



HAP Medicare Part D Formulary Major Changes for 2024

Effective January 1, 2024, HAP Medicare Part D prescription benefits will change. Please see details below.

Drugs not covered

- **Humira** alternatives Hadlima and Hulio. This change will provide patients with significant cost savings.
- **Victoza** alternatives Ozempic, Mounjaro, Trulicity, and Rybelsus.

Drugs that have a change in tier

All GLP1 drugs and SGLT2 drugs will be Tier 3.

Farxiga	Ozempic	Synjardy	Trulicity	Xigduo XR
Jardiance	Rybelsus	Synjardy XR	Xigduo	

*GLP-1 drugs require a prior authorization.

Insulin pricing

Below is the information we communicate to HAP Medicare members.

This chart shows the different cost sharing amounts for insulin covered on our formulary, covered as part of a coverage determination or appeal, or covered as a transition supply. This copay applies even if you haven't met your deductible through all phases of coverage.			
All covered insulin regardless of tier will follow these copays	Pharmacy Advantage (Free In-Home Delivery) (Tiers 3-5)	Preferred Retail Pharmacy (Tiers 3-5)	Standard Retail Network Pharmacy (Tiers 3-5)
1-month supply	\$25	\$25	\$35
2-month supply	\$50	\$50	\$70
3-months supply	\$60	\$60	\$105
*Insulin administered with an infusion pump covered as a Part B medical benefit is \$35 for a 30-day supply.			

Formulary and Prior Authorization Criteria

You can view the new formulary and prior authorization criteria here: [Medicare formulary drug list](#) | [Michigan Health Insurance](#) | [HAP](#).

Submitting Prior Authorization Request

The quickest easiest way to submit a prior authorization for Part D drugs is electronically through the CoverMyMeds platform [Helping People get the Medicine They Need](#) | [CoverMyMeds](#).