## New York OneTouch<sup>®</sup> test strip coverage guide

Covered at the Lowest Co-Pay <sup>*</sup>	Always Covered <sup>*</sup>	Where Not Covered
AARP Medicare Advantage	<ul> <li>Medicare Part B</li> <li>Patient pays \$1.66 for 50 test strips after deductible</li> <li>Decide Health INSURANCE</li> <li>Insurance</li> <li>Insurance<td></td></li></ul>	
Aetna (Commercial, Health Exchange, Medicare Adv.)		
Anthem (Commercial and Medicare Advantage)		
BCBS Federal Employee Program (FEP)		
Care Improvement Plus		
Cigna (Commercial, Health Exchange, Medicare Adv.)	· · ·	
CVS Caremark National Formulary	OneTouch® test strips have the lowest co-pay on the most health plans* <sup>¶</sup>	
Elixir Commercial (Formerly EnvisionRx)		
EmblemHealth Enhanced Care/HIP (Managed Medicaid)		
Empire BCBS (Commercial & Medicare Advantage)	Accuracy of a true of the of t	
Empire BCBS (Managed Medicaid)	Prescribe OneTouch Verio <sup>®</sup> test strips with confidence. Mark Dispense as Written (DAW1) <sup>#</sup> or Do Not Substitute (DNS)	
Excellus BCBS (Commercial & Health Exchange)		
Excellus BCBS (Managed Medicaid)		
As of January 1 2025.	<ul> <li>The information provided is not a guarantee of covera with its respective policies and procedures.</li> <li>* Some health plans may have more than one test strip cat to co-insurance, deduct</li> </ul>	
<b>ONETOUCH</b> <sup>°</sup>	<ul> <li><sup>4</sup> 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.</li> <li><sup>n</sup> MMIT Formulary Report May 2024.</li> <li><sup>a</sup> Product selection code 1 = Substitution not allowed by prescriber. The pharmacy provider may only dispense the brand name version.</li> </ul>	

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\* 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.

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Express Scripts High Performance Formulary	Express Scripts National Preferred Formulary	
Fidelis Care NY (Managed Medicaid)	Fidelis Care NY (Wellcare Medicare Advantage)	
Healthfirst NY (Managed Medicaid)	Highmark BCBS of Western NY/Highmark BS NE NY (Commercial)	
Highmark BCBS of Western NY/Highmark BS NE NY (Managed Medicaid)	Highmark BCBS of Western NY/Highmark BS NE NY (Medicare)	
Independent Health Association (IHA) (Commercial & Medicare Adv)	Independent Health Association (IHA) (Managed Medicaid)	
MedImpact Commercial (Dividend Group)	MedImpact Medicare Advantage (Dividend Group)	
MetroPlusHealth Plan (Managed Medicaid)	Molina Healthcare of New York (Managed Medicaid)	
MVP Health Care (Commercial)	MVP Health Care (Managed Medicaid, Medicare Adv.)	
NYRx (New York Medicaid)	Navitus Health Solutions (Commercial)	
Oxford	OptumRx Commercial (Select)	
ProCare Rx	Sav-Rx	
UnitedHealthcare Commercial & Medicare Adv.	UnitedHealthcare Community Plan	
UnitedHealthcare Dual Complete	WellCare (Medicare Advantage)	

As of January 1 2025.

## **ONETOUCH**°

\* Some health plans may have more than one test strip covered at the lowest co-pay. © 2024-2025 LifeScan IP Holdings, LLC. All rights reserved. US-OTB-2400045