

Select Diabetes Agents Cost and Coverage

Updated 2/2024

Note: Insurance coverage information is subject to change and may vary based on the patient's individual plan.

Considerations from the American Diabetes Association (ADA)	Definitions	
<ul style="list-style-type: none"> 2024 ADA Standards of Care guidelines stress that first-line therapy for type 2 diabetes (T2DM) should be individualized and incorporate comorbidities and weight management goals. Treatment generally includes metformin and lifestyle modifications. For patients with established ASCVD (or at high risk), diabetic kidney disease, or heart failure, a sodium-glucose co-transporter 2 inhibitor (SGLT-2) or Glucagon-like peptide-1 receptor agonist (GLP-1RA) with <i>demonstrated cardiovascular benefit</i> is recommended as part of the glucose-lowering regimen <i>independent</i> of HbA1c. For patients <i>without established CVD</i>, medication specific factors, weight goals, side effect profile, insurance coverage, and patient preference should drive medication selection 	<p>Tier 1 (lowest copay) – Tier 4 (highest copay) NC: Not Covered PA: Prior Authorization ST: Step Therapy QL: Quantity Limit NTM: New to market, coverage not determined Preferred: covered w/out a PA</p>	<p>Copay Tier estimates are based on: BCBS-MA: Standard formulary, 3-tier plan Link HPHC: 3-tier value plan Link Tufts: 3-tier value plan Link WellSense ACO: WellSense MassHealth MCO/ACO plan Link (formerly BMC) BCBS-SR: Medicare Advantage HMO plans Link United Healthcare SR: AARP Medicare Advantage PPO Link Tufts Medicare Preferred: 5-tier HMO formulary Link HPHC BILH Employee Plan: Based on HMO Plus plan Link</p>

Medication	A1c Reduction	Commercial			MAH WellSense ACO	Medicare Advantage			HPHC BILH Employee Plan	
		BCBS-MA	HPHC	Tufts		BCBS-SR	United Healthcare SR	Tufts Medicare Preferred		
Glucagon-like Peptide-1 Receptor Agonist Agents										
GLP-1RA	Trulicity (dulaglutide) SubQ – WEEKLY	~1.5%	2/ST	2/ST	2/ST	Preferred	3/PA	3/PA	3/PA	Covered
	Ozempic (semaglutide) SubQ – WEEKLY	~1.4%	2/ST	2/ST	2/ST	PA	3/PA	3/PA	3/PA	Covered
	Rybelsus (semaglutide) ORAL – DAILY	~1%	2/ST	2/ST	2/ST	PA	3/PA	3/PA	3/PA	Covered
	Victoza (liraglutide) SubQ – WEEKLY	~1.5%	2/ST	2/ST	2/ST	Preferred Brand	NC	NC	3/PA	Covered
	Bydureon (exenatide ER) SubQ - WEEKLY	~1.4%	NC	2/ST	2/ST	PA	3/PA	3/PA	3/PA	NC
	Byetta (exenatide) SubQ – TWICE DAILY	~1%	NC	2/ST	2/ST	Preferred Brand	4/PA	4/PA	4/PA	NC
	Dual GLP-1RA/ GIP									
	Mounjaro (tirzepatide) SubQ - WEEKLY	~2%	2/ST	2/ST	2/ST	PA	3/PA	3/PA	3/PA	Covered

Medication	A1c Reduction	Commercial			MAH WellSense ACO	Medicare Advantage			HPHC BILH Employee Plan
		BCBS-MA	HPHC	Tufts		BCBS-SR	United Healthcare SR	Tufts Medicare Preferred	
Sodium-glucose co-transporter 2 Inhibitors (SGLT-2i)									
Jardiance (empagliflozin)	~0.7% - 1%	2/ST	2	2	Preferred	3	3/QL	3	Covered
Farxiga (dapagliflozin)		2/ST	2	2	Preferred	3	3/QL	3	Covered
Dapagliflozin (generic)		NC	NC	NC	NC	NC	NC	NC	NC
Invokana (canagliflozin)		NC	NC	NC	Preferred	NC	NC	NC	NC
Steglatro (ertugliflozin)		NC	NC	NC	PA	NC	NC	NC	NC
Brenzavvy (bexagliflozin)		NC	NC	NC	NC	NC	NC	NC	NC
Dipeptidyl peptidase-4 Inhibitors (DPP-4i)									
Januvia (sitagliptin)	~0.5% - 1%	2/ST	2	2	Preferred	3	3	3	NC
Zituvio (sitagliptin)		NC	NTM	NTM	NC	NC	NC	NC	NC
Tradjenta (linagliptin)		NC	2	2	Preferred	3	3	3	NC
Saxagliptin (generic)		1/ST	NC	NC	NC	NC	NC	NC	NC
Nesina (alogliptin)		NC	NC	NC	PA	NC	NC	NC	NC
Alogliptin (generic)		NC	3/ST	3/ST	NC	NC	NC	NC	NC

Medication		Commercial			MAH WellSense ACO	Medicare Advantage			HPHC BILH Employee Plan
		BCBS-MA	HPHC	Tufts		BCBS-SR	United Healthcare SR	Tufts Medicare Preferred	
GLP-1RA Combination Products									
Xultophy (liraglutide/ degludec)		NC	3/PA	3/PA	PA	3	NC	NC	Covered
Soliqua (lixisenatide/ glargine)		NC	NC	NC	PA	3	3/PA	NC	Covered
<p>Xultophy: contains 3.6 mg liraglutide + 100 units degludec per mL and provides an additional 1% A1c reduction vs. degludec alone</p> <p>Soliqua: contains 33 mcg lixisenatide + 100 units glargine per mL and provides an additional 0.5% A1c reduction vs. glargine alone</p>									
SGLT-2i Combination Products									
SGLT-2/ Metformin	Invokamet (canagliflozin + metformin)	NC	NC	NC	Preferred	NC	NC	NC	NC
	Synjardy (empagliflozin + metformin)	2/ST	2	2	Preferred	3	3/QL	3	Covered
	Xigduo (dapagliflozin + metformin)	2/ST	2	2	Preferred	3	3/QL	3	Covered
	Dapagliflozin + metformin (generic)	NC	NC	NC	NC	NC	NC	NC	NC
	Segluromet (ertugliflozin + metformin)	NC	NC	NC	PA	NC	NC	NC	NC
SGLT-2/ DPP-4	Glyxambi (linagliptin + empagliflozin)	2/ST	2	2	PA	3	3/QL	3	Covered
	Steglujan (ertugliflozin + sitagliptin)	NC	NC	NC	PA	NC	NC	NC	NC
	Qtern (dapagliflozin + saxagliptin)	NC	NC	NC	PA	NC	NC	NC	NC

Medication		Commercial			MAH WellSense	Medicare Advantage			HPHC BILH
		BCBS-MA	HPHC	Tufts	ACO	BCBS-SR	United Healthcare SR	Tufts Medicare Preferred	Employee Plan
DPP-4i Combination Products									
DPP-4/ Metformin	Janumet (sitagliptin + metformin)	2/ST	2	2	Preferred	3	3/QL	3	Covered
	Jentaduetto (linagliptin + metformin)	NC	2	2	Preferred	3	3/QL	3	NC
	Saxagliptin + metformin (generic)	NC	NC	NC	NC	NC	NC	NC	NC
	alogliptin + metformin (generic)	NC	NC	NC	NC	NC	NC	NC	NC
DPP-4/TZD	alogliptin + pioglitazone (generic)	NC	NC	NC	NC	NC	NC	NC	NC

Medication	Commercial			MAH	Medicare Advantage			HPHC BILH	Pharmacodynamics			
	BCBS-MA	HPHC	Tufts	WellSense ACO	BCBS-SR	United Healthcare SR	Tufts Medicare Preferred	Employee Plan	Onset	Peak	Duration	Stability at room temp
Long Acting Insulin												
Tresiba (degludec)	NC	3/PA	3/PA	Brand preferred	3	3	3	Covered	~ 1 hr	~ 9 hr	> 24 hr	56 days (do not refrigerate after opening)
U-100 & U-200												
Toujeo (glargine)	2	2	2	Preferred	3	3	3	Covered	> 6 hr	12-16 hr	> 24 hr	28 days
U-300												
Lantus (glargine)	2	2	2	Brand preferred	3	3	3	Covered	~ 1 hr	none	10.8 to > 24 hr	28 days
Basaglar (glargine recombinant)#	2	NC	NC	PA	3	NC	NC	NC	~ 1 hr	none	24 hr	28 days
Semglee (glargine-yfgn)#	NC	NC	NC	PA	NC	NC	NC	NC	~ 1 hr	none	10.8 to > 24.0 hr	28 days
Insulin glargine -yfgn#	NC	NC	NC	NC	NC	NC	NC	NC	~ 1 hr	none	10.8 to > 24.0 hr	28 days
Levemir (detemir)	NC	3/PA	3/PA	Preferred	NC	3	3	NC	1-2 hr	6-8 hr	7.6 to >24hr	42 days
Intermediate Acting Insulin												
Humulin N (NPH)	2	2	2	PA	NC	3	3	NC	1-2 hr	6.5 hr	4-12 hr	Vial: 31 days Pen: 14 days
Novolin N (ReliOn)^ (NPH)	NC	3/PA	3/PA	Preferred	3	NC	NC	Covered	90 min	16-24+ hr	Up to 24 hr	Vial: 42 days
Short Acting Insulin												
Humulin R (human regular insulin)	2	2	2	Preferred	5	3	3	Covered	~ 30 min	U-100: ~3 hr U-500: 4-8 hr	U-100: ~ 8 hr U-500: 13-24 hr	U-100 Vial: 31 days U-500 Vial: 40 days U-500 Pen: 28 days
(U-100 & U-500)												
Novolin R (ReliOn)^ (human regular insulin)	NC	3/PA	3/PA	Preferred	3	NC	NC	Covered	~ 30 min	1.5-3.5 hr	~ 8 hr	42 days

Medication	Commercial			MAH WellSense ACO	Medicare Advantage			HPHC BILH Employee Plan	Pharmacodynamics			
	BCBS- MA	HPHC	Tufts		BCBS- SR	United Healthcare SR	Tufts Medicare Preferred		Onset	Peak	Duration	Stability at room temp
Rapid Acting Insulin												
Humalog (lispro) U-100 & U-200	2	2	2	Preferred, 100U PA (brand)	NC	3	3	NC	15-30 min	30-150 min	3-6.5 hr	28 days
Novolog (aspart) ReliOn™ NovoLog^	NC	3/PA	3/PA	PA	3	NC	NC	Covered	10-20 min	40-50 min	3-5 hr	28 days
Apidra (insulin glulisine)	NC	NC	NC	Preferred	NC	NC	NC	NC	25 min	~ 45 min	4-5.5 hr	28 days
Fiasp (insulin aspart)	NC	NC	NC	Brand PA	3	NC	NC	Covered	16-20 min	90-130 min	5-7 hr	28 days
Admelog (insulin lispro U-100) #	NC	NC	NC	PA	3	NC	NC	NC	15-30 min	30-150 min	3-6.5 hr	28 days
Insulin Lispro #	NC	2	2	Preferred	NC	3	NC	NC	15-30 min	30-90 min	3-6.5 hr	28 days
Lyumjev (insulin lispro-aabc) #	NC	2	2	PA	NC	3	NC	NC	15-17 min	120-170 min	4.6 to 7.3 hr	28 days
Biphasic Premixed Insulin												
Humalog Mix 75/25 (75% lispro protamine, 25% lispro)	2	2	2	Preferred, brand PA	NC	3	3	NC	15-30 min	1-6.5 hr	Up to 24 hr	Vial: 28 days, Pen: 10 days
Insulin Lispro Protamine & Insulin Lispro Injectable Suspension Mix 75/25#	NC	2	2	NC	NC	3	NC	NC	15-30 min	1-6 hr	Up to 22 hr	Pen:10 days
Humalog Mix 50/50 (50% lispro protamine, 50% lispro)	2	2	2	Preferred	NC	3	3	NC	15-30 min	0.8-4.8 h.	≥22 hr	Vial: 28 days Pen: 10 days
Novolog Mix 70/30 (70% aspart protamine, 30% aspart)	NC	3/PA	3/PA	Brand PA	3	NC	NC	Covered	10-20 min	1-4 hr	Up to 24 hr	Vial: 28 days, Pen: 14 days
Humulin 70/30 (70% NPH, 30% Regular)	2	2	2	Preferred	NC	3	3	NC	~30 min	1.5-6.5 hr	18-24 hr	Vial: 31 days, Pen: 10 days
Novolin 70/30 (ReliOn) ^ (70% NPH, 30% Regular)	NC	3/PA	3/PA	Preferred	3	NC	NC	Covered	30 min	2-12 hr	Up to 24 hr	Vial: 42 days

^ReliON Novolog insulin is now available from Walmart by prescription only - [Walmart: ReliON Insulin: https://www.walmart.com/cp/relion-diabetic-care/3769564](https://www.walmart.com/cp/relion-diabetic-care/3769564)

#Designation: newer to market insulins that are classified as either a branded copy, unbranded biologics, or biosimilar.

- Currently, there is confusion surrounding interchangeability at the pharmacy with the recent launches of these insulin products. It is however important to note that in Massachusetts these formulations have poor health plan coverage but may provide cost saving options in select patient populations. Writing these prescriptions as generic will allow for substitution at the pharmacy without provider approval. Ex: Writing a prescription for insulin glargine can be substituted for a Mass Health patient at the pharmacy for Lantus (preferred insulin glargine).

Manufacturer Copay Cards, Patient Assistance Program and Clinical Resources

Glucagon-like peptide-1 receptor agonist (GLP-1 RA)

- Trulicity: [Link](#)
- Victoza: [Link](#)
- Ozempic: [Link](#)
- Bydureon BCise: [Link](#)
- Byetta: [Link](#)
- Rybelsus: [Link](#)

GLP-1 RA and Insulin Combination Products

- Xultophy: [Link](#)
- Soliqua: [Link](#)

Sodium-glucose co-transporter 2 Inhibitors (SGLT-2 Inhibitors)

- Invokana: [Link](#)
- Farxiga: [Link](#)
- Jardiance: [Link](#)
- Steglatro: [Link](#)

SGLT-2 Inhibitor Combination Products

- Invokamet/XR: [Link](#)
- Synjardy/XR: [Link](#)
- Xigduo [Link](#)
- Segluromet: [Link](#)

SGLT-2 Inhibitor/DPP-4 Inhibitor Combination

Products

- Glyxambi: [Link](#)
- Steglujan: [Link](#)
- Qtern: [Link](#)

Dipeptidyl peptidase-4 Inhibitors (DPP-4 Inhibitors)

- Tradjenta: [Link](#)
- Januvia: [Link](#)
- Nesina: [Link](#)

DPP-4 Inhibitors Combination Products

- Jentadueto/XR: [Link](#)
- Janumet/XR: [Link](#)

Long Acting Insulin

- Lantus: [Link](#)
- Basaglar: [Link](#)
- Levemir: [Link](#)
- Toujeo/Max: [Link](#)
- Tresiba: [Link](#)

Rapid Acting Insulin

- Humalog: [Link](#)
- Novolog: [Link](#)
- Apidra: [Link](#)
- Fiasp: [Link](#)
- Admelog: [Link](#)
- Insulin Lispro: [Link](#)
- Lyumjev: [Link](#)

Biphasic Premixed Insulin

- Humalog 75/25: [Link](#)
- Insulin Lispo Protamine/Insulin Lispro: [Link](#)
- Humalog 50/50 [Link](#)
- Novolog 70/30: [Link](#)
- Humulin 70/30: [Link](#)
- Novolin 70/30 (ReliON): none available, see Walmart for cash pricing

Intermediate Acting Insulin

- Humulin N: [Link](#)
- Novolin N (ReliON): none available, see Walmart for cash pricing

Short Acting Insulin

- Humulin R: [Link](#)
- Novolin R (ReliON): none available, see Walmart for cash pricing

Additional Savings Programs:

- Sanofi Insulins ValYou Savings Program – for patients with **no** insurance, cost-savings for Admelog, Toujeo, Lantus and Apidra: [Link](#)
- Lilly's Insulin Value Program – for patients with commercial **or** no insurance, \$35 copays for Lilly insulins: [Link](#)
- Good Rx: [Link](#)

Clinical Resources: Lexicomp: [See this link](#), accessed December 21, 2020 | **UptoDate:** [See this link](#), accessed February 8, 2022 | **Pharmacist's Letter:** PL Detail-Document, Drugs for Type 2 Diabetes. Pharmacist's Letter/Prescriber's Letter. July 2019. Compare Cardiovascular Benefits of SGLT2 Inhibitors for Type 2 Diabetes, January 2019.