You may have been told that you have a weak heart or that you've been diagnosed with heart failure and a reduced ejection fraction (HFrEF). You may not yet be taking medicines for your heart, or you may be taking an ACEI (like lisinopril) or an ARB (like losartan), medicines that are often used to treat this condition. Either way, your clinician may be considering whether to have you take an ARNI. Currently there is only one ARNI, called: **sacubitril/valsartan**. For some patients with heart failure, clinical guidelines recommend that an ARNI replace an ACEI or ARB, if the ARNI is tolerated.

### ACEI:
Short for angiotensin-converting-enzyme inhibitor. ACEI may also be referred to as an “ACE inhibitor.”

### ARB:
Short for angiotensin receptor blocker.

What an ACEI and ARB do: They work by relaxing blood vessels, so that blood can flow more easily, which makes it easier for a weak heart to pump blood to the body.

### ARNI:
Short for angiotensin receptor-neprilysin inhibitor. An ARNI is a combination of an ARB and a neprilysin inhibitor drug. The ARB relaxes blood vessels so blood can flow more easily, and the neprilysin inhibitor works with the ARB to help the heart pump blood to the body. The resulting medicine has been shown to work better in some people than an ACEI.

### Everyone with your type of heart problem (HFrEF) should try to be on ONE of these three types of medicines:

<table>
<thead>
<tr>
<th>ACEI, such as:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- captopril</td>
</tr>
<tr>
<td>- enalapril</td>
</tr>
<tr>
<td>- lisinopril</td>
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<tr>
<td>- ramipril</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>ARB, such as:</th>
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<tbody>
<tr>
<td>- candesartan</td>
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<tr>
<td>- losartan</td>
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<tr>
<td>- valsartan</td>
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</table>

<table>
<thead>
<tr>
<th>ARNI, such as:</th>
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<tbody>
<tr>
<td>- sacubitril/valsartan</td>
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</tbody>
</table>

An ARNI cannot be taken within 36 hours of an ACEI. Other medication interactions are relatively rare. Tell your clinician and pharmacist all medications and natural remedies.

These next few pages will discuss some potential pros and cons of these medicines.
ACEI OR ARB VS. ARNI

What are the possible burdens or risks of each?

All 3 medication types can cause:
- lower blood pressure
- high blood potassium levels
- kidney problems
- allergic reactions

ACEI or ARB
A pill taken by mouth, usually once, twice, or three times a day

How it is taken

ARNI
A pill taken by mouth, twice a day

Cough can occur with an ACEI

Risks and Side Effects

Dizziness is more common with an ARNI than with an ACEI

What are the possible benefits of each?

A study comparing an ACEI to an ARNI in more than 8,000 adults with heart failure found:

After two years on an ACEI, 80 of 100 patients were still living and 20 died. After two years on an ARNI, 83 of 100 patients were still living and 17 died.

- Died within 2 years
- Lived
- Saved on an ARNI

Compared to other medicines, this is actually a pretty big benefit.

Patients also had a 3% reduction in hospitalization, or 3 out of 100 fewer patients went to the hospital while on an ARNI.
CONSIDERING A MAJOR TRADEOFF: COST

Because an ARNI is a new medicine, it is not available as a generic. This means an ARNI may be more expensive for you than an ACEI or an ARB.

Below are three scenarios showing patients who might be like you and their insurance plans.

<table>
<thead>
<tr>
<th>No Insurance</th>
<th>Commercial Insurance</th>
<th>Medicare Part D</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="No insurance" /></td>
<td><img src="image" alt="Commercial insurance" /></td>
<td><img src="image" alt="Medicare" /></td>
</tr>
<tr>
<td>This patient has no coverage. This means all medication costs are out-of-pocket. The ARNI is priced around $500 per month.</td>
<td>This patient has private coverage. Out-of-pocket cost can vary widely depending on the insurance plan. Cost can usually be further reduced to $10 per month with a coupon.</td>
<td>This patient has Medicare coverage. ARNI is approved for all Part D plans. Out-of-pocket costs vary across plans and by month (i.e. 'donut hole' months are more). The average co-pay is around $50 a month. Coupons are not allowed under Medicare.</td>
</tr>
</tbody>
</table>

ACEI (lisinopril) and ARB (losartan) costs less than $10 a month even with no insurance. Note: 3% of patients on an ACEI may also have an extra hospitalization and there are costs that come with that.

There are a few ways you may be able to get a better price for an ARNI:

- Ask your clinician or pharmacist if they know of any available discounts (coupons or Patient Assistance Programs) for an ARNI.
- Look for online resources, like goodrx.com, or the manufacturer of the ARNI sacubitril/valsartan (http://www.entresto.com/info/entresto-central.jsp), which may offer coupons for the medicine.
You may be wondering, “How do I find out how much an ARNI will cost ME?” There are two options to find out:

**Option 1: Call your insurance company.**
On the back of your insurance card, call the member services number and ask the representative the following:
“My clinician is considering prescribing the ARNI sacubitril/valsartan for me. Would you please tell me how much it would cost on my plan for a month of this medicine?” (60 tablets of 49/51 mg a month)

**Option 2: Call your pharmacy.**
Your clinician can begin a plan to switch you to an ARNI and write a prescription. You’ll be able to see the cost before you finalize the plan, and decide whether you’d like to move forward. If you feel the cost is too high, you may leave the prescription unfilled; however, it’s important you then get in touch with your clinician and work together to find a plan that will work better for you.

For many medicare plans monthly cost vary significantly by month over the course of a year.

**Write it down:** An ARNI will cost me per month: $__________

**ASK YOURSELF AND DISCUSS WITH YOUR CLINICIAN:**
1) How important are the benefits of this medicine to me?
2) Is the cost of this medicine within my monthly budget?
Mark on the line below where you think an ARNI falls for you and your lifestyle.

The **benefits** of an ARNI are **not all that important** to me

The **cost** of an ARNI is **way too much** for my monthly budget

The **benefits** of an ARNI are **really important** to me

The **cost** of an ARNI is **easily within** my monthly budget

**Making your decision**
Write down the questions or concerns you want to discuss with your clinician about an ARNI.