PREMERA | BLUE CROSS

Insulin Cap Drug List

Medications on this list are included in the Washington state Insulin Cap mandate (HB 2662/ SB 6087). This applies to Washington self-funded groups that opt in. Alaska Air Group members on the Consumer Choice Plan (CCPPO plan) will be covered in full for the Insulin drugs below.

LIST OF DRUGS

Injectable Products

ADMELOG
ADMELOG SOLOSTAR
APIDRA
APIDRA SOLOSTAR
BASAGLAR KWICKPEN U-100
FIASP
FIASP FLEXTOUCH
FIASP PENFILL
HUMALOG
HUMALOG JUNIOR KWICKPEN
HUMALOG KWIKPEN U-100
HUMALOG KWIKPEN U-200
HUMALOG MIX 50-50
HUMALOG MIX 50-50 KWIKPEN
HUMALOG MIX 75-25
HUMALOG MIX 75-25 KWICKPEN
HUMULIN 70-30
HUMULIN 70-30 KWICKPEN
HUMULIN N
HUMULIN N KWICKPEN
HUMULIN R
HUMULIN R U-500
HUMULIN R U-500 KWICKPEN
INSULIN ASPART
INSULIN ASPART FLEXPEN
INSULIN ASPART PENFILL
INSULIN ASPART PROT MIX 70-30
INSULIN DEGLUDEC
INSULIN DEGLUDEC PEN U-100
INSULIN DEGLUDEC PEN U-200
INSULIN GLARGINE
INSULIN GLARGINE SOLOSTAR
INSULIN GLARGINE-YGFN
INSULIN LISPRO
INSULIN LISPRO JUNIOR KWICKPEN
INSULIN LISPRO KWICKPEN U-100
INSULIN LISPRO PROTAMIN MIX
LANTUS
LANTUS SOLOSTAR
LEVEMIR
LEVEMIR FLEXTOUCH
LYUMJEV
LYUMJEV KWICKPEN U-100
LYUMJEV KWICKPEN U-200
MYXREDLIN
NOVOLIN 70-30
NOVOLIN 70-30 FLEXPEN
NOVOLIN N
NOVOLIN N FLEXPEN
NOVOLIN R
NOVOLIN R FLEXPEN
NOVOLOG
NOVOLOG FLEXPEN
NOVOLOG MIX 70-30
NOVOLOG MIX 70-30 FLEXPEN
NOVOLOG PENFILL
SEMGLEE
SEMGLEE PEN
SEMGLEE YFGN
SEMGLEE YFGN PEN
TOUJEO MAX SOLOSTAR
TOUJEO SOLOSTAR
TRESIBA
TRESIBA FLEXTOUCH U-100
TRESIBA FLEXTOUCH U-200

Inhaled Products

AFREZZA

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