AETNA BETTER HEALTH®
Coverage Policy/Guideline

Name:	Antidiabetic Agents Step Therapy Criteria Exenatide - Liraglutide – Ozempic – Segluromet – Steglatro	Page:	1 of 6
Effective Date:	4/2/2026	Last Review Date:	3/2026

Applies to:	☐Illinois	☐Florida	☒Florida Kids
	☐New Jersey	☒Maryland	☐Michigan
	☒Pennsylvania Kids	☐Virginia	☐Texas

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Exenatide immediate-release, Liraglutide, Ozempic injection, Segluromet, and Steglatro under the patient's prescription drug benefit.

Description:

Exenatide

FDA-approved indications

Exenatide immediate-release is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

Limitations of Use

- Coadministration with other exenatide-containing products is not recommended.

Compendial Uses

Metabolic dysfunction–associated steatotic liver disease (MASLD) in adults with type 2 diabetes[29]

Metabolic dysfunction–associated steatohepatitis (MASH) in adults with type 2 diabetes[29]

Ozempic injection

FDA-approved Indications

Ozempic injection is indicated:

- as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.
- to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction, or non-fatal stroke) in adults with type 2 diabetes mellitus and established cardiovascular disease.
- to reduce the risk of sustained eGFR decline, end-stage kidney disease, and cardiovascular death in adults with type 2 diabetes mellitus and chronic kidney disease.

Compendial Uses

Metabolic dysfunction–associated steatotic liver disease (MASLD) in adults with type 2 diabetes[29]

Metabolic dysfunction–associated steatohepatitis (MASH) in adults with type 2 diabetes[29]

Liraglutide

FDA-approved Indications

Liraglutide is indicated:

- as an adjunct to diet and exercise to improve glycemic control in patients 10 years and older with type 2 diabetes mellitus.
- to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction, or non-fatal stroke) in adults with type 2 diabetes mellitus and established cardiovascular disease.

Limitations of Use:

- Liraglutide contains liraglutide and should not be co-administered with other liraglutide-containing products.

Compendial Uses:

Advanced chronic kidney disease (CKD) in adults with type 2 diabetes mellitus[29]

Metabolic dysfunction–associated steatotic liver disease (MASLD) in adults with type 2 diabetes[29]

Metabolic dysfunction–associated steatohepatitis (MASH) in adults with type 2 diabetes[29]

Steglatro

FDA-approved Indications

Steglatro is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

Limitations of Use:

Not recommended for use to improve glycemic control in patients with type 1 diabetes mellitus.

Segluromet

FDA-approved Indications

Segluromet is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

Limitations of Use:

Not recommended for use to improve glycemic control in patients with type 1 diabetes mellitus

Applicable Drug List:

Formulary with Step Therapy:
Exenatide immediate-release
Liraglutide
Ozempic injection
Segluromet
Steglatro

Policy/Guideline:

Coverage Criteria
Authorization may be granted for a diagnosis of type 2 diabetes mellitus when the patient has NOT been receiving a stable maintenance dose of the requested drug for at least 3 months when ALL of the following criteria are met:

- If the request is for a Glucagon-Like Peptide-1 (GLP-1) Receptor Agonists (example exenatide immediate-release, liraglutide, or Ozempic injection), then ONE of the following criteria is met:
  - The patient has a history of an A1C greater than or equal to 6.5 percent. Documentation is required for approval.
  - The patient has a history of a 2-hour plasma glucose greater than or equal to 200 mg/dL during oral glucose tolerance test. Documentation is required for approval.
  - The patient has a history of symptoms of hyperglycemia (e.g., polyuria, polydipsia, polyphagia) or hyperglycemic crisis and a random plasma glucose greater than or equal to 200 mg/dL. Documentation is required for approval.
  - The patient has a history of a fasting plasma glucose greater than or equal to 126 mg/dL AND when the following criteria is met:
    - The patient fasted for at least 8 hours prior to the fasting plasma glucose greater than or equal to 126 mg/dL. Documentation is required for approval.
- The patient meets ONE of the following criteria:
  - The patient experienced an inadequate treatment response, intolerance, or has a contraindication to metformin.
  - The patient requires combination therapy AND has an A1C of 7.5 percent or greater.
  - The patient has a diagnosis of metabolic dysfunction-associated steatotic liver disease (MASLD) or metabolic dysfunction-associated steatohepatitis (MASH) and the following criteria is met:
    - The request is for exenatide immediate-release, Ozempic injection (semaglutide), or liraglutide.
  - The patient has established cardiovascular disease, and the following criteria is met:

        - The request is for Ozempic injection or liraglutide.
    - The patient has a diagnosis of chronic kidney disease AND the following criteria is met:
        - The request is for Ozempic injection.
    - The patient has a diagnosis of advanced chronic kidney disease (estimated glomerular filtration rate less than 30 mL/min/1.73m2) AND the following criteria is met:
        - The request is for liraglutide.

Continuation of Therapy

Authorization may be granted for a diagnosis of type 2 diabetes mellitus when the patient has been receiving a stable maintenance dose of the requested drug for at least 3 months when ALL of the following criteria are met:

- If the request is for a Glucagon-Like Peptide-1 (GLP-1) Receptor Agonists (examples: exenatide immediate-release, liraglutide, Ozempic injection), then ONE of the following criteria is met:
    - The patient has a history of an A1C greater than or equal to 6.5 percent. Documentation is required for approval.
    - The patient has a history of a 2-hour plasma glucose greater than or equal to 200 mg/dL during oral glucose tolerance test. Documentation is required for approval.
    - The patient has a history of symptoms of hyperglycemia (e.g., polyuria, polydipsia, polyphagia) or hyperglycemic crisis and a random plasma glucose greater than or equal to 200 mg/dL. Documentation is required for approval.
    - The patient has a history of a fasting plasma glucose greater than or equal to 126 mg/dL when the following criteria is met:
        - The patient fasted for at least 8 hours prior to the fasting plasma glucose greater than or equal to 126 mg/dL. Documentation is required for approval.
- The patient meets ONE of the following criteria:
    - The patient has demonstrated a reduction in A1C since starting this therapy.
    - The patient has a diagnosis of metabolic dysfunction-associated steatotic liver disease (MASLD) or metabolic dysfunction-associated steatohepatitis (MASH) and the following criteria is met:
        - The request is for exenatide immediate-release, Ozempic injection (semaglutide), or liraglutide.
    - The patient has established cardiovascular disease, AND the following criteria is met:
        - The request is for Ozempic injection or liraglutide

- The patient has a diagnosis of chronic kidney disease, AND the following criteria is met:
  - The request is for Ozempic injection.
- The patient has a diagnosis of advanced chronic kidney disease (estimated glomerular filtration rate less than 30 mL/min/1.73m2) AND the following criteria is met:
  - The request is for liraglutide.

Approval Duration and Quantity Restrictions:

Initial and Renewal Approval: 12 months

Quantity Level Limit: Reference Formulary for drug specific quantity level limits

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