



# SHIP

State Health Insurance  
Assistance Program

Navigating Medicare

# ASK SHIP

YOUR MONTHLY MEDICARE Q&A

July, 2023

## **Q: Will Medicare cover Ozempic or other prescription drugs taken for weight loss?**

**A:** The Food and Drug Administration approved Ozempic to treat Type 2 diabetes in December 2017. Currently, there isn't a generic version of the drug.

This particular class of medications is currently generating a lot of interest for those who are trying to lose weight. Initially approved to treat Type 2 diabetes, these drugs known as GLP-1 (glucagon-like peptide-1) agonists, have been found to be effective weight loss agents. Some of these medications include Ozempic, Wegovy, and Mounjaro. These particular drugs can be expensive.

## **So, does Medicare cover Ozempic and other similar prescription drugs?**

Medicare only covers Ozempic and Mounjaro as Part D medications when prescribed to treat diabetes because the FDA approved them for this purpose. For Medicare to cover these types of medications, they would need to be determined to

be medically necessary by your prescribing doctor.

Medicare isn't allowed to cover drugs taken for weight loss because the 20-year-old Medicare Modernization Act specifically excludes them.

The 2003 law that established Medicare Part D prescription drug benefits prohibits Part D plans from covering drugs for weight loss, as well as some other types of drugs, such as for cosmetic purposes, hair growth, fertility drugs, and drugs prescribed to treat sexual or erectile dysfunction.

Part B may cover a one-time health behavior change program to help prevent Type 2 diabetes. The program begins with weekly sessions in a group setting over a 6-month period. This includes:

- Training to make realistic, lasting behavior changes around diet and exercise
- Tips on how to get more exercise
- Strategies to control your weight
- A specially trained coach to help keep you motivated
- Support from people with similar goals and challenges

Once the core sessions, are completed, you'll get six monthly follow-up sessions.

To qualify, you must have:

- Part B (or a Medicare Advantage Plan)
- A fasting plasma glucose of 110-125mg/dL, a 2-hour plasma glucose of 140-199 mg/dL (oral glucose tolerance test), or a hemoglobin A1C test result between 5.7 and 6.4% within 12 months prior to attending the first core session
- A body mass index (BMI) of 25 or more (BMI of 23 or more if you're Asian)
- No history of type 1 or type 2 diabetes
- No End-Stage Renal Disease (ESRD)
- Never participated in the Medicare Diabetes Prevention Program

You pay nothing for these services if you qualify.

If you have questions related to Medicare, call SHIP at (800) 452-4800 or online at [www.medicare.in.gov](http://www.medicare.in.gov). You can also find SHIP on Facebook, Twitter, LinkedIn, and YouTube.