



NORTH DAKOTA

OneTouch® test strip coverage guide

Covered at the Lowest Co-Pay*	Always Covered†	Where Not Covered
Aetna (Commercial & Medicare Advantage)	<p>Medicare Part B</p> <p>\$ Patient pays \$1.66 for 50 test strips after deductible</p> 	<p>OneTouch® Automatic Savings Program‡</p> <p>\$ Patient pays \$35 for 100 test strips</p> <p>🏪 Available at all major retailers</p>
BCBS Federal Employee Program (FEP)		
Cigna (Commercial & Medicare Advantage)		
CVS Caremark National Formulary		
Express Scripts National Preferred Formulary		
North Dakota Medicaid (Fee For Service)		
OptumRx Commercial (Select)		
Sanford Health Plan (Commercial)		
UnitedHealthcare Commercial & Medicare Advantage		
WellCare (Medicare Advantage)		
<p>As of January 2024</p> <p>ONETOUCH®</p> <p>© 2020-2023 LifeScan IP Holdings, LLC. All rights reserved. US-OTB-2300072 11/23</p>	<p>OneTouch® test strips have the lowest co-pay on the most health plans*†</p>	<p>Prescribe OneTouch Verio® test strips with confidence.</p> <p>Mark Dispense as Written (DAW1)# or Do Not Substitute (DNS)</p>  <p>The information provided is not a guarantee of coverage or payment. Actual benefits are determined by each plan in accordance with its respective policies and procedures.</p> <p>* Some health plans may have more than one test strip covered at the lowest co-pay.</p> <p>† Coverage and payment subject to co-insurance, deductible and patient eligibility requirements.</p> <p>‡ This program only works with a pharmacy benefit that does not cover OneTouch® test strips. Insurers may offer a lower cost option. Out of Pocket will not be applied to plan deductible. Those insured by any government healthcare program, such as Medicare, Medicaid, the military or VA, are NOT eligible for this offer. Program may be changed or discontinued at any time. This offer from LifeScan, Inc. can only be redeemed where OneTouch® products are sold and prescriptions can be processed.</p> <p>†† MMIT Formulary Report April 2023.</p> <p># Product selection code 1 = Substitution not allowed by prescriber. The pharmacy provider may only dispense the brand name version of the drug prescribed using this product selection code.</p>