

Special Bulletin

For professional providers

November 1, 2022

Prior Authorization No Longer Needed for Glimepiride and Glyburide

Effective **November 1, 2022**, prior authorization will no longer be required on Highmark's Medicare formularies for medications containing Glimepiride or Glyburide.

Previously, we required a prior authorization as these medications were considered potentially inappropriate for use by older patients due to increased risk of hypoglycemia. However, an analysis of members using these medications did not show any safety concerns; therefore, Highmark has removed the prior authorization requirement.

These medications are part of the Medication Adherence for Diabetic Medications Star Measure. The removal of this prior authorization eliminates a potential barrier to adherence.

Encourage your patients to use their Highmark prescription coverage when filling these medications. Many members' benefits offer a \$0 copay for preferred generic medications during the initial coverage phase.

This information is issued on behalf of Highmark Blue Shield and its affiliated Blue companies, which are independent licensees of the Blue Cross Blue Shield Association. Highmark Inc. d/b/a Highmark Blue Shield and certain of its affiliated Blue companies serve Blue Shield members in 21 counties in central Pennsylvania and 13 counties in northeastern New York. As a partner in joint operating agreements, Highmark Blue Shield also provides services in conjunction with a separate health plan in southeastern Pennsylvania. Highmark Inc. or certain of its affiliated Blue companies also serve Blue Cross Blue Shield members in 29 counties in western Pennsylvania, 13 counties in northeastern Pennsylvania, the state of West Virginia plus Washington County, Ohio, the state of Delaware, and 8 counties in western New York. All references to Highmark in this document are references to Highmark Inc. d/b/a Highmark Blue Shield and/or to one or more of its affiliated Blue companies.