

## DIABETES (1 of 6)

### Metformin

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

### TZD/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	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

\*Aloha Care: Sulfonylurea/Combinations - must fail metformin alone first

TZD/Combinations - must fail metformin alone AND fail either a GLP-1 or DPP-4 or SGLT2 agent alone

## DIABETES (2 of 6)

### DPP-4 Inhibitors/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
Januvia	sitagliptin	\$469	Brand	\$0*	\$25	\$25	step therapy*	need PA	need PA
Tradjenta	linagliptin	\$338	Brand	need PA	\$25	not covered	need PA	need PA	need PA
Onglyza	saxagliptin	\$316	Brand	need PA	\$50	not covered	need PA	need PA	need PA
Nesina	alogliptin	\$172	Generic	need PA	\$5	not covered	need PA	\$0	step therapy*
Oseni	alogopitin/pioglitazone	\$95	Brand	need PA	\$5	not covered	need PA	need PA	need PA
Kazano	alogliptin/metformin	\$172	Generic	need PA	\$5	not covered	need PA	\$0	step therapy*
Jentadueto	linagliptin/metformin	\$437	Brand	need PA	\$25	not covered	need PA	need PA	need PA
Jentadueto XR	linagliptin/metformin ER	\$437	Brand	need PA	\$25	not covered	need PA	need PA	need PA
Janumet	sitagliptin/metformin	\$435	Brand	\$0*	\$25	\$25	step therapy*	fail Nesina*	need PA
Janumet XR	sitagliptin/metformin ER	\$435	Brand	\$0*	\$25	\$25	step therapy*	fail Kazano*	need PA
Kombiglyze XR	saxagliptin/metformin ER	\$394	Brand	need PA	\$50	not covered	need PA	need PA	need PA

### GLP-1 Mimetic

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
Adlyxin	lixisenatide	662 (6ml)	Brand	need PA	\$50	need PA	need PA	need PA	step therapy*
Byetta	exenatide	\$474 (3ml)	Brand	need PA	\$50	need PA	need PA	need PA	need PA
Bydureon Bydureon BCise	exenatide ER	\$514 (8ml)	Brand	need PA	\$50	need PA	need PA	preferred but need PA	need PA
Victoza	liraglutide	\$440 6ml	Brand	\$0*	\$25	\$25	need PA	preferred but need PA	step therapy*
Trulicity	dulaglutide	\$699	Brand	\$0*	\$25	\$25	step therapy*	need PA	step therapy*
Ozempic	semaglutide	\$773	Brand	\$0*	\$25	\$25	step therapy*	need PA	need PA
Rybelsus	semaglutide (oral)	\$813	Brand	need PA	\$25	\$25	step therapy*	need PA	need PA

\*Aloha Care: Januvia, Janumet, Janumet XR - fail metformin. Victoza, Trulicity, Ozempic -fail metformin.

\*HMSA Quest: Trulicity, Victoza, Ozempic -fail 30d metformin. Januvia, Janumet, Janumet XR -fail metf, sulfonyl, or insulin sensitizer

Ohana: GLP-1 need PA, even Bydureon and Victoza which are preferred. Non-preferred GLP-1 - explain why not preferred. Januvia, Janumet, Janumet XR - fail metformin or alogliptin.

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

## DIABETES (3 of 6)

### SGLT2 Inhibitors/Combinations

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
Invokana	canagliflozin	\$453	Brand	need PA	\$25	not covered	need PA	need PA	needs PA
Invokamet	canagliflozin/metformin	\$453	Brand	need PA	\$25	not covered	need PA	need PA	needs PA
Invokamet XR	canagliflozin/metformin	\$453	Brand	need PA	\$25	not covered	need PA	need PA	needs PA
Jardiance	empagliflozin	\$415	Brand	\$0*	\$25	\$25	need PA	need PA	needs PA
Synjardy	empagliflozin/metformin	\$415	Brand	\$0*	\$25	\$25	need PA	need PA	needs PA
Synjardy XR	empagliflozin/metformin ER	\$415	Brand	\$0*	\$25	\$25	need PA	need PA	needs PA
Farxiga	dapagliflozin	\$457	Brand	need PA	\$25	\$25	need PA	need PA	preferred, need PA
Xigduo XR	dapagliflozin/metformin ER	\$457	Brand	need PA	\$25	\$25	need PA	need PA	need PA
Steglatro	ertugliflozin	\$287	Brand	need PA	\$50	not covered	step therapy*	step therapy*	step therapy*
Segluromet	ertugliflozin/metformin	\$274	Brand	need PA	\$50	not covered	step therapy*	step therapy*	step therapy*
Qtern	dapagliflozin/saxagliptin	\$555	Brand	need PA	\$25	not covered	need PA	need PA	need PA
Glyxambi	empagliflozin/linagliptin	\$582	Brand	need PA	\$25	\$25	need PA	need PA	need PA
Steglujan	ertugliflozin/sitagliptin	\$531	Brand	need PA	\$50	not covered	need PA	need PA	need PA
Trijardy XR	empagliflozin/linagliptin/metformin ER	\$568	Brand	need PA	\$25	non preferred	need PA	need PA	need PA

\*Aloha Care: - **Jardiance, Synjardy, Synjardy XR** - Must try metformin first

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

Ohana: **Steglatro, Segluromet** - must fail metformin (ER), riomet, alogliptin, alogliptin/metformin within past 100 days.

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

## DIABETES (4 of 6)

### Insulin (Rapid-Acting)

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
<b>Apidra</b>	<i>glulisine</i>	\$210 10ml, \$430 15ml pen	Brand	need PA	\$25 vial, pen	not covered	vial, pen	vial, pen	need PA
<b>Humalog</b>	<i>lispro</i>	\$196 10 ml, \$423 15ml pen	Generic	generic vial, pen	\$5 vial, pen	not covered	vial, pen	need PA	need PA
<b>Admelog</b>	<i>lispro</i>	196 15ml \$105 vial	Brand	vial, pen	\$25 vial, pen	not covered	need PA	vial, pen	vial - covered (pen - need PA)
<b>Fiasp</b>	<i>aspart</i>	\$341 15 ml pen \$296 vial	Brand	need PA	\$5 vial, pen	not covered	vial, pen	need PA	need PA
<b>Novolog</b>	<i>aspart</i>	\$197 10ml, \$375 15ml pen	Brand	need PA	\$5 vial, pen	\$5-10	vial, pen	need PA	need PA

### Insulin (Short-Acting)

<b>Humulin R</b>	<i>insulin</i>	\$89 vial	OTC	vial only	\$5 vial, pen	not covered	vial, pen	vial, pen	vial
<b>Humulin R-500</b>	<i>insulin</i>	\$100 vial	Brand	need PA	\$5 vial, pen	not covered	vial	vial, pen	need PA
<b>Novolin R</b>	<i>insulin</i>	\$28 Walmart	OTC	vial, pen	\$5 vial, pen	\$5-10 vial	vial, pen	vial	vial

### Insulin (Intermediate-Acting)

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

### Insulin (Long-Acting)

<b>Lantus</b>	<i>glargine</i>	\$240 10ml, \$371 15ml pen	Brand	need PA	<b>\$5 vial, pen</b>	not covered	need PA	need PA	need PA
<b>Basaglar</b>	<i>glargine</i>	\$248	Brand	need PA	\$5 pen	not covered	pen	\$0 pen	\$0 pen
<b>Semglee</b>	<i>glargine</i>	\$112 10ml \$164 15ml	Brand	\$0	\$25 vial, pen	not covered	need PA	\$0	\$0
<b>Toujeo</b>	<i>glargine</i>	\$308	Brand	need PA	\$5 vial, pen	\$25	need PA	need PA	need PA
<b>Levemir</b>	<i>detemir</i>	\$189 10ml	Brand	need PA	\$5 vial, pen	not covered	need PA	need PA	need PA

### Insulin (Ultra Long-Acting)

<b>Tresiba</b>	<i>degludec</i>	\$356 10ml \$530 15ml pen	Brand	need PA	\$5 vial, pen	\$25 vial, pen	need PA	need PA	need PA
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### Insulin (Pre-Mixed)

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
<b>Humalog Mix 50/50</b>	<i>lispro mix</i>	\$131 10ml, \$841 15ml pen	Brand	vial, pen	\$5 pen	not covered	vial, pen	vial, pen	vial
<b>Humalog Mix 75/25</b>	<i>lispro mix</i>	\$158 10ml, \$423 15ml pen	Brand	vial, pen	\$5 pen	not covered	pen	vial, pen	vial
<b>Humulin 70/30</b>	<i>NPH/reg mix</i>	\$90 10ml, \$385 15ml pen	OTC	vial, pen	\$5 pen	not covered	vial, pen	vial, pen	vial
<b>Novolin 70/30</b>	<i>NPH/reg mix</i>	\$25 Walmart	OTC	vial, pen	\$5 vial, pen	\$5-10 vial, pen	vial, pen	vial	vial
<b>Novolog 70/30</b>	<i>aspart mix</i>	\$240 10ml, \$375 15ml pen	Brand	vial, pen	\$5 pen	\$5-10 vial, pen	vial	need PA	need PA

### Glucometers

BRAND	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
<b>Accu-Chek Aviva Plus, Accu-Chek Compact Plus, Accu-Chek Instant</b>		free meter*	Brand	need PA	not covered	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/ Freestyle Libre/ Freestyle Libre 2</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	Need PA	not covered	One Touch (ultra, verio), Surestep	need PA	Ultra 2, Ultra Mini, Verio	Ultra, ultra2, ultra mini, verio. 2 strips/day (no insulin) 6 strips/day (insulin)
<b>Other meters, e.g. True Metrix</b>		free meter*	Brand	True Metrix (see footnote)	--	---	---	---	---

Aloha Care - Diabetes glucose meters are covered by the drug manufacturer. It is not covered by AlohaCare. To have a meter delivered to the patient's home, have the patient call 1-866-788-9618. Or, the clinician can send a prescription for a TRUE METRIX glucose meter to the pharmacy. The pharmacy can bill the drug manufacturer for the meter. To have a pharmacy give the patient a free meter, the pharmacist needs these numbers: **BIN:** 015251 | **PCN:** PRX2000 | **Group:** TRUEPORT22 | **ID:** HB224289455.

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.

HMSA Comm

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

## DIABETES (6 of 6)

### Glucagon Emergency Kit and Supplies

BRAND (administration)	Generic	GoodRx.com	Generic Brand	Aloha Care	CVS State employees	HMSA Comm.	HMSA Quest	Ohana	UHC Quest
<b>Baqsimi (intranasal)</b>	Glucagon	\$288	Brand	need PA	\$25	non-preferred	2 inh/month	need PA	2 inh/month
<b>GlucaGen HypoKit (IM, IV, Sub Q)</b>	Glucagon	\$300	Brand	2 inj/month	\$25	\$25	need PA	need PA	2 inj/month
<b>Gvoke HypoPen (Sub Q)</b>	Glucagon	\$296	Brand	need PA	\$25	non-preferred	2 inj/month	need PA	2 inj/month
<b>Gvoke PFS (Sub Q)</b>	Glucagon	\$296	Brand	need PA	\$25	non-preferred	2 inj/month	need PA	2 inj/month
<b>Glucagon Emergency Kit (IM, IV, Sub Q)</b>	--	Varies of Manufacturer	Generic	2 kits/month	\$5	\$5-10	2 inj/month*	2 inj/month	2 kits/month

\*Aloha Care:

HMSA Quest: **Glucagon Emergency Kit** - Amphastar drug manufacturer only (NDC:00548-5850-00)

Ohana:

United Health Care: