

	Aetna	Ambetter	Assurant Bronze/Silver 001	Assurant Silver 002/Gold Platinum	Blue Cross HMO	Blue Cross PPO	Cigna	Humana	Scott&White	Sendero	United
Glucophage (Metformin)	G	G	G	G	G,NPB	G,NPB	G	G	G	G	G (ER Tab = NPB)
Micronase (Glyburide)	G	G	G	G	G, NPB	G,NPB	G	PB	G	G	G
Invokana (Canagliflozin)	NPB	not covered	PB	PB	NPB	PB	not covered	NPB	NPB	PB	PB
Farxiga (Dapagliflozin)	not covered	not covered	PB	NPB	NPB	NPB	not covered	not covered	not covered	not covered	S
Glyset (Miglitol)	NPB	NPB	PB	NPB	NPB	NPB	NPB	NPB	NPB	NPB	PB
Glipizide (Glucotrol)	G	G	G	G	G, NPB	G-NPB	G, PB	G	G (some NPB)	G	G (POW=NPB)
Insulin Syringe	PB,NPB		G		NPB			G	G	G	
Actos (pioglitazone)	G	PB	PB	NPB	PB,NPB	PB, NPB	PB	PB, NPB	G	G	PB
Apidra	NPB	NPB	PB	NPB	NPB	NPB	NPB	NPB	NPB	NPB	S
Humalog	PB	PB	PB	PB	NPB	PB	PB	PB	PB	NPB	G, PB
NovoLog	NPB	PB	PB	PB	PB	PB	NPB	PB	PB	PB	S
Humulin R	PB	PB	PB	PB	NPB	PB	PB	PB	PB	NPB	G
Novolin R	NPB	PB	not covered	not covered	PB	PB	not covered	PB	PB	PB	
Humulin N	PB	PB	PB	PB	NPB	PB	PB	PB	PB	NPB	
Novolin N	NPB	PB	not covered	not covered	PB	PB	not covered	PB	PB	PB	
Levemir	PB	PB	PB	PB	PB	PB	PB	PB	PB	PB	G
Lantus	NPB	PB	PB	PB	PB	PB	NPB	PB	PB	PB	NPB
Lancets (sometimes not listed)	NPB		G	G	NPB	PB, NPB	PB		G	G	
Glucose Strips (sometimes not listed)			G	PB	NPB	PB	PB		G		

Labs/Visits:

G - Generic

A1C- Diagnostic and Follow up

PB - Preferred Brand

Fasting Plasma Glucose- Diagnostic

NPB - Non Preferred Brand

Oral Glucose tolerable - Diagnostic

S - Specialty

Random Glucose Plasma- Diagnostic

Blood Glucose Meters- Follow up