

Insulin Cost Cap

As of January 1, 2023, the Inflation Reduction Act (IRA) mandated the total out-of-pocket costs for insulin be capped at \$35 per monthly prescription for all Medicare part D plans. Additionally, as of July 1, 2023, a similar cap will take effect for all part B plans. With the new IRA, it is estimated that 1.5 million Medicare beneficiaries will benefit with cost-savings to the patients of about \$734 million in Part D and \$27 million in Part B spending. This equates to roughly \$500 on average of annual savings per person among those benefiting from this provision.

In similar fashion to the Medicare act, Eli Lilly has announced a 70% price reduction, capping patient out-of-pocket costs to \$35 or less per month for all patients. For those patients with commercial insurance or no insurance, patients may present the Lilly Insulin Value Program savings card ([Lilly Insulin Value Program | Lilly Insulin Affordability](#)) at their local pharmacy to obtain all Lilly insulins for \$35 a month.

Two weeks after Eli Lilly's announcement, Novo Nordisk and Sanofi announced that they would be reducing the list price of several of their popular pre-filled insulin pens and vials by up to 78%. Effective immediately, those without insurance will be able to obtain Lantus (Sanofi) for \$35/month. However, all other Novo Nordisk and Sanofi's price adjustments will not occur until January 1, 2024 for those with commercial or no insurance.

Table 1 outlines the anticipated insulin price reductions for patients with commercial insurance or no insurance by pharmaceutical company.

Table 1. Anticipated Insulin Price Reductions

Pharmaceutical Company	Effective Date	Drug	Cost
Eli Lilly	April 1, 2023	Insulin Glargine-aglr 100 u/mL (Rezvoglar™)	\$92/5 pack of KwikPens®
	May 1, 2023	Insulin Lispro 100 unit/mL	\$25/vial
	4th Quarter 2023	Humulin 100 units/mL	List price reduced by 70%
	4th Quarter 2023	Humalog 100 units/mL	List price reduced by 70%
Novo Nordisk	January 1, 2024	Novolog and Novolog Mix 70/30	\$72.34/vial
	January 1, 2024	Novolog and Novolog Mix 70/30	\$139.71/Flex Pen®
	January 1, 2024	Levemir and Novolin	\$107.85/vial
	January 1, 2024	Levemir and Novolin	\$161.77/FlexPen®
Sanofi	1st Quarter 2023	Lantus	\$35/month for uninsured
	January 1, 2024	Lantus	\$35/month for commercial insurance
	January 1, 2024	Lantus	List price reduced by 78%
	January 1, 2024	Apidra	List price reduced by 70%

Insulin Cost Cap (con't)

References

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3. Luhby, T. (2023, March 14). Novo Nordisk becomes latest to announce it is cutting insulin prices by up to 75%. CNN. Retrieved March 20, 2023, from <https://www.cnn.com/2023/03/14/health/novo-nordisk-insulin-prices/index.html>
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New York State Medicaid Pharmacy Program

Effective April 1, 2023 the pharmacy benefit of NYS Medicaid Managed Care members will be transitioned to NYRX, the Medicaid Pharmacy Program formerly known as Medicaid Fee-for-Service. A list of the managed care plans that will be effected can be found here ([NYS Medicaid Managed Care Pharmacy Benefit Information Center \(suny.edu\)](https://www.suny.edu/medicaid-managed-care-pharmacy-benefit-information-center)).

The transition will not change the scope of benefit in terms of copays and covered drugs with patient's existing Medicaid Pharmacy Benefit. Patients will be advised to present their Medicaid ID Card or Health Plan Card to the pharmacy to fill their prescriptions. Co-payment amounts will remain:

- Non-preferred Brand Name Drugs - \$3.00
- Generic Drugs, preferred Brand Name Drugs, and drugs included in the Brand less than Generic Drugs Program - \$1.00
- Non-Prescriptions (Over-The-Counter) Drugs - \$0.50
- Medical/Sickroom Supplies - \$1.00

In terms of diabetic supplies and commonly prescribed medications for diabetes, the following are preferred:

- Meter
 - Freestyle Lite, Freedom Lite, and InsulinX
 - Contour, Next, Next Gen, Next EZ, Next ONE
 - OneTouch Ultra and OneTouch Verio
- Test Strips
 - Freestyle, Freestyle Lite, InsulinX test strips
 - Contour and Contour Next test strips
 - OneTouch Ultra and OneTouch Verio test strips
- Medications
 - Refer to Table 2

New York State Medicaid Pharmacy Program (con't)

Table 2. NYRX Preferred Diabetes Medications

Medication Class	Preferred Drugs	Non-Preferred Drugs	PA/Coverage Parameters
Biguanides	<ul style="list-style-type: none"> Metformin HCl Metformin ER (generic for Glucophage XR) 	<ul style="list-style-type: none"> Metformin Solution Metformin ER (generic for Fortamet, Glumetza) 	
SGLT2 Inhibitors	<ul style="list-style-type: none"> Jardiance Farxiga Invokana 	<ul style="list-style-type: none"> Invokamet Invokamet XR Segluromet Steglatro Synjardy XR Xigduo XR 	Step Therapy: Requires a trial of metformin with or without insulin
GLP-1 Agonists	<ul style="list-style-type: none"> Ozempic Trulicity Victoza Byetta 	<ul style="list-style-type: none"> Mounjaro Rybelsus Bydureon 	Step Therapy: Requires a trial with metformin with or without insulin
Long-Acting Insulin	<ul style="list-style-type: none"> Insulin glargine solostar (generic Lantus Solostar, vial) Levemir 	<ul style="list-style-type: none"> Basaglar Insulin glargine-YFGN: vial, pen Lantus Solostar, vial Toujeo Solostar; Max Solostar Tresiba 	
Short-Acting Insulin	<ul style="list-style-type: none"> Insulin aspart (generic Novolog cartridge, vial, pen) Insulin lispro (generic Humalog U100 vial, pen) 	<ul style="list-style-type: none"> Admelog Humalog U100, U200 Novolog cartridge, vial, Flexpen 	
Thiazolidinedione	<ul style="list-style-type: none"> Pioglitazone 	<ul style="list-style-type: none"> ACTOplus Met Actos 	Step Therapy: Requires a trial with metformin with or without insulin

Other preferred drugs can be found here at [New York State Medicaid Preferred Drug List \(fhsc.com\)](http://www.fhsc.com). From April 1, 2023 through June 30, 2023, Medicaid will allow a one-time only fill of non-preferred drugs for up to 30 days. Following this, if a non-preferred drug is required, a prior authorization will need to be completed.

There are three methods to submit a prior authorization:

- Call: 1-877-309-9493 and Select 2 for Prescribers
 - Requirements vary based on drug
 - Criteria is listed in the preferred drug list above
- Fax: 1-800-268-2990
 - [NYRX_PDP_PA_Fax_Standardized.pdf](#) (fhsc.com)
 - May take up to 24 hours to process
- Web: Submit web-based application called PAXpress accessible from eMedNY

OTC Narcan Nasal Spray

On November 15, 2022 the FDA announced in a preliminary assessment that certain naloxone products have the potential to be safe and effective for over the counter (OTC) use. Broadening access to naloxone by switching from prescription to OTC status has been deemed by the FDA and other stakeholders as critical to the current opioid epidemic as the majority of opioid deaths occur in the community setting.

As of March 29, 2023, the FDA approved Narcan 4 mg nasal spray to be available over the counter at local pharmacies. The FDA announced it will work with all stakeholders to facilitate the continued availability of naloxone nasal spray products during the time needed to implement the Narcan switch from prescription to OTC status, which may take months. Other formulations and dosages of naloxone will remain available by prescription only, this includes injectable and auto-injector formulations. Cost and timeline for availability of the product is to be determined by the manufacturer, with the FDA encouraging accessibility at an affordable price.

Supporting its approval, in February 2023, a government advisory committee deemed that Narcan 4 mg nasal spray, has met the following OTC criteria:

- User must be able to self-diagnose
- Product is adequately labeled to drive correct use by the consumer
- Benefits of increased access outweigh potential risk
- Low potential for misuse, use and abuse
- Health practitioners are not needed for the safe and effective use of the product



Patients who may benefit from purchase of this newly available OTC product include:

- Patients currently taking opioids or dependent on opioids, specifically targeting patients using ≥ 50 milligrams morphine equivalent (MME)
- Patient at high-risk of overdose
- Patients who have a history of opioid use disorder
- Individuals with friends or household family members who may be dependent on opioids

References

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