## **Medicaid Preferred Asthma Medications**

KY Medicaid & Exchange Insurance	, cs	Combo	SAEA	Comments
Aetna Better Health 866-638-1232	Flovent Diskus/HFA	Dulera	Ventolin HFA (2 / 30 days)	Budesonide max 5 years of age.
https://www.aetnabetterhealth.com	Qvar Redihaler	Breo		
Anthem KY Medicaid	Flovent HFA/Diskus	Breo Ellipta	Ventolin HFA	Budesonide mas 5 years of age.
https://mediproviders.anthem.com	Arnuity Ellipta	AirDuo	S	Arnuity Ellipta pts ≥12 yr of age
Caresource (KY Medicaid) 855-852-7005	Flovent Diskus/HFA Arnuity Ellipta	Advair AirDuo 55/14 Advair Diskus 100/50 Breo	Ventolin HFA	
https://www.caresource.com	Qvar Redihaler	Dulera		
Caresource Exchange (Not Ky Medicaid) <a href="https://www.caresource.com/marketplace">https://www.caresource.com/marketplace</a>	Asmanex HFA/Twist Qvar	Advair HFA or Diskus Symbicort	ProAir HFA or Respiclick	
KY Medicaid  https://kyportal.magellanmedicaid.com	Asmanex Twisthaler Flovent HFA	Advair Diskus only Dulera Symbicort	ProAir HFA Proventil HFA	Advair HFA nonpreferred Sprivia Respimat nonpreferred
Passport 800-846-7971  http://passporthealthplan.com/pharmacy	Asmanex HFA Qvar Arnuity Ellipta	Advair Diskus/HFA AirDuo	Ventolin HFA ProAir Respiclick	Asmanex & Qvar pts < 12 yr of age only. AirDuo Minimum age 12 yrs.
Wellcare 877-389-9457	Asmanex HEA AS NUTTY Flovent Diskus / HFA	AirDuo Dulera	Ventolin HFA	AirDuo Minimum age 12 yrs.
https://www.wellcare.com/Kentucky	Qvar Redihaler	Symbicort	1	
Anthem & Humana National Drug Lists A = Preferred by only Anthem	Arnuity Ellipta Flovent HFA / Diskus Qvar Redihaler (A)	Advair HFA / Diskus Symbicort Dulera (A)	Ventolin HFA ProAir HFA (A only) ProAir Respiclick (A )	This list may not fit all private insurance plans due to many different variables related to plan types & coverage .

## **Medicaid Preferred Asthma Medications**

IN Medicaid & Tricare Insurance	, cs	Combo	SARA	Comments
IN Medicaid Anthem, Healthy IN (HHW)	Flovent HfA / Diskus	Breo <u>&gt;</u> 12 yr	Ventolin	Budesonide 5 yr and younger
https://mediproviders.anthem.com/Documents	Arnuity Elllipta	Advair Diskus (4-11yr)		Arnuity Ellipts <u>&gt;</u> 12 yr of age.
IN Medicaid (Optum RX)	Alvesco Flovent HFA	Advair HFA Dulera	Proventil HFA ProAir HFA	Advair 230/21 HFA or Advair 500/50 Dikus must have tried Advair HFA 45/21, 115/21 or Flovent in past 100 days.
http://provider.indianamedicaid.com/provider	Pumicort Flexhaler	Symbicort		
IN Medicaid Caresource  https://www.caresource.com/providers/indiana	Flovent Diskus/HFA Qvar Redihaler Arnuity Ellipta	Advair Diskus 100/50 AirDuo Respiclick Dulera	Ventolin HFA	Qvar Redihaler no PA for ≤12yr
IN Medicaid MHS https://www.mhsindiana.com/providers	Flovent Diskus/HFA	Dulera Dulera Symbicort	Ventolin HFA	Sprivia Respirmat may require PA.
IN Medicaid MD Wise  http://www.mdwise.org/for-providers/pharmacy	Flovent Diskus/HFA Qvar Redihaler (40) Arnuity Ellipta	Advair Diskus/HFA AirDuo Dulera Breo	Ventolin HFA	Flovent for pts <12yrs of age
Tricare  https://www.express-scripts.com/static/formulary	Flovent Diskus/HFA	Advair Diskus/HFA	Pro Air HFA ProAir Respiclick Ventolin HFA	