



How will this news impact patients?

TII International's FAQ on The Big Three's Insulin Pricing Announcements

March 2023

In March 2023, the Big Three insulin manufacturers (Eli Lilly, Novo Nordisk, and Sanofi) declared that they would be lowering the list prices of several insulin products in response to pressure from grassroots advocates and their allies. In this document, we hope to outline the key changes, when they are occurring, and how they will directly impact patients.

Will the price of my insulin go down?

- Unfortunately, patients with insurance don't often get a choice of what insulin they use. Insurance and pharmacy benefit managers choose which preferred insulins to be on each insurance formulary. These reductions mean you could 'go around' your insurance and get a prescription for an off-formulary insulin if it's cheaper to get insulin directly at the pharmacy. Some changes go into effect soon while others will go into effect next year.
- [Eli Lilly:](#)
 - The list price of a vial of generic Lispro will be reduced around 70% and will go from around \$82 to \$25 in May 2023.
 - The list price of a vial of Humalog will be reduced 70% and will go from around \$275 to \$82 by 2024.
 - The list price of a vial of Humulin will go from around \$82 to \$25 by 2024.
 - An interchangeable biosimilar of long-acting insulin Lantus will be available for \$92 for a pack of KwikPens in April 2023.
- [Novo Nordisk:](#)
 - The list price of a vial of NovoLog will be reduced 75% and will go from around \$289 to \$72 in January 2024. Flex pens will go from around \$537 to \$140.
 - The list price of a vial of Novolog Mix 70/30 will be reduced 75% and will go from around \$300 to \$72 in January 2024. Flexpens will go from around \$559 to \$140.
 - The list price of a vial of Novolin will be reduced 65% from around \$138 to \$48 in January 2024. Flexpens will go from around \$260 to \$91.
 - The list price of a vial of Levemir will be reduced 65% and will go from around \$308 to \$108 in January 2024. Flexpens will go from around \$462 to around \$162.
 - We assume that Novo Nordisk's Walmart ReliOn brand insulin prices will stay the same.
- [Sanofi:](#)
 - The list price of a vial of Lantus will be reduced 78% and will go from around \$292 to \$64 in January 2024. Flexpens will go from around \$439 to \$97.
 - The list price of a vial of Apidra will be reduced 70% and will go from around \$284 to \$85. Flexpens will go from around \$549 to \$165.



Current understanding of the announced reductions of common insulins

Manufacturer	Insulin name	Insulin action	Insulin type	Dosage form	Approximate current price	Approximate future price	Date by which it will be available	Percent reduction	
Eli Lilly	Lispro	Short-acting	Generic of Humalog, Insulin lispro	10ml vial	\$82	\$25	May 1 2023	70%	
				5-pack of 3ml pens	\$159	no change			
	Humalog	Short-acting	Name-brand of insulin lispro	10ml vial	\$275	\$82	Jan 1 2024	70%	
				5-pack of 3ml pens	\$530	\$159	Jan 2 2024	70%	
	Humulin	Intermediate-acting	Name-brand of insulin human Includes N, R, and 70/30	10ml vial	\$82	\$25	Jan 3 2024	70%	
				5-pack of 3ml pens	\$506	\$132	Jan 4 2024	70%	
	Rezvoglar	Long-acting	Interchangeable biosimilar of Lantus, insulin glargine	vial not covered			\$92	April 1 2023	
				5-pack of 3ml pens					
	Basaglar	Long-acting	Biosimilar of Lantus, insulin glargine	vial not covered				no change	
				5-pack of 3ml pens	\$326				
	Lyumjev	Fast-acting	Name-brand of insulin lispro-aabc	10ml vials	\$275	no change			
				5-pack of 3ml pens	\$530	no change			
Novo Nordisk	Novolog	Short-acting insulin	Name-brand of insulin aspart	10ml vial	\$289	\$72	Jan 1 2024	75%	
				Walmart ReliOn vial	\$73	no change			
				5-pack of 3ml pens	\$537	\$140	Jan 1 2024	75%	
				Walmart ReliOn pens	\$86	no change			
	Novolog Mix 70/30	Mix of intermediate- and short-acting	Name-brand of a mix of insulin aspart protamine and insulin aspart	10ml vial	\$300	\$72	Jan 1 2024	75%	
				5-pack of 3ml pens	\$559	\$140	Jan 1 2024	75%	
	Novolin	Intermediate-acting	Name-brand of insulin human Includes N, R, and 70/30	10ml vial	\$138	\$48	Jan 1 2024	65%	
				Walmart ReliOn vial	\$25	no change			
	Levemir	Long-acting	Name-brand of insulin detemir	5-pack of 3ml pens	\$260	\$91	Jan 1 2024	65%	
				10ml vial	\$308	\$108	Jan 1 2024	65%	
	Fiasp	Fast-acting	Name-brand of Insulin aspart	5-pack of 3ml pens	\$462	\$162	Jan 1 2024	65%	
				10ml vial	\$308	\$108	Jan 1 2024	65%	
Tresiba	Long-acting	Name-brand of insulin degludec	10ml vial	\$339	no change				
			5-pack of 3ml pens	\$508	no change				
			3-pack of 3ml pens of U-200	\$610	no change				
Sanofi	Lantus	Long-acting	Name-brand of insulin glargine	10ml vial	\$292	\$64	Jan 1 2024	78%	
				5-pack of 3ml pens	\$439	\$97	Jan 2 2024	78%	
	Apidra	Short-acting	Name-brand of insulin glulisine	10ml vial	\$284	\$85	Jan 3 2024	78%	
				5-pack of 3ml pens	\$549	\$165	Jan 4 2024	78%	
	Toujeo Solostar	Long-acting	Name-brand of concentrated insulin glargine	3-pack of 1.5ml pens of U-300	\$408	no change			
	Toujeo Max Solostar	Long-acting	Name-brand of concentrated insulin glargine	2-pack of 3ml pens of U-300	\$544	no change			
Admelog	Fast-acting	Name-brand of insulin lispro	10ml vial	\$98	no change				
			5-pack of 3ml pens	\$189	no change				
Viatrix / Biocon	Semglee	Long-acting	Interchangeable biosimilar of Lantus, insulin glargine	10ml vial	\$270	no change			
				5-pack of 3ml pens	\$404	no change			
	Glargine	Long-acting	Generic of Semglee	10ml vial	\$98	no change			
5-pack of 3ml pens				\$148	no change				



This does not mean the fight for affordable insulin is over. We also need to ensure that the big three insulin manufacturers can't raise their prices again. That's why we're [calling on Congress](#) and the Biden Administration to put in place an insulin price cap for all insulins, regardless of manufacturer.

Wait, insulin manufacturers can raise their prices again?

- Yes. In the US for example, Humalog was \$21 in 1996 and now costs \$274 before the price change goes into effect.
- We need to cap insulin prices today to ensure that all insulins become and remain affordable to everyone and put the regulations in place so it stays that way.

I already get a \$35 monthly supply of insulin through my insurance, or through Medicare.

- That's great! Many people with insurance pay a low copay for their insulin through their insurance – once the deductible has been met!
- We need to ensure that prices are lower for everyone, especially people without insurance who are often the most vulnerable. Lower list prices are more likely to impact everyone, not just those with insurance.
- But all insurance premium holders (and in the case of Medicare, taxpayers) pay the high *price* of insulin through high premiums. While the copay may be low, everyone is still footing the bill to Pharma for their high list prices.
- A \$35 copay cap for people with insurance is simply streamlining the rebate rate for all PBMs that carry insulin products. However, if your insurance or your pharmacy isn't participating in this program, you're out of luck.
- Medicare beneficiaries also now have access to programs that provide \$35 monthly insulin copay caps with the passage of the [Inflation Reduction Act](#). Again, this does not impact the price of insulin, only the copay.
- Overall, the \$35 monthly copay cap for people with insurance is not likely to impact many people who have insurance.
- **When copays are capped, insulin manufacturers actually have an incentive to raise prices! Insurance companies are guaranteed to pay the difference between the list price and the copay price. That's why we're calling for a cap on the price of insulin, not copays.**

I already get a \$35 monthly supply of insulin through a discount card.

- Patient assistance programs are where drug companies provide vouchers or coupons to cover some costs for expensive drugs. Manufacturers then retain direct control over which drug can be used for which patient. As such, [the United State Department of Health and Human Services \(HHS\) notes](#) that patient assistance programs “present a risk of fraud, waste, and abuse.”
- While the press has clung to elements such as The Big Three's “announcements” of \$35 a monthly supply of insulin, this is not new. Patient assistance programs have been around for years. Some programs have lowered the program cost (for example, Sanofi lowered their program from \$99 to \$35 per month starting July 1 2023).





- Many patients are not eligible for patient assistance programs and they have coverage limits.
- Manufacturers can collect any information they want about patients and patient assistance programs. [LillyCares](#), as well as [NovoCare](#), and [Sanofi Patient Connection](#) applications all state that the data they collect are not covered by federal and state privacy laws and may be shared.
- The high cost of insulin means there is a real need for these programs: For example, from August 2018 to February 2019, over 10,000 patients a month [called Eli Lilly](#) and were granted assistance (not counting those who called and were not accepted). The sheer number of patients calling in need shows the wide scope of this crisis.
- Everyone deserves consistent access to affordable and accessible insulin without jumping through hoops or giving up privacy. That's why we're calling for a regulated price cap on insulin for everyone.

I have a prescription for an insulin that isn't listed in the press releases!

- The medications with reduced list prices, such as the \$25 vials of insulin Lispro, are available to anyone with a prescription for said drug.
- Having your prescriber or pharmacist move you from a common but older drug to a newer drug is called "product hopping". Product hopping is a practice used by many drug manufacturers to move patients away from products that are going off-patent, and will be cheaper, and moving them to marginally improved or changed but more expensive brand-name products.
- If you have a prescription for specific insulin, so long as it doesn't say some version of "no substitutions" or "dispense as written," you should be able to get the insulins listed at a reduced list price at the pharmacy counter. In these scenarios, you may need to consult with your healthcare professionals and do some pharmacist education.
 - **For example:** If you have a prescription for any other short-acting insulin, you will need to get a new prescription for Lispro from your prescriber to access the \$25 Lispro vials. We recommend that you get a Lispro-specific prescription on file with your pharmacy just in case you run into any trouble with your insurance and need a short acting insulin.
- As Novo Nordisk's Walmart ReliOn brand insulin prices were not named in the press releases, we assume their costs of Novolog and Novolin will stay the same.
- We need insulin price caps for everyone!

Why haven't I heard of generic insulins?

- A generic insulin is the same drug with different branding and packaging. For example, Lispro is the generic of Humalog, Aspart is the generic of Novolog, and Glargine is the generic of Lantus. Generic insulins are authorized products as the brand name drug sold under a different name. By making their own generic (Lispro), manufacturers can keep all the profits from the generic while also retaining the high list price for the brand-name drug (Humalog).





- **You may not have heard of generics such as Lispro because they are often not widely available.** In a 2019 [survey](#) of pharmacies in 204 counties across the country found that 83% of pharmacies surveyed did not have Lispro in stock and available for consumers.
- Making insulin affordable is not helpful if it isn't accessible. Insulin Lispro needs to be available for patients to get their prescriptions filled.

Why are insulin manufacturers doing this?

- The major insulin manufacturers are facing increasing action and attention on insulin affordability. Due to industry pressure, political pressure, and most of all public pressure, Novo Nordisk and Sanofi were quickly forced to follow up Eli Lilly's action.
- In October, T1International and people with diabetes [demonstrated outside of Eli Lilly](#) in Indianapolis, and shared a petition with thousands of signatures asking them to lower their list price of insulin. T1International has been demonstrating outside of [Eli Lilly](#), [Novo Nordisk](#) and [Sanofi](#) since 2017, asking for lower list prices. The announcement from Eli Lilly to lower the list price of their authorized generic to \$25 demonstrated the momentum and power behind the #insulin4all movement.
- These price drops also come at a time when other competitors are gearing up to enter the insulin market:
 - Non-profit insulin manufacturer Civica Rx is expected to produce \$30 insulin vials and \$55 for a box of five insulin pens in 2024.
 - Mark Cuban's CostPlus drugs is testing a three-month supply of insulin Lispro for \$170 including shipping.
 - California has contracted with Civica Rx to make California-brand CalRx generic insulin available at \$30 for a vial of insulin and \$55 for a box of five insulin pens for all residents. Maine and Michigan have also begun to take action for affordable public insulin option.
- We need regulators to ensure that low-cost insulins are available for everyone.

Will insulin manufacturers be losing money by lowering these prices?

- We know that producing a vial of most analogue insulins costs between [\\$3.69 and \\$6.16](#) and yet they can cost over \$300 a vial. Prices have been driven by greed, not other factors.
- We also know that the pharmaceutical industry has not lowered prices out of the goodness of their hearts. It is unlikely that they would do anything that truly hurts their profit margins. The companies could have faced a significant Medicaid penalty for hiking the prices of their insulin faster than the rate of inflation had they not lowered the prices of some of their drugs. As a result, all insulin manufacturer's stock prices actually went up after the announcement.
- According to some sources, Eli Lilly and other manufacturers would have had to [pay Medicaid](#) about \$150 for each vial of insulin used in the program before it cut the list price.
- Manufacturers offer rebates to pharmacy benefit managers for their drugs to be on a favorable insurance formulary. Insulin is highly rebated, meaning that while the list price of insulin is very





high, that is not the cost that insurers or patients are paying with the insurance's rebate. However, it is the price some individuals pay without insurance.

- However, manufacturers still retain the most proceeds of high insulin prices among all of the parties. Cutting the price of insulins will allow for patients with high deductibles or those without insurance to access insulin at a lower price.
- We need reforms in all sorts of aspects of our healthcare system in the US – manufacturers are the most responsible for high insulin prices and should be held accountable for lowering costs.

I don't live in the United States. What about high insulin costs in the rest of the world?

- This announcement is just for insulin costs in the US.
- Insulin access and affordability is a worldwide issue – one in two people globally who need insulin to live can't get it because it is unaffordable, unavailable or both. We need insulin manufacturers to lower the cost of insulin for everyone, regardless of where they live.
- T1International continues to work towards a global goal of monthly insulin and blood glucose testing supplies to [cost no more than 5% of median income](#) in any given country.

It seems like this announcement isn't going to help everyone. Why are we celebrating?

- The pressure that our collective voices and actions have put on insulin manufacturers is working. This would not have happened without our advocacy, and we know that more can be achieved.
- Starting May 1, this is the first time in decades that patients will be able to walk into a pharmacy and pick up a vial of short-acting insulin for \$25, regardless of immigration status, or insurance status. This will likely save lives.

Read more about T1International's response to Eli Lilly's initial March 1, 2023 announcement [here](#).

If you are facing an urgent need to access insulin, see our [insulin access and affordability resource](#).

T1International believes in a world where everyone with type 1 diabetes – no matter where they live – has everything they need to survive and achieve their dreams. The organization accepts no funding from pharmaceutical companies and provides advocacy training and support to volunteer advocates.

