



# SAVE ON MEDICAL SERVICES and PRESCRIPTION DRUGS for ongoing conditions

#### With Dickinson College's Value Based Insurance Design (VBID)

If you have an ongoing condition, you can live well. You will need to follow a treatment program that is proven by medical science to help people with your condition. The VBID program makes it easier for you to follow the right treatment.

This program gives extra savings for specific medical services and prescription drugs for members with asthma, chronic obstructive pulmonary disease (COPD), coronary artery disease (CAD), diabetes or heart failure. VBID is included in Dickinson College's HealthAmerica plan for employees and enrolled family members.

#### **HOW IT WORKS**

VBID has no copays, deductible or coinsurance on certain medical services. Your Tier 1 Generic and Tier 2 Brand Formulary prescriptions are covered at 100 percent with no copay.

Condition	Medical Service Covered 100%	Prescription Coverage:	
	(no copay, deductible or coinsurance)	\$0 Copayment on Tier 1 and Tier 2 drugs.*	
Asthma	Pulse oximetry, spirometry, pulmonary function test Inhalers		
CAD	LDL, cardiac rehab	ACE inhibitor or ARBRx and beta-blocker	
COPD	Pulmonary function test, pulse oximetry	Bronchodilator	
Diabetes	LDL, microalbumin, HbAlc, eye exam	Diabetic medications and supplies**	
Heart failure	Cardiac rehab	ACE inhibitor or ARBRx and beta-blocker	

The VBID plan design applies to the following five conditions and specific related services:

\*Applies only to drugs that have been proven to benefit patients with the applicable condition.

\*\*Diabetic supplies include: OneTouch® test strips, and all types of lancets, syringes and pen needles.

### REQUIREMENTS

You must stay enrolled in both disease management and the VBID program as well as receive care from participating physicians otherwise the benefits under the VBID program will cease. The program requires that you meet with your physician at least on an annual basis to ensure you are receiving the appropriate care treatment plan and medication advice to support your health. HealthAmerica will verify that you have followed the treatment for your conditions. Treatment guidelines are those that have been proven by medical science to help people with your condition.

#### HOW TO ENROLL IN VBID OR CHECK ON YOUR ENROLLMENT

• Send completed VBID enrollment form to:

E-mail: DickinsonVBID@cvty.com Fax: 866-804-4862 Mail: HealthAmerica Attn: Jean Enders 3721 TecPort Drive Harrisburg, PA 17111

- The VBID Disease Management team will provide a response to your enrollment and you will receive an outreach call within 10 business days from the date of your enrollment explaining the program.
- If you have further questions about the VBID program, please contact HealthAmerica member services at 1-800-252-5742.

Take action to improve your health and lower your costs with Dickinson College and HealthAmerica's Value-Based Insurance Design.





# Value Based Insurance Design (VBID) Program

**Prescription Drug Guidelines** 

The chart below represents approved drug classes for the VBID Program. Examples are provided within each approved drug class to assist you. There may be generic equivalents for the brand-name examples listed. Talk to your doctor about whether a generic alternative would be right for you. Tier 1 = Generic/Formulary, Tier 2 = Brand Name/Formulary medication. If you have one of these conditions and are currently taking any of the applicable medications listed, but are not currently enrolled in the HealthAmerica VBID (Value Based Insurance Design) Condition Management program, please contact customer service using the number on your insurance ID card for more information. **Note:** The VBID Program does not apply to Tier 3 Non-Formulary drugs. This is the most current list at the time of printing as is subject to change.

Condition	Asthma	Chronic Obstructive Pulmonary Disease	Heart Failure	Coronary Artery Disease	Diabetes
Drug class	Inhaled Corticosteroids (COPD Metered Dose Inhalers ONLY) Tier 1: Budesonide Respules (Asthma Only) Tier 2: QVAR <sup>®</sup> , Flovent <sup>®</sup> , Asmanex <sup>®</sup>		Beta-Blockers and Combinations Tier 1: Atenolol, Bisoprolol, Carvedilol, Labetalol, Metoprolol, Metoprolol ER, Nadolol, Propanolol, Propranolol LA, Timolol Tier 2: None		Insulin Tier 1: None Tier 2: Levemir®, Humalog®, Humulin®
	Methylxanthines Tier 1: Theophylline, Aminophylline Tier 2: None		Ace Inhibitors and Combinations Tier 1: Benazepril, Benazepril/Hydrochlorothiazide, Captopril, Captopril/Hydrochlorothiazide, Enalapril, Enalapril/ Hydrochlorothiazide, Fosinopril/Hydrochlorothiazide, Lisinopril, Lisinopril/Hydrochlorothiazide, Moexipril, Moexipril/Hydrochlorothiazide, Quinapril, Quinapril/Hydrochlorothiazide, Ramipril, Trandolapril Tier 2: None		
	Leukotriene Modifiers Tier 1: Montelukast, Zafirlukast Tier 2: None	Long Acting Beta Agonists Tier 1: None Tier 2: Serevent®	Angiotensin Receptor Blockers and Combinations Tier 1: Losartan, Losartan HCT Tier 2: Benicar <sup>®</sup> , Benicar HCT <sup>®</sup> , Micardis <sup>®</sup> , Micardis HCT <sup>®</sup>		
	Combinations: Short Acting Beta Agonists and Anticholinergics, Long Acting Beta Agonists and Inhaled Corticosteroids Tier 1: None Tier 2: Advair®, Symbicort®	Combinations: Short Acting Beta Agonists and Anticholinergics, Long Acting Beta Agonists and Inhaled Corticosteroids Tier 1: Albuterol/Ipratropium Neb. Tier 2: Combivent®, Symbicort®, Advair®	Hydralazine with Isosorbide in African Americans or Intolerant to ACEI/ARB Tier 1: Isosorbide Dinitrate/Hydralazine Tier 2: None	Cholesterol/Triglyceride Lowering Therapy Tier 1: Atorvastatin, Lovastatin, Pravastatin, Simvastatin, Fenofibrate, Gemfibrozil Tier 2: Niaspan <sup>®</sup> , Simcor <sup>®</sup> , Altoprev <sup>®</sup> , Crestor <sup>®</sup> , Trilipix <sup>®</sup>	

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# VBID Program – Prescription Drug Guidelines



Condition	Asthma	Chronic Obstructive Pulmonary Disease	Heart Failure	Coronary Artery Disease	Diabetes
Drug class	(continued) Combinations: Short Acting Beta Agonists and Anticholinergics, Long Acting Beta Agonists and Inhaled Corticosteroids Tier 1: None Tier 2: Advair®, Symbicort®	Anticholinergics Tier 1: Ipratropium Tier 2: Spiriva®, Atrovent®	Loop Diuretics Tier 1: Bumetanide, Furosemide, Torsemide Tier 2: None	Antiplatelets, Thienopyridine, P2Y12 Platelet Inhibitors: Tier 1: Clopidogrel Tier 2: None	Biguanides and Combinations Tier 1: Metformin, Metformin ER Tier 2: None
			Potassium Sparing Diuretics Tier 1: Spironolactone, Spironolactone- Hydrochlorothiazide, Triamterene- Hydrochlorothiazide Tier 2: None	Calcium Channel Blockers and Combinations Tier 1: Amlodipine, Diltiazem, Diltiazem XR, Felodipine ER, Nifedipine ER, Nifedipine XL, Nisoldipine, Verapamil, Verapamil ER, Verapamil PM Tier 2: None	Sulfonylureas Tier 1: Glyburide, Glyburide Metformin, Glipizide, Chlorpropamide, Glipizide ER, Tolazamide, Tolbutamide, Glipizide-Metformin, Glimiperide Tier 2: None
				Nitroglycerin as Needed and Long Acting Nitrates Tier 1: Isosorbide Mononitrate ER, Isosorbide Dinitrate ER, Nitroglycerin SL, Translingual Spray Tier 2: Nitrobid®	Thiazolidinediones (TZDs) Tier 1: Pioglitazone, Pioglitazone/Meformin Tier 2: Duetact®, ActosPlus Met XL® Glucagon Like Peptide-1s (GLP1s) Tier 1: None Tier 2: None
					Dipeptidyl Peptidase-4s (DPP4s) Tier 1: None Tier 2: Januvia <sup>®</sup> , Onglyza <sup>®</sup> , Janumet <sup>®</sup> , Juvisync <sup>®</sup> , Kombiglyze XR <sup>®</sup>

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	Brand versions of generically available drugs are covered according to the member's Prescription Drug Rider. Some drugs on this list require Prior Approval and/or have quantity limits. Waiver or reduction of the member copay does not imply that coverage is guaranteed.					

PLEASE NOTE: This is not meant to be a complete or most updated list of the drugs included in the program and covered under your plan. Brand names are listed for informational reference and there may be generics available. Ask your doctor whether a generic alternative would be right for you. All information is subject to change.