



It's Your Health: Diabetes

For 2021 WebMD, your Well Wisconsin Program administrator, is offering a pilot program focused on diabetes management.

- ▶ Members who participate in WebMD's diabetes condition management (CM) program will receive reduced pharmacy copayments for the anti-diabetic drugs listed below.
 - Members who self-identify as having diabetes on the WebMD health assessment will receive an invitation from WebMD to participate in the pilot program.
 - Members who are currently taking an anti-diabetic prescription drug and who have a WebMD portal account will also receive an invitation to participate.

- ▶ Eligibility for reduced pharmacy copays begins by the 20th of the following month after completing your first CM call with the WebMD nurse consultant.
- ▶ Reduced copayments will continue throughout the 2021 plan year.
- ▶ Eligible members are limited to subscribers and spouses only.
- ▶ Members CANNOT be enrolled in a High Deductible Health Plan (HDHP) option to be eligible for this pilot program.

For more information or to enroll in the **It's Your Health: Diabetes** pilot program contact WebMD at 1-800-821-6591 or visit the WebMD wellness portal at <https://www.webmdhealth.com/WellWisconsin>.

DRUG NAME	FORMULARY LEVEL
acarbose tab	1
glipizide/metformin tab	1
glyburide/metformin tab	1
AVANDAMET TAB	2
AVANDARYL TAB	2
GLYXAMBI TAB	2
JANUMET TAB	2
JANUMET XR TAB	2
JENTADUETO TAB	2
JENTADUETO XR TAB	2
pioglitazone/glimepiride tab	2
pioglitazone/metformin tab	2
SYNJARDY TAB	2
SYNJARDY XR TAB 10-1000MG, 25-1000MG	2
SYNJARDY XR TAB 5-1000MG, 12.5-1000MG	2
XIGDUO XR TAB 2.5-1000MG, 5-1000MG	2
XIGDUO XR TAB 5-500MG, 10-500MG, 10-1000MG	2
XULTOPHY INJ	2
metformin ER tab	1
metformin tab	1
GLUCAGEN HYPOKIT INJ	2
GLUCAGON INJ KIT	2
JANUVIA TAB	2
TRADJENTA TAB	2
BYDUREON BCISE AUTO INJ	2
BYDUREON INJ	2
BYDUREON PEN INJ	2
OZEMPIC INJ	2
VICTOZA INJ	2
FIASP PENFILL	1
NOVOLOG MIX 70/30 PREFILL	1

DRUG NAME	FORMULARY LEVEL
LANTUS INJ	1
LANTUS SOLOSTAR INJ	1
LEVEMIR FLEXTOUCH INJ	1
LEVEMIR INJ	1
NOVOLIN INJ	1
NOVOLOG FLEXPEN INJ, FIASP FLEXTOUCH INJ	1
NOVOLOG INJ, FIASP INJ	1
NOVOLOG MIX FLEXPEN INJ	1
NOVOLOG MIX INJ	1
NOVOLOG PENFILL INJ	1
TOUJEO MAX SOLOSTAR INJ	1
TOUJEO SOLOSTAR INJ	1
TRESIBA INJ	1
HUMULIN R INJ U-500	2
HUMULIN R U-500 KWIKPEN INJ	2
pioglitazone tab	1
AVANDIA TAB	2
repaglinide tab	1
FARXIGA TAB	2
JARDIANCE TAB	2
chlorpropamide tab	1
glimepiride tab	1
glipizide ER tab	1
glipizide tab	1
glyburide micronized tab	1
glyburide tab	1
tolazamide tab	1
TOLBUTAMIDE TAB	2
TRESIBA FLEXTOUCH	1
LEVEMIR FLEXPEN	1
TRULICITY	2

DRUG NAME	FORMULARY LEVEL
RYBELSUS	2
TRIJARDY XR	2
GVOKE PFS	2
GVOKE	2
SOLIQUA	2