

June 12, 2025

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Michigan Department of Health and Human Services
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Submitted to: MDHHSCommonFormulary@michigan.gov

Dear Ms. VanCamp:

Thank you for the opportunity to submit written comments on the Michigan Medicaid common formulary. We are writing on behalf of AAFA, the Asthma and Allergy Foundation of America, the leading patient organization for people with asthma and allergies and the oldest asthma and allergy patient group in the world and the AAFA Michigan Chapter. AAFA's mission is to save lives and reduce the burden of disease for people with asthma and allergies through support, advocacy, education and research.

Due to the severe impact of asthma across the state of Michigan, and the importance of access to a range of treatment options, we are writing to strongly urge the committee to include all immunomodulator drugs for asthma on the preferred drug list.

In 2022, 11.9% of all adults in Michigan were living with asthma, the eighth highest rate in the country.¹ Nearly 7 percent of Michigan's children are also living with asthma.² Of particular importance to the Medicaid program, asthma in Michigan is also most

¹ American Lung Association, Current Asthma Demographics. Available at https://www.lung.org/research/trends-in-lung-disease/asthma-trends-brief/current-demographics.

² Id.



prevalent among the lowest household income population (<\$20,000).³ Asthma disproportionately harms Black people in Michigan, who experience a prevalence of 15.9% compared to white non-Hispanics (10.6%), Hispanics (10.1%) and other non-Hispanic races (10.3%), and have an asthma hospitalization rate about five times higher than whites (20.5 per 10,000 compared to whites 3.8 per 10,000).⁴

For many patients with mild asthma, routine medications can keep the disease in check and prevent hospitalizations or other serious complications. Moderate-to-severe asthma, however, can be extremely hard to treat. The relatively recent emergence of newer biologics that target the immunological pathway in asthma patients has created new opportunities for effective control of asthma.

These immunomodulators for asthma should be on the preferred drug list and should not be subject to step therapy or prior authorization requirements. "Fail first" policies or other such steps delay getting the appropriate care to patients who need these medications, potentially leading to further asthma attacks and complications.

Because different people with asthma respond better to different drugs, their healthcare providers should be able to swiftly and efficiently prescribe the medication that they think will best improve their health status. Prior authorization and step therapy requirements can result in unnecessary delays and ultimately as a deterrent to prescriptions, potentially putting these crucial drugs entirely out of reach for patients whose providers lack the bandwidth or staff to process prior authorization requests.

AAFA is very aware that these new drugs – like many drugs and devices in our healthcare system – are costly. It is a priority for our organization to address the high cost of drugs, particularly ensuring that costs do not hinder patient access. However, putting prior authorization or step therapy requirements on immunomodulators for

https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/Asthma/MI_Asthma_Plan_Final.pdf?rev=9f2d75bd5915453085441426b62c06de

³ Asthma Initiative of Michigan and Michigan Department of Health and Human Services, "Asthma in Michigan 2020-2025: Plans for Action." Available at

⁴ Id.



asthma is not the right way to save funds. It will negatively impact health in a treatment area where low barriers to accessing these important treatments are crucial.

Thank you for your time and attention.

Sincerely,

Kenneth Mendez

Kenneth Mendez

President and Chief Executive Officer

Asthma and Allergy Foundation of America

Kathleen Slonager, RN, AE-C, CCH

Executive Director

Asthma and Allergy Foundation of America - Michigan Chapter