

## DIABETES (1 of 5)

### Metformin

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
Glucophage	<i>metformin</i>	\$7 (500mg) walmart \$4	Generic	\$0	\$5	\$5-10	\$0	\$0	\$0
Glucophage XR	<i>metformin ER</i>	\$7 (500mg) walmart \$4	Generic	\$0	\$5	\$5-10	500mg, 750mg only	500mg, 750mg only	\$0

### Sulfonylurea/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
Amaryl	<i>glimepiride</i>	\$6 walmart \$4	Generic	\$0	\$5	\$5-10	\$0	\$0	\$0
Glucotrol	<i>glipizide</i>	\$6 walmart \$4	Generic	\$0	\$5	\$5-10	\$0	\$0	\$0
Glucotrol XL	<i>glipizide ER</i>	\$12	Generic	\$0	\$5	\$5-10	\$0	\$0	\$0
Micronase, Diabeta	<i>glyburide</i>	\$6 walmart \$4	Generic	\$0	\$5	\$5-10	\$0	\$0	\$0
Metaglip	<i>glipizide/metformin</i>	\$22	Generic	\$0	\$5	\$5-10	\$0	\$0	need PA
Glucovance	<i>glyburide/metformin</i>	\$15	Generic	\$0	\$5	\$5-10	\$0	\$0	\$0

### TZD/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
Actos	<i>pioglitazone</i>	\$10	Generic	\$0	\$5	\$5-10	\$0	step therapy*	\$0
Duetact	<i>pioglitazone/ glimepiride</i>	\$122	Generic	\$0	\$5	\$5-10	\$0	need PA	need PA
ACTOplus met	<i>pioglitazone/ metformin</i>	\$55	Generic	\$0	\$5	\$5-10	\$0	step therapy*	need PA

\*Ohana: Actos, ACTOplus met - Must fail metformin, alogliptin or combination of the two within past 100 days

## DIABETES (2 of 5)

### DPP-4 Inhibitors/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
Januvia	<i>sitagliptin</i>	\$469	Brand	need PA	\$25	\$25	step therapy*	step therapy*	need PA
Tradjenta	<i>linagliptin</i>	\$338	Brand	need PA	\$25	\$25	need PA	need PA	need PA
Onglyza	<i>saxagliptin</i>	\$316	Brand	need PA	\$50	non-preferred	need PA	need PA	need PA
Nesina	<i>alogliptin</i>	\$172	Generic	\$0	\$5	\$5-\$10	need PA	\$0	step therapy*
Kazano	<i>alogliptin/metformin</i>	\$172	Generic	\$0	\$5	\$5-\$10	need PA	\$0	step therapy*
Janumet	<i>sitagliptin/metformin</i>	\$435	Brand	need PA	\$25	\$25	step therapy*	step therapy*	need PA
Janumet XR	<i>sitagliptin/metformin ER</i>	\$435	Brand	need PA	\$25	\$25	step therapy*	step therapy*	need PA
Kombiglyze XR	<i>saxagliptin/metformin ER</i>	\$394	Brand	need PA	\$50	non-preferred	need PA	need PA	need PA

### GLP-1 Mimetic

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
Byetta	<i>exenatide</i>	\$474 (3ml)	Brand	need PA	\$50	need PA	need PA	need PA	need PA
Bydureon Bydureon BCise	<i>exenatide ER</i>	\$514 (8ml)	Brand	need PA	\$50	need PA	need PA	preferred but need PA	need PA
Victoza	<i>liraglutide</i>	\$440 6ml	Brand	preferred but need PA	\$25	\$25	step therapy*	preferred but need PA	need PA
Trulicity	<i>dulaglutide</i>	\$699	Brand	need PA	\$25	\$25	step therapy*	need PA	step therapy*
Ozempic	<i>Semaglutide</i>	\$773	Brand	Preferred but need PA	\$25	\$25	step therapy*	need PA	need PA

\*HMSA Quest: **Trulicity, Victoza, Ozempic** - trial of metformin 30 days

**Januvia, Janumet, Janumet XR** trial of metformin, sulfonylurea, or insulin sensitizer.

Ohana: all GLP-1 mimetic drugs need a PA, ever **Bydureon** and **Victoza** which are the preferred drugs. Non-preferred drugs may require explaining why Bydureon and Victoza are not a good choice.

**Januvia, Janumet, Janumet XR** - must fail metformin, alogliptin, or combination of the two within 100 days

United Health Care: **Nesina, Kazano, Trulicity, Tanzeum**, --trial of Metformin 1500mg qd for 90 days

## DIABETES (3 of 5)

### SGLT2 Inhibitors/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
Invokana	canagliflozin	\$453	Brand	need PA	\$25	metformin first	step therapy*	need PA	needs PA
Invokamet	canagliflozin/metformin	\$453	Brand	need PA	\$25	metformin first	step therapy*	need PA	needs PA
Invokamet XR	canagliflozin/metformin	\$453	Brand	need PA	\$25	metformin first	step therapy*	need PA	needs PA
Jardiance	empagliflozin	\$415	Brand	need PA	\$25	metformin first	need PA	need PA	needs PA
Synjardy	empagliflozin/metformin	\$415	Brand	need PA	\$25	metformin first	need PA	need PA	needs PA
Synjardy XR	empagliflozin/metformin	\$415	Brand	need PA	\$25	metformin first	need PA	need PA	needs PA
Farxiga	dapagliflozin	\$457	Brand	need PA	\$25	non-preferred	need PA	need PA	need PA
Xigduo XR	dapagliflozin/metformin ER	\$457	Brand	need PA	\$25	non-preferred	need PA	need PA	need PA
Steglatro	ertugliflozin	\$287	Brand	preferred need PA	\$50	not covered	needs PA	step therapy*	step therapy*
Segluromet	ertugliflozin/metformin	\$274	Brand	preferred need PA	\$50	not covered	needs PA	step therapy*	step therapy*

\*Aloha Care: - **Jardiance** - Only FDA approval use that is consistent with ADA or AACE guidelines for T2DM and A1C monitoring within the past 3 months.

HMSA Quest: **Invokana, Invokamet, Invokamet XR** - must try metformin, sulfonylurea, or insulin sensitizer

Ohana: **Steglatro, Segluromet** - must try metformin, metformin er, or Riomet within past 100 days

United Health Care: **Steglatro, Segluromet** --90 day trial of 1500mg/day metformin

## DIABETES (4 of 5)

### Insulin (Rapid-Acting)

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	UHC Quest
<b>Apidra</b>	<i>glulisine</i>	\$210 10ml, \$430 15ml pen	Brand	need PA	\$15 vial, pen	need PA	\$0 vial, pen	vial, pen	need PA
<b>Humalog</b>	<i>lispro</i>	\$196 10 ml, \$423 15ml pen	Brand	vial, pen	\$15 vial, pen	need PA	\$0 vial, pen	need PA	need PA
<b>Admelog</b>	<i>lispro</i>	\$485	Brand	vial, pen	\$15 vial, pen	not covered	need PA	vial, pen	vial - covered (pen - need PA)
<b>Novolog</b>	<i>aspart</i>	\$197 10ml, \$375 15ml pen	Brand	need PA	\$5 vial, pen	\$5-10	\$0 vial, pen	needs PA	need PA

### Insulin (Short-Acting)

<b>Humulin R</b>	<i>insulin</i>	\$89 vial	OTC	vial only	\$5 vial, pen	need PA	\$0 vial, pen	vial, pen	vial
<b>Novolin R</b>	<i>insulin</i>	\$28 Walmart	OTC	vial	\$15 vial	\$5-10 vial, pen	\$0 vial, pen	vial	vial

### Insulin (Intermediate-Acting)

<b>Humulin N</b>	<i>NPH</i>	\$309 15ml pen	OTC	vial, pen	\$15 vial, pen	need PA	\$0 vial, pen	vial, pen	vial
<b>Novolin N</b>	<i>NPH</i>	\$29 Walmart	OTC	vial, pen	\$15 vial	\$5-10 vial, pen	\$0 vial, pen	vial	vial

### Insulin (Long-Acting)

<b>Lantus</b>	<i>glargine</i>	\$240 10ml, \$371 15ml pen	Brand	Pen	\$5 vial, pen	\$5-10 Vial, Pen	need PA	need PA	need PA
<b>Basaglar</b>	<i>glargine</i>	\$248	Brand	Pen	\$5 pen	non-preferred	\$0 pen	\$0 pen	\$0 pen
<b>Toujeo</b>	<i>glargine</i>	\$308	Brand	need PA	not covered	non-preferred	need PA	need PA	need PA
<b>Levemir</b>	<i>detemir</i>	\$189 10ml	Brand	need PA	\$5 vial, pen	Preferred but need PA	need PA	need PA	need PA

### Insulin (Ultra Long-Acting)

<b>Tresiba</b>	<i>degludec</i>	???	Brand	need PA	\$5 pen	need PA	need PA	need PA	need PA
----------------	-----------------	-----	-------	---------	---------	---------	---------	---------	---------

## DIABETES (5 of 5)

### Insulin (Pre-Mixed)

Humalog Mix 50/50	<i>lispro mix</i>	\$131 10ml, \$841 15ml pen	Brand	need PA	\$5 pen	need PA	\$0 vial, pen	vial, pen	vial
Humalog Mix 75/25	<i>lispro mix</i>	\$158 10ml, \$423 15ml pen	Brand	need PA	\$5 pen	need PA	\$0 vial, pen	vial, pen	vial
Humulin 70/30	<i>NPH/reg mix</i>	\$90 10ml, \$385 15ml pen	OTC	vial, pen	\$5 pen	need PA	\$0 vial, pen	vial, pen	vial
Novolin 70/30	<i>NPH/reg mix</i>	\$25 Walmart	OTC	vial, pen	\$5 vial, pen	\$5-10 vial, pen	\$0 vial, pen	vial	vial
Novolog 70/30	<i>aspart mix</i>	\$240 10ml, \$375 15 ml pen	Brand	need PA	\$5 pen	\$5-10	\$0 vial, pen	vial, pen	vial

### Glucometers

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA	HMSA Quest	Ohana	United Healthcare
<b>Accu-Chek Aviva Plus, Accu-Chek Compact Plus</b>		free meter*	Brand	need PA	Accu-check compact plus	not covered	need PA	footnote	need PA
<b>Bayer Breeze 2/ Bayer Contour</b>		free meter*	Brand	need PA	not covered	not covered	need PA	need PA	need PA
<b>Freestyle Lite/ Freestyle Freedom Lite/ Freestyle InsulinX</b>		free meter*	Brand	need PA	not covered	Freestyle, Freestyle Lite	Freestyle, Freestyle Lite, Insulin X	footnote	need PA
<b>Onetouch (Ultra2, Ultramini, or Verio)</b>		free meter*	Brand	may need PA	One Touch Verio	One Touch (ultra, verio), Surestep	need PA	Ultra 2, Ultra Mini, Verio	2 strips/day (no insulin) 6 strips/day (insulin)

Ohana - glucometer. Website and customer service both say accu-chek (AvivaPlus, Compact, Nano 100 stp/30d) and freestyle (Lite, Freedom Lite) covered, but pharmacists tell us onetouch glucometer/lancets covered (verio, ultra2, ultramini) although says need PA.

\*\*\*CVS State employees: Accu-Chek or One Touch glucometers- call 1-800-588-4456.