

Empire BlueCross BlueShield HealthPlus Hot Tip: Diabetes

Your Empire BlueCross BlueShield HealthPlus (Empire) patients on nonpreferred products may experience a pharmacy claim rejection. To avoid additional steps or delays at the pharmacy, consider prescribing preferred products whenever possible. Prior authorization and step therapy may apply to select preferred products. Coverage should be verified by reviewing the *Preferred Drug List (PDL)* on the Empire provider website. The *PDL* is subject to change quarterly.

Therapeutic class	Nonpreferred products	Preferred products
Insulin ¹	<p>Short-acting:</p> <ul style="list-style-type: none"> • Afrezza (insulin regular) • Apidra (insulin glulisine) • Fiasp (insulin aspart) • Humalog (insulin lispro) • Novolog (insulin aspart) <p>Long-acting:</p> <ul style="list-style-type: none"> • Lantus (insulin glargine) • Levemir (insulin detemir) • Toujeo (insulin glargine) • Tresiba (insulin degludec) 	<p>Short-acting:</p> <ul style="list-style-type: none"> • Admelog (insulin lispro) • Insulin Lispro (Humalog authorized generic)⁵ • Insulin Aspart (Novolog authorized generic)⁵ <p>Intermediate-acting:</p> <ul style="list-style-type: none"> • Humulin R & Novolin R (insulin regular) • Humulin N & Novolin N (insulin NPH) <p>Long-acting:</p> <ul style="list-style-type: none"> • Basaglar (insulin glargine) • Semglee (insulin glargine) <p>Mixes:</p> <ul style="list-style-type: none"> • Humalog Mix (insulin lispro) • Humulin Mix (insulin NPH & insulin regular) • Insulin Aspart Mix (Novolog Mix authorized generic) • Novolin Mix (insulin NPH & insulin regular) • Novolog Mix (insulin aspart)
GLP-1s ²	<ul style="list-style-type: none"> • Adlyxin (lixisenatide) • Bydureon (exenatide) • Byetta (exenatide) • Tanzeum (albiglutide) 	<ul style="list-style-type: none"> • Trulicity (dulaglutide) • Ozempic (semaglutide) • Victoza (liraglutide)
GLP-1/long-acting insulin combo ³	<ul style="list-style-type: none"> • Soliqua (lixisenatide/insulin glargine) • Xultophy (liraglutide/insulin degludec) 	
DPP4-s ²	<ul style="list-style-type: none"> • Alogliptin (generic Nesina) • Nesina (alogliptin) • Onglyza (saxagliptin) • Tradjenta (linagliptin) 	<ul style="list-style-type: none"> • Januvia (sitagliptin)

<https://providerpublic.empireblue.com>

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DPP4 combo products ³	<ul style="list-style-type: none"> • Alogliptin/metformin² (generic Kazano) • Alogliptin/pioglitazone² (generic Oseni) • Jentadueto & Jentadueto XR (linagliptin/metformin) • Kazano (alogliptin/metformin) • Kombiglyze XR (saxagliptin/metformin) • Oseni² (alogliptin/pioglitazone) 	<ul style="list-style-type: none"> • Janumet & Janumet XR (sitagliptin/ metformin)
SGLT2 ² SGLT2 combo products ³	<ul style="list-style-type: none"> • Farxiga (dapagliflozin) • Invokana (canagliflozin) • Streglatro (ertugliflozin) • Glyxambi (empagliflozin/ linagliptin) • Invokamet & Invokamet XR (canagliflozin/metformin) • Qtern (dapagliflozin/ saxagliptin) • Segluromet (ertugliflozin/ metformin) • Steglujan (ertugliflozin/ sitagliptin) • Xigduo XR (dapagliflozin/ metformin) 	<ul style="list-style-type: none"> • Jardiance (empagliflozin) • Synjardy & Synjardy XR (empagliflozin/ metformin)
TZDs ⁴	<ul style="list-style-type: none"> • Actos (pioglitazone) • Avandia (rosiglitazone) • Duetact (pioglitazone/glimepiride) • Actoplus Met & Actoplus Met XR (pioglitazone/metformin) • Avandamet (rosiglitazone/ metformin) 	<ul style="list-style-type: none"> • Pioglitazone (generic Actos) • Pioglitazone-Metformin (generic Actoplus Met) • Pioglitazone-Glimepiride (generic Duetact)

1. Insulin quantities are limited to 30 ml per 30 days.
2. All anti-diabetic agents require step therapy through metformin unless contraindicated.
3. Combination agents require trial of individual agents and rationale regarding clinical necessity of combination product.
4. TZDs have step therapy through metformin **and** one preferred drug within any of the following classes: DPP4s, GLP-1s, SGLT2s
5. AG Humalog and AG Novolog will become non-preferred on February 2, 2022. Admelog and Admelog SoloStar will become the only preferred agent in the category.

If you have questions regarding this *Hot Tip*, call Provider Services at **800-450-8753**.

PDL: <https://mediprovider.empireblue.com/new-york-empire-provider/resources/pharmacy-information>