

## Medicaid Preferred Asthma Medications

| KY Medicaid & Exchange Insurance  | ICS   | Combo   | SABA                              | Comments  |
|---|---|---|-----------------------------------|---|
| <b>Aetna Better Health 866-638-1232</b><br><a href="https://www.aetnabetterhealth.com">https://www.aetnabetterhealth.com</a>                | Flovent Diskus/HFA<br>Qvar HFA/Redihaler              | Dulera  | Ventolin HFA                      |   |
| <b>Anthem KY Medicaid</b><br><a href="https://mediproviders.anthem.com">https://mediproviders.anthem.com</a>                                | Flovent HFA/Diskus<br>Arnuity Ellipta                 | Dulera  | Ventolin HFA                      | Dulera after failed previous then PA.<br>Arnuity Ellipta pts $\geq$ 12 yr of age    |
| <b>Caresource (KY Medicaid) 855-852-7005</b><br><a href="https://www.caresource.com">https://www.caresource.com</a>                         | Flovent Diskus/HFA<br>Arnuity Ellipta                 | Advair AirDuo<br>Advair Diskus 100/50<br>Dulera | Ventolin HFA                      |   |
| <b>Caresource Exchange (Not Ky Medicaid)</b><br><a href="https://www.caresource.com/marketplace">https://www.caresource.com/marketplace</a> | Asmanex HFA/Twist<br>Qvar                             | Advair HFA or Diskus<br>Symbicort               | ProAir HFA or Respiclick          |   |
| <b>KY Medicaid</b><br><a href="https://kyportal.magellanmedicaid.com">https://kyportal.magellanmedicaid.com</a>                             | Asmanex Twisthaler<br>Flovent HFA<br>Qvar HFA only    | Advair Diskus only<br>Dulera<br>Symbicort       | ProAir HFA<br>Proventil HFA       | Advair HFA nonpreferred<br>Qvar Redihaler nonpreferred                              |
| <b>Passport 800-846-7971</b><br><a href="http://passporthealthplan.com/pharmacy">http://passporthealthplan.com/pharmacy</a>                 | Asmanex HFA<br>Qvar<br>Arnuity Ellipta                | Advair Diskus/HFA                               | Ventolin HFA<br>ProAir Respiclick | Asmanex & Qvar pts < 12 yr of age only.<br>Arnuity Ellipta pts $\geq$ 12 yrs of age |
| <b>Wellcare 877-389-9457</b><br><a href="https://www.wellcare.com/Kentucky">https://www.wellcare.com/Kentucky</a>                           | Asmanex HFA<br>Flovent Diskus / HFA<br>Qvar Redihaler | AirDuo<br>Dulera<br>Symbicort                   | Ventolin HFA                      | AirDuo Minimum age 12 yrs.  |

## Medicaid Preferred Asthma Medications

| IN Medicaid & Tricare Insurance  | ICS   | Combo                                     | SABA                           | Comments  |
|--|---|---|--------------------------------|---|
| <b>IN Medicaid Anthem, Healthy IN (HHW)</b><br><a href="https://medproviders.anthem.com/Documents">https://medproviders.anthem.com/Documents</a> | Flovent Diskus/HFA<br>Arnuity Ellipta                                   | Dulera                                    | Ventolin                       | Flovent for < 12 yrs.   |
| <b>IN Medicaid (Optum RX)</b><br><br><a href="http://provider.indianamedicaid.com/provider">http://provider.indianamedicaid.com/provider</a>     | Asmanex HFA<br><br>Alvesco<br><br>Flovent HFA<br><br>Pumicort Flexhaler | Advair HFA<br><br>Dulera<br><br>Symbicort | Ventolin HFA<br><br>ProAir HFA | Advair 230/21 HFA must have tried Advair HFA 45/21, 115/21 or Flovent in past 100 days.<br><br>Dulera and Symbicort must have tried Advair HFA 45/21, 115/21 or Flovent HFA within past 100 days. |
| <b>IN Medicaid Caresource</b><br><a href="https://www.caresource.com/providers/indiana">https://www.caresource.com/providers/indiana</a>         | Flovent Diskus/HFA<br>Arnuity Ellipta                                   | Advair Diskus 100/50<br>Dulera            | Ventolin HFA                   |   |
| <b>IN Medicaid MHS</b><br><a href="https://www.mhsindiana.com/providers">https://www.mhsindiana.com/providers</a>                                | Flovent Diskus/HFA  | Dulera<br>Symbicort                       | Ventolin HFA                   |   |
| <b>IN Medicaid MD Wise</b><br><a href="http://www.mdwise.org/for-providers/pharmacy">http://www.mdwise.org/for-providers/pharmacy</a>            | Flovent Diskus/HFA<br>Qvar Redihaler<br>Arnuity Ellipta                 | Advair Diskus/HFA<br>AirDuo<br>Dulera     | Ventolin HFA                   | Flovent for pts <12yrs of age   |
| <b>Tricare</b><br><a href="https://www.express-scripts.com/static/formulary">https://www.express-scripts.com/static/formulary</a>                | Flovent Diskus/HFA  | Advair Diskus/HFA                         |                                |   |