



DISB

Government of the District of Columbia
Department of Insurance, Securities and Banking

2022 RX GUIDE



DIABETES

If you or a family member covered under your health plan has a diagnosis of diabetes, knowing the cost of medications can help you make a more informed decision when selecting a plan.

This guide developed by the District of Columbia Department of Insurance, Securities and Banking provides an overview of 30 commonly prescribed drugs to treat diabetes. For each insurance company offering plans for sale on DC Health Link, the charts on the next page depict the name of each drug along with the corresponding drug cost-sharing.

Each insurance company uses different language to explain its cost-sharing. Reference the charts on the next page alongside your potential plans' Summary of Benefits and Coverage (SBC) to get an idea of your out-of-pocket prescription cost. Generally, the key below provides clarification of the information in the chart.

As you consider different plan options, also check your SBC to see whether your cost-sharing on prescription drugs will apply before or after you reach your deductible.

Government of the District of Columbia
Department of Insurance, Securities and Banking

1050 First Street NE, Suite 801, Washington, DC 20002

202-727-8000 | disb.dc.gov | disb.communications@dc.gov | Follow us on Twitter @DCDISB



GOVERNMENT OF THE
DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR

2022 Diabetes Rx Review Guide

District of Columbia Insurance Companies									
		Aetna		CareFirst		Kaiser		United Healthcare	
Name (Generic)	Name (Brand)	Generic/Brand	Generic/Brand	Generic/Brand	Generic/Brand	Generic/Brand	Generic/Brand	Generic/Brand	Generic/Brand
		Restrictions	Copay/Coinsurance	Restrictions	Copay/Coinsurance	Restrictions	Copay/Coinsurance	Restrictions	Copay/Coinsurance
Metformin	Glucophage	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25/NC	NR/NR	\$5-40/ \$25-100*	NR/NC	\$0-10/NC
	Glumetza	NA/NC	NA/NC	NA/NC	NA/NC	PA/PA	\$25-100/ \$25-100*	NC/NC	NC/NC
	Glyset	NR/NC	\$12-\$15/NC	NR/NA	\$0-\$25/NC	NR/NR	\$25-100/ \$25-100*	NC/NC	NC/NC
	Riomet	NA/NC	NC/NC	NA/NC	NA/NC	NR/NR	\$25-100 / \$25-100*	NA/NR	NA/ \$0-80 ²
	Fortamet	NC/NC	NC/NC	NA/NC	NA/NC	PA/PA	\$25-100/ \$25-100*	NC/NC	NC/NC
Glipizide	Glucotrol	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25/NC	NR/NR	\$5-100/ \$25-100*	NR/NR	\$0-10/0-125 ²
Glimepiride	Amaryl	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25/NC	NR/NR	\$25-100/ \$25-100*	NR/NR	\$0-10/0-125 ²
Acarbose	Precose	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25/NC	NR/NR	\$5-40/ \$25-100*	NR/NR	\$0-10/0-125 ²
Sitagliptin	Januvia	NA/NR	NA/\$55-\$65	NA/PA-ST	NA/\$0-\$75	NA/NR	NA / \$25-100*	NC/NC	NC/NC
Nateglinide	Starlix	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25/NC	NR/NR	\$25-100/ \$25-100*	NR/NR	\$0-50/0-125 ²
Repaglinide	Prandin	NR/NC	\$95-\$100/NC	NR/NC	\$0-\$25/NC	NR/NR	\$25-100/ \$25-100*	NR/NR	\$0-50/0-125 ²
Pioglitazone	Actos	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25/NC	NR/NR	\$5-40/ \$25-100*	NR/NC	\$0-10/NC
Alogliptin	Nesina	ST/NC	\$95-\$100/NC	NR/NC	\$0-\$25/NC	PA/PA	\$25-100 / \$25-100*	NA/NR	NA/\$0-50
Canagliflozin	Invokana	NA/NC	NA/NC	NA/NC	NA/NC	NA/PA	NA / \$25-100*	NC/NC	NC/NC
Dapagliflozin	Farxiga	NA/ST	NA/\$55-\$65	NA/PA-ST	NA/\$0-\$75	NA/PA	NR / \$25-100*	NC/NC	NC/NC
Dulaglutide	Trulicity	NA/ST	NA/\$55-\$65	NA/PA-ST	NA/\$0-\$75	NA/PA	NA / \$25-100*	NA/ST	NA/\$0-50
Empagliflozin	Jardiance	NA/ST	NA/\$95-\$100	NA/PA-ST	NA/\$0-\$75	NA/NR	NA / \$25-100*	NA/ST	NA/\$0-50
Exenatide	Bydureon	NA/NC	NA/NC	NA/NC	NA/NC	NA/PA	NA / \$25-100*	NA/PA-ST	NA/\$0-50
Linaliptin Liraglutide	Tradjenta	NA/NC	NA/NC	NA/PA-ST	NA/\$0-\$75	NA/PA	NA / \$25-100*	NA/NR	NA/\$0-50
	Victoza	NA/ST	NA/\$95-\$100	NA/PA-ST	NA/\$0-\$75	NA/NR	NA / \$25-100*	NA/PA-ST ¹	NA/\$0-\$80 ^{2,3}
Miglitol	Glyset	NR/NC	\$12-\$15/NC	NA/NC	NA/NC	NR/NR	\$25-100/ \$25-100*	NR/NR	\$0-50/0-125
Saxagliptin	Onglyza	NA/NC	NA/NC	NA/NC	NA/NC	NA/PA	NA / \$25-100*	NA/NR	NA/\$0-50
Rosiglitazone	Avandia	NA/NC	NA/NC	NA/NC	NA/NC	NA/NR	NA / \$25-100*	NC/NC	NC/NC

District of Columbia Insurance Companies									
Covered Insulin* and Other Injectable Diabetes	Aetna		CareFirst		Kaiser		United Healthcare		
	Restrictions	Copay/Coinsurance	Restrictions	Copay/Coinsurance	Restrictions	Copay/Coinsurance	Restrictions	Copay/Coinsurance	
	Apidra	NC		NC		PA/ \$30; 0-50% \$30 max		NC	
Humalog	NC		NC		PA/ \$25-30; 0-50% \$30 max		NR/ \$0-\$30		
Humalog Mix	NC		NC		PA/ \$30; 0-50% \$30 max		NR/ \$0-\$30		
NovoLog	NR / \$30		NR / \$0		PA/ \$30;0-50% \$30 max		NC		
Humulin R (all strengths except U-500)	NR / \$30		NR / \$0-\$30		NR/ \$25-30; 0-50% \$30 max		NR/ \$0-\$30		
Novolin	NR / \$30		NR / \$0		PA/ \$30;0-50% \$30 max		NC		
Levemir	NR / \$30		NR / \$0		PA/ \$30;0-50% \$30 max		NC		
Lantus	NC		NR / \$0		NR/ \$25-\$30;0-50% \$30 max		NR/ \$0-\$30		
Basaglar	ST / \$30		NR / \$0		PA/ \$30;0-50% \$30 max		NC		
Byetta (exenatide)	NA / NC		NC		NR/ \$50-\$110; 0-50%		PA-ST/ \$0-\$50		
Symlin (pramlintide)	ST / \$95-\$100		PA-ST / \$0-\$100		NR/ \$50-\$110; 0-50%		NC		

Note: Formularies are subject to change during the plan year. Please contact your insurance company for the most up-to-date information.

KEY	
NC	Not Covered
NA	Not Applicable
NR	No Restrictions
ST	Step Therapy
PA	Pre-Authorization
NR	No Restrictions

* The cost share for this drug could be a copayment or coinsurance depending on the plan. Generic co-insurance ranges between 0%-20%. Brand name co-insurance ranges between 0%-50%.

¹ The cost share for this drug could be a copayment or coinsurance depending on the plan. Generic co-insurance ranges between 0%-20%.

² The cost share for this drug could be a copayment or coinsurance depending on the plan. Co-insurance ranges from 30% - 50%

³ Victoza 2 copayment between \$0-50 and Victoza 3 copayment between \$0-\$80.

⁴ Insulin max of \$30 monthly.