

## Neighborhood Pharmacy Department

Please see below for the formulary status of commonly used respiratory drugs as of 7/1/2021.

### Inhaled Corticosteroid (ICS) Agents

Drug Name	Cost Per Month	Medicaid	Commercial	INTEGRITY (MMP)
Alvesco	\$\$	Non Formulary	Non Formulary	Non Formulary
Arnuity	\$\$	Formulary with QL	Formulary with QL	Formulary with QL
Asmanex HFA	\$\$	Formulary	Non Formulary	Non Formulary
Asmanex Twisthaler	\$\$	Formulary with QL	Non Formulary	Non Formulary
Flovent Diskus	\$\$	Formulary	Non Formulary	Formulary with QL
Flovent HFA	\$\$	Formulary with QL	Non Formulary	Formulary with QL
Pulmicort Flexhaler	\$\$	Formulary	Non Formulary	Formulary with QL
Qvar Redihaler	\$\$	Formulary with QL	Formulary with QL	Non Formulary
Budesonide Inhalation Susp	\$\$	Formulary with QL	Formulary with QL	Formulary

### Long-Acting Beta2-Agonist Agents

Drug Name	Cost Per Month	Medicaid	Commercial	INTEGRITY (MMP)
Serevent Diskus	\$\$\$\$	Formulary	Non Formulary	Formulary with QL
Striverdi Respimat	\$\$	Formulary	Formulary with QL	Non Formulary

### Long-Acting and Short-Acting Muscarinic Antagonist Agents

Drug Name	Cost Per Month	Medicaid	Commercial	INTEGRITY (MMP)
Atrovent HFA	\$\$\$\$	Non Formulary	Non Formulary	Formulary with QL
Incruse Ellipta	\$\$\$	Formulary	Formulary with QL	Formulary with QL
Spiriva Handihaler	\$\$\$\$	Formulary with ST	Formulary with QL	Non Formulary
Spiriva Respimat	\$\$\$\$	Formulary	Formulary with QL	Non Formulary
Tudorza Pressair	\$\$\$\$\$	Non Formulary	Non Formulary	Non Formulary
Ipratropium Inhalation Soln	\$	Formulary	Formulary with QL	Formulary

#### Key

Formulary – Formulary without Restriction  
 Formulary with QL – Formulary with Quantity Limit  
 Formulary with ST – Formulary with Step Therapy

Key	Cost Per Month
\$	<\$100
\$\$	\$100-\$299
\$\$\$	\$300-\$399
\$\$\$\$	\$400-\$499
\$\$\$\$\$	> \$500

### Inhaled Corticosteroid and Long-Acting Beta2-Agonist (ICS/LABA) Agents

Drug Name	Cost Per Month	Medicaid	Commercial	INTEGRITY (MMP)
Advair Diskus	\$\$\$\$	Non Formulary	Formulary with QL	Formulary with QL
Advair HFA	\$\$\$\$	Formulary with ST	Formulary with QL	Formulary with QL
Fluticasone-Salmeterol HFA (AirDuo HFA)	\$\$	Formulary with QL	Non Formulary	Non Formulary
Fluticasone-Salmeterol (Advair Diskus Generic)	\$\$\$	Formulary	Non Formulary	Non Formulary
Wixela Inhub	\$\$\$	Formulary	Non Formulary	Non Formulary
Breo Ellipta	\$\$\$	Formulary with ST	Formulary with QL	Formulary with QL
Dulera	\$\$\$	Formulary with ST	Non Formulary	Non Formulary
Symbicort	\$\$\$\$	Non Formulary	Formulary with QL	Formulary with QL
Budesonide-Formoterol (Symbicort Generic)	\$\$	Formulary	Non Formulary	Non Formulary

### Combination Muscarinic Antagonist and Beta2-Agonist Agents

Drug Name	Cost Per Month	Medicaid	Commercial	INTEGRITY (MMP)
Anoro Ellipta	\$\$\$\$	Formulary	Formulary with QL	Formulary with QL
Stiolto Respimat	\$\$\$\$	Formulary	Non Formulary	Non Formulary
Combivent	\$\$\$\$	Formulary	Non Formulary	Formulary with QL
Bevespi Aerosphere	\$\$\$\$	Non Formulary	Formulary with QL	Formulary with QL
Ipratropium-Albuterol Nebu Soln	\$	Formulary	Formulary with QL	Formulary

### Long-Acting Muscarinic Antagonist/Long-Acting Beta2-Adrenergic Agonist/Inhaled Corticosteroid (LAMA/LABA/ICS) Agents

Drug Name	Cost Per Month	Medicaid	Commercial	INTEGRITY (MMP)
Trelegy Ellipta	\$\$\$\$\$	Formulary	Formulary with QL	Formulary with QL
Breztri Aerosphere	\$\$\$\$\$	Non Formulary	Non Formulary	Formulary with QL

For additional questions or concerns, please reach out to the Neighborhood Pharmacy Department at: **401-427-8200**

#### Key

Formulary – Formulary without Restriction  
 Formulary with QL – Formulary with Quantity Limit  
 Formulary with ST – Formulary with Step Therapy

Key	Cost Per Month
\$	<\$100
\$\$	\$100-\$299
\$\$\$	\$300-\$399
\$\$\$\$	\$400-\$499
\$\$\$\$\$	> \$500