

EHP Healthy Choice Coordinated Care Asthma Medication Reimbursement List

Below, please find a list of medications that are able to be reimbursed as part of this EHP Healthy Choice Coordinated Care program for members who qualify for reimbursement. Medications are categorized below by their availability as a brand or generic. Medications that are generically available will only be eligible for copay/co-insurance reimbursement when the generic medication is filled, unless members have a prior authorization from the EHP Pharmacy Management department on file for the brand medication. **If a brand medication recently becomes available as generic, members will be notified of an effective date that the brand formulation will no longer be reimbursable. Before that effective date, if a member or physician requests a brand name drug be dispensed when a generic is available, the member is required to pay the generic co-insurance AND the cost difference between the brand name drug price and the generic drug price. The cost difference is known as a DAW penalty. When a DAW penalty is applied it will not be reimbursed. Medications that require prior authorization will have (PA) listed after the name of the medication.** To qualify for pharmacy reimbursement, members must provide the original tax receipt provided by a Cleveland Clinic Pharmacy **AND** the cash register receipt. Both must be provided to request reimbursement. Only monies actually paid out-of-pocket will be reimbursed. Drug manufacturer coupons used to pay the deductible will not be reimbursed. The deductible is the member's responsibility. Any fraudulent receipts submitted will disqualify the member for future reimbursements in the program. EHP members residing in the states of Florida, Indiana, Michigan, Nevada, New Jersey, Ohio, Pennsylvania, Virginia, West Virginia, or Wisconsin who are enrolled in a Coordinated Care program and are eligible for medication reimbursement must utilize a Cleveland Clinic Outpatient Pharmacy or Cleveland Clinic Home Delivery/Cleveland Clinic Specialty Pharmacy to qualify for medication reimbursement. Members residing in all other states must utilize CVS/Caremark Mail Order Pharmacies or CVS/Specialty Pharmacies to qualify for medication reimbursement. If you have any remaining questions regarding qualifying for reimbursement as it pertains to medications in this list, please refer to the Cleveland Clinic Coordinated Care Incentive FAQ found on the EHP website at [Cleveland Clinic Employee Health Plan – Coordinated Care Incentive FAQ](#) or contact your Care Coordinator.

Brand

Advair HFA
Arnuity Ellipta
Asmanex HFA
Asmanex Twisthaler
Breo Ellipta
Dulera
Pulmicort Flexhaler
Qvar Redihaler
Serevent Diskus
Spiriva Respimat 2.5 mcg/actuation
Trelegy Ellipta (PA)

Generic

Albuterol sulfate HFA
Albuterol sulfate nebulization solution
Albuterol sulfate ER tablet
Albuterol sulfate tablet or syrup
Aminophylline
Breyna
Budesonide/Formoterol
Budesonide nebulizer solution
Cromolyn sodium inhalation solution
Epinephrine Pen
Fluticasone furoate/Vilanterol Ellipta
Fluticasone propionate diskus
Fluticasone propionate HFA
Fluticasone propionate/Salmeterol diskus
Fluticasone propionate/Salmeterol HFA
Fluticasone propionate/Salmeterol Respicklick
Levalbuterol HFA

Generic (cont.)

Levalbuterol nebulization solution
Metaproterenol tablet or syrup
Montelukast tablet or chewable tablet (*packets are not reimbursable*)
Terbutaline
Theophylline ER tablet or oral solution
Wixela Inhub
Zafirlukast
Zileuton ER

PrudentRx Medications

The medications listed below are part of the Prudent Rx Program and are NOT reimbursable medications. If a member enrolls in PrudentRx, they will have a \$0 out-of-pocket responsibility for their prescriptions covered under the PrudentRx program. If not enrolled, the medications will be subject to a 30% co-insurance that is NOT reimbursable.

Cinqair (PA)
Dupixent (PA)
Fasenra (PA)
Nucala (PA)
Tezspire (PA)
Xolair (PA)