

PAY AS LITTLE AS

\$**20**

BIN 610020
GROUP 99994096
ID#

ProAir[®]
digihaler[®]
(albuterol sulfate)
Inhalation Powder

AirDuo[®]
digihaler[®]
(fluticasone propionate
and salmeterol)
Inhalation Powder

ArmonAir[®]
digihaler[®]
(fluticasone propionate)
Inhalation Powder

**PAY AS
LITTLE AS \$20**

for each inhaler in the Digihaler Family*

BIN 610020
GROUP 99994096
ID#



teva

Pharmacist Instructions for a Patient With an Eligible Third-Party Payer:

For commercially insured/covered patients: Submit the claim to the primary Third-Party Payer first. Submit the balance due to PDMI, Group: 99994096, as a Secondary Payer COB (coordination of benefits) with the patient responsibility amount and Other Coverage Code: 08. Eligible Patients may pay as little as \$20.

For commercially insured/not covered patients: If the primary claim submission rejects for a managed care restriction (step-edit, prior authorization, or NDC block), continue the claim adjudication process and submit the balance due to PDMI, Group: 99994096, as a Secondary Payer COB with the patient responsibility amount and Other Coverage Code: 03. If the primary Third-Party Payer has denied the primary claim due to a Prior Authorization (PA) requirement, please initiate the PA process. Eligible Patients may pay approximately \$35. A PCN is not necessary for processing, but "PDMI" may be used in the PCN field if required by the pharmacy processing software.

For questions regarding Digihaler Savings Card processing, please call 1-866-955-9463.

Terms and Conditions for the Digihaler[®] Patient Savings Program:

The Digihaler[®] Portfolio Patient Savings Program is available to eligible patients who have been prescribed ProAir[®] Digihaler[®], AirDuo[®] Digihaler[®], or ArmonAir[®] Digihaler[®] and have commercial insurance. Eligible patients may pay as little as [\$20] for each Digihaler[®] Portfolio Product. Patients with prescription deductibles or insurance that does not cover or have a managed care restriction on their prescription (step-edit, prior authorization, or NDC block), may receive a lower benefit towards their out-of-pocket costs for each Digihaler[®] Portfolio Product. Maximum benefits apply and out-of-pocket expenses may vary. Patient is responsible for costs above maximum benefit amounts. This Program is restricted to residents of the United States and United States territories. Uninsured and cash-paying patients are NOT eligible for this Program. Patients enrolled in any state or federally funded healthcare program, including but not limited to, Medicare, Medigap, Medicaid, VA, DOD, TRICARE, Puerto Rico Government Health Insurance Plan, or Medicare-eligible patients enrolled in an employer-sponsored health plan or prescription drug benefit program for retirees, are NOT eligible for this Program. Teva Pharmaceuticals USA, Inc. and its affiliates reserve the right to change, rescind, revoke, or discontinue this Program at any time without notice. Please see complete Terms and Conditions at www.Digihaler.com.