



Formulary Diabetic Testing Supplies

Quick Reference Guide

Diabetic Testing Supplies

ITEM	NDC
One Touch Verio Flex Meter	53885019401
OneTouch Verio Test Strips 25ct	53885027025
OneTouch Verio Test Strips 50ct	53885027150
OneTouch Verio Test Strips 100ct	53885027210
OneTouch Delica Lancing Device	53885014201
OneTouch Delica Lancets 30g 100ct	53885059501
OneTouch Delica Lancets 33g 100ct	53885013610
OneTouch Verio Control Solution – Level 3 (Mid)	53885027302
OneTouch Verio Control Solution – Level 4 (High)	53885027402
Sharps Container	08290323487

Preferred SGLT2, DPP-4 and GLP-1 Products

SGLT2 Inhibitor	Steglatro
DPP-4 Inhibitor	Alogliptin, Alogliptin/Metformin
GLP-1 Agonist	Trulicity

Prior Authorization (PA) Criteria for Steglatro, Alogliptin, Alogliptin/Metformin, Trulicity

- * A1C > 7.5% and patient was co-prescribed metformin
OR
- * A1C >6.5% after inadequate response, intolerable side effect, or contraindication to metformin with compliance of at least 3 months

Please note: Jardiance, Invokana, Victoza, Ozempic will be approved if above criteria is met and documentation of established cardiovascular disease is provided.

Preferred Rapid-Acting and Long-Acting Insulin Products

Rapid-Acting Insulin	Long-Acting Insulin
Admelog Solostar, Admelog vial	Basaglar Kwikpen

PA criteria for Lantus Solostar, Lantus Vial, Tresiba Flextouch, Toujeo Solostar, Levemir

- * Diagnosis of uncontrolled diabetes (HbA1C>7%) AND has inadequate response, intolerable side effect, or contraindication to Basaglar Kwikpen

PA criteria for Apidra, Humalog, Humalog Kwikpen, Novolog

- * Diagnosis of Type 1 or Type 2 diabetes AND inadequate response, intolerable side effect to Admelog vial or Admelog Solostar