(51)	(ST) step therapy (PA) prior auth									
Humana	FMOLHS	ОНС	BCBS	Drug Class	Medication	Clinical Points	est. HgA1c lowering (added to Metformin)	CV outcomes		
1(ex- cluding 625mg)	\$0 (ex- cluding 625mg)	1 ex- cluding 625mg)	\$0 (ex- cluding 625mg)	Biguanides	Metformin	<ul> <li>1. Weight loss possible</li> <li>2. GI side effects (titrate to minimize)</li> <li>3. Monitor for B12 deficiency, lactic acidosis risk</li> <li>4. C/I with eGFR &lt;30</li> </ul>	1% as mon- otherapy	Metformin UKPDS trial showed possible CV mortality risk reduction		
1- 500mg, 750mg	\$0	1	\$0		Metformin ER (Glu- cophage ER generic) 500mg, 750mg					
1	\$0	1- ex- cluding the 2.5mg	\$0	Sulfonylureas	Glipizide	1.Weight gain 2. Chlorpropamide, Glyburide, & Glimepiride not recommended for elderly due to hypoglycemia risk (Beers List)	0.7 to 1%	Linagliptin compared to Glimepiride showed a noninferior risk of composite CV outcomes in pts with DM and increased CV risk (CAROLINA)		
1	\$0	1	\$0	ure	Glipizide ER					
1	\$0	2	1	S	Glipizide / Metformin					
2	\$0	1	\$0		Glyburide					
2	\$0	1	\$0		Glyburide / Metformin					
1	\$0	1	\$0		Glimepiride					
1	\$0	1	\$0	7.	Pioglitazone	Weight gain     Risk of edema or heart failure (Beers List)     Risk of bone fracture	0.8 to 0.9%	Pioglitazone may reduce the risk of CV mortality, however the impact on an increased risk of heart failure needs to be considered		
				TZDs	Avandia					
3	\$0	2	3		Pioglitazone / Metformin					
		4			ActoPlus Met XR					
	\$0		1		Pioglit./Glimepiride					
3	\$0 (PA)	(ST)	2	5 <u>D</u>	Januvia	1.Weight neutral	0.5 to 0.7%	Alogliptin (Nesina) & Saxagliptin (Onglyza) are		
3	\$0(PA)	(ST)	2	DPP-4 Inhibitors	Janumet	2. Possible acute pancreatitis		associated with an increased risk of HF hospi-		
3	\$0(PA)	(ST)	2	ē <sup>4</sup>	Janumet XR	3. Low hypoglycemic risk		talizations,		
3	\$0 (PA)	2		ν	Saxagliptin	when used as monotherapy 4. No renal adjustment necessary for Tradjenta 5. Not recommended for use with GLP-1r agonist		Sitagliptin (Januvia) and Linagliptin (Tradjenta) are CV neutral (TECOS & CARMELINA trials), Linagliptin compared to Glimepiride showed a		
	\$0 (PA)	2	0(5.1)		Saxagliptin/Metformin XR					
		2	3(PA)		Alogliptin Nesina			noninferior risk of composite CV outcomes in		
					Alogliptin/Pioglit.			pts with DM and increased CV risk (CAROLINA)		
					Oseni			pto with Divi and mercused events (crimozinary)		
		2			Alogliptin / Metformin					
					Kazano					
3		2	2		Tradjenta					
3		2	2		Jentadueto					
3		2	2		Jentadueto XR					

(31)	(ST) step therapy (PA) prior auth								
Humana	FMOLHS	ОНС	BCBS	Drug Class	Medication	Clinical Points	est. HgA1c lowering (added to Metformin)	CV outcomes	
3 3 3 3 3 3 3	\$0(PA) \$0(PA) \$0(PA) \$0(PA) \$0(PA) \$0(PA)	(ST) (ST) (ST) 2 2 2 2 2 2(ST) (ST)	2 2 2 2 2 2	SGLT-2 Inhibitors	Brenzavyy (\$50) Invokana (\$700) Invokamet (>\$700) Invokamet XR (>\$700) Dapagliflozin (>\$650) Fargixa Dapagliflozin/Metformin ER (>\$650) Xigduo XR Qtern (>\$675) Jardiance (>\$730) Synjardy XR (>\$730) Synjardy XR (>\$730) Trijardy XR (>\$730) Steglatro (>\$425) Segluromet (>\$425) Steglujan (>\$660)	1. Weight loss possible 2. May increase the risk of mycotic genital infections, including Fournier's gangrene 3. Risk of DKA, including euglycemic DKA 4. Standards of Diabetes Care 2023 states to use SGLT2i in people with an eGFR ≥20ml/min per 1.73m² to reduce CKD progression 5. Removal of boxed warning with Invokana increasing the risk of amputation (toe / metatarsal), Aug 2020	0.4% to 0.7%	Jardiance is FDA approved for reducing CV mortality in DM pts with established CV disease, no decrease in the risk of nonfatal MI or stroke was found (EMP-REG OUTCOME). Approved for risk reduction of CV mortality plus hospitalization for HFrEF (EMPEROR-Reduced). When added to usual therapy in pts with class II, III, or IV HFpEF, may reduce composite endpoint of CV death or HF-related hospitalizations (EMPEROR-Preserved)  Inkovana is FDA approved for reducing combined endpoints CV mortality, nonfatal MI, or nonfatal stroke (CANVAS) in high-risk pts with established CV disease, and approved for risk reduction of combined endpoints ESRD, doubling SCr, CV death, and hospitalization for HF in pts with DM and diabetic nephropathy (urine albumin>300mg/day) (CRE-DENCE)  Farxiga had neutral effects on combined endpoints CV mortality, MI or ischemic stroke but may reduce HF hospitalizations (DECLARE-TIMI58); Farxiga is FDA approved to reduce the risk of hospitalization for HF (reduced or preserved) in pts with DM or without DM and CV disease or multiple CV risks (DAPA-HF & DELIVER), Farxiga when added to ACE or ARB therapy in CKD pts may reduce the decline in eGFR of at least 50% and delay the progression to ESRD (DAPA-CKD),  Steglatro has demonstrated noninferiority on the primary endpoint of major CV events (MACE) in DM pts with established CV disease (VERTIS CV)	
3	\$0	2	1	Meglitinides	Nateglinide	Weight gain     Hypoglycemia possible	0.7% to 1.1%	CV outcomes unknown	
3	\$0	2	\$0		Repaglinide  Repaglinide/ Metformin	3. Consider if allergy to sulfa 4. Consider if late postprandial hypoglycemia or if an erratic meal schedule			

(31)	(ST) step therapy (PA) prior auth									
Humana	FMOLHS	OHC	BCBS	Drug Class	Medication	Clinical Points	est. HgA1c lowering (added to Metformin)	CV outcomes		
2	\$0	1	\$0	Alpha Gluc Inhibitors	Acarbose	<ol> <li>Weight neutral</li> <li>GI side effects</li> </ol>	~ 0.7%	CV outcomes unknown		
	\$0		1	Gluc. itors	Miglitol	3. Elevated serum transami- nases / use caution in hepatic impairment				
			3	<b>5</b> 5	Basaglar	Weight gain possible     Higher hypoglycemic risk	~ 1%	CV neutral effects		
\$35		1	2	ong	Lantus					
		(PA)	2	Long Ac	Levemir	3. Toujeo & Tresiba may have				
	\$0			Long Acting Insulins	Semglee	lower hypoglycemic risk when used with orals				
\$35	\$0	2	2		Toujeo					
\$35	\$0		2		Tresiba					
			\$0	Act	Novolin N ReliOn vial, Pen Cash price \$25, \$43	Weight gain possible     Higher hypoglycemic risk	~ 1%	CV neutral effects		
\$35		(ST)	2	Intermediate Acting Insulin	Novolin N					
\$35	\$0	1-vial 2-pen		ate <sub>J</sub> lin	Humulin N					
			\$0	Regular	Novolin R ReliOn vial, Pen Cash price \$25, \$43	Weight gain possible     Higher hypoglycemic risk	~ 1%	CV neutral effects		
\$35		(ST)	2	ar	Novolin R					
5 (U- 500)	\$0	1-vial 2-pen	2 (U-500 only)	& Rapid	Humulin R					
			\$0	pid acting Insulins	Novolin 70/30 ReliOn vial & flexpen <i>(Walmart Cash</i>					
					price per each \$25)					
\$35	4.0	(ST)	2		Novolin 70/30					
\$35	\$0	1-vial 2-pen			Humulin 70/30					
\$35	\$0	1-vial 2-pen			Lyumjev					
\$35		(ST)	2		Novolog					
			\$0		Novolog ReliOn vial & Pen					
		(ST)			(\$82 & \$85)					
		(ST)			Insulin aspart					

(31)	ST) step therapy (PA) prior auth									
Humana	FMOLHS Plan	ОНС	BCBS	Drug Class	Medication	Clinical Points	est. HgA1c lowering (added to Metformin)	CV outcomes		
\$35		(ST) (ST) (ST)	\$0		Novolog Mix 70/30 Novolog ReliOn Mix 70/30 (\$82 & \$85) Insulin aspart prota- mine/aspart					
\$35			2		Fiasp					
\$35	\$0	1-vial 2-Pen	3(PA)		Humalog					
\$35	\$0	1-vial 2-pen			Insulin lispro					
\$35	\$0	1-vial 2-pen	3(PA)		Humalog 50/50					
\$35	\$0	1-vial 2-Pen	3(PA)		Humalog 75/25					
		2-vial			Insulin lispro protamine / lispro 75/25					
					Admelog					
			3(PA)		Apidra					
		(PA)			Afrezza					
		4(ST)		G	Adlyxin (>\$800)	1. Weight loss possible	~ 1-2%	Victoza is FDA approved for reducing the com-		
\$35	\$0	2	2	Ę	Soliqua (>\$1,000)	2. GI effects, do not use if se-		bined endpoints of CV death, MI, or stroke in		
	\$0(PA)	2 (PA)		1r i	Byetta (>\$1,000)	vere GI disease		DM pts with CV disease (LEADER)		
4	\$0(PA)	2 (PA)		GLP-1r agonists &	Bydureon BCise (>\$1,000)	3. Risk of gallbladder disease		Bydureon was associated with a reduction in		
3	\$0(PA)	2(PA)	2(PA)	nis	Mounjaro (<\$1,300)	or pancreatitis (acute and		all-cause mortality in DM pts with or without		
3	\$0(PA)	2 (PA)	2(PA)	ts es	Ozempic (>\$1,500)	chronic)		CV disease (EXSCEL)  Mounjaro is awaiting SURPASS CVOT trial re-		
3	\$0(PA)	2 (PA)	2(PA)	ሄ Combos	Rybelsus (>\$1,150)	4. C/I in patient or family his-		sults, SURPASS-4 post-hoc analysis showed a		
3	\$0(PA)	2 (PA)	2(PA)		Trulicity (>\$1,150)	tory of medullary thyroid		lower occurrence of the kidney composite		
3		2(PA)-			Liraglutide (>\$625-	cancer or MEN2		(eGFR decline, ESRD, death due to kidney fail-		
		2pk 3(PA)- 3pk			2pk,>\$950 3pk)			ure, & new onset macroalbuminuria) verses insulin glargine		

Humana	FMOLHS Plan	ОНС	BCBS	Drug Class	Medication	Clinical Points	est. HgA1c lowering (added to Metformin)	CV outcomes
\$35			2		Xultophy (>\$1,550)	5. Ozempic – monitor for worsening diabetic retinopathy		Adlyxin was found to have neutral effects on CV outcomes in DM pts with recent ASC (ELIXA)  Ozempic is FDA approved for the combined endpoints of CV mortality, nonfatal MI, or nonfatal stroke in DM pts with CV disease (SUSTAIN-6), In CV patients without DM, CV outcomes composite was reduced over 39.8 months (SELECT trial)  Rybelsus had neural effects on CV outcomes in pts with T2DM and CV disease, CKD, or CV risk factors (PIONEER 6 trial), pts with T2DM and CV disease and/or CKD, MACE reduction was reported in the SOUL trial  Trulicity is FDA approved for reducing the combined endpoints of CV death, MI, or stroke in DM patients with CV disease or at high CV risk (REWIND)

## References:

- 1.) Lexicomp® Online. Updated Drug information and Pricing, accessed December 3 2024. https://online.lexi.com/lco/action/home
- 2.) Humana Gold Plus H1951-048 (HMO) Formulary; online [PDF file], accessed 12//04/24, <a href="https://assets.humana.com/is/content/humana/20250010PDG2545625Cpdf">https://assets.humana.com/is/content/humana/20250010PDG2545625Cpdf</a>
- 3.) BCBS 2025 4-Tier covered Drugs, online [PDF file], accessed 12/04/24, 2025 Closed 4 Tier HCR
- 4.) United Healthcare Prescription Drug List; online [PDF file], accessed 12/06/24, Prescription Drug List UnitedHealthcare Commercial Plans Effective January 1, 2025
- 5.) Expressscripts.com, accessed by S.Tripode on 12/04/24
- 6.) American Diabetes Association. 9. Pharmacologic approaches to glycemic treatment: Standards of Medical Care in Diabetes-2020. Diabetes Care 2020;43(Suppl.1):S98-S110. dio.org/10.2337/dc20-S009
- 7.) Cefalu, W., Kaul, S., Gerstein, H., et al. Cardiovascular Outcomes Trials in Type 2 Diabetes: Where do we go from here? Reflections from a Diabetes Care Editors' Expert Forum. Diabetes Care 2018;41:14-31. doi:10.2337/doi17-0057
- 8.) ElSayed NA, Alepp,G, Aroda VR, et al. American Diabetes Association. Introduction and methodology. Standards of Care in Diabetes 2023. Diabetes Care 2023;46(Suppl.1):S1-S4