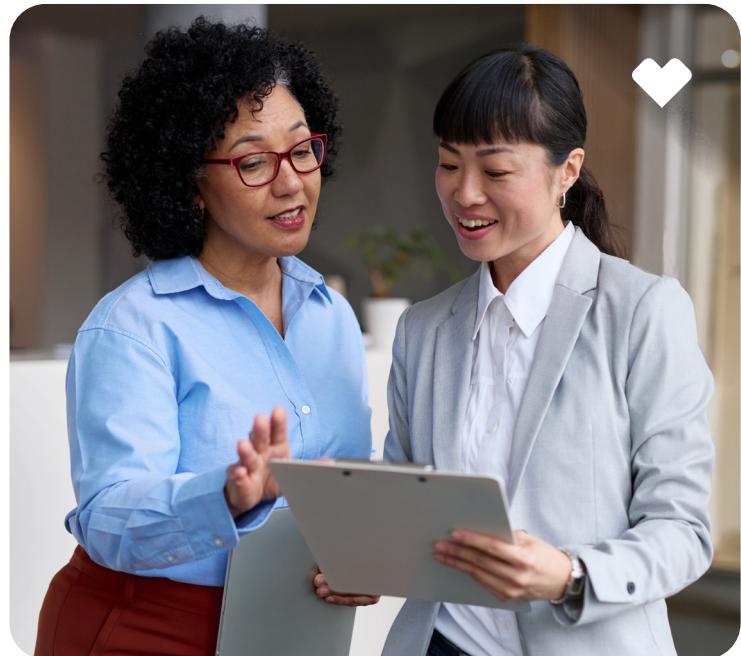


2026 GLP-1 outlook

A strategic roadmap to manage
spend and trend



AN INSIGHTS REPORT FROM

Joshua Fredell

Senior Vice President & Head of PBM & Specialty Product Innovation

The weight management category remains one of the fastest-growing and most consequential areas of the pharmacy benefit.

With strong clinical benefits, expanding treatment options and broad eligibility, we expect GLP-1 use for weight management to continue to rise.

The implication for your pharmacy trend and workforce health strategy couldn't be bigger. These therapies are game changers for people's health and well-being. And as innovation accelerates, manufacturers will naturally focus on driving utilization and revenue.

Our role at CVS Caremark is to make sure that innovation and affordability rise together, helping you capture clinical value while we actively manage cost, advocate for your needs and support you with clear, forward-looking strategies. At the same time, the market is evolving in ways that create new opportunities to reduce cost trends without compromising clinical outcomes or member experiences.

This Insights Report outlines what to expect in 2026,
our market perspective and the strategies we're building to help you navigate
cost, access and long-term clinical outcomes.

Market momentum: What's fueling GLP-1 growth

We anticipate weight management GLP-1 use to grow ~25% in 2026,* reflecting how meaningful these therapies are for people who clinically need them. With 30-40% of U.S. adults meeting obesity criteria by BMI,* and millions more overweight with cardiometabolic risk factors, demand isn't slowing down.

The GLP-1 pipeline

New oral GLP-1 therapies are also driving interest and utilization. With oral Wegovy available and Lilly's orforglipron expected mid-2026, members now have choices that may feel less intimidating than injectables. As this category evolves, we'll continue tracking how people use them and their associated outcomes — and we'll adjust our strategies to support you along the way.



~25%

projected GLP-1 utilization growth*



30-40%

of U.S. adults meet obesity criteria*

Wegovy 7.2mg = ~21% weight loss*

The GLP-1 pipeline continues to grow, with higher-strength options that support members needing more significant weight loss. Clinical studies show that people taking the higher-strength Wegovy 7.2 mg dose experienced ~21% weight loss.* In practice, that means people can reach 20%+ body-weight loss with either Wegovy or Zepbound.

The cost outlook: A better-than-expected story

While projected utilization growth may sound daunting, there's positive news on the cost front.

We expect a ~15% decrease in the per prescription net cost in 2026 compared to 2025 for commercial template formulary clients with Standard Utilization Management (UM).* We contained costs through product-specific negotiations across injectable and oral formulations, formulary optimization and proactive contracting. And we took strategic steps that made sure oral Wegovy launched at a better net cost than expected, and at the same net price as injectables.



~15%

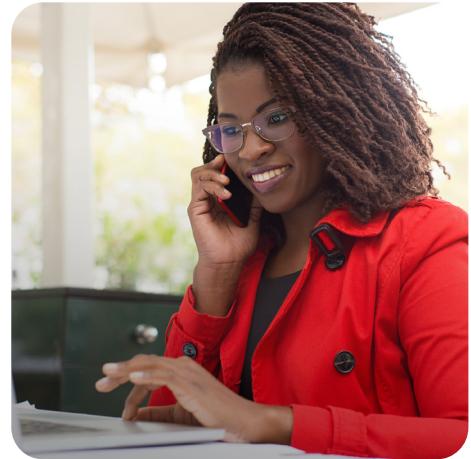
reduction in the per prescription net cost from 2025-2026*

Category spend still expected to rise

Even with lower net costs per prescription, we're expecting overall category spend to rise ~10% for clients maintaining their current benefit designs.* This reflects higher utilization and expanded eligibility.

Bottom line:

Thoughtful plan design and clinical programs will be key to balancing affordability and access.



OUR 2026 STRATEGY:

Delivering lower costs, better access & stronger outcomes

We're investing in solutions that empower you to do three things: Manage costs, maintain member access and affordability, and support strong clinical results.

1

Driving lower costs through proactive formulary strategies

We've strengthened our formulary and product strategy with a consistent focus on maximizing affordability for you and your members, and we continue to build on this foundation.



Key outcomes

- **Negotiate competitive net costs** across injectable and oral GLP-1s
- **Evaluate pipeline products** for clinical and economic value before launch
- **Design formulary strategies** that guide members to the most cost-effective therapies

Proof in action

Ahead of oral Wegovy's launch, we secured better-than-expected net pricing, showing our commitment to staying ahead of market changes rather than reacting to them.

2

Flexible plan designs that expand access without breaking budgets

You choose the plan design that works for your goals. We support it with options that expand member access while giving you greater predictability and control over overall spend.



Key strategies



Guide members to lower net-cost products

while maintaining access to clinically appropriate therapies (including high-strength Wegovy) through our Select Exclusion Program.



Limit member out-of-pocket costs with a weight-management-specific copay tier

(up to \$200 per month). For clients looking to influence cost-share dynamics, it keeps costs well below typical direct-to-consumer (DTC) rates and may reduce client spend by ~25%.*



Support members using non-covered medications

by giving them access to DTC pricing through the RxSavingsPlus® for Non-Covered Drugs program, while still keeping them connected to guided care and clinical oversight.

Proof in action:

Removing prior authorizations (PAs) entirely can lower unit net costs by

~40%

compared to 2025, offsetting rising use while expanding access.*

3

Proven clinical model delivers strong, sustainable outcomes

Our CVS Weight Management® program delivers some of the most compelling clinical and financial outcomes in the industry. It proves that pairing GLP-1 therapy with structured lifestyle support produces stronger and more durable results.

Key outcomes

18.5%

average weight loss for program members taking weight management drugs within 1 year*

Up to

47%

lower spend on GLP-1s approved for weight loss*

90%

of members maintain weight loss 10–12 months after ending therapy*

Proof in action

This program reduces downstream medical costs and improves productivity, delivering measurable value.

Partnering to help you maximize your GLP-1 strategy

As you shape your GLP-1 approach for 2026, our teams at CVS Caremark will continue investing in solutions that make it easier to balance access, affordability and clinical experiences.

These include:

New benefit design models

that balance affordability and sustainability

Enhanced clinical pathways

to support appropriate utilization

Administrative simplification

that reduces friction for prescribers and members



We're committed to helping you improve affordability, expand access and support strong clinical outcomes — whether members receive their medications through the pharmacy benefit or DTC channels.

As utilization rises, so do the tools available to manage it. With improving net cost, expanding treatment options and flexible benefit strategies, you have more ways than ever to stay ahead of trend while supporting member health.

We'll work side-by-side with you to tailor the right mix of strategies — from plan design and cost-share decisions to PA approaches and condition management support — so you can see significant improvements in both costs and outcomes.



We're fully invested in your success.

Our goal is to help you design an approach that aligns with your financial goals, culture and broader wellness priorities.

And as the market continues to evolve, we'll keep you informed early and often so you always know what's coming next and how we can navigate it together.

References

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- *FOR CLINICAL STUDIES SHOW THAT PEOPLE TAKING THE HIGHER-STRENGTH WEGOVY 7.2MG DOSE EXPERIENCED ~21% WEIGHT LOSS SOURCE: Ferruggia, K. (2025, November 11). "Higher-dose semaglutide achieves significant weight reduction in adults with obesity." Pharmacy Times.
- *FOR WE EXPECT A ~15% DECREASE IN THE PER PRESCRIPTION NET COST IN 2026 COMPARED TO 2025 FOR COMMERCIAL TEMPLATE FORMULARY CLIENTS WITH STANDARD UTILIZATION MANAGEMENT CLAIM: CVS Health Analytics, 2026.
- *FOR WE'RE EXPECTING OVERALL CATEGORY SPEND TO RISE ~10% FOR CLIENTS MAINTAINING THEIR CURRENT BENEFIT DESIGNS CLAIM: CVS Health Analytics, 2026.
- *FOR CLIENTS LOOKING TO INFLUENCE COST-SHARE DYNAMICS, LIMITING MEMBER OUT-OF-POCKET COSTS WITH A WEIGHT-MANAGEMENT-SPECIFIC COPAY TIER KEEPS COSTS WELL BELOW TYPICAL DTC RATES AND MAY REDUCE EMPLOYER SPEND CLAIM: Estimated member out-of-pocket and employer savings based on \$200 weight-management-specific copay tier. Plan savings may vary.
- *FOR REMOVING PRIOR AUTHORIZATIONS ENTIRELY CAN LOWER UNIT NET COSTS BY ~40% COMPARED TO 2025, OFFSETTING RISING USE WHILE EXPANDING ACCESS CLAIM: CVS Health Analytics, 2026.
- *FOR 18.5% AVERAGE WEIGHT LOSS FOR PROGRAM MEMBERS TAKING WEIGHT MANAGEMENT DRUGS WITHIN ONE YEAR SOURCE: CVS Health Analytics, 2025. Weight management early adopter results, August 2023–December 2024. Internal analysis of 265,000 covered lives. 18.5% reflects data from clients who implemented the CVS Weight Management program in 2024, showing average weight loss among engaged members who have been on anti-obesity medication for one year.
- *FOR UP TO 47% LOWER SPEND ON GLP-1s APPROVED FOR WEIGHT LOSS SOURCE: CVS Health Analytics, 2025. Represents large early adopter clients' results showing reduced spend on weight management drug prescriptions relative to their peer cohort after two years in the program.
- *FOR 90% OF MEMBERS MAINTAIN WEIGHT LOSS 10-12 MONTHS AFTER ENDING THERAPY SOURCE: Analysis of the 2023 early adopter cohort for the CVS Weight Management program reveals 90% weight loss maintenance after discontinuing weight management drugs.

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