



Missouri Pharmacy Program – Preferred Drug List



Insulin Mix

Effective 10/19/2005

Revised 07/02/2009

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.