

GLP-1s Beyond Glycemic Control: Understanding Additional Indications

Glucagon-like peptide (GLP-1) receptor agonists are well established in the management of type 2 diabetes mellitus (T2DM). As research continues to expand, these medications are increasingly being studied for benefits beyond glycemic control, with several agents now carrying additional FDA-approved cardiovascular and kidney indications.

GLP-1 Medication	Formulary Status	Cardiovascular Risk Reduction	Kidney Disease/Risk Reduction
Liraglutide (Victoza)	Preferred	✓	—
Dulaglutide (Trulicity)	Preferred	✓	—
Semaglutide (Ozempic tablet) *	Preferred – PA Required	✓	—
Semaglutide (Ozempic injection)	Non-Preferred – PA Required	✓	✓
Exenatide ER (Bydureon BCise)	Non-Preferred – PA Required	—	—
Tirzepatide (Mounjaro)	Non-Preferred – PA Required	—	—

*Ozempic tablets were previously marketed as Rybelsus (oral semaglutide) tablets.

Understanding the Additional Indications

Several GLP-1 medications have FDA-approved cardiovascular and kidney indications in addition to their use for glycemic control in T2DM. These additional indications can help guide treatment selection based on a patient's comorbidities and clinical needs.

Please note: The cardiovascular and kidney indications highlighted above apply to patients with an established diagnosis of type 2 diabetes mellitus (T2DM) and do not represent standalone indications independent of a diagnosis of T2DM.

Coverage Considerations

CountyCare's formulary aligns with the Illinois Department of Healthcare and Family Services (HFS), under which obesity and weight loss are benefit exclusions. As a result, FDA-approved indications that are specifically associated with obesity or weight loss are not covered.



Provider Notice

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Looking Ahead

Research into GLP-1 therapies continues to expand beyond currently approved indications. Emerging areas of study include substance use disorders, neurodegenerative diseases and other metabolic conditions. Cook County Health is currently participating in research evaluating GLP-1-based therapy in patients with opioid use disorder.

As evidence continues to evolve, additional FDA-approved indications may emerge. Providers should refer to the most current prescribing information and formulary requirements when selecting therapy.

Contact Us

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact CountyCare Provider Services at countycareproviderservices@cookcountyhhs.org or your assigned Provider Relations Representative.

References

1. U.S. Food and Drug Administration. *Victoza (liraglutide) Prescribing Information*.
2. U.S. Food and Drug Administration. *Trulicity (dulaglutide) Prescribing Information*.
3. U.S. Food and Drug Administration. *Ozempic (semaglutide) Prescribing Information*.
4. U.S. Food and Drug Administration. *Ozempic (semaglutide) Tablets Prescribing Information*.
5. Illinois Department of Healthcare and Family Services. *Medicaid Preferred Drug List*.
6. Illinois Department of Healthcare and Family Services. GLP-1 receptor agonist coverage and prior authorization criteria.
7. ClinicalTrials.gov. *Tirzepatide as an Adjunct to Buprenorphine for Opioid Use Disorder*. NCT06651177.