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-406-444-1386 (TTY: 1-800-833-8503).

3,650 copies of this public document were published at an estimated cost of \$0.266 per copy, for a total cost of \$970.90, which includes \$970.90 for printing and \$0.00 for distribution. This publication was supported by the Cooperative Agreement Number CDC-RFA-EH14-1404 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.