

General Guide

for covered diabetic medications and supplies*



Diabetic supplies covered through the pharmacy benefit (Your Choice formulary)

Insulin

- Insulin products available at the preferred brand (tier 2 copayment) include Humalog, Humulin and Basaglar products, Lantus, Levemir, Toujeo, and Tresiba.

Free glucometer

- LifeScan/OneTouch Meters (e.g., OneTouch Ultra, One Touch Verio, One Touch Verio Flex, etc.) are available for \$0 copayment.

Test strips

- LifeScan/OneTouch test strips (e.g., OneTouch Ultra, OneTouch Verio, OneTouch Verio Flex, etc.) are available on the preferred brand tier (tier 2 copayment).

Frequently used diabetic supplies

- Lancets are available on the preferred brand tier (tier 2 copayment).
- Insulin syringes are available on the preferred brand tier (tier 2 copayment).

UPMC Health Plan members can sign up for convenient home delivery through Express Scripts, which includes free standard shipping.

Prospective members interested in more detailed information can check the formulary (drug list) for their plan option by visiting upmchp.us/pharmacybenefits.

Diabetic supplies covered through the medical benefit

- Continuous glucose monitoring (CGM) systems (insulin pump and supplies) are covered if FDA approved.
- These are the medical equipment suppliers that UPMC Health Plan has in the network:
 - CCS Medical/Medical Express Depot—insulin pump and supplies and CGM distributor for all FDA-approved pumps except Omnipod
 - Insulet—provider for Omnipod and supplies
 - Medtronic—provider for the Medtronic insulin pump and supplies and Medtronic CGM and supplies

If you have questions about what medications are covered, call Member Services at: **1-888-876-2756**.

**Some employers use a company other than UPMC Health Plan to administer their pharmacy benefits program. Refer to employer group's Schedule of Plan Benefits or Certificate of Coverage.*

Nondiscrimination statement

UPMC Health Plan¹ complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, gender identity, or gender expression.

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Translation Services

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-869-7228 (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-869-7228（TTY：711）。

UPMC HEALTH PLAN

U.S. Steel Tower, 600 Grant Street
Pittsburgh, PA 15219

www.upmchealthplan.com

