

Respiratory Drug Product [^]	Generic Drug Name	Usual Dosing Instructions	PCH Coverage	Approx Cost [#]
LAAC (LAMA) (LAAC = long-acting anticholinergic; LAMA = long-acting muscarinic antagonist)				
Incruse Ellipta 62.5 mcg (COPD)	umeclidinium	1 inh daily	Yes	\$53
Seebri Breezhaler 50 mcg (COPD)	glycopyrronium	1 cap daily (2 inh)	Yes	\$56
Spiriva HandiHaler 18 mcg (COPD)	tiotropium	1 cap daily (2 inh)	Yes	\$57
Spiriva Respimat 2.5 mcg (COPD/Asthma)	tiotropium	2 inh daily	Yes	\$57
Tudorza Genuair 400 mcg (COPD)	aclidinium	1 inh BID	Yes	\$56
LABA (LABA = long-acting beta agonist)				
Foradil Aerolizer 12 mcg (Asthma/COPD)	formoterol	1 inh BID	Yes	\$55
Onbrez Breezhaler 75 mcg (COPD)	indacaterol	1 cap daily (2 inh)	Yes	\$49
Oxeze Turbuhaler 6 mcg; 12 mcg (Asthma)	formoterol	1-2 inh BID†	Yes	\$35-47
Serevent Diskus 50 mcg (Asthma/COPD)	salmeterol	1 inh BID (max)	Yes	\$65
LAAC/LABA (Dual Therapy)				
Anoro Ellipta 62.5/25 mcg (COPD)	umeclidinium/vilanterol	1 inh daily	Yes	\$81
Duaklir Genuair 400/12 mcg (COPD)	aclidinium/formoterol	1 inh BID	Yes	\$63
Inspiroto Respimat 2.5/2.5 mcg (COPD)	tiotropium/olodaterol	2 inh daily	Yes	\$67
Ultibro Breezhaler 50/110 mcg (COPD)	glycopyrronium/indacaterol	1 cap daily (2 inh)	Yes	\$82
ICS (ICS = inhaled corticosteroid)				
Aermony Respiclick 55, 113, 232 mcg (Asthma)	fluticasone propionate	1 inh BID	Yes	\$18-50
Alvesco MDI 100; 200 mcg (Asthma)	ciclesonide	1-2 inh daily	Yes	\$49-82
Arnuity Ellipta 100; 200 mcg (Asthma)	fluticasone furoate	1-2 inh daily	Yes	\$42-82
Asmanex Twisthaler 100; 200; 400 mcg (Asthma)	mometasone	1-2 inh daily–BID†	Yes	\$41-81
Flovent MDI 50; 125; 250 mcg (Asthma)	fluticasone propionate	1-2 inh BID	Yes	\$27-95
Flovent Diskus 100; 250; 500 mcg (Asthma)	fluticasone propionate	1-2 inh BID	Yes	\$47-74
Apo-fluticasone and PMS-fluticasone 250 mcg MDI (generic versions of Flovent 250 mcg MDI) (Asthma)	fluticasone propionate	1-2 inh BID	Yes	\$50
Pulmicort Turbuhaler 100; 200; 400 mcg (Asthma)	budesonide	1-2 inh BID	Yes	\$35-103
QVAR 50; 100 mcg (Asthma)	beclomethasone	1-2 inh BID	Yes	\$38-75
ICS/LABA (Combo Therapy)				
Advair Diskus 100/50; 250/50; 500/50 mcg (Asthma/COPD)	fluticasone propionate / salmeterol	1 inh BID (max)	Yes	\$53-76
Wixela inhub and PMS-fluticasone propionate /salmeterol DPI 100/50; 250/50; 500/50 mcg (generic versions of Advair Diskus) (Asthma/COPD)	fluticasone propionate / salmeterol	1 inh BID (max)	Yes	\$45-75
Advair MDI 50/25; 125/25; 250/25 mcg (Asthma)	fluticasone propionate / salmeterol	1-2 inh BID (max 4 inh)	Yes	\$110-156
Breo Ellipta 100/25 mcg (Asthma/COPD); 200/25 mcg (Asthma only)	fluticasone furoate /vilanterol	1 inh daily	Yes	\$91-142
Symbicort Turbuhaler 100/6; 200/6 mcg (Asthma/COPD)	budesonide/formoterol	1-2 inh BID	Yes	\$71-93
Zenhale MDI 100/5; 200/5 mcg (Asthma)	mometasone/formoterol	2 inh BID	Yes	\$100-121
Atectura Breezhaler 80/150; 160/150; 320/150 mcg (Asthma)	mometasone / indacaterol	1 cap daily (2 inh)	Yes	\$34-58
SAAC (SAMA) (SAAC = short-acting anticholinergic; SAMA = short-acting muscarinic antagonist)				
Atrovent MDI 20 mcg (COPD)	ipratropium	2 inh QID	Yes	\$21
SABA (SABA short-acting beta agonist)				
Bricanyl Turbuhaler 0.5 mg (Asthma)	terbutaline	1 inh QID	Yes	\$9
Ventolin Diskus 200 mcg (Asthma/COPD)	salbutamol	1 inh QID (prn)	No	\$10
Ventolin MDI 100 mcg (Asthma/COPD)	salbutamol	2 inh QID (prn)	Yes	\$6
SAAC/SABA				
Combivent Respimat 100mcg/20 mcg (COPD)	salbutamol/ipratropium	1 inh QID	Yes	\$32
ICS/LABA/LAMA (Triple Therapy)				
Trelegy Ellipta 100/62.5/25 mcg (COPD)	fluticasone furoate/ umeclidinium/vilanterol	1 inh daily	EDS (3)*	\$139
Energair Breezhaler 160/50/150 mcg (Asthma)	mometasone / glycopyrronium /indacaterol	1 cap daily (2 inh)	EDS (3)**	\$108

Legend: ^ - includes manufacturer indication; # -approx. retail cost excluding dispensing fee per inhaler or per month; * - requires Part III Exception Drug Status for use in patients who are not controlled on optimal dual inhaled therapy for COPD; ** - requires Part III Exception Drug Status for use in patients who are not controlled on dual inhaled LABA + medium-to-high dose ICS for asthma; † = strength dependent; inh = inhalation; 2 inh = inhale 2x for 1 cap to ensure it is emptied; prn = as needed; BID = twice daily; QID = four times a day.