



Asthma

National Asthma Education Prevention Program (NAEPP)

Important Points to Remember

More than 22 million Americans have asthma. With an estimated 6 million children in the United States diagnosed with this disease, asthma is one of the most common chronic diseases of childhood. The National Heart, Lung and Blood Institute Clinical Practice Guidelines provide recommendations for the diagnosis and management of asthma.

Humana – CareSource® works to educate our members with asthma on the importance of self-management, medication compliance and smoking cessation. Below are some key clinical activities for the diagnosis and management of asthma:

Diagnosis

- Establish asthma diagnosis using medical history and physical examination.
- Use of spirometry in patients 5 and older to establish reversibility of airway obstruction.
- Consider alternative causes of airway obstruction.

Long-Term Management

Goal for therapy is to control asthma

- Reduce impairment and prevent chronic symptoms. Require infrequent use of short-acting beta2-agonist (SABA) (less than or equal to twice a week) and maintain normal or near normal lung function and normal activity levels.
- Reduce risk of exacerbations and minimize need for emergency room care or hospitalization.
- Prevent loss of lung function, and for children, prevent reduced lung growth and have minimal or no adverse effects of therapy.
- Review indications and adherence for long-term control therapy.

COMPONENTS OF CARE:

1. Assessment and Monitoring

- Assess asthma severity to initiate therapy.
- Identify episodic signs and symptoms.
- Assess response to medication and asthma control to monitor and adjust therapy.
- Schedule follow-up care.

2. Education

- With patient, develop self-management plan and ensure understanding.
- Develop a written asthma action plan for patient, parent/caregiver and school.
- Educate patient on taking prescribed medications correctly.
- Integrate education into all points of care.

3. Control Environmental Factors and Co-Morbid Conditions

- Recommend measures to control exposures to allergens and pollutants or irritants that make asthma worse (triggers).
- Advise smoking cessation and eliminate exposure to secondhand smoke.
- Treat co-morbid conditions and develop a self-management plan.

4. Medications

- Select medication therapy and delivery devices to meet patients' needs and circumstances (use stepwise approach). Inhaled corticosteroids are the most effective long-term control therapy for asthma that is not well-controlled.

5. Home Management

- Incorporate assessment and monitoring, patient education, environmental control and medication adherence
- Ensure patient is knowledgeable of the importance of medication adherence
- Incorporate written asthma action plan

METRIC INFORMATION

Patient demographic includes patients five to 85 years of age who identify as having persistent asthma.

To be considered compliant, asthmatics patients must show evidence of the following:

- Having a ratio of controller medications to total asthma medications of more than 0.50 during treatment period
- Remain on asthma controller medication for at least 75 percent of treatment period

The NAEPP Education and Prevention Guidelines for the Diagnosis and Management of Asthma is the source document for this information and can be accessed at: <http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.pdf>

Care Management Referral Contact Information

1-866-206-0272

Nurse Advice Line, Available 24/7

1-866-206-9599

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