

Measure #7: Asthma Action Plan

Asthma

Measure Description

Percentage of patients aged 5 years and older with a diagnosis of asthma who received a written asthma action plan at one or more visits during the measurement period

Measure Components

Numerator Statement	Patients who received a written asthma action plan* at one or more visits during the measurement period *The written asthma action plan can be symptom-based or peak-flow based and must include: 1. Instructions regarding daily management and use of asthma control medications AND 2. Instructions for recognizing and handling worsening asthma, including self-adjustment of medications in response to acute symptoms or changes in Peak Expiratory Flow (PEF) measures. See NHLBI/NAEPP Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma for sample asthma action plans
Denominator Statement	All patients aged 5 years and older with a diagnosis of asthma
Denominator Exclusion(s)	None
Denominator Exception(s)	None
Supporting Guideline	The following evidence statements are quoted <u>verbatim</u> from the referenced clinical guidelines. NHLBI/NAEPP Expert Panel Report 3: Guidelines for the Diagnosis and Management of Asthma⁴ The Expert Panel recommends: Provide all patients with a written asthma action plan that includes two aspects: (1) daily management and (2) how to recognize and handle worsening asthma. Provide to all patients a written asthma action plan based on signs and symptoms and/or PEF; written action plans are particularly recommended for patients who have moderate or severe persistent asthma, a history of severe exacerbations, or poorly controlled asthma (Evidence B). Every patient who has asthma should be taught to recognize symptom patterns that indicate inadequate asthma control (Evidence A) Either symptom and/or PEF monitoring should be used as a means to determine the need for intervention, including additional medication, in the context of a written asthma action plan.

Measure Importance

Relationship to desired outcome	Self-management is an important aspect of daily and emergency asthma care. The goal of asthma self-management asthma control and the prevention of asthma exacerbations. Written asthma action plans provide instruction on the appropriate use of medications and identifying and avoiding exposure to asthma triggers. There is evidence that provision of a written action plan significantly increases patient adherence to treatment and asthma control and physicians' recommendations for management and medical follow-up.¹⁷
Opportunity for Improvement	National guidelines for treatment of asthma include recommendations for providing written asthma action plans. However, the use of asthma action plans may be limited in clinical practice. One study found that 74% of patients with controlled asthma and 65% of patients with uncontrolled asthma reported never received an asthma action plan.¹⁸ A 2009 Asthma Insight and Management survey found that half of physicians prepared a written action plan for all or most of their patients. A lower percentage (32%) of patients reported ever having received a written asthma action plan from their physician.⁷
Exception Justification	This measure has no exceptions.
Harmonization with Existing Measures	There are no existing performance measures at the individual provider or system levels that address provision of a written asthma action plan.

Measure Designation

Measure purpose	Quality Improvement Accountability
Type of measure	Process
Care setting	Ambulatory Care: Clinician Office Clinic
Data source	Registry Electronic Health Record System

7/20/2026