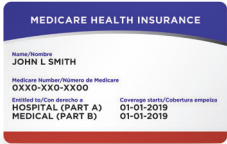



# Oregon

## OneTouch® test strip coverage guide

Covered at the Lowest Co-Pay*	Always Covered†	Where Not Covered
AARP Medicare Advantage	<p>Medicare Part B</p> <p><b>\$</b> Patient pays \$1.66 for 50 test strips after deductible</p> 	<p>OneTouch® Automatic Savings Program‡</p> <p><b>\$</b> Patient pays \$35 for 100 test strips</p> <p><b>🏪</b> Available at all major retailers</p>
Aetna (Commercial, Health Exchange)		
Aetna (Medicare Advantage)		
Anthem (Commercial and Medicare Advantage)		
BCBS Federal Employee Program (FEP)		
Cigna (Commercial, Health Exchange)		
Cigna (Medicare Advantage)		
CVS Caremark Managed Medicaid Formulary		
CVS Caremark National Formulary		
Elixir Commercial (Formerly EnvisionRx)		
Express Scripts High Performance Formulary		
Express Scripts National Preferred Formulary		
Health Net (Commercial & HIX)		
<p><b>As of January 1 2025.</b></p> <p><b>ONETOUCH®</b></p> <p>© 2024-2025 LifeScan IP Holdings, LLC. All rights reserved. US-OTB-2400045</p>	<p>OneTouch® test strips have the lowest co-pay on the most health plans*†</p>  <p><b>Prescribe OneTouch Verio® test strips with confidence.</b></p> <p><b>Mark Dispense as Written (DAW1)# or Do Not Substitute (DNS)</b></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 May 2024.</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>	

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### Covered at the Lowest Co-Pay\*

Health Net (Wellcare Medicare Advantage)	MedImpact Commercial (Dividend Group)
MedImpact Medicare Advantage (Dividend Group)	Navitus Health Solutions (Commercial)
OptumRx Commercial (Select)	PacificSource (Commercial & Medicare Advantage)
Premera Blue Cross (Commercial)	Premera Blue Cross (Health Exchange)
Premera Medicare Advantage	ProCare Rx
Providence Health Plan	Regence BCBS of Oregon (Commercial)
Regence BCBS of Oregon (Medicare Advantage)	Sav-Rx
Trillium Advantage (Wellcare Medicare Advantage)	Trillium Community Health Plan (Managed Medicaid)
UnitedHealthcare Assisted Living Plan	UnitedHealthcare Commercial & Medicare Advantage
UnitedHealthcare Community Plan	UnitedHealthcare SignatureValue
UnitedHealthcare SignatureValue Alliance	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.  
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