Barriers to Accessing Asthma Care

Asthma remains one of the most prevalent respiratory diseases in the United States, affecting more than **28 million** Americans.[1] While advances in diagnostic tools and treatment options such as biologics and inhalers have provided patients with new opportunities for better disease management, health plan barriers have prevented patients from accessing advanced asthma care. Increasing awareness of innovative treatment options and the barriers that stand in the way are needed to improve access to patient-centered care.

Utilization Management as a Barrier to Care

Utilization management practices create significant barriers for respiratory patients seeking clinically-driven, timely care.

Excessive prior authorization delays necessary treatment by burdening clinicians with insurer approval processes, potentially denying access to advanced therapies. With **9 to 11** Americans dying from asthma each day, timely access to appropriate care is critical.[2]

Step therapy forces patients to try and fail insurer-preferred medications before accessing the treatment their clinician deemed appropriate. It is especially prevalent among biologics that target specific inflammation pathways. This practice causes treatment delays for the millions of patients with uncontrolled asthma, resulting in **millions** of emergency room visits and hospitalizations reported each year.[3]

Non-medical switching forces clinically stable patients to switch from their prescribed medications to insurer-preferred options for cost-saving purposes.

Patient Cost and Affordability

Advances in biologic therapies have provided more targeted care for patients with asthma. However, out-of-pocket costs including copays, coinsurance and other cost-sharing requirements can create significant barriers to accessing these advanced treatment options, particularly for patients with severe asthma. The medical costs are nearly three times higher than for milder cases.[4]

Unexpected costs from copay accumulator programs prevent patients from accessing financial assistance resources, forcing patients to choose between their medication or other necessities. One out of six asthma patients reported skipping their medication due to costs.[5]

Policy Solutions

Although asthma is a chronic condition, its symptoms can be managed with access to the appropriate treatments. Utilization management practices can delay or limit patients' access to clinically-driven therapies, increasing the risk of preventable respiratory events. Effective policy should prioritize patient access by:

- Requiring prior authorization and step therapy protocols to be based on clinical evidence.
- Banning non-medical switching practices that force stable patients off medication that works for them.
- Addressing affordability challenges by reducing patient cost-sharing requirements that limit access to asthma treatments.
- Protecting clinician-patient relationships by ensuring clinical judgment makes treatment decisions instead of utilization management practices.

Sources

1. Asthma Statistics. Allergy & Asthma Network. April 30, 2020. Accessed August 27, 2026. https://allergyasthmanetwork.org/asthma/asthma-statistics/
2. Asthma and Allergy Foundation of America. (2025). Asthma facts and figures. https://aafa.org/wp-content/uploads/2025/04/aafa-asthma-facts-and-figures-1.pdf
3. Asthma and Allergy Foundation of America. (n.d.). Asthma facts. https://aafa.org/asthma/asthma-facts/
4. Centers for Disease Control and Prevention. (n.d.). Asthma-related healthcare use. https://www.cdc.gov/asthma/national-surveillance-data/healthcare-use.htm
5. Hung CT, Erickson SR, Wu CH. Cost-related non-adherence to medications among adults with asthma in the USA, 2011–2022. Thorax. 2024. https://doi.org/10.1136/thorax-2024-222662
6. Song, H. J., Blake, K. V., Wilson, D. L., Winterstein, A. G., & Park, H. (2020). Medical costs and productivity loss due to mild, moderate, and severe asthma in the United States. Journal of Asthma and Allergy, 13, 545–555. https://doi.org/10.2147/JAA.S272681