

# INHALER PATIENT ASSISTANCE PROGRAMS

Partners For Kids designed this resource to support healthcare professionals in guiding uninsured or underinsured patients to the lowest out-of-pocket cost for their asthma inhalers. This resource is not intended for use for Ohio Medicaid patients. Please refer to the [PFK UPDL](#) for asthma inhaler coverage for Ohio Medicaid patients. This resource is developed by PFK pharmacy and updated quarterly to ensure accurate and timely information. For clinical decision-making guidance, please refer to the [PFK Asthma Pathway](#).

Copay cards reduce cost up to the maximum benefit of the card. Patient is responsible for any remaining balance. GoodRx can be used instead of insurance coverage, it cannot be combined with insurance or copay cards & the cost of the medication does not go towards the patient's insurance deductible. Cost varies by pharmacy, refer to [goodrx.com](#) for details.

## Definitions:

ICS: inhaled corticosteroid | LABA: long-acting beta-agonist | LAMA: long-acting muscarinic antagonist

DPI: dry powder inhaler | MDI: metered dose inhaler | (B): brand | (G): generic

Medications are **BOLDED** if product is available as generic

Name	Type	Manufacturer Cost Savings		Lowest Advertised Good Rx Cost	
		With Prescription Insurance Copay Cards	No Prescription Insurance Patient Assistance Programs		
Beclomethasone dipropionate (QVAR Redihaler)	Breath actuated aerosol	No manufacturer copay assistance	No manufacturer assistance program	40 mcg	\$185
				80 mcg	\$245
Budesonide (Pulmicort Flexhaler)	DPI	Copay ↓ to \$20 Card pays max of \$50 <b>Savings card at <a href="#">h2-pharma.com/products/</a></b>	No manufacturer assistance program	90 mcg	\$200
				180 mcg	\$266
Ciclesonide (Alvesco HFA)	MDI *spacer*	Copay ↓ to \$60 Card pays max of \$175 <b>eVoucher automatically applied, participating pharmacy list at <a href="#">alvesco.us/savings-card</a></b>	Free medication if income qualifies  <b>Apply at <a href="#">alvesco.us/savings-card</a></b>	80 mcg	\$109
				160 mcg	\$109
Fluticasone propionate (ArmonAir Digihaler)	DPI	No manufacturer copay assistance	No manufacturer assistance program	55 mcg	\$265
				113 mcg	\$265
				232 mcg	\$326
<b>Fluticasone Propionate (Flovent HFA)</b> *generic ONLY*	MDI *spacer*	No manufacturer copay assistance	No manufacturer assistance program	44 mcg	\$91
				110 mcg	\$118
				220 mcg	\$178
<b>Fluticasone Propionate (Flovent Diskus)</b> *generic ONLY*	DPI	No manufacturer copay assistance	No manufacturer assistance program	50 mcg	\$65
				100 mcg	\$68
				250 mcg	\$88
Fluticasone furoate (Arnuity Ellipta)	DPI	No manufacturer copay assistance	Free medication if income qualifies <b>Apply at <a href="#">gskforyou.com</a> Or call 1-866-728-4368</b>	50 mcg	\$213
				100 mcg	\$211
				200 mcg	\$280
Mometasone furoate (Asmanex HFA)	MDI *spacer*	Copay ↓ to \$15 Card pays max of \$90 <b>Savings card at <a href="#">asmanex.com</a></b>	No manufacturer assistance program	50 mcg	\$108
				100 mcg	\$116
				200 mcg	\$128
Mometasone furoate (Asmanex Twisthaler)	DPI	Copay ↓ to \$15 Card pays max of \$90 <b>Savings card at <a href="#">asmanex.com</a></b>	No manufacturer assistance program	110 mcg (30 doses)	\$102
				220 mcg (30 doses)	\$110

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	Name	Type	Manufacturer Cost Savings		Lowest Advertised Good Rx Cost
			With Prescription Insurance Copay Cards	No Prescription Insurance Patient Assistance Programs	
ICS/LABA	<b>Budesonide/ formoterol fumarate (Symbicort)</b> Generics include Breyndra	MDI *spacer*	No manufacturer copay assistance	No manufacturer assistance program	80/4.5 mcg (B) \$211 (G) \$103 160/4.5 mcg (B) \$240 (G) \$109
	<b>Fluticasone propionate/ Salmeterol (Advair HFA)</b>	MDI *spacer*	No manufacturer copay assistance	No manufacturer assistance program	45/21 mcg (B) \$256 (G) \$103 115/21 mcg (B) \$317 (G) \$126 230/21 mcg (B) \$431 (G) \$164
	<b>Fluticasone propionate/ salmeterol (AirDuo Respiclick)</b>	DPI	No manufacturer copay assistance	No manufacturer assistance program	55/14 mcg   (B) \$401 113/14 mcg   (G) \$44 232/14 mcg
	Fluticasone propionate/ salmeterol (AirDuo Digihaler)	DPI	No manufacturer copay assistance	No manufacturer assistance program	55/14 mcg \$437 113/14 mcg \$437 232/14 mcg \$488
	<b>Fluticasone propionate/ salmeterol (Advair Diskus)</b> Generics include Wixela Inhub	DPI	(Wixela Inhub generic ONLY) Copay ↓ to \$10 Card pays max of \$50 <b>Savings card at wixela.com</b>	No manufacturer assistance program	100/50 mcg (B) \$165 (G) \$75 250/50 mcg (B) \$203 (G) \$90 500/50 mcg (B) \$266 (G) \$125
	<b>Fluticasone furoate/ vilanterol (Breo Ellipta)</b>	DPI	No manufacturer copay assistance	Free medication if income qualifies <b>Apply at gskforyou.com</b> <b>Or call 1-866-728-4368</b>	50/25 mcg   (B) \$402 100/25 mcg   (G) \$120 200/25 mcg
	Mometasone furoate/ formoterol (Dulera)	MDI *spacer*	Copay ↓ to \$15 Card pays max of \$90 <b>Savings card at dulera.com</b>	No manufacturer assistance program	50/5 mcg \$339 100/5 mcg \$339 200/5 mcg \$339
	LAMA	Tiotropium Bromide (Spiriva Respimat)	Soft mist	Copay ↓ to \$0 Card pays max of \$100 <b>Savings card at patient.boehringer-ingenelheim.com/us/products/spiriva/asthma</b>	Free medication if income qualifies <b>Apply at Boehringer-ingenelheim.com/us/our-responsibility/patient-assistance-program</b>
2.5 mcg \$517					
ICS/LABA/ LAMA	Fluticasone/ umeclidinium/vilanterol (Trelegy Ellipta)	DPI	Copay ↓ to \$0 Card pays max of \$500 Jan-Mar, \$200 Apr-Dec <b>Savings card at trelegy.com</b>	Free medication if income qualifies <b>Apply at gskforyou.com</b> <b>Or call 1-866-728-4368</b>	100/62.5/25 mcg & 200/62.5/25 mcg \$647