

GLP-1 COVERAGE

Frequently Asked Questions

Q: Why is Blue Cross making this change?

A: We didn't make this decision lightly. GLP-1 medications hold great promise, both for managing type 2 (T2) diabetes and potentially addressing other chronic conditions. At the same time, these drugs are incredibly expensive. It's our responsibility to ensure our members and clients get the best value for their premium dollars. This includes balancing drug coverage with increases in premiums to pay for those medications. Higher premiums affect all members and employer groups, whether they use these medications or not.

Q: When does this change take effect?

A: The coverage change will go into effect upon plan renewal starting January 1, 2026. For example, if a member is part of an employer group that renews their health insurance coverage on July 1, 2026, then that member would have coverage of weight-loss drugs up until June 30, 2026, provided the member meets prior authorization criteria.

Q: What specific medications are affected?

A: On anniversary, starting January 1, 2026, Wegovy, Saxenda, and Zepbound will be excluded from coverage. Coverage for GLP-1s approved to treat type 2 diabetes isn't changing. This includes medications such as Ozempic, Mounjaro, Trulicity, and others, which aren't approved for weight loss. These medications will continue to require prior authorization, including a documented diagnosis of type 2 diabetes.

Q: Do accounts have the option to continue coverage?

A: Employer groups with more than 100 employees have the option of adding coverage for weight-loss drugs for an additional cost. This decision may require additional lead time during the renewal process.

Q: Why don't employers with fewer than 100 employees get the option to continue coverage?

A: Given the cost burden of these medications, we're offering choice to our employer customers wherever and whenever possible. With the high price and dramatic spikes in GLP-1 usage rates, it's difficult to accurately price the optional coverage for groups with fewer than 100 employees.

Q: Will Blue Cross review requests for formulary exceptions based on medical necessity?

A: No. This change is part of standard benefits for our fully insured, group, and individual commercial members. Since this is a benefit exclusion, coverage can't be appealed.

Q: Can GLP-1s be excluded for weight loss only but be kept on for all other indications?

A: Beginning January 1, 2026, and then upon anniversary, we'll be excluding all GLP-1 indications except for type 2 diabetes.

Q: Do other health insurers cover weight-loss drugs?

A: A growing number of insurers have dropped or limited coverage of GLP-1s for weight loss because of the cost of the medications. According to recent Kaiser Family Foundation research, Affordable Care Act Marketplace plans rarely cover GLP-1 drugs that are approved solely for obesity treatment. Medicare doesn't allow drug coverage for Part D-excluded use, such as weight loss.

Q: What does this change mean to members who are currently taking weight-loss drugs?

A: Members who are currently using Blue Cross coverage to help pay for a weight-loss drug will be responsible for the full cost of the drug after our coverage changes upon plan renewal starting on January 1, 2026, if they choose to continue taking the drug. Weight-loss drugs may be health savings account (HSA) and/or flexible spending arrangement (FSA) eligible.

Members diagnosed with obesity or interested in losing weight have options that are covered by Blue Cross. There are programs to help manage their weight loss, including:

- Lifestyle management programs that offer clinically proven support for weight management, nutrition, stress management, and more.
- TrueCare, providing members with personalized support from a team of health experts, including registered nurses, mental health specialists, and others, to help

set and meet health goals, answer questions in between health care appointments, coordinate care with providers, and access additional resources and support

- Mental health and nutritional counseling (virtual and in-person options)
- Reimbursements for fitness center fees, gym memberships, yoga/Pilates/tai chi class fees, weight-management programs, acupuncture, nutrition counseling, personal training, massage therapy, and more
- Discounts and deals on nutrition, fitness equipment, and more
- Bariatric surgery for members with health risks from being obese

We'll continue to cover these medications for type 2 diabetes.

Q: How are you letting members know about this change?

A: Members will be notified about this change approximately 60 days in advance of the effective date (e.g., November 3, 2025 for January 1, 2026). Providers will also be informed so they can support their patients through any necessary transition.

Q: If the drug manufacturers lower the prices, will you reconsider your decision not to cover these drugs for weight loss?

A: We're constantly evaluating our medical policies and looking at the latest published medical evidence. We'll continue to examine this class of drugs as their price and usage indications evolve, as we know GLP-1 medications hold great promise, both for managing type 2 diabetes and potentially addressing other chronic conditions.

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