



## Missouri Pharmacy Program – Preferred Drug List



### Insulin Mix

**Effective 10/19/2005**

**Revised 07/07/2011**

#### Preferred Agents

- Novolog Mix 70/30
- Humalog Mix 75/25
- Humalog Mix 50/50
- Novolin 70/30
- Humulin 70/30

#### Non-Preferred Agents

- Relion 70/30

Approval Criteria	Denial Criteria
Failure to achieve desired therapeutic outcomes with documented trial period for 4 or more preferred agents	Lack of adequate trial on required preferred agents
Documented ADE/ADR to preferred agents	Therapy will be denied if no approval criteria are met
Documented compliance on current therapy regimen	Drug Prior Authorization Hotline: (800) 392-8030