



PHARMACY FACTS

Current information for pharmacists about
the MassHealth Pharmacy Program

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Changes in MassHealth Management of Mounjaro® (tirzepatide), Trulicity® (dulaglutide), and Victoza® (liraglutide): Effective August 11, 2025

Effective August 11, 2025, Mounjaro® (tirzepatide) will be a preferred drug on the MassHealth Drug List (MHDL).

Mounjaro® (tirzepatide), Trulicity® (dulaglutide), and Victoza® (liraglutide) will require prior authorization (PA). Criteria for approval include diagnosis of type 2 diabetes (T2DM) or prediabetes, quantity limits, and that the agent will not be used in combination with another glucagon like peptide-1 (GLP-1) agonist.

Most claims for Mounjaro® (tirzepatide), Trulicity® (dulaglutide), and Victoza® (liraglutide) will pay at the pharmacy without a PA request if a member has a diagnosis of either T2DM or pre-diabetes, the claim is within quantity limits, and the agent is not used in combination with another GLP-1 agonist.

Effective August 11, 2025, all other GLP-1 Agents for Diabetes will require Trials of Mounjaro® (tirzepatide), Trulicity® (dulaglutide), and Victoza® (liraglutide)

Effective August 11, 2025, GLP-1 agents Bydureon Bcise® (exenatide), Byetta® (exenatide), Ozempic® (semaglutide), and Rybelsus® (semaglutide) will require prior authorization. Criteria for approval include appropriate diagnosis, a trial of each of the following agents: Mounjaro® (tirzepatide), Trulicity® (dulaglutide), and Victoza® (liraglutide), quantity limits, and the agent will not be used in combination with another GLP-1 agonist. Additional information can be found on the [MassHealth Drug List](#).

Please see **Table 1** for guidance on the dosing equivalencies when switching patients to Mounjaro® (tirzepatide), Trulicity® (dulaglutide), or Victoza® (liraglutide). Prescribers should work with their patients to determine which dose is appropriate.

Table 1. Dosing Equivalencies for GLP-1 Agents for T2DM¹

| Agent | Comparative Doses (mg)* | | | | | | | | | |
|------------------------------------|-------------------------|-------|-----|---|-----|---|-----|----|------|----|
| Exenatide <i>twice daily</i> | 5 µg | 10 µg | | | | | | | | |
| Exenatide XR <i>once weekly</i> | | | 2 | | | | | | | |
| Dulaglutide <i>once weekly</i> | | 0.75 | 1.5 | 3 | 4.5 | | | | | |
| Liraglutide <i>once daily</i> | 0.6 | 1.2 | 1.8 | | | | | | | |
| Semaglutide <i>once weekly</i> | | 0.25 | 0.5 | | 1 | 2 | | | | |
| Oral Semaglutide <i>once daily</i> | 3 | 7 | 14 | | | | | | | |
| Tirzepatide <i>once weekly</i> | | | 2.5 | | | 5 | 7.5 | 10 | 12.5 | 15 |

*Dosing is in mg unless otherwise noted

References

1. Whitley HP, Trujillo JM, Neumiller JJ; Special Report: Potential Strategies for Addressing GLP-1 and Dual GLP-1/GIP Receptor Agonist Shortages. Clin Diabetes 1 July 2023; 41 (3): 467–473.