Criteria-Based Consultation Prescribing Program CRITERIA FOR DRUG COVERAGE

Insulin NPH isophane and insulin regular (Novolin 70/30)

Notes:

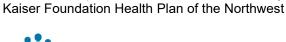
- Quantity Limits: No
- * Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

<u>Initiation (new start) criteria</u>: Non-formulary <u>insulin NPH isophane and insulin regular (Novolin 70/30)</u> will be covered on the prescription drug benefit when the following criteria are met:

- Documented allergy or intolerance* to basal insulins: insulin NPH (Humulin N) and insulin glargine
- Documented allergy or intolerance* to prandial insulins: insulin regular (Humulin R) and insulin lispro

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