

Formulary GLP-1 weight loss medications (7/1/25):

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
Saxenda subcutaneous solution pen injector (liraglutide-weight management)	Tier 3(NP)	PA; SPC; QL (5 PENS per 25 days)
Wegovy oral tablet 1.5mg, 25mg, 4mg, 9mg, 25mg (semaglutide weight management)Eff. 4/2/26	Tier 2(PB)	PA; SPC; QL (30 TABLETS per 25 DAYs)
Wegovy subcutaneous solution auto-injector 0.25mg/0.5mL, 0.5mg/0.5mL, 1mg/0.5mL, 1.7mg/0.75mL, 2.4mg/0.75mL, 7.2mg/0.5mL (semaglutide weight management)	Tier 2(PB)	PA; SPC; QL (4 PENS per 21 days)
Zepbound subcutaneous solution auto-injector 2.5mg/0.5mL, 5mg/0.5mL, 7.5mg/mL, 12.5mg/0.5mL, 15mg/0.5mL	Tier 2(PB)	PA; SPC; QL (2 mL - 4 prefilled single-dose pens per 21 days)

Formulary GLP-1 anti-diabetic medications (7/1/25):

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
exenatide subcutaneous solution pen-injector 10 mcg/0.04ml, 5 mcg/0.02ml	NF	
liraglutide subcutaneous solution pen-injector 18 mg/3ml	Tier 1(PG)	PA; QL (3 PENS per 25 days)
MOUNJARO SUBCUTANEOUS SOLUTION AUTO[1]INJECTOR 10 MG/0.5ML, 12.5	Tier 2(PB)	PA; QL (4 PENS per 21 days)

MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML (tirzepatide)		
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML (semaglutide)	Tier 2(PB)	PA; QL (1 PEN per 28 DAYS)
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN[1]INJECTOR 4 MG/3ML (semaglutide)	Tier 2(PB)	PA; QL (1 PEN per 28 DAYS)
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN[1]INJECTOR 8 MG/3ML (semaglutide)	Tier 2(PB)	PA; QL (1 PEN per 28 days)
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG (semaglutide)	Tier 2(PB)	PA; QL (30 TABLETS per 25 days)
TRULICITY SUBCUTANEOUS SOLUTION AUTO[1]INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML (dulaglutide)	Tier 2(PB)	PA; QL (4 PENS per 21 days)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML (liraglutide)	NF	