What Is the Impact of Insurance Status and the Affordable Care Act (ACA) on Asthma-Related Outcomes for Individuals With Low Income?

**STUDY DESIGN**

Pooled, *cross-sectional, observational study* using National Health Interview Survey data from 2011-2013 and 2016-2018 (pre- and post-ACA)

Included 4,043 observations in individuals with asthma and low income

**RESULTS**

Overall, *having health insurance* correlated with *improved asthma outcomes*

The *ACA resulted in significant changes in insurance status* but *no significant change in asthma outcomes*

In *low-income individuals*, *cost barriers to both physician visits and medications persisted* in the insured

<table>
<thead>
<tr>
<th></th>
<th>Pre-ACA</th>
<th>Post-ACA</th>
<th>P value</th>
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</thead>
<tbody>
<tr>
<td>Physician Visits</td>
<td>44.1% (41.2-47.1)</td>
<td>30.6% (27.6-33.8)</td>
<td>&lt; .001</td>
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<tr>
<td>Medications</td>
<td>31.5% (28.9-34.1)</td>
<td>21.9% (19.5-24.6)</td>
<td>&lt; .001</td>
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</tbody>
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Insurance coverage is associated with improved asthma control for adults in low socioeconomic households. The ACA reduced the rates of uninsured but did not have the same magnitude of effect on reducing cost barriers or improving health outcomes.

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