



THE PRESCRIBER e-LETTER

Upcoming Changes to MassHealth Coverage of Rapid-Acting Insulin

MassHealth Pharmacy currently covers the authorized generic formulations of insulin lispro (Humalog®) and insulin aspart (Novolog®) without prior authorization (PA) and covers the branded formulation without PA when there is no authorized generic equivalent (i.e., Humalog® [insulin lispro] 100 units/mL cartridge; Humalog® [insulin lispro] 200 units/mL).

Effective April 1, 2025, insulin aspart (Novolog®) will require PA

Effective April 1, 2025, PA will be required for all MassHealth members prescribed insulin aspart (Novolog®) to encourage the use of the cost-effective short-acting insulin agents. If clinically appropriate, please consider transitioning your members to insulin lispro (Humalog®), which will remain available without PA. If transition to insulin lispro (Humalog®) would not be clinically appropriate, you must submit a PA for insulin aspart (Novolog®) to MassHealth. The PA clinical criteria will require documentation of an appropriate diagnosis and inadequate response, adverse reaction, or contraindication to insulin lispro (Humalog®) (e.g., inadequate blood glucose control, documented intolerance or hypersensitivity, FDA-labeled contraindication, etc.).

Summary of PA Status of Rapid-Acting Insulin Products

| Available without PA |
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| <ul style="list-style-type: none"> Humalog® (insulin lispro) 100 units/mL cartridge, 200 units/mL insulin lispro 100 units/mL prefilled syringe, vial |
| PA Required |
| <ul style="list-style-type: none"> Admelog® (insulin lispro) Apidra® (insulin glulisine) Afrezza® (insulin human inhalation powder) Humalog® (insulin lispro) 100 units/mL prefilled syringe, vial Humalog Tempo® (insulin lispro) Fiasp® (insulin aspart) insulin aspart Lyumjev® (insulin lispro-aabc) Lyumjev Tempo® (insulin lispro-aabc) Novolog® (insulin aspart) |

The MassHealth Drug List, including [Therapeutic Class Table 26](#) (outlining the coverage status and PA criteria for antidiabetic agents) and the [Antidiabetic Agents PA form](#), will be updated to reflect these changes. Additional information can be found on the [MassHealth Drug List](#).

The Prescriber e-Letter is an update designed to enhance the transparency and efficiency of the MassHealth drug prior-authorization (PA) process and the MassHealth Drug List. Each issue highlights key clinical information and updates to the MassHealth Drug List. The Prescriber E-Letter was prepared by the MassHealth Drug Utilization Review Program and the MassHealth Pharmacy Program.