

Asthma/COPD – Glucocorticoids, Inhalation

Point-of-Sale (POS) edits are safety limitations that are automatically verified through computer programming at the time that a prescription claim is submitted at the pharmacy. These edits can be applied to *any* medication, whether or not it is listed in the Preferred Drug List / Non-Preferred Drug List (PDL/NPDL). The first section of this document is organized to follow the order of the therapeutic classes in the PDL/NPDL and explains the POS edits for those medications.

POS Abbreviations

AL – Age Limit	DS – Maximum Days’ Supply Allowed	PU – Prior Use of Other Medication is Required
BH – Behavioral Health Clinical Authorization for Children Younger than 7 Years of Age	DT – Duration of Therapy Limit	QL – Quantity Limit
BY – Diagnosis Codes Bypass Some Requirements	DX – Diagnosis Code Requirement	RX – Specific Prescription Requirement
CL – Additional Clinical Information is Required	ER – Early Refill	TD – Therapeutic Duplication
CU – Concurrent Use with Other Medication is Restricted	MD – Maximum Dose Limit	YQ – Yearly Quantity Limit
DD – Drug-Drug Interaction	MME – Maximum Morphine Milligram Equivalent is Restricted	

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<u>POS Edits</u>		
<u>QL – These agents are limited to a maximum quantity listed in the chart to the right.</u>	<u>Medication</u>	<u>Quantity Limit</u>
	<u>Albuterol/Budesonide (AirSupra HFA®)</u>	<u>2 inhalers per 30 days</u>
	<u>Beclomethasone Breath-Actuated HFA (QVAR® RediHaler®)</u>	<u>2 inhalers per 30 days</u>
	<u>Budesonide DPI (Pulmicort® Flexhaler®)</u>	<u>2 inhalers per 30 days</u>
	<u>Budesonide Respules 0.25 mg, 0.5 mg, 1 mg (Generic; Pulmicort® Respules®)</u>	<u>2 doses per day</u>
	<u>Budesonide/Formoterol MDI (AG; Generic; Symbicort®)</u>	<u>1 inhaler per 30 days</u>
	<u>Budesonide/Glycopyrrolate/Formoterol Inhalation (Breztri Aerosphere™)</u>	<u>1 inhaler per 30 days</u>
	<u>Ciclesonide MDI (Alvesco®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone Furoate Inhalation Powder (Arnuity Ellipta®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone MDI (AG; Flovent® HFA)</u>	<u>2 inhalers per 30 days</u>
	<u>Fluticasone Propionate Inhalation Powder (Armonair® Digihaler™)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone Propionate Inhalation Powder (Flovent® Diskus®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone/Salmeterol DPI (AG; Generic; Advair® Diskus®, Wixela Inhub®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone/Salmeterol Inhalation Powder (AG; AirDuo® RespiClick®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone/Salmeterol Inhalation Powder (AirDuo® Digihaler™)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone/Salmeterol MDI (AG; Advair HFA®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone/Umeclidinium/Vilanterol Inh Powder (Trelegy Ellipta®)</u>	<u>1 inhaler per 30 days</u>
	<u>Fluticasone/Vilanterol Inhalation Powder (AG; Breo Ellipta®)</u>	<u>1 inhaler per 30 days</u>
	<u>Mometasone Furoate MDI (Asmanex HFA®)</u>	<u>1 inhaler per 30 days</u>
	<u>Mometasone Inhalation Powder (Asmanex® Twisthaler®)</u>	<u>1 inhaler per 30 days</u>
	<u>Mometasone/Formoterol MDI (Dulera®)</u>	<u>1 inhaler per 30 days</u>

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Revision / Date	Implementation Date
Created POS Document	February 2020
Updated age for BH in POS Abbreviations chart / November 2020	January 2021
Formatting changes / August 2023	October 2023
<u>Added quantity limits / November 2024</u>	<u>March 2025</u>