



# Patient Assurance Program

## Participating Drugs on the National Preferred Formulary

PLEASE NOTE: This list is subject to change. Not all of the drugs listed are covered by all prescription plans; check your benefit materials for the specific drugs covered for your prescription plan. This list is effective beginning April 1, 2021.

FARXIGA®

GLYXAMBI®

HUMALOG®

HUMALOG MIX®

HUMULIN®

JARDIANCE®

LANTUS®

LANTUS® SOLOSTAR®

LEVEMIR®

LEVEMIR® FLEXTOUCH®

LYUMJEV™

OZEMPIC®

RYBELSUS®

SYNJARDY®

SYNJARDY® XR

TRIJARDY® XR

TRULICITY®

XIGDUO® XR