Smokefree Multi-Unit Housing

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Smokefree Housing

Lung Association has been working with Dept of Housing & Urban Development (HUD) on voluntary efforts to make all federally subsidized housing smokefree

http://
portal.hud.gov/
hudportal/
HUD?src=/
smokefreetoolki



Smokefree Policies in Multi-Unit Housing: Steps for Success

Are you interested in how to make your apartment building smokefree?

Wondering how to educate and

mobilize

This online curriculum is designed to give property managers, residents and public health advocates the knowledge and skills they need to enact smokefree air policies in multi-unit housing properties such as apartments and condominiums across the nation.

Smokefreehousing

State Medicaid Coverage for Guidelines-Based Asthma Care

Background on NAEPP Guidelines

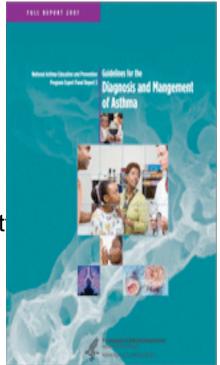
What are the NAEPP Guidelines?

 National Heart, Lung & Blood Institute's National Asthma Education and Prevention Program (NAEPP)

Most recently updated in 2007

Four Components of 2007 NAEPP Guidelines

- Assessment and Monitoring
- Control of Factors Contributing to Asthma Severit
- Education for a Partnership in Asthma Care
- Pharmacological Treatment



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In Practice: Coverage for Guidelines-Based Asthma Care

Allergy testing for people with persistent asthma

Skin or blood testing to determine any allergens

Daily Maintenance Medications

To reduce the risk of an asthma attack

Fast Acting

In Practice: Coverage for Guidelines-Based Asthma Care

Home Visits and Interventions

Specifics?

Asthma Self-Management Education

Other??

Access to Care...Without Barriers

Barriers

Common Barrier	Potential Problem
Prior Authorization – Needing to get approval from Medicaid or the insurance company to use the medication	Causes a delay before the patient can receive the medication they need. Can result in an initial denial at the pharmacy creating confusion.
Quantity Limits – Patient is only allowed to have one inhaler/ supply of medication at a time	Especially problematic for children who often need to have multiple inhalers for school, the babysitter's and home.
Co-Pays – Out of pocket payment made by the patient	The Medicaid population is by definition poor and cannot afford the most minimal copay. Could result in skipping medication.
Stepped Care Therapy – Patient needs to try and fail at a similar medication before being able to access the medication	Can result in multiple doctor's appointments or a patient not controlling their asthma as well as it could be controlled, because they are not on the best medication for controlling their asthma.

Key Goal:

Increase access to guidelines-based care to improve patient outcomes

Coverage for treatments

Minimal barriers to access medications

Clarity in coverage

Data will be available in spring, 2016



Our Credo

We will breathe easier when the air in every American community is clean and healthy.

We will breathe easier when people are free from the addictive grip of tobacco and the debilitating effects of lung disease.

We will breathe easier when the air in our public spaces and workplaces is clear of secondhand smoke.

We will breathe easier when children no longer battle airborne poisons or fear an asthma attack.

Until then, we are fighting for air.

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