

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. **Medications that require prior authorization will have (PA) listed after the name of the medication. Medications that are part of the Step Therapy Program will have (step therapy) after the name of the medication.** To qualify for pharmacy reimbursement, members must provide the original tax receipt provided by a Cleveland Clinic/Akron General 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. If EHP members are enrolled in a Healthy Choice Coordinated Care program and are eligible for medication reimbursement, the members must utilize a Cleveland Clinic/Akron General Pharmacy to qualify for medication reimbursement. Medications obtained from the CVS/caremark Mail Service Program are not reimbursable. If you have any remaining questions regarding qualifying for reimbursement as it pertains to medications in this list, please refer to the Cleveland Clinic/Akron General Employee Health Plan(s) Coordinated Care Incentive FAQ found on the EHP website at <https://employeehealthplan.clevelandclinic.org/EmployeeHealthPlan/media/CCF-EHP/Coordinated%20Care/USECoordinated-Care-Incentive-FAQ-11-05-20.pdf> or contact your Care Coordinator.

Brand

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

Generic

Albuterol sulfate HFA
Albuterol sulfate nebulization solution
Albuterol sulfate ER tablet
Albuterol sulfate tablet or syrup
Aminophylline
Budesonide/Formoterol
Budesonide inhalation suspension
Cromolyn sodium inhalation solution
Epinephrine Pen
Fluticasone propionate/Salmeterol diskus
Levalbuterol HFA
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