

FREE GUIDE

The GLP-1 Cost & Provider Comparison Guide

A plain-English breakdown of what these medications actually cost, why prices vary so much between providers, and the questions worth asking before you choose one.

10 PAGES · EDUCATIONAL GUIDE

1 How GLP-1 Pricing Actually Works

GLP-1 medications (semaglutide, tirzepatide, and related compounds) are priced very differently depending on three things: whether you're getting a brand-name product or a compounded version, whether you have insurance coverage, and which type of provider you go through.

Brand-name products — the ones with the recognizable manufacturer names — carry a fixed list price set by the manufacturer. That price generally does not change based on which telehealth platform or pharmacy fills it. What *does* change is whether insurance covers some or all of it, and what the platform charges on top for the medical visit itself.

Compounded versions are prepared by licensed pharmacies (state-licensed 503A pharmacies or larger 503B outsourcing facilities) using the same active ingredient in a different formulation. Because compounders aren't bound to a single manufacturer price, you'll see much wider variation from one provider to the next — and that variation is where most of the comparison-shopping actually happens.

The core idea: almost no provider charges only for the medication. The number on the landing page is usually a starting price, a membership fee, or a first-month promotion — not necessarily what you'll pay every month going forward.

2 The Real Cost Breakdown

When you see a monthly price advertised, it's worth mentally splitting it into the pieces that typically make it up:

Cost Component	What It Covers	How It's Usually Billed
Medication	The GLP-1 itself, at your current dose	Monthly, often rises as your dose increases
Membership / platform fee	Access to the telehealth service, messaging, app	Flat monthly fee, separate from medication
Initial consultation	Your first visit with a prescriber	One-time, sometimes waived as a promotion
Labs	Bloodwork some providers require before prescribing	One-time or annual, sometimes bundled
Shipping & supplies	Needles, alcohol swabs, sharps container, delivery	Included or itemized separately
Follow-up visits	Dose adjustments, refill authorization	Included in membership or billed per visit

The single biggest source of "surprise" cost is dose-based pricing that isn't disclosed up front. Many protocols increase the dose every 4 weeks, and some providers charge more per month as the dose goes up. A price that looks great at the starting dose can look very different by month four or five.

3 Brand-Name vs. Compounded: What's the Difference

This is the single most consequential decision in the cost conversation, so it's worth understanding clearly rather than picking based on price alone.

Brand-name medications

Manufactured under FDA approval for the specific product, with a fixed formulation, standardized dosing pens or pills, and consistent manufacturing oversight. Typically the most expensive option without insurance coverage.

Compounded medications

Prepared by a licensed compounding pharmacy using the same active pharmaceutical ingredient. Two regulatory categories matter here:

- **503A pharmacies** compound for an individual patient based on a specific prescription.
- **503B outsourcing facilities** produce in larger batches under closer FDA oversight, similar in spirit to conventional drug manufacturing, and are permitted to compound during officially recognized shortages of the brand-name product.

Why this matters for cost: compounded options are generally less expensive, but the tradeoff is that you're relying on the individual pharmacy's quality practices rather than a single standardized manufacturing process. A pharmacy's licensing status and testing practices are worth confirming, not assuming.

4 Insurance & Coverage Basics

Insurance coverage for GLP-1 medications is inconsistent and changes often, but a few patterns hold reasonably steady:

- Coverage is more common when the medication is prescribed for type 2 diabetes than for weight management alone.
- Many plans that do cover weight-management use requires prior authorization — documentation showing you meet specific clinical criteria before the plan will pay.
- Formulary tiers matter: even "covered" medications can carry a meaningful copay if they sit on a higher tier.
- Compounded versions are typically not eligible for insurance reimbursement the way brand-name, FDA-approved products can be, since they aren't a single billable NDC product in the same way.

If you don't have coverage

Cash-pay brand-name pricing is usually the most expensive route. This is exactly the gap compounded options and manufacturer savings programs exist to address — worth checking both before assuming brand-name is out of reach entirely.

5 Questions to Ask Before You Choose a Provider

Use this list when you're comparing two or more platforms side by side. A provider that answers all of these clearly, without pressure, is a good sign.

- ☐ Is the price I'm seeing the price for month one, or every month?
- ☐ Does the price change as my dose increases?
- ☐ What's included in the membership fee, and what's billed separately?
- ☐ Is the medication brand-name or compounded, and from what type of pharmacy?
- ☐ Are labs required, and are they included in the price?
- ☐ What happens if I need to pause or stop — is there a cancellation fee?
- ☐ How do I reach a licensed prescriber if I have a question or side effect?
- ☐ Is there a real follow-up visit built into the plan, or is it a one-time intake and then auto-refills?

6 Red Flags to Watch For

Most telehealth weight-loss providers are legitimate, but the category has attracted its share of low-quality operators. Watch for these patterns:

No real intake process. A legitimate prescriber asks about your medical history, current medications, and relevant conditions before prescribing anything. If the "consultation" is a single checkbox form, that's worth questioning.

No path to a human. If there's no way to message a prescriber or get a question answered before your next shipment goes out, that's a service gap worth weighing against the price.

Pressure and urgency. Countdown timers, "only 3 spots left," and aggressive upsells during checkout are marketing tactics, not clinical ones.

Pricing that seems disconnected from everyone else's. If one provider is dramatically cheaper than every other option with no explanation, it's worth understanding why before assuming it's simply the best deal.

7 How to Compare Providers Apples-to-Apples

Because pricing structures differ so much, the fairest way to compare two providers is to project the total cost over a realistic time horizon rather than comparing the number on the landing page.

Line Item	Provider A	Provider B
Month 1 (starting dose)	\$ ____	\$ ____
Month 3 (mid-titration)	\$ ____	\$ ____
Month 6 (maintenance dose)	\$ ____	\$ ____
One-time costs (labs, intake)	\$ ____	\$ ____
6-month total	\$ ____	\$ ____

Filling in a table like this — even roughly — almost always reveals a clearer picture than comparing the advertised starting price alone. Most providers will tell you their dose-tier pricing if you ask directly, even if it isn't posted prominently.

8 Titration & Cost Over Time

Most GLP-1 protocols follow a titration schedule: you start at a low dose and increase gradually over roughly two to four months to reduce side effects, before settling into a maintenance dose. This matters for cost planning in two ways:

- **Some providers price by dose tier**, meaning your monthly cost rises as you move up the titration schedule — sometimes significantly by the time you reach a maintenance dose.
- **Other providers offer flat-rate pricing** that doesn't change regardless of dose, trading a higher starting price for predictability later.

Neither approach is inherently better — it depends whether you'd rather have a lower cost up front or a predictable cost long-term. Just make sure you know which model you're signing up for before you commit, since the difference compounds over a full course of treatment.

Before You Go

This guide is meant to help you ask better questions and compare providers on equal footing — it isn't a recommendation of any specific medication, pharmacy, or platform, and it isn't medical advice.

Whether a GLP-1 medication is appropriate for you, and which formulation and dose make sense, is a decision to make with a licensed healthcare provider who knows your medical history.

Medical disclaimer: This guide is for general educational purposes only and does not constitute medical advice, diagnosis, or treatment. Pricing information reflects general market patterns as of 2026 and will vary by provider, location, insurance, and individual treatment plan. Always consult a licensed healthcare professional before starting, stopping, or changing any medication.