



## Cystic Fibrosis Fund

The Cystic Fibrosis Fund is designed to assist eligible people living with cystic fibrosis with cost-shares associated with FDA approved CF-specific treatments and some related treatments. In addition, HealthWell is also able to assist with the full cost of some vitamins, supplements, hypertonic saline solution, nebulizer systems paired with treatments, and certain handsets.

### Treatments covered requiring the patient's insurance to cover or pay first:

Acetylcysteine solution	Kalydeco	Tobi
Actigall	Kitabis	Tobi Podhaler
AccuNeb	Nebcin	Tobramycin
Albuterol Sulfate HFA	Nebusal	Ultresa
Bethkis	Orkambi	Ventolin HFA
Cayston	Pancreaze	Viokace
Colistin	Pertzze	VoSpire ER
Combivent	Proair HFA	Xopenex
Creon	Proventil HFA	Xopenex HFA
DuoNeb	Pulmosal	Zenpep
Ipratropium combine with Albuterol	Pulmozyme	

### Covered Supplements

Alfamino Formula*	Jevity	Peptamen (all variations)*
Benecalorie	Kate Farms Nutrition*	Peptide*
Boost and all variations	Liquid Hope Formula	Perative*
Boost Kids Essential	Liquigen	Pregestimil*
Bright Beginnings Soy Pediatric Drinks	Megace	Pulmocare*
Carnation Instant Breakfast	Microlipid	Resource Breeze*
Compleat Tube Feeding and Pediatric	Myoplex Bars*	Scandical*
Duocal	Myoplex Shakes*	Scandishake
E028 Splash Formula	Neocate	Similac Formula (all variations)*
EleCare	Nutrament Nutrition Drink*	Sol Carb*
EleCare Formula	Nutramigen	Tolerex*
Enfamil Formula (all variations)	NutraSource Fiber Powder	Two Cal HN*
Ensure (all variations)	Nutren 2.0	Two Cal-HN Liquid*
Enteral Tube Feeding Formula	Nutren Jr.	Vital (1.0, 1.5, 2.0)*
ENU Nutritional Shake	NutriShake	Vivonex TEN*
Equate Nutritional Shake	Orgain Nutritional Shakes*	Walgreen's Nutritional Shake Plus*
Gerber Good Start Formula	Pedia Smart Powder Shake*	ZonePerfect Bars*
Glucerna	PediaSure (all variations)*	
Hormel Mighty Shakes	Pediasure Peptide*	

## Other Covered Products

Hypertonic Saline Solution or Hyper-Sal or Sodium Chloride\*  
(3, 7, and 10% HTS)\*

\*These products are eligible for reimbursement through HealthWell's paper claim process. The electronic design requirements of HealthWell's Pharmacy Card necessitate certain identifiers associated with each product; these products do not carry these identifiers.

## Covered Vitamins

Alive Multi-Vitamin	Mephyton (phytonadione-Vit. K)	Vitamin D2 50000 IU**
AquaDeks (drops/softgel/tabs)	MVW Complete Formulation Multivitamins (Softgels, Chewables and Drops)	Vitamin D3 1000 IU
Aqua-E	Nature Made Vitamins (A, D, E, K) or Multi-vitamins	Vitamin D3 2000 IU
Choiceful Multi-Vitamins	Poly-Vi-Sol Vitamin	Vitamin D3 4000 IU**
DEKA Vitamins (liquid, capsule)	Replesta Vitamin D**	Vitamin D3 5000 IU
Ferrous Sulfate 325mg Tablet	Vitamax	Vitamin D3 50000 IU
Libertas Pediatric (drops, chewable, softgel)	Vitamin D 1000 IU	Vitamin D3 8000 IU**
Libertas Vitamins (Multi-vitamins)	Vitamin D 400 IU	Vitamin K

\*\*The electronic design requirements of HealthWell's Pharmacy Card necessitate certain identifiers associated with each product; these products may not carry these identifiers. If there is a store brand of vitamins of a covered type (e.g., vitamin D or K) that cannot be processed through the HealthWell Pharmacy Card, please contact HealthWell at [grants@healthwellfoundation.org](mailto:grants@healthwellfoundation.org) with the product details and we will make every effort to add it to the pharmacy card file. Vitamins not available through the Pharmacy Card are eligible for reimbursement through HealthWell's paper claim process.

## Covered Nebulizers Handsets

**NOTE: All nebulizer and handset reimbursements must go through HealthWell's paper claim process.**

Durable Sidestream Handset	PARI PEP Handset
Hudson T Up-draft II Handset	PARI Sprint Handset
PARI Baby Handset	
PARI eRapid Nebulizer Handset	
PARI LC Plus Handset	

## Other Covered Paired Nebulizer Systems

Altera Nebulizer System<sup>i</sup>

<sup>i</sup> HealthWell covers nebulizer systems (compressor + handset) where a covered product can only be delivered using that system. In all other cases, HealthWell is able to assist with handset replacements.



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HealthWell is committed to supporting the CF Community and the established guidelines around our covered product list are meant to focus on the areas of greatest need for the majority of people living with CF. We understand there are additional areas to be addressed and, over time, it is our hope to be able to expand our coverage even further.

As an independent, non-profit organization, HealthWell works closely with many advocacy groups associated with the funds we manage, including the Cystic Fibrosis Foundation. While we may seek their insight related to some aspects our CF program, the decisions are ultimately ours.

**The following products have already been considered by HealthWell and, at this time, are not covered under the fund. We periodically reconsider coverage for these products; any changes to the list of covered products will be made available through our website at [www.healthwellfoundation.org](http://www.healthwellfoundation.org).**

Advair Diskus	Mucinex
Aerobika	Omeprazole
Antibiotics (e.g., Zyxov and Doxycycline)	Pantoprazole
Bactrim	Pari eRapid Nebulizer System (Compressor)
Benefiber	Pari LC Sprint Sinus Reusable Nebulizer with Nasal Adapter
Brovana	Pari Sinus Pulsating Aerosol Compressor System
Cefepine	Prevacid
Culturelle	Prilosec
Dulera	Probiotics
Feosol Complete Iron	Pulmicort
Filters for Pari Vios PRO, PRONeb Ultra, and SinuStar	Qvar, Qvar 80
Flintstone Multivitamin	Sidestream Nebulizer (Compressor)
Flonase	Symbicort
Gatorade	SMZ-TMP
Helios	Udo Blend 3, 6, 9
Homeopathic Treatment (e.g., herbal teas)	Vibra Lung Airway
Materials (e.g., feeding tubes and diabetic supplies)	Zyrtec