



2022 Value-Based Drug Plan (VBD) Medication Guide

Plan participants actively participating in the Care Coordination Program for asthma, chronic obstructive pulmonary disease (COPD), diabetes and/or heart disease (coronary artery disease or heart failure) are eligible for VBD. The copay for certain generic drugs taken for the chronic condition(s) will be waived and the member cost share for certain formulary brand drugs taken for the chronic condition(s) will be reduced by 50 percent. **VBD discounts only apply if the plan participant uses a preferred pharmacy.** Plan participants using preferred pharmacies can also benefit from the Diabetes Patient Assurance Program for insulins.

This guide provides examples of qualifying generic and formulary brand drugs for each of the major categories of covered medications. **This does not represent a complete list and is subject to change with or without notice.** The VBD guide does not dictate or control decisions regarding appropriate care. As always, you and your health care provider make the final decision on which medication(s) is/are right for you.

| Asthma / Chronic Obstructive Pulmonary Disease (COPD) | | |
|--|--|---|
| | Generic Drugs | Formulary Brand Drugs |
| Bronchodilators | albuterol nebulization solution, albuterol sulfate HFA (by Bryant Ranch, Cipla, Civica, Lupin, Par, Perrigo, Proficient Rx, Sandoz, Teva), levalbuterol nebulization solution, metaproterenol, terbutaline | Perforomist, Serevent Diskus |
| Oral Corticosteroids | dexamethasone, hydrocortisone, methylprednisolone, prednisolone, prednisone | |
| Inhaled Corticosteroids | budesonide nebulization suspension | Arnuity Ellipta, Asmanex HFA/Twisthaler, Flovent Diskus/HFA, Qvar Redihaler |
| Combination Products | ipratropium/albuterol solution, fluticasone/salmeterol (by Hikma, Prasco, Proficient Rx) | Advair HFA, Anoro Ellipta, Bevespi Aerosphere, Breo Ellipta, Breztri Aerosphere, Combivent Respimat, Dulera, Stiolto Respimat, Symbicort, Trelegy Ellipta |
| Other Covered Medications | cromolyn solution, ipratropium solution, montelukast, theophylline/ER, zafirlukast | Incruse Ellipta, Spiriva Handihaler/Respimat |
| Diabetes / Heart Disease (Coronary Artery Disease and Heart Failure) | | |
| | Generics | Formulary Brand Drugs |
| ACE Inhibitors | benazepril, captopril, enalapril, fosinopril, lisinopril, moexipril, perindopril, quinapril, ramipril, trandolapril | |
| Angiotensin II Receptor Antagonists | candesartan, eprosartan, irbesartan, losartan, olmesartan, telmisartan, valsartan | |
| Beta Blockers | acebutolol, atenolol, betaxolol, bisoprolol, carvedilol/ER, labetalol, metoprolol/ER, nadolol, pindolol, propranolol/ER | |
| Diuretics | amiloride, bumetanide, chlorothiazide, chlorthalidone, eplerenone, furosemide, hydrochlorothiazide (HCTZ), indapamide, metolazone, spironolactone, torsemide, triamterene/HCTZ | |
| Lipid-Lowering Agents | atorvastatin, cholestyramine, colestevlam, colestipol, ezetimibe, fenofibrate/fenofibric acid, fluvastatin, gemfibrozil, lovastatin, niacin ER, pravastatin, rosuvastatin, simvastatin | Lipofen, Livalo |
| Other Covered Medications | clopidogrel, digoxin, diltiazem, hydralazine, isosorbide, nitroglycerin, prasugrel, ranolazine ER, verapamil | Brilinta |
| Blood Glucose Monitoring | | Dexcom, FreeStyle, FreeStyle InsuLinx, FreeStyle Libre, FreeStyle Lite, One Touch, Precision |
| Injectable Diabetes Medications | | Glucagen, Glucagon, Humalog, Humulin, Levemir, Semglee (YFGN), Toujeo, Tresiba |
| Oral Diabetes Medications | acarbose, glimepiride, glipizide, glyburide, metformin, miglitol, nateglinide, pioglitazone, repaglinide | |

For questions regarding this VBD guide, please contact OSU Health Plan at 800-678-6269.