Asthma and Allergy Foundation of America

May 28, 2026

District of Columbia Pharmacy and Therapeutics Committee
RE: Immunomodulators, Asthma, June 4 Board Meeting
Submitted to: charlene.fairfax@dc.gov

Dear Committee Members:

I am writing on behalf of the Asthma and Allergy Foundation of America (AAFA), the leading patient organization for people with asthma and allergies and the oldest asthma and allergy patient group in the world. 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. We understand that at the June 4, 2026, Pharmacy and Therapeutics Committee Meeting, the board will be reviewing Immunomodulators for asthma, among other classes of drugs. Thank you for the opportunity to submit written comments in advance of this discussion.

Due to the severe impact of asthma across the District, and the importance of access to a range of treatment options, AAFA strongly urges the committee to include all immunomodulator drugs for asthma on the preferred drug list.

Asthma in Washington, D.C.

- According to the latest CDC data, in 2021, over 64,000 adults in D.C., about one in nine, were living with asthma.[1]
- Current asthma prevalence among children in D.C. is also higher than the national average.[2]
- Data show a decline in childhood asthma-related emergency department (ED) visits from 2017 to 2020. However, between 2021 to 2022, childhood asthma related ED visit rates increased from 1542.5 to 1948.6/100,000.[3]
- In our annual analysis on "Asthma Capitals," AAFA ranks cities in the United States based on asthma prevalence, emergency department visits for asthma, and deaths due to asthma. Unfortunately, in 2025, D.C. was represented in our analysis of the places where asthma is hardest to live, ranking #31, with a crude asthma death rate higher than the national average.[4]

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[1] Centers for Disease Control and Prevention, Most Recent Asthma State or Territory Data, found at: https://www.cdc.gov/asthma/most_recent_data_states.htm
[2] CDC. (2021). BRFSS Prevalence Data. Retrieved from https://www.cdc.gov/asthma/brfss/default.htm
[3] CPPE. (2022). DCHA Inpatient and Outpatient Hospital Discharge Data, Data Management and Analysis Division, Center for Policy, Planning and Evaluation, D.C. Department of Health.
[4] AAFA, "Asthma Capitals: The Most Challenging Places to Live with Asthma" (2025). Available at https://aafa.org/wp-content/uploads/2025/09/aafa-2025-asthma-capitals-report.pdf

Asthma and Allergy Foundation of America

The Importance of Access to Medications

- 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 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