



Step Therapy Requirements

Effective February 1, 2025

ANTIGOUT AGENTS

Products Affected

Step 2:

- *febuxostat 40 mg tablet*
- *febuxostat 80 mg tablet*

Details

Criteria	PRIOR CLAIM FOR FORMULARY VERSION OF ALLOPURINOL TABLETS WITHIN THE PAST 120 DAYS.

ANTIULCER AGENTS

Products Affected

Step 2:

- *esomeprazole magnesium dr 10 mg granules delayed release for susp*
- *esomeprazole magnesium dr 20 mg granules delayed release for susp*
- *esomeprazole magnesium dr 40 mg granules delayed release for susp*

Details

Criteria	PRIOR CLAIM FOR GENERIC FEDERAL LEGEND FORMULARY VERSION OF ORAL LANSOPRAZOLE CAPSULES, ESOMEPRAZOLE MAG CAPSULES, RABEPRAZOLE, OMEPRAZOLE, OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS.
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ARIPIRAZOLE ODT

Products Affected

Step 2:

- *aripiprazole 10 mg disintegrating tablet* • *aripiprazole 15 mg disintegrating tablet*

Details

Criteria	PRIOR CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: RISPERIDONE, CLOZAPINE TABLET, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIRAZOLE, ASENAPINE, PALIPERIDONE, LURASIDONE WITHIN THE PAST 120 DAYS.
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ASENAPINE PATCH

Products Affected

Step 2:

- SECUADO 3.8 MG/24 HOUR
TRANSDERMAL 24 HOUR PATCH
- SECUADO 5.7 MG/24 HOUR
TRANSDERMAL 24 HOUR PATCH
- SECUADO 7.6 MG/24 HOUR
TRANSDERMAL 24 HOUR PATCH

Details

Criteria	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN PAST 365 DAYS
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B VERSUS D ADMINISTRATIVE STEP

Products Affected

Step 2:

- *cyclophosphamide 25 mg capsule*
- *cyclophosphamide 25 mg tablet*
- *cyclophosphamide 50 mg capsule*
- *cyclophosphamide 50 mg tablet*
- JYLAMVO 2 MG/ML ORAL SOLUTION
- *methotrexate sodium 2.5 mg tablet*
- XATMEP 2.5 MG/ML ORAL SOLUTION

Details

Criteria	IN ORDER TO ASSIST IN A PART B VS. D PAYMENT DETERMINATION, A PRIOR CLAIM SEEN FOR A RHEUMATOID ARTHRITIS, PSORIASIS OR ACTIVE POLYARTICULAR JUVENILE IDIOPATHIC ARTHRITIS DRUG WITHIN THE PAST 120 DAYS WILL QUALIFY FOR PART D PAYMENT. ALL OTHER INDICATIONS WILL HAVE A PART B VS. D PAYMENT DETERMINATION MADE THROUGH THE FORMULARY EXCEPTION PROCESS PRIOR TO THE APPROVAL OF THE DRUG.
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BREXPIPRAZOLE

Products Affected

Step 2:

- REXULTI 0.25 MG TABLET
- REXULTI 0.5 MG TABLET
- REXULTI 1 MG TABLET
- REXULTI 2 MG TABLET
- REXULTI 3 MG TABLET
- REXULTI 4 MG TABLET

Details

Criteria	CLAIM FOR 2 FORMULARY ORAL GENERIC VERSION: LURASIDONE, RISPERIDONE, OLANZAPINE, QUETIAPINE, ARIPIPRAZOLE, ZIPRASIDONE IN PAST 365 DAYS
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CARIPRAZINE

Products Affected

Step 2:

- VRAYLAR 1.5 MG (1)-3 MG (6) CAPSULES IN A DOSE PACK
- VRAYLAR 1.5 MG CAPSULE
- VRAYLAR 3 MG CAPSULE
- VRAYLAR 4.5 MG CAPSULE
- VRAYLAR 6 MG CAPSULE

Details

Criteria	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE WITHIN THE PAST 365 DAYS
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CENOBAMATE

Products Affected

Step 2:

- XCOPRI 100 MG TABLET
- XCOPRI 150 MG TABLET
- XCOPRI 200 MG TABLET
- XCOPRI 25 MG TABLET
- XCOPRI 50 MG TABLET
- XCOPRI MAINTENANCE PACK 250MG/DAY (150 MG X 1 AND 100 MG X 1) TABLETS
- XCOPRI MAINTENANCE PACK 350 MG/DAY (200 MG X 1 AND 150 MG X 1) TABLETS
- XCOPRI TITRATION PACK 12.5 MG (14)-25 MG (14) TABLETS IN A DOSE PACK
- XCOPRI TITRATION PACK 150 MG (14)-200 MG (14) TABLETS IN A DOSE PACK
- XCOPRI TITRATION PACK 50 MG (14)-100 MG (14) TABLETS IN A DOSE PACK

Details

Criteria	PRIOR CLAIM FOR GENERIC ANTICONVULSANT AGENT (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, ZONISAMIDE OR LACOSAMIDE), WITHIN THE PAST 120 DAYS.
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CLOZAPINE

Products Affected

Step 2:

- *clozapine 100 mg disintegrating tablet*
- *clozapine 12.5 mg disintegrating tablet*
- *clozapine 150 mg disintegrating tablet*
- *clozapine 200 mg disintegrating tablet*
- *clozapine 25 mg disintegrating tablet*
- VERSACLOZ 50 MG/ML ORAL SUSPENSION

Details

Criteria	PRIOR CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: RISPERIDONE, CLOZAPINE TABLET, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIRAZOLE, ASENAPINE, PALIPERIDONE, LURASIDONE WITHIN THE PAST 120 DAYS.
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DEXTROMETHORPHAN HBR/BUPROPION

Products Affected

Step 2:

- AUVELITY 45 MG-105 MG TABLET, EXTENDED RELEASE

Details

Criteria	PRIOR CLAIM FOR TRINTELLIX AND ONE GENERIC ANTIDEPRESSANT (CITALOPRAM, ESCITALOPRAM, FLUOXETINE, PAROXETINE, SERTRALINE, DESVENLAFAXINE, DULOXETINE, VENLAFAXINE, MIRTAZAPINE, BUPROPION IR/SR/XL, OR VILAZODONE) WITHIN THE PAST 365 DAYS
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DIHYDROERGOTAMINE MESYLATE

Products Affected

Step 2:

- *dihydroergotamine 0.5 mg/pump act.
(4 mg/ml) nasal spray*

Details

Criteria	PRIOR CLAIM FOR 2 FORMULARY GENERIC TRIPTANS (e.g. SUMATRIPTAN and RIZATRIPTAN) WITHIN THE PAST 365 DAYS
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DRIZALMA SPRINKLE

Products Affected

Step 2:

- DRIZALMA SPRINKLE 20 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 30 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 40 MG CAPSULE,DELAYED RELEASE
- DRIZALMA SPRINKLE 60 MG CAPSULE,DELAYED RELEASE

Details

Criteria	PRIOR CLAIM FOR FORMULARY GENERIC DULOXETINE CAPSULE WITHIN THE PAST 120 DAYS.
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EPRONTIA

Products Affected

Step 2:

- EPRONTIA 25 MG/ML ORAL SOLUTION

Details

Criteria	PRIOR CLAIM FOR GENERIC TOPIRAMATE IMMEDIATE RELEASE (IR) OR EXTENDED RELEASE (ER) WITHIN THE PAST 120 DAYS.
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ESLICARBAZEPINE ACETATE

Products Affected

Step 2:

- APTIOM 200 MG TABLET
- APTIOM 400 MG TABLET
- APTIOM 600 MG TABLET
- APTIOM 800 MG TABLET

Details

Criteria	PRIOR CLAIM FOR 2 GENERIC ANTICONVULSANT AGENTS (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, ZONISAMIDE OR LACOSAMIDE), WITHIN THE PAST 365 DAYS.
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FIBRATES

Products Affected

Step 2:

- *omega-3 acid ethyl esters 1 gram capsule*

Details

Criteria	PRIOR CLAIM FOR GENERIC FENOFIBRATE IN THE LAST 120 DAY
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HIGH INTENSITY STATIN

Products Affected

Step 2:

- NEXLETOL 180 MG TABLET
- NEXLIZET 180 MG-10 MG TABLET
- REPATHA PUSHTRONEX 420 MG/3.5 ML SUBCUTANEOUS WEARABLE INJECTOR
- REPATHA SURECLICK 140 MG/ML SUBCUTANEOUS PEN INJECTOR
- REPATHA SYRINGE 140 MG/ML SUBCUTANEOUS SYRINGE

Details

Criteria	PRIOR 25 DAY TRIAL OF GENERIC HIGH INTENSITY STATIN: FORMULARY VERSION OF ATORVASTATIN (40 MG or 80 MG) OR ROSUVASTATIN (20 MG or 40 MG) WITHIN THE PAST 120 DAYS
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ILOPERIDONE

Products Affected

Step 2:

- FANAPT 1 MG TABLET
- FANAPT 10 MG TABLET
- FANAPT 12 MG TABLET
- FANAPT 1MG(2)-2 MG(2)-4MG(2)-6 MG(2) TABLETS IN A DOSE PACK
- FANAPT 2 MG TABLET
- FANAPT 4 MG TABLET
- FANAPT 6 MG TABLET
- FANAPT 8 MG TABLET

Details

Criteria	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN THE PAST 365 DAYS.
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INSULIN SUPPLY PAYMENT DETERMINATION ST

Products Affected

Step 2:

- 1ST TIER UNIFINE PENTIPS 31 GAUGE X 1/4" NEEDLE
- 1ST TIER UNIFINE PENTIPS 31 GAUGE X 3/16" NEEDLE
- 1ST TIER UNIFINE PENTIPS 31 GAUGE X 5/16" NEEDLE
- 1ST TIER UNIFINE PENTIPS 32 GAUGE X 5/32" NEEDLE
- 1ST TIER UNIFINE PENTIPS PLUS 29 GAUGE X 1/2" NEEDLE
- 1ST TIER UNIFINE PENTIPS PLUS 31 GAUGE X 3/16" NEEDLE
- 1ST TIER UNIFINE PENTIPS PLUS 32 GAUGE X 5/32" NEEDLE
- ABOUTTIME PEN NEEDLE 30 GAUGE X 5/16"
- ABOUTTIME PEN NEEDLE 31 GAUGE X 3/16"
- ABOUTTIME PEN NEEDLE 31 GAUGE X 5/16"
- ABOUTTIME PEN NEEDLE 32 GAUGE X 5/32"
- ADVOCATE PEN NEEDLE 29 GAUGE X 1/2"
- ADVOCATE PEN NEEDLE 31 GAUGE X 3/16"
- ADVOCATE PEN NEEDLE 31 GAUGE X 5/16"
- ADVOCATE PEN NEEDLE 32 GAUGE X 5/32"
- ADVOCATE PEN NEEDLE 33 GAUGE X 5/32"
- ADVOCATE SYRINGES 0.3 ML 29 GAUGE X 1/2"
- ADVOCATE SYRINGES 0.3 ML 30 GAUGE X 5/16"
- ADVOCATE SYRINGES 0.3 ML 31 GAUGE X 5/16"
- ADVOCATE SYRINGES 0.5 ML 29 GAUGE X 1/2"
- ADVOCATE SYRINGES 0.5 ML 30 GAUGE X 5/16"
- ADVOCATE SYRINGES 0.5 ML 31 GAUGE X 5/16"
- ADVOCATE SYRINGES 1 ML 29 GAUGE X 1/2"
- ADVOCATE SYRINGES 1 ML 30 GAUGE X 5/16"
- ADVOCATE SYRINGES 1 ML 31 GAUGE X 5/16"
- ALCOHOL PADS
- ALCOHOL PREP PADS
- ALCOHOL PREP SWABS
- ALCOHOL SWABS
- ALCOHOL WIPES
- AQINJECT PEN NEEDLE 31 GAUGE X 3/16"
- AQINJECT PEN NEEDLE 32 GAUGE X 5/32"
- ASSURE ID DUO PRO SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- ASSURE ID DUO-SHIELD 30 GAUGE X 3/16" NEEDLE
- ASSURE ID DUO-SHIELD 30 GAUGE X 5/16" NEEDLE
- ASSURE ID INSULIN SAFETY 0.5 ML 29 GAUGE X 1/2" SYRINGE

- ASSURE ID INSULIN SAFETY 0.5 ML 31 GAUGE X 15/64" SYRINGE
- ASSURE ID INSULIN SAFETY 1 ML 29 GAUGE X 1/2" SYRINGE
- ASSURE ID INSULIN SAFETY 1 ML 31 GAUGE X 15/64" SYRINGE
- ASSURE ID PEN NEEDLE 30 GAUGE X 3/16"
- ASSURE ID PEN NEEDLE 30 GAUGE X 5/16"
- ASSURE ID PEN NEEDLE 31 GAUGE X 3/16"
- ASSURE ID PRO PEN NEEDLE 30 GAUGE X 3/16"
- BD ALCOHOL SWABS
- BD AUTOSHIELD DUO PEN NEEDLE 30 GAUGE X 3/16"
- BD ECLIPSE LUER-LOK 1 ML 30 GAUGE X 1/2" SYRINGE
- BD ECLIPSE LUER-LOK 30 X 1/2" NEEDLE
- BD INSULIN SYRINGE 1 ML 25 GAUGE X 5/8"
- BD INSULIN SYRINGE 1 ML 25 X 1"
- BD INSULIN SYRINGE 1 ML 26 X 1/2"
- BD INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- BD INSULIN SYRINGE SLIP TIP 1 ML
- BD INSULIN SYRINGE U-500 1/2 ML 31 GAUGE X 15/64"
- BD INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16"
- BD INSULIN SYRINGE ULTRA-FINE 1 ML 30 GAUGE X 1/2"
- BD NANO 2ND GEN PEN NEEDLE 32 GAUGE X 5/32"
- BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- BD SAFETYGLIDE INSULIN SYRINGE 0.5 ML 31 GAUGE X 15/64"
- BD SAFETYGLIDE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- BD SAFETYGLIDE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- BD SAFETYGLIDE SYRINGE 1 ML 27 GAUGE X 5/8"
- BD ULTRA-FINE MICRO PEN NEEDLE 32 GAUGE X 1/4"
- BD ULTRA-FINE MINI PEN NEEDLE 31 GAUGE X 3/16"
- BD ULTRA-FINE NANO PEN NEEDLE 32 GAUGE X 5/32"
- BD ULTRA-FINE ORIGINAL PEN NEEDLE 29 GAUGE X 1/2"
- BD ULTRA-FINE SHORT PEN NEEDLE 31 GAUGE X 5/16"
- BD VEO INSULIN SYRINGE ULTRA-FINE (HALF UNIT) 0.3 ML 31 GAUGE X 15/64"
- BD VEO INSULIN SYRINGE ULTRA-FINE 0.3 ML 31 GAUGE X 15/64"
- BD VEO INSULIN SYRINGE ULTRA-FINE 1 ML 31 GAUGE X 15/64"
- BD VEO INSULIN SYRINGE ULTRA-FINE 1/2 ML 31 GAUGE X 15/64"
- BORDERED GAUZE 2" X 2" BANDAGE
- CAREFINE PEN NEEDLE 29 GAUGE X 1/2"
- CAREFINE PEN NEEDLE 30 GAUGE X 5/16"
- CAREFINE PEN NEEDLE 31 GAUGE X 1/4"

- CAREFINE PEN NEEDLE 31 GAUGE X 5/16"
- CAREFINE PEN NEEDLE 32 GAUGE X 1/4"
- CAREFINE PEN NEEDLE 32 GAUGE X 3/16"
- CAREFINE PEN NEEDLE 32 GAUGE X 5/32"
- CARETOUCH ALCOHOL PREP PAD TOPICAL PADS
- CARETOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- CARETOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- CARETOUCH PEN NEEDLE 29 GAUGE X 1/2"
- CARETOUCH PEN NEEDLE 31 GAUGE X 1/4"
- CARETOUCH PEN NEEDLE 31 GAUGE X 3/16"
- CARETOUCH PEN NEEDLE 31 GAUGE X 5/16"
- CARETOUCH PEN NEEDLE 32 GAUGE X 3/16"
- CARETOUCH PEN NEEDLE 32 GAUGE X 5/32"
- CLICKFINE PEN NEEDLE 31 GAUGE X 1/4"
- CLICKFINE PEN NEEDLE 31 GAUGE X 5/16"
- CLICKFINE PEN NEEDLE 32 GAUGE X 5/32"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- COMFORT EZ INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- COMFORT EZ INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- COMFORT EZ INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- COMFORT EZ INSULIN SYRINGE 1/2 ML 31 GAUGE X 15/64"
- COMFORT EZ PEN NEEDLES 29 GAUGE X 1/2"
- COMFORT EZ PEN NEEDLES 31 GAUGE X 1/4"

- COMFORT EZ PEN NEEDLES 31 GAUGE X 3/16"
- COMFORT EZ PEN NEEDLES 31 GAUGE X 5/16"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 1/4"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 3/16"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 5/16"
- COMFORT EZ PEN NEEDLES 32 GAUGE X 5/32"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 1/4"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 3/16"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 5/16"
- COMFORT EZ PEN NEEDLES 33 GAUGE X 5/32"
- COMFORT EZ PRO SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- COMFORT EZ PRO SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- COMFORT EZ PRO SAFETY PEN NEEDLE 31 GAUGE X 5/32"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 1/4"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 3/16"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 5/16"
- COMFORT TOUCH PEN NEEDLE 31 GAUGE X 5/32"
- COMFORT TOUCH PEN NEEDLE 32 GAUGE X 1/4"
- COMFORT TOUCH PEN NEEDLE 32 GAUGE X 3/16"
- COMFORT TOUCH PEN NEEDLE 32 GAUGE X 5/16"
- COMFORT TOUCH PEN NEEDLE 32 GAUGE X 5/32"
- COMFORT TOUCH PEN NEEDLE 33 GAUGE X 1/4"
- COMFORT TOUCH PEN NEEDLE 33 GAUGE X 3/16"
- COMFORT TOUCH PEN NEEDLE 33 GAUGE X 5/32"
- CURAD GAUZE PAD 2" X 2" BANDAGE
- CURITY ALCOHOL SWABS
- CURITY GAUZE 2" X 2" BANDAGE
- CURITY GAUZE 2" X 2" SPONGE
- DERMACEA 2" X 2" BANDAGE
- DERMACEA 2" X 2" SPONGE
- DERMACEA NON-WOVEN 2" X 2" SPONGE
- DROPLET INSULIN SYRINGE (HALF UNIT) 0.5 ML 29 GAUGE X 1/2"
- DROPLET INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 1/2"
- DROPLET INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 15/64"
- DROPLET INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 5/16"
- DROPLET INSULIN SYRINGE (HALF UNIT) 0.5 ML 31 GAUGE X 15/64"
- DROPLET INSULIN SYRINGE (HALF UNIT) 0.5 ML 31 GAUGE X 5/16"
- DROPLET INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- DROPLET INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2"
- DROPLET INSULIN SYRINGE 0.3 ML 30 GAUGE X 15/64"
- DROPLET INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- DROPLET INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- DROPLET INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"

- DROPLET INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- DROPLET INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- DROPLET INSULIN SYRINGE 1 ML 30 GAUGE X 15/64"
- DROPLET INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- DROPLET INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- DROPLET INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- DROPLET MICRON PEN NEEDLE 34 GAUGE X 9/64"
- DROPLET PEN NEEDLE 29 GAUGE X 1/2"
- DROPLET PEN NEEDLE 29 GAUGE X 3/8"
- DROPLET PEN NEEDLE 30 GAUGE X 5/16"
- DROPLET PEN NEEDLE 31 GAUGE X 1/4"
- DROPLET PEN NEEDLE 31 GAUGE X 3/16"
- DROPLET PEN NEEDLE 31 GAUGE X 5/16"
- DROPLET PEN NEEDLE 32 GAUGE X 1/4"
- DROPLET PEN NEEDLE 32 GAUGE X 3/16"
- DROPLET PEN NEEDLE 32 GAUGE X 5/16"
- DROPLET PEN NEEDLE 32 GAUGE X 5/32"
- DROPSAFE ALCOHOL PREP PADS
- DROPSAFE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- DROPSAFE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- DROPSAFE INSULIN SYRINGE 0.5 ML 31 GAUGE X 15/64"
- DROPSAFE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- DROPSAFE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- DROPSAFE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- DROPSAFE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- DROPSAFE PEN NEEDLE 31 GAUGE X 1/4"
- DROPSAFE PEN NEEDLE 31 GAUGE X 3/16"
- DROPSAFE PEN NEEDLE 31 GAUGE X 5/16"
- EASY COMFORT ALCOHOL PAD TOPICAL PADS
- EASY COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 0.3 ML 31 X 1/2"
- EASY COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- EASY COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1 ML 32 GAUGE X 5/16"
- EASY COMFORT INSULIN SYRINGE 1/2 ML 32 GAUGE X 5/16"

- EASY COMFORT PEN NEEDLES 31 GAUGE X 1/4"
- EASY COMFORT PEN NEEDLES 31 GAUGE X 3/16"
- EASY COMFORT PEN NEEDLES 31 GAUGE X 5/16"
- EASY COMFORT PEN NEEDLES 32 GAUGE X 5/32"
- EASY COMFORT PEN NEEDLES 33 GAUGE X 1/4"
- EASY COMFORT PEN NEEDLES 33 GAUGE X 3/16"
- EASY COMFORT PEN NEEDLES 33 GAUGE X 5/32"
- EASY COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- EASY COMFORT SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- EASY COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- EASY GLIDE INSULIN SYRINGE 0.3 ML 31 GAUGE X 15/64"
- EASY GLIDE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- EASY GLIDE INSULIN SYRINGE 1/2 ML 31 GAUGE X 15/64"
- EASY GLIDE PEN NEEDLE 33 GAUGE X 5/32"
- EASY TOUCH 29 GAUGE X 1/2" NEEDLE
- EASY TOUCH 31 GAUGE X 1/4" NEEDLE
- EASY TOUCH 31 GAUGE X 3/16" NEEDLE
- EASY TOUCH 31 GAUGE X 5/16" NEEDLE
- EASY TOUCH 32 GAUGE X 1/4" NEEDLE
- EASY TOUCH 32 GAUGE X 3/16" NEEDLE
- EASY TOUCH 32 GAUGE X 5/32" NEEDLE
- EASY TOUCH ALCOHOL PREP PADS
- EASY TOUCH FLIPLOCK INSULIN 1 ML 29 GAUGE X 1/2" SYRINGE
- EASY TOUCH FLIPLOCK INSULIN 1 ML 31 GAUGE X 5/16" SYRINGE
- EASY TOUCH FLIPLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH FLIPLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- EASY TOUCH FLIPLOCK SYRINGE 1 ML 27 GAUGE X 1/2"
- EASY TOUCH INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2"
- EASY TOUCH INSULIN SAFETY SYRINGE 0.5 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"
- EASY TOUCH INSULIN SAFETY SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 27 GAUGE X 5/8"

- EASY TOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- EASY TOUCH INSULIN SYRINGE 1/2 ML 27 GAUGE X 1/2"
- EASY TOUCH INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- EASY TOUCH LUER LOCK INSULIN 1 ML SYRINGE
- EASY TOUCH PEN NEEDLE 30 GAUGE X 5/16"
- EASY TOUCH SAFETY PEN NEEDLE 29 GAUGE X 3/16"
- EASY TOUCH SAFETY PEN NEEDLE 29 GAUGE X 5/16"
- EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 1/4"
- EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 3/16"
- EASY TOUCH SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- EASY TOUCH SHEATHLOCK INSULIN 1 ML 29 GAUGE X 1/2" SYRINGE
- EASY TOUCH SHEATHLOCK INSULIN 1 ML 30 GAUGE X 5/16" SYRINGE
- EASY TOUCH SHEATHLOCK INSULIN 1 ML 31 GAUGE X 5/16" SYRINGE
- EASY TOUCH SHEATHLOCK INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- EASY TOUCH UNI-SLIP 1 ML SYRINGE
- EMBRACE PEN NEEDLE 29 GAUGE X 1/2"
- EMBRACE PEN NEEDLE 30 GAUGE X 3/16"
- EMBRACE PEN NEEDLE 30 GAUGE X 5/16"
- EMBRACE PEN NEEDLE 31 GAUGE X 1/4"
- EMBRACE PEN NEEDLE 31 GAUGE X 3/16"
- EMBRACE PEN NEEDLE 31 GAUGE X 5/16"
- EMBRACE PEN NEEDLE 32 GAUGE X 5/32"
- FREESTYLE PRECISION 0.5 ML 30 GAUGE X 5/16" SYRINGE
- FREESTYLE PRECISION 0.5 ML 31 GAUGE X 5/16" SYRINGE
- FREESTYLE PRECISION 1 ML 30 GAUGE X 5/16" SYRINGE
- FREESTYLE PRECISION 1 ML 31 GAUGE X 5/16" SYRINGE
- GAUZE PAD 2" X 2" BANDAGE
- HEALTHWISE INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- HEALTHWISE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- HEALTHWISE PEN NEEDLE 31 GAUGE X 3/16"
- HEALTHWISE PEN NEEDLE 31 GAUGE X 5/16"
- HEALTHWISE PEN NEEDLE 32 GAUGE X 5/32"

- HEALTHY ACCENTS UNIFINE PENTIP 29 GAUGE X 1/2" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 31 GAUGE X 1/4" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 31 GAUGE X 3/16" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 31 GAUGE X 5/16" NEEDLE
- HEALTHY ACCENTS UNIFINE PENTIP 32 GAUGE X 5/32" NEEDLE
- INCONTROL ALCOHOL PADS
- INCONTROL PEN NEEDLE 29 GAUGE X 1/2"
- INCONTROL PEN NEEDLE 31 GAUGE X 1/4"
- INCONTROL PEN NEEDLE 31 GAUGE X 3/16"
- INCONTROL PEN NEEDLE 31 GAUGE X 5/16"
- INCONTROL PEN NEEDLE 32 GAUGE X 5/32"
- INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- INSULIN SYRINGE MICROFINE 1 ML 27 GAUGE X 5/8"
- INSULIN SYRINGE NEEDLELESS 1 ML
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 29 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 29 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 30
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 30 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 30 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 31 GAUGE X 1/4"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 31 GAUGE X 15/64"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.3 ML 31 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 29 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 30 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 30 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 0.5 ML 31 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 27 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 28 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 28 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 29 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 29 GAUGE X 7/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 3/8"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 30 GAUGE X 7/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 31 GAUGE X 1/4"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 31 GAUGE X 15/64"
- INSULIN SYRINGE U-100 WITH NEEDLE 1 ML 31 GAUGE X 5/16"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 27 GAUGE X 1/2"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 28 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 28 GAUGE X 1/2"

- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 29
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 30 GAUGE
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 31 GAUGE X 1/4"
- INSULIN SYRINGE U-100 WITH NEEDLE 1/2 ML 31 GAUGE X 15/64"
- INSULIN SYRINGE-NEEDLE U-100 HALF UNIT MARKING 0.3 ML 31 GAUGE X 1/4"
- INSUPEN PEN NEEDLE 29 GAUGE X 1/2"
- INSUPEN PEN NEEDLE 30 GAUGE X 5/16"
- INSUPEN PEN NEEDLE 31 GAUGE X 1/4"
- INSUPEN PEN NEEDLE 31 GAUGE X 3/16"
- INSUPEN PEN NEEDLE 31 GAUGE X 5/16"
- INSUPEN PEN NEEDLE 32 GAUGE X 1/4"
- INSUPEN PEN NEEDLE 32 GAUGE X 5/16"
- INSUPEN PEN NEEDLE 32 GAUGE X 5/32"
- INSUPEN PEN NEEDLE 33 GAUGE X 5/32"
- IV PREP WIPES MEDICATED
- LISCO 2" X 2" SPONGE
- LITE TOUCH INSULIN PEN NEEDLES 29 GAUGE X 1/2"
- LITE TOUCH INSULIN PEN NEEDLES 31 GAUGE X 1/4"
- LITE TOUCH INSULIN PEN NEEDLES 31 GAUGE X 3/16"
- LITE TOUCH INSULIN PEN NEEDLES 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 1 ML 28 GAUGE
- LITE TOUCH INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 1 ML 29 GAUGE
- LITE TOUCH INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 1 ML 30 GAUGE X 7/16"
- LITE TOUCH INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- LITE TOUCH INSULIN SYRINGE 1/2 ML 28 GAUGE
- LITE TOUCH INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- LITE TOUCH INSULIN SYRINGE 1/2 ML 29
- LITE TOUCH INSULIN SYRINGE 1/2 ML 30 GAUGE
- MAGELLAN INSULIN SAFETY SYRINGE 0.3 ML 29 GAUGE X 1/2"
- MAGELLAN INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2"
- MAGELLAN INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"

- MAGELLAN INSULIN SAFETY SYRINGE 1 ML 30 GAUGE X 5/16"
- MAGELLAN SYRINGE 0.3 ML 30 X 5/16"
- MAGELLAN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- MAXICOMFORT II PEN NEEDLE 31 GAUGE X 1/4"
- MAXICOMFORT INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- MAXI-COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- MAXICOMFORT INSULIN SYRINGE 1/2 ML 27 GAUGE X 1/2"
- MAXI-COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- MAXICOMFORT SAFETY PEN NEEDLE 29 GAUGE X 3/16"
- MAXICOMFORT SAFETY PEN NEEDLE 29 GAUGE X 5/16"
- MICRODOT INSULIN PEN NEEDLE 31 GAUGE X 1/4"
- MICRODOT INSULIN PEN NEEDLE 32 GAUGE X 5/32"
- MICRODOT INSULIN PEN NEEDLE 33 GAUGE X 5/32"
- MICRODOT READYGARD PEN NEEDLE 31 GAUGE X 3/16"
- MINI ULTRA-THIN II 31 GAUGE X 3/16" NEEDLE
- MONOJECT INSULIN SAFETY SYRINGE 0.3 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SAFETY SYRINGE 0.5 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SAFETY SYRINGE 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 1 ML
- MONOJECT INSULIN SYRINGE 1 ML 25 GAUGE X 5/8"
- MONOJECT INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- MONOJECT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- MONOJECT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- MONOJECT SYRINGE 1/2 ML 28 GAUGE
- MONOJECT ULTRA COMFORT INSULIN 1/2 ML 28 GAUGE SYRINGE
- NOVOFINE 30 NEEDLE
- NOVOFINE 32 32 GAUGE X 1/4" NEEDLE
- NOVOFINE PLUS 32 GAUGE X 1/6" NEEDLE
- NOVOTWIST 32 GAUGE X 1/5" NEEDLE
- PEN NEEDLE 29 GAUGE X 1/2"
- PEN NEEDLE 30 GAUGE X 5/16"
- PEN NEEDLE 31 GAUGE X 1/4"
- PEN NEEDLE 31 GAUGE X 3/16"
- PEN NEEDLE 31 GAUGE X 5/16"

- PEN NEEDLE 32 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC 29 GAUGE X 1/2"
- PEN NEEDLE, DIABETIC 29 GAUGE X 15/32"
- PEN NEEDLE, DIABETIC 30 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 30 GAUGE X 5/16"
- PEN NEEDLE, DIABETIC 31 GAUGE X 1/3"
- PEN NEEDLE, DIABETIC 31 GAUGE X 1/4"
- PEN NEEDLE, DIABETIC 31 GAUGE X 1/6"
- PEN NEEDLE, DIABETIC 31 GAUGE X 13/64"
- PEN NEEDLE, DIABETIC 31 GAUGE X 15/64"
- PEN NEEDLE, DIABETIC 31 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC 32 GAUGE X 1/4"
- PEN NEEDLE, DIABETIC 32 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 32 GAUGE X 5/16"
- PEN NEEDLE, DIABETIC 32 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC 33 GAUGE X 1/4"
- PEN NEEDLE, DIABETIC 33 GAUGE X 3/16"
- PEN NEEDLE, DIABETIC 33 GAUGE X 5/32"
- PEN NEEDLE, DIABETIC, SAFETY 31 GAUGE X 5/32"
- PENTIPS PEN NEEDLE 29 GAUGE X 1/2"
- PENTIPS PEN NEEDLE 31 GAUGE X 1/4"
- PENTIPS PEN NEEDLE 31 GAUGE X 3/16"
- PENTIPS PEN NEEDLE 31 GAUGE X 5/16"
- PENTIPS PEN NEEDLE 32 GAUGE X 1/4"
- PENTIPS PEN NEEDLE 32 GAUGE X 5/32"
- PIP PEN NEEDLE 31 GAUGE X 3/16"
- PIP PEN NEEDLE 32 GAUGE X 5/32"
- PREVENT DROPSAFE PEN NEEDLE 31 GAUGE X 1/4"
- PREVENT DROPSAFE PEN NEEDLE 31 GAUGE X 5/16"
- PRO COMFORT ALCOHOL PADS
- PRO COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- PRO COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- PRO COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- PRO COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- PRO COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- PRO COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- PRO COMFORT PEN NEEDLE 31 GAUGE X 5/16"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 3/16"
- PRO COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- PRODIGY INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"

- PRODIGY INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- PRODIGY INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- PURE COMFORT ALCOHOL PADS
- PURE COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- PURE COMFORT PEN NEEDLE 32 GAUGE X 3/16"
- PURE COMFORT PEN NEEDLE 32 GAUGE X 5/16"
- PURE COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- PURE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- PURE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- PURE COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- RELION NEEDLES 31 GAUGE X 1/4"
- RELION PEN NEEDLES 32 GAUGE X 5/32"
- SAFESNAP INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- SAFESNAP INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- SAFESNAP INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- SAFESNAP INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- SAFESNAP INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SAFETY PEN NEEDLE 31 GAUGE X 3/16"
- SECURESAFE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- SECURESAFE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SECURESAFE PEN NEEDLE 30 GAUGE X 5/16"
- SKY SAFETY PEN NEEDLE 30 GAUGE X 3/16"
- SKY SAFETY PEN NEEDLE 30 GAUGE X 5/16"
- STERILE PADS 2" X 2" BANDAGE
- SURE COMFORT ALCOHOL PREP PADS
- SURE COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 1/4"
- SURE COMFORT INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 1/4"
- SURE COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- SURE COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- SURE COMFORT INSULIN SYRINGE 1/2 ML 31 GAUGE X 1/4"
- SURE COMFORT INSULIN SYRINGE U-100 0.5 ML 29 GAUGE X 1/2"

- SURE COMFORT PEN NEEDLE 29 GAUGE X 1/2"
- SURE COMFORT PEN NEEDLE 30 GAUGE X 5/16"
- SURE COMFORT PEN NEEDLE 31 GAUGE X 3/16"
- SURE COMFORT PEN NEEDLE 31 GAUGE X 5/16"
- SURE COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- SURE COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- SURE COMFORT SAFETY PEN NEEDLE 31 GAUGE X 1/4"
- SURE COMFORT SAFETY PEN NEEDLE 32 GAUGE X 5/32"
- SURE-FINE PEN NEEDLES 29 GAUGE X 1/2"
- SURE-FINE PEN NEEDLES 31 GAUGE X 3/16"
- SURE-FINE PEN NEEDLES 31 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- SURE-JECT INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- SURE-JECT INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- SURE-PREP ALCOHOL PREP PADS
- SYRINGE WITH NEEDLE, SAFETY 0.5 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 29 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 30 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 15/64"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.3 ML 31 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 29 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 30 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 31 GAUGE X 15/64"
- TECHLITE INSULIN SYRINGE (HALF UNIT) 0.5 ML 31 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- TECHLITE INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
- TECHLITE INSULIN SYRINGE 1 ML 31 GAUGE X 15/64"
- TECHLITE INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- TECHLITE PEN NEEDLE 29 GAUGE X 1/2"
- TECHLITE PEN NEEDLE 29 GAUGE X 3/8"
- TECHLITE PEN NEEDLE 31 GAUGE X 1/4"

- TECHLITE PEN NEEDLE 31 GAUGE X 3/16"
- TECHLITE PEN NEEDLE 31 GAUGE X 5/16"
- TECHLITE PEN NEEDLE 32 GAUGE X 1/4"
- TECHLITE PEN NEEDLE 32 GAUGE X 5/16"
- TECHLITE PEN NEEDLE 32 GAUGE X 5/32"
- TECHLITE PLUS PEN NEEDLE 32 GAUGE X 5/32"
- TERUMO INSULIN SYRINGE 0.3 ML 30 X 3/8"
- TERUMO INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1 ML 27 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1/2 ML 27 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- TERUMO INSULIN SYRINGE 1/2 ML 30 X 3/8"
- THINPRO INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 0.3 ML 30 X 3/8"
- THINPRO INSULIN SYRINGE 0.3 ML 31 X 3/8"
- THINPRO INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 0.5 ML 31 X 3/8"
- THINPRO INSULIN SYRINGE 1 ML 28 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 1 ML 29 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 1 ML 30 GAUGE X 3/8"
- THINPRO INSULIN SYRINGE 1 ML 31 X 3/8"
- THINPRO INSULIN SYRINGE 1/2 ML 28 GAUGE X 1/2"
- THINPRO INSULIN SYRINGE 1/2 ML 30 X 3/8"
- TOPCARE CLICKFINE 31 GAUGE X 1/4" NEEDLE
- TOPCARE CLICKFINE 31 GAUGE X 5/16" NEEDLE
- TOPCARE ULTRA COMFORT 0.3 ML 29 GAUGE X 1/2" SYRINGE
- TOPCARE ULTRA COMFORT 0.3 ML 30 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 0.3 ML 31 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 0.5 ML 29 GAUGE X 1/2" SYRINGE
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- TOPCARE ULTRA COMFORT 0.5 ML 31 GAUGE X 5/16" SYRINGE
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- TOPCARE ULTRA COMFORT 1 ML 30 GAUGE X 5/16" SYRINGE
- TOPCARE ULTRA COMFORT 1 ML 31 GAUGE X 5/16" SYRINGE
- TRUE COMFORT ALCOHOL PADS
- TRUE COMFORT INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- TRUE COMFORT INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
- TRUE COMFORT PEN NEEDLE 31 GAUGE X 1/4"

- TRUE COMFORT PEN NEEDLE 31 GAUGE X 3/16"
- TRUE COMFORT PEN NEEDLE 31 GAUGE X 5/16"
- TRUE COMFORT PEN NEEDLE 32 GAUGE X 1/4"
- TRUE COMFORT PEN NEEDLE 32 GAUGE X 3/16"
- TRUE COMFORT PEN NEEDLE 32 GAUGE X 5/32"
- TRUE COMFORT PEN NEEDLE 33 GAUGE X 1/4"
- TRUE COMFORT PEN NEEDLE 33 GAUGE X 3/16"
- TRUE COMFORT PEN NEEDLE 33 GAUGE X 5/32"
- TRUE COMFORT PRO ALCOHOL PADS
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- TRUE COMFORT PRO INS SYRINGE 0.5 ML 30 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 0.5 ML 31 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1 ML 30 GAUGE X 1/2"
- TRUE COMFORT PRO INS SYRINGE 1 ML 30 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1 ML 31 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1 ML 32 GAUGE X 5/16"
- TRUE COMFORT PRO INS SYRINGE 1/2 ML 32 GAUGE X 5/16"
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- TRUEPLUS INSULIN 0.5 ML 30 GAUGE X 5/16" SYRINGE
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- TRUEPLUS PEN NEEDLE 29 GAUGE X 1/2"
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- TRUEPLUS PEN NEEDLE 31 GAUGE X 3/16"
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- ULTRACARE INSULIN SYRINGE 0.5 ML 31 GAUGE X 5/16"
- ULTRACARE INSULIN SYRINGE 1 ML 30 GAUGE X 1/2"
- ULTRACARE INSULIN SYRINGE 1 ML 30 GAUGE X 5/16"
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- ULTRACARE PEN NEEDLE 31 GAUGE X 1/4"
- ULTRACARE PEN NEEDLE 31 GAUGE X 3/16"
- ULTRACARE PEN NEEDLE 31 GAUGE X 5/16"
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- ULTRA-THIN II (SHORT) INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16"
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- ULTRA-THIN II (SHORT) INSULIN SYRINGE 1 ML 31 GAUGE X 5/16"
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- UNIFINE PENTIPS 31 GAUGE X 5/16" NEEDLE
- UNIFINE PENTIPS 32 GAUGE X 1/4" NEEDLE
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- UNIFINE PENTIPS PLUS 29 GAUGE X 1/2" NEEDLE
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- UNIFINE PENTIPS PLUS 31 GAUGE X 3/16" NEEDLE
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- UNIFINE SAFECONTROL 30 GAUGE X 5/16" NEEDLE
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- UNIFINE SAFECONTROL PEN NEEDLE 31 GAUGE X 1/4"
- UNIFINE SAFECONTROL PEN NEEDLE 31 GAUGE X 3/16"
- UNIFINE SAFECONTROL PEN NEEDLE 31 GAUGE X 5/16"
- UNIFINE ULTRA PEN NEEDLE 31 GAUGE X 1/4"
- UNIFINE ULTRA PEN NEEDLE 31 GAUGE X 3/16"
- UNIFINE ULTRA PEN NEEDLE 31 GAUGE X 5/16"
- UNIFINE ULTRA PEN NEEDLE 32 GAUGE X 5/32"
- VANISHPOINT INSULIN SYRINGE 1 ML 30 GAUGE X 3/16"
- VANISHPOINT SYRINGE 0.5 ML 30 GAUGE X 1/2"
- VANISHPOINT SYRINGE 1 ML 29 GAUGE X 1/2"
- VERIFINE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"
- VERIFINE INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2"
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- VERIFINE PLUS PEN NEEDLE 32 GAUGE X 5/32"
- VERIFINE PLUS PEN NEEDLE-SHARPS CONTAINER 32 GAUGE X 5/32"
- VERSALON 2" X 2" SPONGE
- WEBCOL TOPICAL PADS

Details

Criteria	IN ORDER TO ASSIST IN PAYMENT DETERMINATION, A PRIOR CLAIM SEEN FOR AN INJECTABLE INSULIN WITHIN THE PAST 120 DAYS WILL QUALIFY FOR PART D PAYMENT.
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LEVOMILNACIPRAN

Products Affected

Step 2:

- FETZIMA 120 MG CAPSULE,EXTENDED RELEASE
- FETZIMA 20 MG (2)-40 MG (26) CAPSULE,EXTENDED RELEASE,24 HR,DOSE PACK
- FETZIMA 20 MG CAPSULE,EXTENDED RELEASE
- FETZIMA 40 MG CAPSULE,EXTENDED RELEASE
- FETZIMA 80 MG CAPSULE,EXTENDED RELEASE

Details

Criteria	PRIOR CLAIM FOR TRINTELLIX AND 1 GENERIC ANTIDEPRESSANT: BUPROPION, CITALOPRAM, ESCITALOPRAM, FLUOXETINE, MIRTAZAPINE, PAROXETINE, SERTRALINE, VENLAFAXINE, or VILAZODONE IN THE PAST 365 DAYS
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LUMATEPERONE TOSYLATE

Products Affected

Step 2:

- CAPLYTA 10.5 MG CAPSULE
- CAPLYTA 21 MG CAPSULE
- CAPLYTA 42 MG CAPSULE

Details

Criteria	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE WITHIN THE PAST 365 DAYS
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MEMANTINE ER

Products Affected

Step 2:

- *memantine 14 mg capsule
sprinkle,extended release 24hr*
- *memantine 21 mg capsule
sprinkle,extended release 24hr*
- *memantine 28 mg capsule
sprinkle,extended release 24hr*
- *memantine 7 mg capsule
sprinkle,extended release 24hr*

Details

Criteria	PRIOR CLAIM FOR FORMULARY VERSION OF MEMANTINE IR WITHIN THE PAST 120 DAYS
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METHOTREXATE INJECTOR

Products Affected

Step 2:

- RASUVO (PF) 10 MG/0.2 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 12.5 MG/0.25 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 15 MG/0.3 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 17.5 MG/0.35 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 20 MG/0.4 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 22.5 MG/0.45 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 25 MG/0.5 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 30 MG/0.6 ML
SUBCUTANEOUS AUTO-INJECTOR
- RASUVO (PF) 7.5 MG/0.15 ML
SUBCUTANEOUS AUTO-INJECTOR

Details

Criteria	TRIAL OF OR CONTRAINDICATION TO GENERIC ORAL METHOTREXATE TABLET
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OPHTHALMIC ALLERGY - NO OTC

Products Affected

Step 2:

- ALREX 0.2 % EYE DROPS,SUSPENSION
- *loteprednol etabonate 0.2 % eye drops,suspension*

Details

Criteria	PRIOR CLAIM FOR FEDERAL LEGEND LEVOCETIRIZINE , CROMOLYN SODIUM, OR EPINASTINE WITHIN THE PAST 120 DAYS.
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PERAMPANEL

Products Affected

Step 2:

- FYCOMPA 0.5 MG/ML ORAL SUSPENSION
- FYCOMPA 10 MG TABLET
- FYCOMPA 12 MG TABLET
- FYCOMPA 2 MG TABLET
- FYCOMPA 4 MG TABLET
- FYCOMPA 6 MG TABLET
- FYCOMPA 8 MG TABLET

Details

Criteria	PRIOR CLAIM FOR 2 GENERIC ANTICONVULSANT AGENTS (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, ZONISAMIDE OR LACOSAMIDE), WITHIN THE PAST 365 DAYS.
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RUFINAMIDE

Products Affected

Step 2:

- *rufinamide 200 mg tablet*
- *rufinamide 400 mg tablet*
- *rufinamide 40 mg/ml oral suspension*

Details

Criteria	PRIOR CLAIM FOR GENERIC ANTICONVULSANT AGENT (CARBAMAZEPINE, DIVALPROEX SODIUM, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TIAGABINE, TOPIRAMATE, VALPROIC ACID, OR ZONISAMIDE), WITHIN THE PAST 120 DAYS.
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SELEGILINE PATCH

Products Affected

Step 2:

- EMSAM 12 MG/24 HR TRANSDERMAL 24 HOUR PATCH
- EMSAM 9 MG/24 HR TRANSDERMAL 24 HOUR PATCH
- EMSAM 6 MG/24 HR TRANSDERMAL 24 HOUR PATCH

Details

Criteria	PRIOR CLAIM OF FORMULARY ORAL VERSION OF SSRI (CITALOPRAM, ESCITALOPRAM, FLUOXETINE, PAROXETINE OR SERTRALINE), SNRI (DESVENLAFAXINE, DULOXETINE OR VENLAFAXINE), MIRTAZAPINE, OR BUPROPION IR/SR/XL IN THE PAST 120 DAYS
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SPRITAM

Products Affected

Step 2:

- SPRITAM 1,000 MG TABLET FOR ORAL SUSPENSION
- SPRITAM 250 MG TABLET FOR ORAL SUSPENSION
- SPRITAM 500 MG TABLET FOR ORAL SUSPENSION
- SPRITAM 750 MG TABLET FOR ORAL SUSPENSION

Details

Criteria	PRIOR CLAIM FOR GENERIC LEVETIRACETAM SOLUTION IN THE PAST 120 DAYS
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TENOFOVIR ALAFENAMIDE

Products Affected

Step 2:

- VEMLIDY 25 MG TABLET

Details

Criteria	TRIAL OF GENERIC TENOFOVIR DISOPROXIL FUMARATE WITHIN THE PAST 120 DAYS
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XANOMELINE/TROSPIUM

Products Affected

Step 2:

- COBENFY 100 MG-20 MG CAPSULE
- COBENFY 125 MG-30 MG CAPSULE
- COBENFY 50 MG-20 MG CAPSULE
- COBENFY STARTER PACK 50 MG-20 MG/100 MG-20 MG CAPSULES IN A DOSE PACK

Details

Criteria	CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN THE PAST 120 DAYS
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