

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

**ANALGESICS, NARCOTICS**

---

**Products Affected**

**Step 2:**

- *morphine sulfate er capsule extended release 24 hour 10 mg oral*
- *morphine sulfate er capsule extended release 24 hour 100 mg oral*
- *morphine sulfate er capsule extended release 24 hour 20 mg oral*
- *morphine sulfate er capsule extended release 24 hour 30 mg oral*
- *morphine sulfate er capsule extended release 24 hour 50 mg oral*
- *morphine sulfate er capsule extended release 24 hour 60 mg oral*
- *morphine sulfate er capsule extended release 24 hour 80 mg oral*

**Details**

<b>Criteria</b>	PRIOR CLAIM FOR MORPHINE SULFATE SUSTAINED ACTION TABLET (MS CONTIN) WITHIN THE PAST 120 DAYS.
-----------------	--

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### ANTIULCER AGENTS

---

#### Products Affected

##### Step 2:

- *esomeprazole magnesium packet 10 mg oral*
- *esomeprazole magnesium packet 20 mg oral*
- *esomeprazole magnesium packet 40 mg oral*
- *lansoprazole tablet delayed release dispersible 15 mg oral*
- *lansoprazole tablet delayed release dispersible 30 mg oral*
- *pantoprazole sodium packet 40 mg oral*

#### Details

---

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC FEDERAL LEGEND FORMULARY VERSION OF ORAL LANSOPRAZOLE CAPSULES, ESOMEPRAZOLE MAG CAPSULES, RABEPRAZOLE, OMEPRAZOLE, OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS.
-----------------	---

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **ARIPIPIRAZOLE FILM**

---

**Products Affected**

**Step 2:**

- OPIPZA FILM 10 MG ORAL
- OPIPZA FILM 2 MG ORAL
- OPIPZA FILM 5 MG ORAL

**Details**

---

<b>Criteria</b>	TRIAL OF GENERIC ARIPIPIRAZOLE TABLETS IN THE PAST 120 DAYS
-----------------	---

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **ARIPIPIRAZOLE ODT**

---

**Products Affected**

**Step 2:**

- *aripiprazole tablet dispersible 10 mg oral* • *aripiprazole tablet dispersible 15 mg oral*

**Details**

---

<b>Criteria</b>	PRIOR CLAIM FOR ONE FORMULARY ORAL ANTIPSYCHOTIC: RISPERIDONE, CLOZAPINE TABLET, OLANZAPINE, IMMEDIATE RELEASE QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPIRAZOLE (TAB, FILM, SOLN) ASENAPINE, PALIPERIDONE, LURASIDONE WITHIN THE PAST 120 DAYS.
-----------------	--

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### ASENAPINE PATCH

---

#### Products Affected

##### Step 2:

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

#### Details

---

Criteria
CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENA PINE, PALIPERIDONE WITHIN PAST 365 DAYS

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

**B VERSUS D ADMINISTRATIVE STEP**

---

**Products Affected**

**Step 2:**

- CYCLOPHOSPHAMIDE CAPSULE 25 MG ORAL
- *cyclophosphamide capsule 50 mg oral*
- *cyclophosphamide tablet 25 mg oral*
- CYCLOPHOSPHAMIDE TABLET 50 MG ORAL
- JYLAMVO SOLUTION 2 MG/ML ORAL
- *methotrexate (anti-rheumatic) tablet 2.5 mg oral*
- *methotrexate sodium tablet 2.5 mg oral*
- XATMEP SOLUTION 2.5 MG/ML ORAL

**Details**

<b>Criteria</b>	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.
-----------------	--

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### CARIPRAZINE

---

#### Products Affected

##### Step 2:

- VRAYLAR CAPSULE 0.5 MG ORAL
- VRAYLAR CAPSULE 0.75 MG ORAL
- VRAYLAR CAPSULE 1.5 MG ORAL
- VRAYLAR CAPSULE 3 MG ORAL
- VRAYLAR CAPSULE 4.5 MG ORAL
- VRAYLAR CAPSULE 6 MG ORAL
- VRAYLAR CAPSULE THERAPY PACK 1.5 & 3 MG ORAL

#### Details

---

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

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### CLOZAPINE

---

#### Products Affected

##### Step 2:

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

#### Details

---

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

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **DEXTROMETHORPHAN HBR/BUPROPION**

---

**Products Affected**

**Step 2:**

- AUVELITY TABLET EXTENDED  
RELEASE 45-105 MG ORAL

**Details**

---

<b>Criteria</b>	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
-----------------	--

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **DIHYDROERGOTAMINE MESYLATE**

---

**Products Affected**

**Step 2:**

- *dihydroergotamine mesylate solution 4 mg/ml nasal*

**Details**

---

<b>Criteria</b>	PRIOR CLAIM FOR 2 FORMULARY GENERIC TRIPTANS (e.g. SUMATRIPTAN and RIZATRIPTAN) WITHIN THE PAST 365 DAYS
-----------------	--

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### DRIZALMA SPRINKLE

---

#### Products Affected

##### Step 2:

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

#### Details

<b>Criteria</b>	PRIOR CLAIM FOR FORMULARY GENERIC DULOXETINE CAPSULE WITHIN THE PAST 120 DAYS.
-----------------	--

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### EPRONTIA

---

#### Products Affected

##### Step 2:

- *topiramate solution 25 mg/ml oral*

#### Details

---

Criteria	
	PRIOR CLAIM FOR GENERIC TOPIRAMATE (TABLETS OR CAPSULES) WITHIN THE PAST 120 DAYS.

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **ESLICARBAZEPINE ACETATE**

---

**Products Affected**

**Step 2:**

- *eslicarbazepine acetate tablet 200 mg oral* • *eslicarbazepine acetate tablet 600 mg oral*
- *eslicarbazepine acetate tablet 400 mg oral* • *eslicarbazepine acetate tablet 800 mg oral*

**Details**

---

<b>Criteria</b>	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.
-----------------	--

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### FIBRATES

---

#### Products Affected

**Step 2:**

- *omega-3-acid ethyl esters capsule 1 gm oral*

#### Details

---

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC FENOFIBRATE IN THE LAST 120 DAY
-----------------	---

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### HIGH INTENSITY STATIN

---

#### Products Affected

##### Step 2:

- NEXLETOL TABLET 180 MG ORAL
- NEXLIZET TABLET 180-10 MG ORAL
- REPATHA PUSHTRONEX SYSTEM SOLUTION CARTRIDGE 420 MG/3.5ML SUBCUTANEOUS
- REPATHA SOLUTION PREFILLED SYRINGE 140 MG/ML SUBCUTANEOUS
- REPATHA SURECLICK SOLUTION AUTO-INJECTOR 140 MG/ML SUBCUTANEOUS

#### Details

<b>Criteria</b>	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. OTHERWISE, A STEP EXCEPTION REQUEST IS REQUIRED IF PATIENT CANNOT TOLERATE A STATIN.
-----------------	---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### ILOPERIDONE

---

#### Products Affected

##### Step 2:

- FANAPT TABLET 1 MG ORAL
- FANAPT TABLET 10 MG ORAL
- FANAPT TABLET 12 MG ORAL
- FANAPT TABLET 2 MG ORAL
- FANAPT TABLET 4 MG ORAL
- FANAPT TABLET 6 MG ORAL
- FANAPT TABLET 8 MG ORAL
- FANAPT TITRATION PACK A  
TABLET 1 & 2 & 4 & 6 MG ORAL
- FANAPT TITRATION PACK B  
TABLET 1 & 2 & 6 & 8 MG ORAL
- FANAPT TITRATION PACK C  
TABLET 1 & 2 & 6 MG ORAL

#### Details

<b>Criteria</b>	CLAIM FOR 2 FORMULARY ORAL GENERIC ANTIPSYCHOTICS: LURASIDONE, RISPERIDONE, CLOZAPINE TAB, OLANZAPINE, IR QUETIAPINE FUMARATE, ZIPRASIDONE, ARIPIPRAZOLE, ASENAPINE, PALIPERIDONE WITHIN THE PAST 365 DAYS.
-----------------	---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **INSULIN- RAPID ACTING**

---

**Products Affected**

**Step 2:**

- *insulin lispro junior kwikpen solution pen-injector 100 unit/ml subcutaneous*

**Details**

---

<b>Criteria</b>	PRIOR CLAIM FOR INSULIN ASPART, FIASP, OR INSULIN LISPRO VIALS WITHIN THE PAST 120 DAYS
-----------------	---

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **INSULIN- RAPID ACTING MIX**

---

**Products Affected**

**Step 2:**

- *insulin lispro prot & lispro suspension  
pen-injector (75-25) 100 unit/ml  
subcutaneous*

**Details**

---

<b>Criteria</b>	PRIOR CLAIM FOR INSULIN ASPART MIX WITHIN THE PAST 120 DAYS
-----------------	---

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

# INSULIN SUPPLY PAYMENT DETERMINATION ST

---

**Products Affected**

**Step 2:**

- ABOUTTIME PEN NEEDLE 30G X 8 MM
- ABOUTTIME PEN NEEDLE 31G X 5 MM
- ABOUTTIME PEN NEEDLE 31G X 8 MM
- ABOUTTIME PEN NEEDLE 32G X 4 MM
- ADVOCATE INSULIN PEN NEEDLE 32G X 4 MM
- ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM
- ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM
- ADVOCATE INSULIN PEN NEEDLES 31G X 8 MM
- ADVOCATE INSULIN PEN NEEDLES 33G X 4 MM
- ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.3 ML
- ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.5 ML
- ADVOCATE INSULIN SYRINGE 29G X 1/2" 1 ML
- ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.3 ML
- ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.5 ML
- ADVOCATE INSULIN SYRINGE 30G X 5/16" 1 ML
- ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.3 ML
- ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.5 ML
- ADVOCATE INSULIN SYRINGE 31G X 5/16" 1 ML
- ALCOHOL PREP PAD
- ALCOHOL PREP PAD 70 %
- ALCOHOL PREP PADS PAD 70 %
- ALCOHOL SWABS PAD
- ALCOHOL SWABS PAD 70 %
- AQ INSULIN SYRINGE 31G X 5/16" 1 ML
- AQINJECT PEN NEEDLE 31G X 5 MM
- AQINJECT PEN NEEDLE 32G X 4 MM
- ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM
- ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML
- ASSURE ID INSULIN SAFETY SYR 31G X 15/64" 0.5 ML
- ASSURE ID INSULIN SAFETY SYR 31G X 15/64" 1 ML
- ASSURE ID PRO PEN NEEDLES 30G X 5 MM
- AUM ALCOHOL PREP PADS PAD 70 %
- AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM
- AUM INSULIN SAFETY PEN NEEDLE 31G X 5 MM
- AUM MINI INSULIN PEN NEEDLE 32G X 4 MM
- AUM MINI INSULIN PEN NEEDLE 32G X 5 MM
- AUM MINI INSULIN PEN NEEDLE 32G X 6 MM
- AUM MINI INSULIN PEN NEEDLE 32G X 8 MM
- AUM MINI INSULIN PEN NEEDLE 33G X 4 MM

H1587\_003ST26\_C

Formulary ID: 26387

Effective: 04/01/2026

Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- AUM MINI INSULIN PEN NEEDLE 33G X 5 MM
- AUM MINI INSULIN PEN NEEDLE 33G X 6 MM
- AUM PEN NEEDLE 32G X 4 MM
- AUM PEN NEEDLE 32G X 5 MM
- AUM PEN NEEDLE 32G X 6 MM
- AUM PEN NEEDLE 33G X 4 MM
- AUM PEN NEEDLE 33G X 5 MM
- AUM PEN NEEDLE 33G X 6 MM
- AUM READYGARD DUO PEN NEEDLE 32G X 4 MM
- AUM SAFETY PEN NEEDLE 31G X 4 MM
- BD AUTOSHIELD DUO 30G X 5 MM
- BD ECLIPSE SYRINGE 30G X 1/2" 1 ML
- BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML
- BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML
- BD INSULIN SYR ULTRAFINE II 31G X 5/16" 1 ML
- BD INSULIN SYRINGE 27.5G X 5/8" 2 ML
- BD INSULIN SYRINGE 27G X 1/2" 1 ML
- BD INSULIN SYRINGE 29G X 1/2" 0.5 ML
- BD INSULIN SYRINGE 29G X 1/2" 1 ML
- BD INSULIN SYRINGE HALF-UNIT 31G X 5/16" 0.3 ML
- BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML
- BD INSULIN SYRINGE MICROFINE 28G X 1/2" 1 ML
- BD INSULIN SYRINGE U-100 1 ML
- BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML
- BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.5 ML
- BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML
- BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM
- BD PEN NEEDLE MINI U/F 31G X 5 MM
- BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM
- BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM
- BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM
- BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM
- BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM
- BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.3 ML
- BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML
- BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML
- BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.5 ML
- BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML
- BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16" 0.3 ML
- BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 5/8" 1 ML
- BD SWAB SINGLE USE REGULAR PAD
- BD SWABS SINGLE USE BUTTERFLY PAD
- BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML
- BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.3 ML
- BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.5 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 1 ML
- BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML
- BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.5 ML
- BD VEO INSULIN SYRINGE U/F 31G X 15/64" 1 ML
- CAREFINE PEN NEEDLES 29G X 12MM
- CAREFINE PEN NEEDLES 30G X 8 MM
- CAREFINE PEN NEEDLES 31G X 6 MM
- CAREFINE PEN NEEDLES 31G X 8 MM
- CAREFINE PEN NEEDLES 32G X 4 MM
- CAREFINE PEN NEEDLES 32G X 5 MM
- CAREFINE PEN NEEDLES 32G X 6 MM
- CAREONE INSULIN SYRINGE 30G X 1/2" 0.3 ML
- CAREONE INSULIN SYRINGE 30G X 1/2" 0.5 ML
- CAREONE INSULIN SYRINGE 30G X 1/2" 1 ML
- CAREONE INSULIN SYRINGE 31G X 5/16" 0.3 ML
- CAREONE INSULIN SYRINGE 31G X 5/16" 0.5 ML
- CAREONE INSULIN SYRINGE 31G X 5/16" 1 ML
- CARETOUCH ALCOHOL PREP PAD 70 %
- CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML
- CARETOUCH INSULIN SYRINGE 29G X 5/16" 1 ML
- CARETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML
- CARETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML
- CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML
- CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML
- CARETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML
- CARETOUCH PEN NEEDLES 29G X 12MM
- CARETOUCH PEN NEEDLES 31G X 5 MM
- CARETOUCH PEN NEEDLES 31G X 6 MM
- CARETOUCH PEN NEEDLES 31G X 8 MM
- CARETOUCH PEN NEEDLES 32G X 4 MM
- CARETOUCH PEN NEEDLES 32G X 5 MM
- CARETOUCH PEN NEEDLES 33G X 4 MM
- CLEVER CHOICE COMFORT EZ 29G X 12MM
- CLEVER CHOICE COMFORT EZ 33G X 4 MM
- CLICKFINE PEN NEEDLES 31G X 8 MM
- CLICKFINE PEN NEEDLES 32G X 4 MM
- COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML
- COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.3 ML
- COMFORT EZ INSULIN SYRINGE 27G X 1/2" 1 ML
- COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML
- COMFORT EZ INSULIN SYRINGE 28G X 1/2" 1 ML
- COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.3 ML

H1587\_003ST26\_C  
Formulary ID: 26387  
Effective: 04/01/2026  
Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.5 ML
- COMFORT EZ INSULIN SYRINGE 29G X 1/2" 1 ML
- COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.3 ML
- COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.5 ML
- COMFORT EZ INSULIN SYRINGE 30G X 1/2" 1 ML
- COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.3 ML
- COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.5 ML
- COMFORT EZ INSULIN SYRINGE 30G X 5/16" 1 ML
- COMFORT EZ INSULIN SYRINGE 31G X 15/64" 0.3 ML
- COMFORT EZ INSULIN SYRINGE 31G X 15/64" 0.5 ML
- COMFORT EZ INSULIN SYRINGE 31G X 15/64" 1 ML
- COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.3 ML
- COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.5 ML
- COMFORT EZ INSULIN SYRINGE 31G X 5/16" 1 ML
- COMFORT EZ PEN NEEDLES 31G X 5 MM
- COMFORT EZ PEN NEEDLES 31G X 6 MM
- COMFORT EZ PEN NEEDLES 31G X 8 MM
- COMFORT EZ PEN NEEDLES 32G X 4 MM
- COMFORT EZ PEN NEEDLES 32G X 5 MM
- COMFORT EZ PEN NEEDLES 32G X 6 MM
- COMFORT EZ PEN NEEDLES 32G X 8 MM
- COMFORT EZ PEN NEEDLES 33G X 4 MM
- COMFORT EZ PEN NEEDLES 33G X 5 MM
- COMFORT EZ PEN NEEDLES 33G X 6 MM
- COMFORT EZ PEN NEEDLES 33G X 8 MM
- COMFORT EZ PRO PEN NEEDLES 30G X 8 MM
- COMFORT EZ PRO PEN NEEDLES 31G X 4 MM
- COMFORT EZ PRO PEN NEEDLES 31G X 5 MM
- COMFORT TOUCH INSULIN PEN NEED 31G X 4 MM
- COMFORT TOUCH INSULIN PEN NEED 31G X 5 MM
- COMFORT TOUCH INSULIN PEN NEED 31G X 6 MM
- COMFORT TOUCH INSULIN PEN NEED 31G X 8 MM
- COMFORT TOUCH INSULIN PEN NEED 32G X 4 MM
- COMFORT TOUCH INSULIN PEN NEED 32G X 5 MM
- COMFORT TOUCH INSULIN PEN NEED 32G X 6 MM
- COMFORT TOUCH INSULIN PEN NEED 32G X 8 MM
- CURITY ALCOHOL PREPS PAD 70 %
- CURITY ALL PURPOSE SPONGES PAD 2"X2"
- CURITY GAUZE PAD 2"X2"
- CURITY GAUZE SPONGE PAD 2"X2"
- CURITY SPONGES PAD 2"X2"
- CVS GAUZE PAD 2"X2"
- CVS GAUZE STERILE PAD 2"X2"
- CVS ISOPROPYL ALCOHOL WIPES 70 % EXTERNAL
- DERMACEA GAUZE SPONGE PAD 2"X2"

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- DERMACEA IV DRAIN SPONGES PAD 2"X2"
- DERMACEA NON-WOVEN SPONGES PAD 2"X2"
- DERMACEA TYPE VII GAUZE PAD 2"X2"
- DIATHRIVE PEN NEEDLE 31G X 5 MM
- DIATHRIVE PEN NEEDLE 31G X 6 MM
- DIATHRIVE PEN NEEDLE 31G X 8 MM
- DIATHRIVE PEN NEEDLE 32G X 4 MM
- DROPLET INSULIN SYRINGE 29G X 1/2" 0.3 ML
- DROPLET INSULIN SYRINGE 29G X 1/2" 0.5 ML
- DROPLET INSULIN SYRINGE 29G X 1/2" 1 ML
- DROPLET INSULIN SYRINGE 30G X 1/2" 0.3 ML
- DROPLET INSULIN SYRINGE 30G X 1/2" 0.5 ML
- DROPLET INSULIN SYRINGE 30G X 1/2" 1 ML
- DROPLET INSULIN SYRINGE 30G X 15/64" 0.3 ML
- DROPLET INSULIN SYRINGE 30G X 15/64" 0.5 ML
- DROPLET INSULIN SYRINGE 30G X 15/64" 1 ML
- DROPLET INSULIN SYRINGE 30G X 5/16" 0.3 ML
- DROPLET INSULIN SYRINGE 30G X 5/16" 0.5 ML
- DROPLET INSULIN SYRINGE 30G X 5/16" 1 ML
- DROPLET INSULIN SYRINGE 31G X 15/64" 0.3 ML
- DROPLET INSULIN SYRINGE 31G X 15/64" 0.5 ML
- DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML
- DROPLET INSULIN SYRINGE 31G X 5/16" 1 ML
- DROPLET MICRON 34G X 3.5 MM
- DROPLET PEN NEEDLES 29G X 10MM
- DROPLET PEN NEEDLES 29G X 12MM
- DROPLET PEN NEEDLES 30G X 8 MM
- DROPLET PEN NEEDLES 31G X 5 MM
- DROPLET PEN NEEDLES 31G X 6 MM
- DROPLET PEN NEEDLES 31G X 8 MM
- DROPLET PEN NEEDLES 32G X 4 MM
- DROPLET PEN NEEDLES 32G X 5 MM
- DROPLET PEN NEEDLES 32G X 6 MM
- DROPLET PEN NEEDLES 32G X 8 MM
- DROPSAFE ALCOHOL PREP PAD 70 %
- DROPSAFE AUTOPROTECT DUO 31G X 4 MM
- DROPSAFE AUTOPROTECT DUO 31G X 8 MM
- DROPSAFE SAFETY PEN NEEDLES 31G X 5 MM
- DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM
- DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML
- DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.3 ML
- DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.5 ML
- DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 1 ML
- DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.3 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.5 ML
- DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 1 ML
- DRUG MART ULTRA COMFORT SYR 29G X 1/2" 0.3 ML
- DRUG MART ULTRA COMFORT SYR 29G X 1/2" 1 ML
- DRUG MART ULTRA COMFORT SYR 30G X 5/16" 0.5 ML
- DRUG MART ULTRA COMFORT SYR 30G X 5/16" 1 ML
- DRUG MART UNIFINE PENTIPS 31G X 5 MM
- EASY COMFORT ALCOHOL PADS PAD
- EASY COMFORT INSULIN SYRINGE 29G X 5/16" 0.5 ML
- EASY COMFORT INSULIN SYRINGE 29G X 5/16" 1 ML
- EASY COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML
- EASY COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML
- EASY COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML
- EASY COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML
- EASY COMFORT INSULIN SYRINGE 31G X 1/2" 0.3 ML
- EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML
- EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML
- EASY COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML
- EASY COMFORT INSULIN SYRINGE 32G X 5/16" 0.5 ML
- EASY COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML
- EASY COMFORT PEN NEEDLES 29G X 4MM
- EASY COMFORT PEN NEEDLES 29G X 5MM
- EASY COMFORT PEN NEEDLES 31G X 5 MM
- EASY COMFORT PEN NEEDLES 31G X 6 MM
- EASY COMFORT PEN NEEDLES 31G X 8 MM
- EASY COMFORT PEN NEEDLES 32G X 4 MM
- EASY COMFORT PEN NEEDLES 33G X 4 MM
- EASY COMFORT PEN NEEDLES 33G X 5 MM
- EASY COMFORT PEN NEEDLES 33G X 6 MM
- EASY GLIDE PEN NEEDLES 33G X 4 MM
- EASY TOUCH ALCOHOL PREP MEDIUM PAD 70 %
- EASY TOUCH FLIPLOCK INSULIN SY 29G X 1/2" 1 ML
- EASY TOUCH FLIPLOCK INSULIN SY 30G X 1/2" 1 ML
- EASY TOUCH FLIPLOCK INSULIN SY 30G X 5/16" 1 ML
- EASY TOUCH FLIPLOCK INSULIN SY 31G X 5/16" 1 ML
- EASY TOUCH FLIPLOCK SAFETY SYR 27G X 1/2" 1 ML
- EASY TOUCH INSULIN BARRELS U-100 1 ML
- EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML
- EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 1 ML
- EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML
- EASY TOUCH INSULIN SAFETY SYR 30G X 5/16" 0.5 ML
- EASY TOUCH INSULIN SYRINGE 27G X 1/2" 0.5 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- EASY TOUCH INSULIN SYRINGE 27G X 1/2" 1 ML
- EASY TOUCH INSULIN SYRINGE 27G X 5/8" 1 ML
- EASY TOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML
- EASY TOUCH INSULIN SYRINGE 28G X 1/2" 1 ML
- EASY TOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML
- EASY TOUCH INSULIN SYRINGE 29G X 1/2" 1 ML
- EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.3 ML
- EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.5 ML
- EASY TOUCH INSULIN SYRINGE 30G X 1/2" 1 ML
- EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML
- EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML
- EASY TOUCH INSULIN SYRINGE 30G X 5/16" 1 ML
- EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML
- EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML
- EASY TOUCH INSULIN SYRINGE 31G X 5/16" 1 ML
- EASY TOUCH PEN NEEDLES 29G X 12MM
- EASY TOUCH PEN NEEDLES 30G X 5 MM
- EASY TOUCH PEN NEEDLES 30G X 6 MM
- EASY TOUCH PEN NEEDLES 30G X 8 MM
- EASY TOUCH PEN NEEDLES 31G X 5 MM
- EASY TOUCH PEN NEEDLES 31G X 6 MM
- EASY TOUCH PEN NEEDLES 31G X 8 MM
- EASY TOUCH PEN NEEDLES 31G X 4 MM
- EASY TOUCH PEN NEEDLES 32G X 4 MM
- EASY TOUCH PEN NEEDLES 32G X 5 MM
- EASY TOUCH PEN NEEDLES 32G X 6 MM
- EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM
- EASY TOUCH SAFETY PEN NEEDLES 29G X 8MM
- EASY TOUCH SAFETY PEN NEEDLES 30G X 8 MM
- EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2" 1 ML
- EASY TOUCH SHEATHLOCK SYRINGE 30G X 1/2" 1 ML
- EASY TOUCH SHEATHLOCK SYRINGE 30G X 5/16" 1 ML
- EASY TOUCH SHEATHLOCK SYRINGE 31G X 5/16" 1 ML
- EMBECTA AUTOSHIELD DUO 30G X 5 MM
- EMBECTA INS SYR U/F 1/2 UNIT 31G X 15/64" 0.3 ML
- EMBECTA INS SYR U/F 1/2 UNIT 31G X 5/16" 0.3 ML
- EMBECTA INSULIN SYR ULTRAFINE 30G X 1/2" 0.3 ML
- EMBECTA INSULIN SYR ULTRAFINE 30G X 1/2" 0.5 ML
- EMBECTA INSULIN SYR ULTRAFINE 30G X 1/2" 1 ML
- EMBECTA INSULIN SYR ULTRAFINE 31G X 15/64" 0.5 ML
- EMBECTA INSULIN SYR ULTRAFINE 31G X 15/64" 1 ML
- EMBECTA INSULIN SYR ULTRAFINE 31G X 5/16" 0.5 ML
- EMBECTA INSULIN SYR ULTRAFINE 31G X 5/16" 1 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- EMBECTA INSULIN SYRINGE 28G X 1/2" 0.5 ML
- EMBECTA INSULIN SYRINGE 28G X 1/2" 1 ML
- EMBECTA INSULIN SYRINGE U-100 27G X 5/8" 1 ML
- EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML
- EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM
- EMBECTA PEN NEEDLE NANO 32G X 4 MM
- EMBECTA PEN NEEDLE ULTRAFINE 29G X 12.7MM
- EMBECTA PEN NEEDLE ULTRAFINE 31G X 5 MM
- EMBECTA PEN NEEDLE ULTRAFINE 31G X 8 MM
- EMBECTA PEN NEEDLE ULTRAFINE 32G X 6 MM
- EMBRACE PEN NEEDLES 29G X 12MM
- EMBRACE PEN NEEDLES 30G X 5 MM
- EMBRACE PEN NEEDLES 30G X 8 MM
- EMBRACE PEN NEEDLES 31G X 5 MM
- EMBRACE PEN NEEDLES 31G X 6 MM
- EMBRACE PEN NEEDLES 31G X 8 MM
- EMBRACE PEN NEEDLES 32G X 4 MM
- EQL ALCOHOL SWABS PAD 70 %
- EQL GAUZE PAD 2"X2"
- EQL INSULIN SYRINGE 29G X 1/2" 0.3 ML
- EQL INSULIN SYRINGE 29G X 1/2" 0.5 ML
- EQL INSULIN SYRINGE 30G X 5/16" 0.5 ML
- EQL INSULIN SYRINGE 30G X 5/16" 1 ML
- EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 0.3 ML
- EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 0.3 ML
- EXEL COMFORT POINT PEN NEEDLE 29G X 12MM
- FIFTY50 PEN NEEDLES 31G X 5 MM
- FIFTY50 PEN NEEDLES 31G X 8 MM
- FIFTY50 PEN NEEDLES 32G X 4 MM
- FIFTY50 PEN NEEDLES 32G X 6 MM
- GAUZE PADS PAD 2"X2"
- GAUZE TYPE VII MEDI-PAK PAD 2"X2"
- GLOBAL ALCOHOL PREP EASE PAD 70 %
- GLOBAL EASE INJECT PEN NEEDLES 29G X 12MM
- GLOBAL EASE INJECT PEN NEEDLES 31G X 5 MM
- GLOBAL EASE INJECT PEN NEEDLES 31G X 8 MM
- GLOBAL EASE INJECT PEN NEEDLES 32G X 4 MM
- GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.3 ML
- GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.5 ML
- GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 1 ML
- GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 1 ML
- GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML
- GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.5 ML
- GLUCOPRO INSULIN SYRINGE 30G X 1/2" 1 ML
- GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.3 ML
- GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.5 ML

H1587\_003ST26\_C  
Formulary ID: 26387  
Effective: 04/01/2026  
Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- GLUCOPRO INSULIN SYRINGE 30G X 5/16" 1 ML
- GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.3 ML
- GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.5 ML
- GLUCOPRO INSULIN SYRINGE 31G X 5/16" 1 ML
- GNP ALCOHOL SWABS PAD
- GNP CLICKFINE PEN NEEDLES 31G X 6 MM
- GNP CLICKFINE PEN NEEDLES 31G X 8 MM
- GNP INSULIN SYRINGE 28G X 1/2" 1 ML
- GNP INSULIN SYRINGE 29G X 1/2" 1 ML
- GNP INSULIN SYRINGE 30G X 5/16" 0.3 ML
- GNP INSULIN SYRINGE 30G X 5/16" 0.5 ML
- GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 0.5 ML
- GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 1 ML
- GNP INSULIN SYRINGES 30G X 5/16" 1 ML
- GNP INSULIN SYRINGES 30GX5/16" 30G X 5/16" 0.3 ML
- GNP INSULIN SYRINGES 31GX5/16" 31G X 5/16" 0.3 ML
- GNP PEN NEEDLES 31G X 5 MM
- GNP PEN NEEDLES 32G X 4 MM
- GNP PEN NEEDLES 32G X 6 MM
- GNP STERILE GAUZE PAD 2"X2"
- GNP ULTRA COM INSULIN SYRINGE 29G X 1/2" 0.5 ML
- GNP ULTRA COM INSULIN SYRINGE 30G X 5/16" 1 ML
- GOODSENSE ALCOHOL SWABS PAD 70 %
- GOODSENSE CLICKFINE PEN NEEDLE 31G X 5 MM
- GOODSENSE PEN NEEDLE PENFINE 31G X 8 MM
- HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.3 ML
- HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.5 ML
- HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 1 ML
- HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.3 ML
- HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.5 ML
- HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 1 ML
- HEALTHWISE MICRON PEN NEEDLES 32G X 4 MM
- HEALTHWISE SHORT PEN NEEDLES 31G X 5 MM
- HEALTHWISE SHORT PEN NEEDLES 31G X 8 MM
- HEALTHY ACCENTS UNIFINE PENTIP 29G X 12MM
- HEALTHY ACCENTS UNIFINE PENTIP 31G X 5 MM
- HEALTHY ACCENTS UNIFINE PENTIP 31G X 6 MM
- HEALTHY ACCENTS UNIFINE PENTIP 31G X 8 MM
- HEALTHY ACCENTS UNIFINE PENTIP 32G X 4 MM
- H-E-B INCONTROL ALCOHOL PAD
- H-E-B INCONTROL PEN NEEDLES 29G X 12MM
- H-E-B INCONTROL PEN NEEDLES 31G X 5 MM
- H-E-B INCONTROL PEN NEEDLES 31G X 6 MM
- H-E-B INCONTROL PEN NEEDLES 31G X 8 MM
- H-E-B INCONTROL PEN NEEDLES 32G X 4 MM
- HM STERILE ALCOHOL PREP PAD
- HM STERILE PADS PAD 2"X2"

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- HM ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML
- HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML
- HM ULTICARE SHORT PEN NEEDLES 31G X 8 MM
- INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM
- INCONTROL ULTICARE PEN NEEDLES 31G X 8 MM
- INCONTROL ULTICARE PEN NEEDLES 32G X 4 MM
- INSULIN SYRINGE 29G X 1/2" 0.3 ML
- INSULIN SYRINGE 29G X 1/2" 0.5 ML
- INSULIN SYRINGE 29G X 1/2" 1 ML
- INSULIN SYRINGE 30G X 5/16" 0.3 ML
- INSULIN SYRINGE 30G X 5/16" 0.5 ML
- INSULIN SYRINGE 30G X 5/16" 1 ML
- INSULIN SYRINGE 31G X 5/16" 0.3 ML
- INSULIN SYRINGE 31G X 5/16" 0.5 ML
- INSULIN SYRINGE 31G X 5/16" 1 ML
- INSULIN SYRINGE/NEEDLE 27G X 1/2" 0.5 ML
- INSULIN SYRINGE/NEEDLE 28G X 1/2" 0.5 ML
- INSULIN SYRINGE/NEEDLE 28G X 1/2" 1 ML
- INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 0.5 ML
- INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 1 ML
- INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 0.5 ML
- INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 1 ML
- INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 1 ML
- INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.3 ML
- INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.5 ML
- INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 1 ML
- INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML
- INSUPEN PEN NEEDLES 31G X 5 MM
- INSUPEN PEN NEEDLES 31G X 8 MM
- INSUPEN PEN NEEDLES 32G X 4 MM
- INSUPEN PEN NEEDLES 33G X 4 MM
- INSUPEN SENSITIVE 32G X 6 MM
- INSUPEN SENSITIVE 32G X 8 MM
- INSUPEN ULTRAFIN 29G X 12MM
- INSUPEN ULTRAFIN 30G X 8 MM
- INSUPEN ULTRAFIN 31G X 6 MM
- INSUPEN ULTRAFIN 31G X 8 MM
- INSUPEN32G EXTR3ME 32G X 6 MM
- J & J GAUZE PAD 2"X2"
- KENDALL HYDROPHILIC FOAM DRESS PAD 2"X2"
- KENDALL HYDROPHILIC FOAM PLUS PAD 2"X2"
- KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML
- KMART VALU INSULIN SYRINGE 29G U-100 1 ML
- KMART VALU INSULIN SYRINGE 30G U-100 0.3 ML
- KMART VALU INSULIN SYRINGE 30G U-100 1 ML
- KROGER INSULIN SYRINGE 30G X 5/16" 0.5 ML
- KROGER PEN NEEDLES 29G X 12MM
- KROGER PEN NEEDLES 31G X 6 MM
- LEADER INSULIN SYRINGE 28G X 1/2" 0.5 ML
- LEADER INSULIN SYRINGE 28G X 1/2" 1 ML
- LEADER UNIFINE PENTIPS 31G X 5 MM
- LEADER UNIFINE PENTIPS 32G X 4 MM

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- LEADER UNIFINE PENTIPS PLUS 31G X 5 MM
- LEADER UNIFINE PENTIPS PLUS 31G X 8 MM
- LITETOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML
- LITETOUCH INSULIN SYRINGE 28G X 1/2" 1 ML
- LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.3 ML
- LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML
- LITETOUCH INSULIN SYRINGE 29G X 1/2" 1 ML
- LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML
- LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML
- LITETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML
- LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML
- LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML
- LITETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML
- LITETOUCH PEN NEEDLES 29G X 12.7MM
- LITETOUCH PEN NEEDLES 31G X 5 MM
- LITETOUCH PEN NEEDLES 31G X 6 MM
- LITETOUCH PEN NEEDLES 31G X 8 MM
- LITETOUCH PEN NEEDLES 32G X 4 MM
- MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML
- MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.5 ML
- MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML
- MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.3 ML
- MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML
- MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 1 ML
- MAXICOMFORT II PEN NEEDLE 31G X 6 MM
- MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML
- MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML
- MAXI-COMFORT SAFETY PEN NEEDLE 29G X 5MM
- MAXI-COMFORT SAFETY PEN NEEDLE 29G X 8MM
- MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 0.5 ML
- MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 1 ML
- MEDIC INSULIN SYRINGE 30G X 5/16" 0.3 ML
- MEDIC INSULIN SYRINGE 30G X 5/16" 0.5 ML
- MEDICINE SHOPPE PEN NEEDLES 29G X 12MM
- MEDICINE SHOPPE PEN NEEDLES 31G X 8 MM
- MEDPURA ALCOHOL PADS 70 % EXTERNAL
- MEIJER ALCOHOL SWABS PAD 70 %
- MEIJER PEN NEEDLES 29G X 12MM
- MEIJER PEN NEEDLES 31G X 6 MM
- MEIJER PEN NEEDLES 31G X 8 MM
- MICRODOT PEN NEEDLE 31G X 6 MM
- MICRODOT PEN NEEDLE 32G X 4 MM
- MICRODOT PEN NEEDLE 33G X 4 MM
- MIRASORB SPONGES 2"X2"
- MM PEN NEEDLES 31G X 6 MM
- MM PEN NEEDLES 32G X 4 MM

H1587\_003ST26\_C  
Formulary ID: 26387  
Effective: 04/01/2026  
Last Updated: 03/31/2026



## Tribute Select 2026 Formulary Step Therapy Criteria

- PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 1 ML
- PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM
- PREVENT DROPSAFE PEN NEEDLES 31G X 6 MM
- PREVENT DROPSAFE PEN NEEDLES 31G X 8 MM
- PREVENT SAFETY PEN NEEDLES 31G X 6 MM
- PREVENT SAFETY PEN NEEDLES 31G X 8 MM
- PRO COMFORT ALCOHOL PAD 70 %
- PRO COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML
- PRO COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML
- PRO COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML
- PRO COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML
- PRO COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML
- PRO COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML
- PRO COMFORT PEN NEEDLES 32G X 4 MM
- PRO COMFORT PEN NEEDLES 32G X 5 MM
- PRO COMFORT PEN NEEDLES 32G X 6 MM
- PRO COMFORT PEN NEEDLES 32G X 8 MM
- PRODIGY INSULIN SYRINGE 28G X 1/2" 1 ML
- PRODIGY INSULIN SYRINGE 31G X 5/16" 0.3 ML
- PRODIGY INSULIN SYRINGE 31G X 5/16" 0.5 ML
- PURE COMFORT ALCOHOL PREP PAD
- PURE COMFORT PEN NEEDLE 32G X 4 MM
- PURE COMFORT PEN NEEDLE 32G X 5 MM
- PURE COMFORT PEN NEEDLE 32G X 6 MM
- PURE COMFORT PEN NEEDLE 32G X 8 MM
- PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM
- PURE COMFORT SAFETY PEN NEEDLE 31G X 6 MM
- PURE COMFORT SAFETY PEN NEEDLE 32G X 4 MM
- PX SHORTLENGTH PEN NEEDLES 31G X 8 MM
- QC ALCOHOL 70 % EXTERNAL
- QC ALCOHOL SWABS PAD 70 %
- QC BORDER ISLAND GAUZE PAD 2"X2"
- QUICK TOUCH INSULIN PEN NEEDLE 29G X 12.7MM
- QUICK TOUCH INSULIN PEN NEEDLE 31G X 4 MM
- QUICK TOUCH INSULIN PEN NEEDLE 31G X 5 MM
- QUICK TOUCH INSULIN PEN NEEDLE 31G X 6 MM
- QUICK TOUCH INSULIN PEN NEEDLE 31G X 8 MM
- QUICK TOUCH INSULIN PEN NEEDLE 32G X 4 MM
- QUICK TOUCH INSULIN PEN NEEDLE 32G X 5 MM
- QUICK TOUCH INSULIN PEN NEEDLE 32G X 6 MM
- QUICK TOUCH INSULIN PEN NEEDLE 32G X 8 MM
- QUICK TOUCH INSULIN PEN NEEDLE 33G X 4 MM
- QUICK TOUCH INSULIN PEN NEEDLE 33G X 5 MM
- QUICK TOUCH INSULIN PEN NEEDLE 33G X 6 MM

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- QUICK TOUCH INSULIN PEN NEEDLE 33G X 8 MM
- RA ALCOHOL SWABS PAD 70 %
- RA INSULIN SYRINGE 29G X 1/2" 0.5 ML
- RA INSULIN SYRINGE 29G X 1/2" 1 ML
- RA INSULIN SYRINGE 30G X 5/16" 0.5 ML
- RA INSULIN SYRINGE 30G X 5/16" 1 ML
- *ra isopropyl alcohol wipes 70 % external*
- RA PEN NEEDLES 31G X 5 MM
- RA PEN NEEDLES 31G X 8 MM
- RA STERILE PAD 2"X2"
- RAYA SURE PEN NEEDLE 29G X 12MM
- RAYA SURE PEN NEEDLE 31G X 4 MM
- RAYA SURE PEN NEEDLE 31G X 5 MM
- RAYA SURE PEN NEEDLE 31G X 6 MM
- REALITY INSULIN SYRINGE 28G X 1/2" 0.5 ML
- REALITY INSULIN SYRINGE 28G X 1/2" 1 ML
- REALITY INSULIN SYRINGE 29G X 1/2" 0.5 ML
- REALITY INSULIN SYRINGE 29G X 1/2" 1 ML
- REALITY SWABS PAD
- RELION ALCOHOL SWABS PAD
- RELI-ON INSULIN SYRINGE 29G 0.3 ML
- RELION INSULIN SYRINGE 31G X 15/64" 0.3 ML
- RELION INSULIN SYRINGE 31G X 15/64" 0.5 ML
- RELION INSULIN SYRINGE 31G X 15/64" 1 ML
- RELION MINI PEN NEEDLES 31G X 6 MM
- RELION PEN NEEDLES 29G X 12MM
- RELION PEN NEEDLES 31G X 6 MM
- RELION PEN NEEDLES 31G X 8 MM
- RESTORE CONTACT LAYER PAD 2"X2"
- SAFETY INSULIN SYRINGES 29G X 1/2" 0.5 ML
- SAFETY INSULIN SYRINGES 29G X 1/2" 1 ML
- SAFETY INSULIN SYRINGES 30G X 1/2" 1 ML
- SAFETY INSULIN SYRINGES 30G X 5/16" 0.5 ML
- SAFETY PEN NEEDLES 30G X 5 MM
- SAFETY PEN NEEDLES 30G X 8 MM
- SB ALCOHOL PREP PAD 70 %
- SB INSULIN SYRINGE 29G X 1/2" 0.5 ML
- SB INSULIN SYRINGE 29G X 1/2" 1 ML
- SB INSULIN SYRINGE 30G X 5/16" 0.5 ML
- SB INSULIN SYRINGE 30G X 5/16" 1 ML
- SB INSULIN SYRINGE 31G X 5/16" 1 ML
- SECURESAFE INSULIN SYRINGE 29G X 1/2" 0.5 ML
- SECURESAFE INSULIN SYRINGE 29G X 1/2" 1 ML
- SECURESAFE SAFETY PEN NEEDLES 30G X 8 MM
- SM ALCOHOL PREP PAD
- SM ALCOHOL PREP PAD 6-70 % EXTERNAL
- SM ALCOHOL PREP PAD 70 %
- SM GAUZE PAD 2"X2"
- STERILE GAUZE PAD 2"X2"
- STERILE PAD 2"X2"
- SURE COMFORT ALCOHOL PREP PAD 70 %
- SURE COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- SURE COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML
- SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.3 ML
- SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.5 ML
- SURE COMFORT INSULIN SYRINGE 29G X 1/2" 1 ML
- SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.3 ML
- SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML
- SURE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML
- SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML
- SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML
- SURE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML
- SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.3 ML
- SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.5 ML
- SURE COMFORT INSULIN SYRINGE 31G X 1/4" 1 ML
- SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML
- SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML
- SURE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML
- SURE COMFORT PEN NEEDLES 29G X 12.7MM
- SURE COMFORT PEN NEEDLES 30G X 8 MM
- SURE COMFORT PEN NEEDLES 31G X 5 MM
- SURE COMFORT PEN NEEDLES 31G X 6 MM
- SURE COMFORT PEN NEEDLES 31G X 8 MM
- SURE COMFORT PEN NEEDLES 32G X 4 MM
- SURE COMFORT PEN NEEDLES 32G X 6 MM
- SURGICAL GAUZE SPONGE PAD 2"X2"
- TECHLITE INSULIN SYRINGE 29G X 1/2" 0.5 ML
- TECHLITE PEN NEEDLES 32G X 4 MM
- THERAGAUZE PAD 2"X2"
- TODAYS HEALTH PEN NEEDLES 29G X 12MM
- TODAYS HEALTH SHORT PEN NEEDLE 31G X 8 MM
- TOPCARE CLICKFINE PEN NEEDLES 31G X 6 MM
- TOPCARE CLICKFINE PEN NEEDLES 31G X 8 MM
- TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.3 ML
- TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.5 ML
- TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 1 ML
- TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.3 ML
- TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.5 ML
- TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 1 ML
- TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.3 ML
- TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.5 ML
- TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 1 ML
- TRUE COMFORT ALCOHOL PREP PADS PAD 70 %
- TRUE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML
- TRUE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML

H1587\_003ST26\_C  
Formulary ID: 26387  
Effective: 04/01/2026  
Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- TRUE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML
- TRUE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML
- TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML
- TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML
- TRUE COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML
- TRUE COMFORT PEN NEEDLES 31G X 5 MM
- TRUE COMFORT PEN NEEDLES 31G X 6 MM
- TRUE COMFORT PEN NEEDLES 32G X 4 MM
- TRUE COMFORT PRO ALCOHOL PREP PAD 70 %
- TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 0.5 ML
- TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 1 ML
- TRUE COMFORT PRO INSULIN SYR 30G X 5/16" 0.5 ML
- TRUE COMFORT PRO INSULIN SYR 30G X 5/16" 1 ML
- TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 0.5 ML
- TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 1 ML
- TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 0.5 ML
- TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 1 ML
- TRUE COMFORT PRO PEN NEEDLES 31G X 5 MM
- TRUE COMFORT PRO PEN NEEDLES 31G X 6 MM
- TRUE COMFORT PRO PEN NEEDLES 31G X 8 MM
- TRUE COMFORT PRO PEN NEEDLES 32G X 4 MM
- TRUE COMFORT PRO PEN NEEDLES 32G X 5 MM
- TRUE COMFORT PRO PEN NEEDLES 33G X 4 MM
- TRUE COMFORT PRO PEN NEEDLES 33G X 5 MM
- TRUE COMFORT PRO PEN NEEDLES 33G X 6 MM
- TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM
- TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 5 MM
- TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 6 MM
- TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 8 MM
- TRUEPLUS 5-BEVEL PEN NEEDLES 32G X 4 MM
- TRUEPLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML
- TRUEPLUS INSULIN SYRINGE 28G X 1/2" 1 ML
- TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML
- TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML
- TRUEPLUS INSULIN SYRINGE 29G X 1/2" 1 ML
- TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML
- TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML
- TRUEPLUS INSULIN SYRINGE 30G X 5/16" 1 ML
- TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.3 ML
- TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.5 ML
- TRUEPLUS INSULIN SYRINGE 31G X 5/16" 1 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- TRUEPLUS PEN NEEDLES 29G X 12MM
- TRUEPLUS PEN NEEDLES 31G X 5 MM
- TRUEPLUS PEN NEEDLES 31G X 6 MM
- TRUEPLUS PEN NEEDLES 31G X 8 MM
- TRUEPLUS PEN NEEDLES 32G X 4 MM
- ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML
- ULTICARE INSULIN SAFETY SYR 29G X 1/2" 1 ML
- ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML
- ULTICARE INSULIN SYRINGE 28G X 1/2" 1 ML
- ULTICARE INSULIN SYRINGE 29G X 1/2" 0.3 ML
- ULTICARE INSULIN SYRINGE 29G X 1/2" 0.5 ML
- ULTICARE INSULIN SYRINGE 29G X 1/2" 1 ML
- ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML
- ULTICARE INSULIN SYRINGE 30G X 1/2" 0.5 ML
- ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML
- ULTICARE INSULIN SYRINGE 30G X 5/16" 0.3 ML
- ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML
- ULTICARE INSULIN SYRINGE 30G X 5/16" 1 ML
- ULTICARE INSULIN SYRINGE 31G X 1/4" 0.3 ML
- ULTICARE INSULIN SYRINGE 31G X 1/4" 0.5 ML
- ULTICARE INSULIN SYRINGE 31G X 1/4" 1 ML
- ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML
- ULTICARE INSULIN SYRINGE 31G X 5/16" 0.5 ML
- ULTICARE INSULIN SYRINGE 31G X 5/16" 1 ML
- ULTICARE MICRO PEN NEEDLES 32G X 4 MM
- ULTICARE MINI PEN NEEDLES 30G X 5 MM
- ULTICARE MINI PEN NEEDLES 31G X 6 MM
- ULTICARE MINI PEN NEEDLES 32G X 6 MM
- ULTICARE PEN NEEDLES 29G X 12.7MM
- ULTICARE PEN NEEDLES 31G X 5 MM
- ULTICARE SHORT PEN NEEDLES 30G X 8 MM
- ULTICARE SHORT PEN NEEDLES 31G X 8 MM
- ULTIGUARD SAFEPACK PEN NEEDLE 29G X 12.7MM
- ULTIGUARD SAFEPACK PEN NEEDLE 31G X 5 MM
- ULTIGUARD SAFEPACK PEN NEEDLE 31G X 6 MM
- ULTIGUARD SAFEPACK PEN NEEDLE 31G X 8 MM
- ULTIGUARD SAFEPACK PEN NEEDLE 32G X 4 MM
- ULTIGUARD SAFEPACK PEN NEEDLE 32G X 6 MM
- ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.3 ML
- ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.5 ML
- ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 1 ML
- ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.3 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- ULTIGUARD SAFEPACK  
SYR/NEEDLE 31G X 5/16" 0.5 ML
- ULTIGUARD SAFEPACK  
SYR/NEEDLE 31G X 5/16" 1 ML
- ULTILET ALCOHOL SWABS PAD
- ULTILET PEN NEEDLE 29G X 12.7MM
- ULTILET PEN NEEDLE 31G X 5 MM
- ULTILET PEN NEEDLE 31G X 8 MM
- ULTILET PEN NEEDLE 32G X 4 MM
- ULTRA COMFORT INSULIN  
SYRINGE 30G X 5/16" 0.3 ML
- ULTRA FLO INSULIN PEN NEEDLES  
29G X 12MM
- ULTRA FLO INSULIN PEN NEEDLES  
31G X 8 MM
- ULTRA FLO INSULIN PEN NEEDLES  
32G X 4 MM
- ULTRA FLO INSULIN PEN NEEDLES  
33G X 4 MM
- ULTRA FLO INSULIN SYR 1/2 UNIT  
30G X 1/2" 0.3 ML
- ULTRA FLO INSULIN SYR 1/2 UNIT  
30G X 5/16" 0.3 ML
- ULTRA FLO INSULIN SYR 1/2 UNIT  
31G X 5/16" 0.3 ML
- ULTRA FLO INSULIN SYRINGE 29G  
X 1/2" 0.3 ML
- ULTRA FLO INSULIN SYRINGE 29G  
X 1/2" 0.5 ML
- ULTRA FLO INSULIN SYRINGE 29G  
X 1/2" 1 ML
- ULTRA FLO INSULIN SYRINGE 30G  
X 1/2" 0.3 ML
- ULTRA FLO INSULIN SYRINGE 30G  
X 1/2" 0.5 ML
- ULTRA FLO INSULIN SYRINGE 30G  
X 1/2" 1 ML
- ULTRA FLO INSULIN SYRINGE 30G  
X 5/16" 0.3 ML
- ULTRA FLO INSULIN SYRINGE 30G  
X 5/16" 0.5 ML
- ULTRA FLO INSULIN SYRINGE 30G  
X 5/16" 1 ML
- ULTRA FLO INSULIN SYRINGE 31G  
X 5/16" 0.3 ML
- ULTRA FLO INSULIN SYRINGE 31G  
X 5/16" 0.5 ML
- ULTRA FLO INSULIN SYRINGE 31G  
X 5/16" 1 ML
- ULTRACARE INSULIN SYRINGE 30G  
X 1/2" 0.5 ML
- ULTRACARE INSULIN SYRINGE 30G  
X 1/2" 1 ML
- ULTRACARE INSULIN SYRINGE 30G  
X 5/16" 0.3 ML
- ULTRACARE INSULIN SYRINGE 30G  
X 5/16" 0.5 ML
- ULTRACARE INSULIN SYRINGE 30G  
X 5/16" 1 ML
- ULTRACARE INSULIN SYRINGE 31G  
X 5/16" 0.3 ML
- ULTRACARE INSULIN SYRINGE 31G  
X 5/16" 0.5 ML
- ULTRACARE INSULIN SYRINGE 31G  
X 5/16" 1 ML
- ULTRACARE PEN NEEDLES 31G X 5  
MM
- ULTRACARE PEN NEEDLES 31G X 6  
MM
- ULTRACARE PEN NEEDLES 31G X 8  
MM
- ULTRACARE PEN NEEDLES 32G X 4  
MM
- ULTRACARE PEN NEEDLES 32G X 5  
MM
- ULTRACARE PEN NEEDLES 32G X 6  
MM
- ULTRACARE PEN NEEDLES 33G X 4  
MM
- ULTRA-COMFORT INSULIN  
SYRINGE 29G X 1/2" 0.5 ML
- ULTRA-THIN II INS SYR SHORT 30G  
X 5/16" 0.3 ML

H1587\_003ST26\_C

Formulary ID: 26387

Effective: 04/01/2026

Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.5 ML
- ULTRA-THIN II INS SYR SHORT 30G X 5/16" 1 ML
- ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.3 ML
- ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML
- ULTRA-THIN II INS SYR SHORT 31G X 5/16" 1 ML
- ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML
- ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 1 ML
- ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM
- ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM
- ULTRA-THIN II PEN NEEDLES 29G X 12.7MM
- UNIFINE OTC PEN NEEDLES 31G X 5 MM
- UNIFINE OTC PEN NEEDLES 32G X 4 MM
- UNIFINE PEN NEEDLES 32G X 4 MM
- UNIFINE PENTIPS 29G X 12MM
- UNIFINE PENTIPS 31G X 6 MM
- UNIFINE PENTIPS 31G X 8 MM
- UNIFINE PENTIPS 32G X 4 MM
- UNIFINE PENTIPS PLUS 29G X 12MM
- UNIFINE PENTIPS PLUS 31G X 6 MM
- UNIFINE PENTIPS PLUS 32G X 4 MM
- UNIFINE PROTECT PEN NEEDLE 30G X 5 MM
- UNIFINE PROTECT PEN NEEDLE 30G X 8 MM
- UNIFINE PROTECT PEN NEEDLE 32G X 4 MM
- UNIFINE SAFECONTROL PEN NEEDLE 30G X 5 MM
- UNIFINE SAFECONTROL PEN NEEDLE 30G X 8 MM
- UNIFINE SAFECONTROL PEN NEEDLE 31G X 5 MM
- UNIFINE SAFECONTROL PEN NEEDLE 31G X 6 MM
- UNIFINE SAFECONTROL PEN NEEDLE 31G X 8 MM
- UNIFINE SAFECONTROL PEN NEEDLE 32G X 4 MM
- UNIFINE ULTRA PEN NEEDLE 31G X 5 MM
- UNIFINE ULTRA PEN NEEDLE 31G X 6 MM
- UNIFINE ULTRA PEN NEEDLE 31G X 8 MM
- UNIFINE ULTRA PEN NEEDLE 32G X 4 MM
- VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 0.5 ML
- VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 1 ML
- VANISHPOINT INSULIN SYRINGE 29G X 5/16" 1 ML
- VANISHPOINT INSULIN SYRINGE 30G X 3/16" 0.5 ML
- VANISHPOINT INSULIN SYRINGE 30G X 3/16" 1 ML
- VANISHPOINT INSULIN SYRINGE 30G X 5/16" 0.5 ML
- VANISHPOINT INSULIN SYRINGE 30G X 5/16" 1 ML
- VERIFINE INSULIN PEN NEEDLE 29G X 12MM
- VERIFINE INSULIN PEN NEEDLE 31G X 5 MM
- VERIFINE INSULIN PEN NEEDLE 32G X 6 MM
- VERIFINE INSULIN SYRINGE 28G X 1/2" 1 ML
- VERIFINE INSULIN SYRINGE 29G X 1/2" 0.5 ML
- VERIFINE INSULIN SYRINGE 29G X 1/2" 1 ML

H1587\_003ST26\_C  
 Formulary ID: 26387  
 Effective: 04/01/2026  
 Last Updated: 03/31/2026

## Tribute Select 2026 Formulary Step Therapy Criteria

- VERIFINE INSULIN SYRINGE 30G X 1/2" 1 ML
- VERIFINE INSULIN SYRINGE 30G X 5/16" 0.5 ML
- VERIFINE INSULIN SYRINGE 30G X 5/16" 1 ML
- VERIFINE INSULIN SYRINGE 31G X 5/16" 0.3 ML
- VERIFINE INSULIN SYRINGE 31G X 5/16" 0.5 ML
- VERIFINE INSULIN SYRINGE 31G X 5/16" 1 ML
- VERIFINE PLUS PEN NEEDLE 31G X 5 MM
- VERIFINE PLUS PEN NEEDLE 31G X 8 MM
- VERIFINE PLUS PEN NEEDLE 32G X 4 MM
- VP INSULIN SYRINGE 29G X 1/2" 0.3 ML
- WEBCOL ALCOHOL PREP LARGE PAD 70 %
- WEGMANS UNIFINE PENTIPS PLUS 31G X 8 MM
- ZEVRX STERILE ALCOHOL PREP PAD PAD 70 %

### Details

<b>Criteria</b>	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.
-----------------	---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### KLISYRI

---

#### Products Affected

##### Step 2:

- KLISYRI (250 MG) OINTMENT 1 %  
EXTERNAL

#### Details

---

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC TOPICAL FLUOROURACIL IN THE LAST 120 DAYS.
-----------------	---

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### LEVOMILNACIPRAN

---

#### Products Affected

##### Step 2:

- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 120 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 20 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 40 MG ORAL
- FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 80 MG ORAL
- FETZIMA TITRATION CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG ORAL

#### Details

---

<b>Criteria</b>	PRIOR CLAIM FOR TRINTELLIX AND 1 GENERIC ANTIDEPRESSANT: BUPROPION, CITALOPRAM, ESCITALOPRAM, FLUOXETINE, MIRTAZAPINE, PAROXETINE, SERTRALINE, VENLAFAXINE, or VILAZODONE IN THE PAST 365 DAYS
-----------------	--

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **LUMATEPERONE TOSYLATE**

---

**Products Affected**

**Step 2:**

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

**Details**

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

# Tribute Select 2026 Formulary Step Therapy Criteria

## MEMANTINE ER

---

### Products Affected

#### Step 2:

- *memantine hcl er capsule extended release 24 hour 14 mg oral*
- *memantine hcl er capsule extended release 24 hour 21 mg oral*
- *memantine hcl er capsule extended release 24 hour 28 mg oral*
- *memantine hcl er capsule extended release 24 hour 7 mg oral*

### Details

---

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

---

**Tribute Select 2026 Formulary  
Step Therapy Criteria**

## **METHOTREXATE INJECTOR**

---

### **Products Affected**

#### **Step 2:**

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

### **Details**

<b>Criteria</b>	TRIAL OF OR CONTRAINDICATION TO GENERIC ORAL METHOTREXATE TABLET
-----------------	--

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### PERAMPANEL

---

#### Products Affected

##### Step 2:

- *perampanel suspension 0.5 mg/ml oral*
- *perampanel tablet 10 mg oral*
- *perampanel tablet 12 mg oral*
- *perampanel tablet 2 mg oral*
- *perampanel tablet 4 mg oral*
- *perampanel tablet 6 mg oral*
- *perampanel tablet 8 mg oral*

#### 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.

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### RUFINAMIDE

---

#### Products Affected

##### Step 2:

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

#### 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.
----------	--

---

# Tribute Select 2026 Formulary Step Therapy Criteria

## SELEGILINE PATCH

---

### Products Affected

#### Step 2:

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

### Details

---

<b>Criteria</b>	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
-----------------	---

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### SPRITAM

---

#### Products Affected

##### Step 2:

- *levetiracetam tablet disintegrating soluble 250 mg oral* • SPRITAM TABLET DISINTEGRATING SOLUBLE 250 MG ORAL
- *levetiracetam tablet disintegrating soluble 500 mg oral* • SPRITAM TABLET DISINTEGRATING SOLUBLE 500 MG ORAL
- SPRITAM TABLET DISINTEGRATING SOLUBLE 1000 MG ORAL • SPRITAM TABLET DISINTEGRATING SOLUBLE 750 MG ORAL

#### Details

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

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### XANOMELINE/TROSPIUM

---

#### Products Affected

##### Step 2:

- COBENFY CAPSULE 100-20 MG ORAL
- COBENFY CAPSULE 125-30 MG ORAL
- COBENFY CAPSULE 50-20 MG ORAL
- COBENFY STARTER PACK CAPSULE THERAPY PACK 50-20 & 100-20 MG ORAL

#### Details

---

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

# Tribute Select 2026 Formulary Step Therapy Criteria

## XARELTO

---

### Products Affected

#### Step 2:

- XARELTO TABLET 2.5 MG ORAL

### Details

---

<b>Criteria</b>	PRIOR CLAIM FOR GENERIC RIVAROXABAN 2.5MG TABLET IN THE LAST 120 DAYS.
-----------------	--

---

# Tribute Select 2026 Formulary

## Step Therapy Criteria

### INDEX

#### A

ABOUTTIME PEN NEEDLE 30G X 8 MM ..... 19, 37

ABOUTTIME PEN NEEDLE 31G X 5 MM ..... 19, 37

ABOUTTIME PEN NEEDLE 31G X 8 MM ..... 19, 37

ABOUTTIME PEN NEEDLE 32G X 4 MM ..... 19, 37

ADVOCATE INSULIN PEN NEEDLE 32G X 4 MM..... 19, 37

ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM..... 19, 37

ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM..... 19, 37

ADVOCATE INSULIN PEN NEEDLES 31G X 8 MM..... 19, 37

ADVOCATE INSULIN PEN NEEDLES 33G X 4 MM..... 19, 37

ADVOCATE INSULIN SYRINGE 29G X 1/2 ..... 19, 37

ADVOCATE INSULIN SYRINGE 30G X 5/16 ..... 19, 37

ADVOCATE INSULIN SYRINGE 31G X 5/16 ..... 19, 37

ALCOHOL PREP PAD..... 19, 37

ALCOHOL PREP PAD 70 %..... 19, 37

ALCOHOL PREP PADS PAD 70 %.. 19, 37

ALCOHOL SWABS PAD..... 19, 37

ALCOHOL SWABS PAD 70 % ..... 19, 37

AQ INSULIN SYRINGE 31G X 5/16 19, 37

AQINJECT PEN NEEDLE 31G X 5 MM ..... 19, 37

AQINJECT PEN NEEDLE 32G X 4 MM ..... 19, 37

aripiprazole tablet dispersible 10 mg oral... 4

aripiprazole tablet dispersible 15 mg oral... 4

ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM..... 19, 37

ASSURE ID INSULIN SAFETY SYR 29G X 1/2..... 19, 37

ASSURE ID INSULIN SAFETY SYR 31G X 15/64..... 19, 37

ASSURE ID PRO PEN NEEDLES 30G X 5 MM ..... 19, 37

AUM ALCOHOL PREP PADS PAD 70 % ..... 19, 37

AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM..... 19, 37

AUM INSULIN SAFETY PEN NEEDLE 31G X 5 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 32G X 4 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 32G X 5 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 32G X 6 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 32G X 8 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 33G X 4 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 33G X 5 MM..... 19, 37

AUM MINI INSULIN PEN NEEDLE 33G X 6 MM..... 19, 37

AUM PEN NEEDLE 32G X 4 MM ... 19, 37

AUM PEN NEEDLE 32G X 5 MM ... 20, 37

AUM PEN NEEDLE 32G X 6 MM ... 20, 37

AUM PEN NEEDLE 33G X 4 MM ... 20, 37

AUM PEN NEEDLE 33G X 5 MM ... 20, 37

AUM PEN NEEDLE 33G X 6 MM ... 20, 37

AUM READYGARD DUO PEN NEEDLE 32G X 4 MM..... 20, 37

AUM SAFETY PEN NEEDLE 31G X 4 MM ..... 20, 37

AUVELITY TABLET EXTENDED RELEASE 45-105 MG ORAL ..... 9

#### B

BD AUTOSHIELD DUO 30G X 5 MM . 20, 37

BD ECLIPSE SYRINGE 30G X 1/2 .. 20, 37

BD INSULIN SYR ULTRAFINE II 31G X 5/16 ..... 20, 37

BD INSULIN SYRINGE 27.5G X 5/820, 37

BD INSULIN SYRINGE 27G X 1/2.. 20, 37

BD INSULIN SYRINGE 29G X 1/2.. 20, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

BD INSULIN SYRINGE HALF-UNIT 31G X 5/16..... 20, 37	BD VEO INSULIN SYRINGE U/F 31G X 15/64 ..... 20, 37
BD INSULIN SYRINGE MICROFINE 27G X 5/8..... 20, 37	<b>C</b>
BD INSULIN SYRINGE MICROFINE 28G X 1/2..... 20, 37	CAPLYTA CAPSULE 10.5 MG ORAL .. 40
BD INSULIN SYRINGE U-100 1 ML ... 20, 37	CAPLYTA CAPSULE 21 MG ORAL ..... 40
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2..... 20, 37	CAPLYTA CAPSULE 42 MG ORAL ..... 40
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2..... 20, 37	CAREFINE PEN NEEDLES 29G X 12MM ..... 20, 37
BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM..... 20, 37	CAREFINE PEN NEEDLES 30G X 8 MM ..... 21, 37
BD PEN NEEDLE MINI U/F 31G X 5 MM ..... 20, 37	CAREFINE PEN NEEDLES 31G X 6 MM ..... 21, 37
BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM..... 20, 37	CAREFINE PEN NEEDLES 31G X 8 MM ..... 21, 37
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM..... 20, 37	CAREFINE PEN NEEDLES 32G X 4 MM ..... 21, 37
BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM..... 20, 37	CAREFINE PEN NEEDLES 32G X 5 MM ..... 21, 37
BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM..... 20, 37	CAREFINE PEN NEEDLES 32G X 6 MM ..... 21, 37
BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM..... 20, 37	CAREONE INSULIN SYRINGE 30G X 1/2 ..... 21, 37
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2..... 20, 37	CAREONE INSULIN SYRINGE 31G X 5/16 ..... 21, 37
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16..... 20, 37	CARETOUCH ALCOHOL PREP PAD 70 % ..... 21, 37
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64..... 20, 37	CARETOUCH INSULIN SYRINGE 28G X 5/16 ..... 21, 37
BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16..... 20, 37	CARETOUCH INSULIN SYRINGE 29G X 5/16 ..... 21, 37
BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 5/8..... 20, 37	CARETOUCH INSULIN SYRINGE 30G X 5/16 ..... 21, 37
BD SWAB SINGLE USE REGULAR PAD ..... 20, 37	CARETOUCH INSULIN SYRINGE 31G X 5/16 ..... 21, 37
BD SWABS SINGLE USE BUTTERFLY PAD..... 20, 37	CARETOUCH PEN NEEDLES 29G X 12MM ..... 21, 37
BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64..... 20, 37	CARETOUCH PEN NEEDLES 31G X 5 MM ..... 21, 37
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64..... 20, 37	CARETOUCH PEN NEEDLES 31G X 6 MM ..... 21, 37
	CARETOUCH PEN NEEDLES 31G X 8 MM ..... 21, 37
	CARETOUCH PEN NEEDLES 32G X 4 MM ..... 21, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

CARETOUCH PEN NEEDLES 32G X 5 MM .....	21, 37	COMFORT EZ PEN NEEDLES 31G X 6 MM .....	22, 37
CARETOUCH PEN NEEDLES 33G X 4 MM .....	21, 37	COMFORT EZ PEN NEEDLES 31G X 8 MM .....	22, 37
CLEVER CHOICE COMFORT EZ 29G X 12MM .....	21, 37	COMFORT EZ PEN NEEDLES 32G X 4 MM .....	22, 37
CLEVER CHOICE COMFORT EZ 33G X 4 MM .....	21, 37	COMFORT EZ PEN NEEDLES 32G X 5 MM .....	22, 37
CLICKFINE PEN NEEDLES 31G X 8 MM .....	21, 37	COMFORT EZ PEN NEEDLES 32G X 6 MM .....	22, 37
CLICKFINE PEN NEEDLES 32G X 4 MM .....	21, 37	COMFORT EZ PEN NEEDLES 32G X 8 MM .....	22, 37
clozapine tablet dispersible 100 mg oral.....	8	COMFORT EZ PEN NEEDLES 33G X 4 MM .....	22, 37
clozapine tablet dispersible 12.5 mg oral.....	8	COMFORT EZ PEN NEEDLES 33G X 5 MM .....	22, 37
clozapine tablet dispersible 150 mg oral.....	8	COMFORT EZ PEN NEEDLES 33G X 6 MM .....	22, 37
clozapine tablet dispersible 200 mg oral.....	8	COMFORT EZ PEN NEEDLES 33G X 8 MM .....	22, 37
clozapine tablet dispersible 25 mg oral.....	8	COMFORT EZ PRO PEN NEEDLES 30G X 8 MM.....	22, 37
COBENFY CAPSULE 100-20 MG ORAL .....	47	COMFORT EZ PRO PEN NEEDLES 31G X 4 MM.....	22, 37
COBENFY CAPSULE 125-30 MG ORAL .....	47	COMFORT EZ PRO PEN NEEDLES 31G X 5 MM.....	22, 37
COBENFY CAPSULE 50-20 MG ORAL	47	COMFORT TOUCH INSULIN PEN NEED 31G X 4 MM.....	22, 37
COBENFY STARTER PACK CAPSULE THERAPY PACK 50-20 & 100-20 MG ORAL.....	47	COMFORT TOUCH INSULIN PEN NEED 31G X 5 MM.....	22, 37
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2.....	21, 37	COMFORT TOUCH INSULIN PEN NEED 31G X 6 MM.....	22, 37
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16.....	21, 37	COMFORT TOUCH INSULIN PEN NEED 31G X 8 MM.....	22, 37
COMFORT EZ INSULIN SYRINGE 27G X 1/2.....	21, 37	COMFORT TOUCH INSULIN PEN NEED 32G X 4 MM.....	22, 37
COMFORT EZ INSULIN SYRINGE 28G X 1/2.....	21, 37	COMFORT TOUCH INSULIN PEN NEED 32G X 5 MM.....	22, 37
COMFORT EZ INSULIN SYRINGE 29G X 1/2.....	21, 37	COMFORT TOUCH INSULIN PEN NEED 32G X 6 MM.....	22, 37
COMFORT EZ INSULIN SYRINGE 30G X 1/2.....	21, 37	COMFORT TOUCH INSULIN PEN NEED 32G X 8 MM.....	22, 37
COMFORT EZ INSULIN SYRINGE 30G X 5/16.....	21, 22, 37	CURITY ALCOHOL PREPS PAD 70 %	22, 37
COMFORT EZ INSULIN SYRINGE 31G X 15/64.....	22, 37		
COMFORT EZ INSULIN SYRINGE 31G X 5/16.....	22, 37		
COMFORT EZ PEN NEEDLES 31G X 5 MM .....	22, 37		

## Tribute Select 2026 Formulary Step Therapy Criteria

CURITY ALL PURPOSE SPONGES PAD 2.....	22, 37	DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 60 MG ORAL .....	11
CURITY GAUZE PAD 2 .....	22, 37	DROPLET INSULIN SYRINGE 29G X 1/2 .....	22, 23, 37
CURITY GAUZE SPONGE PAD 2... ..	22, 37	DROPLET INSULIN SYRINGE 30G X 1/2 .....	23, 37
CURITY SPONGES PAD 2 .....	22, 37	DROPLET INSULIN SYRINGE 30G X 15/64 .....	23, 37
CVS GAUZE PAD 2 .....	22, 37	DROPLET INSULIN SYRINGE 30G X 5/16 .....	23, 37
CVS GAUZE STERILE PAD 2 .....	22, 37	DROPLET INSULIN SYRINGE 31G X 15/64 .....	23, 37
CVS ISOPROPYL ALCOHOL WIPES 70 % EXTERNAL .....	22, 37	DROPLET INSULIN SYRINGE 31G X 5/16 .....	23, 37
CYCLOPHOSPHAMIDE CAPSULE 25 MG ORAL .....	6	DROPLET MICRON 34G X 3.5 MM	23, 37
cyclophosphamide capsule 50 mg oral .....	6	DROPLET PEN NEEDLES 29G X 10MM .....	23, 37
cyclophosphamide tablet 25 mg oral .....	6	DROPLET PEN NEEDLES 29G X 12MM .....	23, 37
CYCLOPHOSPHAMIDE TABLET 50 MG ORAL.....	6	DROPLET PEN NEEDLES 30G X 8 MM .....	23, 37
<b>D</b>		DROPLET PEN NEEDLES 31G X 5 MM .....	23, 37
DERMACEA GAUZE SPONGE PAD 2	22, 37	DROPLET PEN NEEDLES 31G X 6 MM .....	23, 37
DERMACEA IV DRAIN SPONGES PAD 2.....	22, 37	DROPLET PEN NEEDLES 31G X 8 MM .....	23, 37
DERMACEA NON-WOVEN SPONGES PAD 2.....	22, 37	DROPLET PEN NEEDLES 32G X 4 MM .....	23, 37
DERMACEA TYPE VII GAUZE PAD	22, 37	DROPLET PEN NEEDLES 32G X 5 MM .....	23, 37
DIATHRIVE PEN NEEDLE 31G X 5 MM .....	22, 37	DROPLET PEN NEEDLES 32G X 6 MM .....	23, 37
DIATHRIVE PEN NEEDLE 31G X 6 MM .....	22, 37	DROPLET PEN NEEDLES 32G X 8 MM .....	23, 37
DIATHRIVE PEN NEEDLE 31G X 8 MM .....	22, 37	DROPSAFE ALCOHOL PREP PAD 70 % .....	23, 37
DIATHRIVE PEN NEEDLE 32G X 4 MM .....	22, 37	DROPSAFE AUTOPROTECT DUO 31G X 4 MM .....	23, 37
dihydroergotamine mesylate solution 4 mg/ml nasal.....	10	DROPSAFE AUTOPROTECT DUO 31G X 8 MM .....	23, 37
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 20 MG ORAL .....	11	DROPSAFE SAFETY PEN NEEDLES 31G X 5 MM.....	23, 37
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 30 MG ORAL .....	11		
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 40 MG ORAL .....	11		

## Tribute Select 2026 Formulary Step Therapy Criteria

DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM.....	23, 37	EASY COMFORT PEN NEEDLES 33G X 6 MM .....	24, 37
DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2.....	23, 37	EASY GLIDE PEN NEEDLES 33G X 4 MM .....	24, 37
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64.....	23, 37	EASY TOUCH ALCOHOL PREP MEDIUM PAD 70 %.....	24, 37
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16.....	23, 37	EASY TOUCH FLIPLOCK INSULIN SYR 29G X 1/2.....	24, 37
DRUG MART ULTRA COMFORT SYR 29G X 1/2.....	23, 37	EASY TOUCH FLIPLOCK INSULIN SYR 30G X 1/2.....	24, 37
DRUG MART ULTRA COMFORT SYR 30G X 5/16.....	23, 37	EASY TOUCH FLIPLOCK INSULIN SYR 30G X 5/16.....	24, 37
DRUG MART UNIFINE PENTIPS 31G X 5 MM .....	23, 37	EASY TOUCH FLIPLOCK INSULIN SYR 31G X 5/16.....	24, 37
<b>E</b>		EASY TOUCH FLIPLOCK SAFETY SYR 27G X 1/2.....	24, 37
EASY COMFORT ALCOHOL PADS PAD .....	23, 37	EASY TOUCH INSULIN BARRELS U-100 1 ML.....	24, 37
EASY COMFORT INSULIN SYRINGE 29G X 5/16.....	23, 37	EASY TOUCH INSULIN SAFETY SYR 29G X 1/2.....	24, 37
EASY COMFORT INSULIN SYRINGE 30G X 1/2.....	23, 24, 37	EASY TOUCH INSULIN SAFETY SYR 30G X 1/2.....	24, 37
EASY COMFORT INSULIN SYRINGE 30G X 5/16.....	24, 37	EASY TOUCH INSULIN SAFETY SYR 30G X 5/16.....	24, 37
EASY COMFORT INSULIN SYRINGE 31G X 1/2.....	24, 37	EASY TOUCH INSULIN SYRINGE 27G X 1/2.....	24, 37
EASY COMFORT INSULIN SYRINGE 31G X 5/16.....	24, 37	EASY TOUCH INSULIN SYRINGE 27G X 5/8.....	24, 37
EASY COMFORT INSULIN SYRINGE 32G X 5/16.....	24, 37	EASY TOUCH INSULIN SYRINGE 28G X 1/2.....	24, 37
EASY COMFORT PEN NEEDLES 29G X 4MM .....	24, 37	EASY TOUCH INSULIN SYRINGE 29G X 1/2.....	24, 37
EASY COMFORT PEN NEEDLES 29G X 5MM .....	24, 37	EASY TOUCH INSULIN SYRINGE 30G X 1/2.....	24, 37
EASY COMFORT PEN NEEDLES 31G X 5 MM .....	24, 37	EASY TOUCH INSULIN SYRINGE 30G X 5/16.....	24, 37
EASY COMFORT PEN NEEDLES 31G X 6 MM .....	24, 37	EASY TOUCH INSULIN SYRINGE 31G X 5/16.....	24, 25, 37
EASY COMFORT PEN NEEDLES 31G X 8 MM .....	24, 37	EASY TOUCH PEN NEEDLES 29G X 12MM .....	25, 37
EASY COMFORT PEN NEEDLES 32G X 4 MM .....	24, 37	EASY TOUCH PEN NEEDLES 30G X 5 MM .....	25, 37
EASY COMFORT PEN NEEDLES 33G X 4 MM .....	24, 37	EASY TOUCH PEN NEEDLES 30G X 6 MM .....	25, 37
EASY COMFORT PEN NEEDLES 33G X 5 MM .....	24, 37		

## Tribute Select 2026 Formulary Step Therapy Criteria

EASY TOUCH PEN NEEDLES 30G X 8 MM ..... 25, 37	EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML..... 25, 37
EASY TOUCH PEN NEEDLES 31G X 5 MM ..... 25, 37	EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM..... 25, 37
EASY TOUCH PEN NEEDLES 31G X 6 MM ..... 25, 37	EMBECTA PEN NEEDLE NANO 32G X 4 MM ..... 25, 37
EASY TOUCH PEN NEEDLES 31G X 8 MM ..... 25, 37	EMBECTA PEN NEEDLE ULTRAFINE 29G X 12.7MM..... 25, 37
EASY TOUCH PEN NEEDLES 32G X 4 MM ..... 25, 37	EMBECTA PEN NEEDLE ULTRAFINE 31G X 5 MM..... 25, 37
EASY TOUCH PEN NEEDLES 32G X 5 MM ..... 25, 37	EMBECTA PEN NEEDLE ULTRAFINE 31G X 8 MM..... 25, 37
EASY TOUCH PEN NEEDLES 32G X 6 MM ..... 25, 37	EMBECTA PEN NEEDLE ULTRAFINE 32G X 6 MM..... 25, 37
EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM..... 25, 37	EMBRACE PEN NEEDLES 29G X 12MM ..... 25, 37
EASY TOUCH SAFETY PEN NEEDLES 29G X 8MM..... 25, 37	EMBRACE PEN NEEDLES 30G X 5 MM ..... 25, 37
EASY TOUCH SAFETY PEN NEEDLES 30G X 8 MM..... 25, 37	EMBRACE PEN NEEDLES 30G X 8 MM ..... 25, 37
EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2..... 25, 37	EMBRACE PEN NEEDLES 31G X 5 MM ..... 25, 37
EASY TOUCH SHEATHLOCK SYRINGE 30G X 1/2..... 25, 37	EMBRACE PEN NEEDLES 31G X 6 MM ..... 25, 37
EASY TOUCH SHEATHLOCK SYRINGE 30G X 5/16..... 25, 37	EMBRACE PEN NEEDLES 31G X 8 MM ..... 26, 37
EASY TOUCH SHEATHLOCK SYRINGE 31G X 5/16..... 25, 37	EMBRACE PEN NEEDLES 32G X 4 MM ..... 26, 37
EMBECTA AUTOSHIELD DUO 30G X 5 MM ..... 25, 37	EMSAM PATCH 24 HOUR 12 MG/24HR TRANSDERMAL..... 45
EMBECTA INS SYR U/F 1/2 UNIT 31G X 15/64 ..... 25, 37	EMSAM PATCH 24 HOUR 6 MG/24HR TRANSDERMAL..... 45
EMBECTA INS SYR U/F 1/2 UNIT 31G X 5/16 ..... 25, 37	EMSAM PATCH 24 HOUR 9 MG/24HR TRANSDERMAL..... 45
EMBECTA INSULIN SYR ULTRAFINE 30G X 1/2..... 25, 37	EQL ALCOHOL SWABS PAD 70 % 26, 37
EMBECTA INSULIN SYR ULTRAFINE 31G X 15/64..... 25, 37	EQL GAUZE PAD 2 ..... 26, 37
EMBECTA INSULIN SYR ULTRAFINE 31G X 5/16..... 25, 37	EQL INSULIN SYRINGE 29G X 1/2 26, 37
EMBECTA INSULIN SYRINGE 28G X 1/2 ..... 25, 37	EQL INSULIN SYRINGE 30G X 5/16... 26, 37
EMBECTA INSULIN SYRINGE U-100 27G X 5/8..... 25, 37	eslicarbazepine acetate tablet 200 mg oral 13
	eslicarbazepine acetate tablet 400 mg oral 13
	eslicarbazepine acetate tablet 600 mg oral 13
	eslicarbazepine acetate tablet 800 mg oral 13
	esomeprazole magnesium packet 10 mg oral ..... 2

## Tribute Select 2026 Formulary Step Therapy Criteria

esomeprazole magnesium packet 20 mg oral  
..... 2  
esomeprazole magnesium packet 40 mg oral  
..... 2  
EXEL COMFORT POINT INSULIN SYR  
29G X 1/2..... 26, 37  
EXEL COMFORT POINT INSULIN SYR  
30G X 5/16..... 26, 37  
EXEL COMFORT POINT PEN NEEDLE  
29G X 12MM..... 26, 37

### F

FANAPT TABLET 1 MG ORAL ..... 16  
FANAPT TABLET 10 MG ORAL ..... 16  
FANAPT TABLET 12 MG ORAL ..... 16  
FANAPT TABLET 2 MG ORAL ..... 16  
FANAPT TABLET 4 MG ORAL ..... 16  
FANAPT TABLET 6 MG ORAL ..... 16  
FANAPT TABLET 8 MG ORAL ..... 16  
FANAPT TITRATION PACK A TABLET  
1 & 2 & 4 & 6 MG ORAL ..... 16  
FANAPT TITRATION PACK B TABLET  
1 & 2 & 6 & 8 MG ORAL ..... 16  
FANAPT TITRATION PACK C TABLET  
1 & 2 & 6 MG ORAL ..... 16  
FETZIMA CAPSULE EXTENDED  
RELEASE 24 HOUR 120 MG ORAL . 39  
FETZIMA CAPSULE EXTENDED  
RELEASE 24 HOUR 20 MG ORAL ... 39  
FETZIMA CAPSULE EXTENDED  
RELEASE 24 HOUR 40 MG ORAL ... 39  
FETZIMA CAPSULE EXTENDED  
RELEASE 24 HOUR 80 MG ORAL ... 39  
FETZIMA TITRATION CAPSULE ER 24  
HOUR THERAPY PACK 20 & 40 MG  
ORAL..... 39  
FIFTY50 PEN NEEDLES 31G X 5 MM 26,  
37  
FIFTY50 PEN NEEDLES 31G X 8 MM 26,  
37  
FIFTY50 PEN NEEDLES 32G X 4 MM 26,  
37  
FIFTY50 PEN NEEDLES 32G X 6 MM 26,  
37

### G

GAUZE PADS PAD 2..... 26, 37

GAUZE TYPE VII MEDI-PAK PAD 2.. 26,  
37  
GLOBAL ALCOHOL PREP EASE PAD 70  
% ..... 26, 37  
GLOBAL EASE INJECT PEN NEEDLES  
29G X 12MM..... 26, 37  
GLOBAL EASE INJECT PEN NEEDLES  
31G X 5 MM..... 26, 37  
GLOBAL EASE INJECT PEN NEEDLES  
31G X 8 MM..... 26, 37  
GLOBAL EASE INJECT PEN NEEDLES  
32G X 4 MM..... 26, 37  
GLOBAL EASY GLIDE INSULIN SYR  
31G X 15/64..... 26, 37  
GLOBAL INJECT EASE INSULIN SYR  
30G X 1/2..... 26, 37  
GLUCOPRO INSULIN SYRINGE 30G X  
1/2 ..... 26, 37  
GLUCOPRO INSULIN SYRINGE 30G X  
5/16 ..... 26, 37  
GLUCOPRO INSULIN SYRINGE 31G X  
5/16 ..... 26, 37  
GNP ALCOHOL SWABS PAD..... 26, 37  
GNP CLICKFINE PEN NEEDLES 31G X 6  
MM ..... 26, 37  
GNP CLICKFINE PEN NEEDLES 31G X 8  
MM ..... 26, 37  
GNP INSULIN SYRINGE 28G X 1/2 26, 37  
GNP INSULIN SYRINGE 29G X 1/2 26, 37  
GNP INSULIN SYRINGE 30G X 5/16 .. 26,  
37  
GNP INSULIN SYRINGES 29GX1/2 26, 37  
GNP INSULIN SYRINGES 30G X 5/16 26,  
37  
GNP INSULIN SYRINGES 30GX5/16 .. 26,  
37  
GNP INSULIN SYRINGES 31GX5/16 .. 26,  
37  
GNP PEN NEEDLES 31G X 5 MM .. 26, 37  
GNP PEN NEEDLES 32G X 4 MM .. 26, 37  
GNP PEN NEEDLES 32G X 6 MM .. 26, 37  
GNP STERILE GAUZE PAD 2 ..... 26, 37  
GNP ULTRA COM INSULIN SYRINGE  
29G X 1/2..... 27, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

GNP ULTRA COM INSULIN SYRINGE  
30G X 5/16..... 27, 37

GOODSENSE ALCOHOL SWABS PAD  
70 % ..... 27, 37

GOODSENSE CLICKFINE PEN NEEDLE  
31G X 5 MM..... 27, 37

GOODSENSE PEN NEEDLE PENFINE  
31G X 8 MM..... 27, 37

**H**

HEALTHWISE INSULIN SYR/NEEDLE  
30G X 5/16..... 27, 37

HEALTHWISE INSULIN SYR/NEEDLE  
31G X 5/16..... 27, 37

HEALTHWISE MICRON PEN NEEDLES  
32G X 4 MM..... 27, 37

HEALTHWISE SHORT PEN NEEDLES  
31G X 5 MM..... 27, 37

HEALTHWISE SHORT PEN NEEDLES  
31G X 8 MM..... 27, 37

HEALTHY ACCENTS UNIFINE PENTIP  
29G X 12MM..... 27, 37

HEALTHY ACCENTS UNIFINE PENTIP  
31G X 5 MM..... 27, 37

HEALTHY ACCENTS UNIFINE PENTIP  
31G X 6 MM..... 27, 37

HEALTHY ACCENTS UNIFINE PENTIP  
31G X 8 MM..... 27, 37

HEALTHY ACCENTS UNIFINE PENTIP  
32G X 4 MM..... 27, 37

H-E-B INCONTROL ALCOHOL PAD.. 27,  
37

H-E-B INCONTROL PEN NEEDLES 29G  
X 12MM..... 27, 37

H-E-B INCONTROL PEN NEEDLES 31G  
X 5 MM..... 27, 37

H-E-B INCONTROL PEN NEEDLES 31G  
X 6 MM..... 27, 37

H-E-B INCONTROL PEN NEEDLES 31G  
X 8 MM..... 27, 37

H-E-B INCONTROL PEN NEEDLES 32G  
X 4 MM..... 27, 37

HM STERILE ALCOHOL PREP PAD .. 27,  
37

HM STERILE PADS PAD 2..... 27, 37

HM ULTICARE INSULIN SYRINGE 30G  
X 1/2..... 27, 37

HM ULTICARE INSULIN SYRINGE 31G  
X 5/16..... 27, 37

HM ULTICARE SHORT PEN NEEDLES  
31G X 8 MM..... 27, 37

**I**

INCONTROL ULTICARE PEN NEEDLES  
31G X 6 MM..... 27, 37

INCONTROL ULTICARE PEN NEEDLES  
31G X 8 MM..... 27, 37

INCONTROL ULTICARE PEN NEEDLES  
32G X 4 MM..... 27, 37

insulin lispro junior kwikpen solution pen-  
injector 100 unit/ml subcutaneous ..... 17

insulin lispro prot & lispro suspension pen-  
injector (75-25) 100 unit/ml subcutaneous  
..... 18

INSULIN SYRINGE 29G X 1/2 ..... 27, 37

INSULIN SYRINGE 30G X 5/16 ..... 27, 37

INSULIN SYRINGE 31G X 5/16 ..... 27, 37

INSULIN SYRINGE/NEEDLE 27G X 1/2  
..... 27, 37

INSULIN SYRINGE/NEEDLE 28G X 1/2  
..... 27, 37

INSULIN SYRINGE-NEEDLE U-100 27G  
X 1/2..... 27, 37

INSULIN SYRINGE-NEEDLE U-100 28G  
X 1/2..... 27, 37

INSULIN SYRINGE-NEEDLE U-100 30G  
X 5/16..... 28, 37

INSULIN SYRINGE-NEEDLE U-100 31G  
X 1/4..... 28, 37

INSULIN SYRINGE-NEEDLE U-100 31G  
X 5/16..... 28, 37

INSUPEN PEN NEEDLES 31G X 5 MM  
..... 28, 37

INSUPEN PEN NEEDLES 31G X 8 MM  
..... 28, 37

INSUPEN PEN NEEDLES 32G X 4 MM  
..... 28, 37

INSUPEN PEN NEEDLES 33G X 4 MM  
..... 28, 37

INSUPEN SENSITIVE 32G X 6 MM 28, 37

INSUPEN SENSITIVE 32G X 8 MM 28, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

INSUPEN ULTRAFIN 29G X 12MM 28, 37  
 INSUPEN ULTRAFIN 30G X 8 MM 28, 37  
 INSUPEN ULTRAFIN 31G X 6 MM 28, 37  
 INSUPEN ULTRAFIN 31G X 8 MM 28, 37  
 INSUPEN32G EXTR3ME 32G X 6 MM 28,  
 37

### J

J & J GAUZE PAD 2..... 28, 37  
 JYLAMVO SOLUTION 2 MG/ML ORAL 6

### K

KENDALL HYDROPHILIC FOAM  
 DRESS PAD 2 ..... 28, 37  
 KENDALL HYDROPHILIC FOAM PLUS  
 PAD 2..... 28, 37  
 KINRAY INSULIN SYRINGE 29G X 1/2  
 ..... 28, 37  
 KLISYRI (250 MG) OINTMENT 1 %  
 EXTERNAL ..... 38  
 KMART VALU INSULIN SYRINGE 29G  
 U-100 1 ML ..... 28, 37  
 KMART VALU INSULIN SYRINGE 30G  
 U-100 0.3 ML ..... 28, 37  
 KMART VALU INSULIN SYRINGE 30G  
 U-100 1 ML ..... 28, 37  
 KROGER INSULIN SYRINGE 30G X 5/16  
 ..... 28, 37  
 KROGER PEN NEEDLES 29G X 12MM  
 ..... 28, 37  
 KROGER PEN NEEDLES 31G X 6 MM 28,  
 37

### L

lansoprazole tablet delayed release  
 dispersible 15 mg oral..... 2  
 lansoprazole tablet delayed release  
 dispersible 30 mg oral..... 2  
 LEADER INSULIN SYRINGE 28G X 1/2  
 ..... 28, 37  
 LEADER UNIFINE PENTIPS 31G X 5  
 MM ..... 28, 37  
 LEADER UNIFINE PENTIPS 32G X 4  
 MM ..... 28, 37  
 LEADER UNIFINE PENTIPS PLUS 31G  
 X 5 MM..... 28, 37  
 LEADER UNIFINE PENTIPS PLUS 31G  
 X 8 MM..... 28, 37

levetiracetam tablet disintegrating soluble  
 250 mg oral ..... 46  
 levetiracetam tablet disintegrating soluble  
 500 mg oral ..... 46  
 LITETOUCH INSULIN SYRINGE 28G X  
 1/2 ..... 28, 37  
 LITETOUCH INSULIN SYRINGE 29G X  
 1/2 ..... 28, 37  
 LITETOUCH INSULIN SYRINGE 30G X  
 5/16 ..... 28, 37  
 LITETOUCH INSULIN SYRINGE 31G X  
 5/16 ..... 28, 37  
 LITETOUCH PEN NEEDLES 29G X  
 12.7MM ..... 28, 37  
 LITETOUCH PEN NEEDLES 31G X 5  
 MM ..... 28, 37  
 LITETOUCH PEN NEEDLES 31G X 6  
 MM ..... 28, 37  
 LITETOUCH PEN NEEDLES 31G X 8  
 MM ..... 28, 37  
 LITETOUCH PEN NEEDLES 32G X 4  
 MM ..... 28, 37

### M

MAGELLAN INSULIN SAFETY SYR  
 29G X 1/2..... 28, 37  
 MAGELLAN INSULIN SAFETY SYR  
 30G X 5/16..... 29, 37  
 MAXICOMFORT II PEN NEEDLE 31G X  
 6 MM ..... 29, 37  
 MAXI-COMFORT INSULIN SYRINGE  
 28G X 1/2..... 29, 37  
 MAXI-COMFORT SAFETY PEN  
 NEEDLE 29G X 5MM ..... 29, 37  
 MAXI-COMFORT SAFETY PEN  
 NEEDLE 29G X 8MM ..... 29, 37  
 MAXICOMFORT SYR 27G X 1/2 .... 29, 37  
 MEDIC INSULIN SYRINGE 30G X 5/16  
 ..... 29, 37  
 MEDICINE SHOPPE PEN NEEDLES 29G  
 X 12MM..... 29, 37  
 MEDICINE SHOPPE PEN NEEDLES 31G  
 X 8 MM..... 29, 37  
 MEDPURA ALCOHOL PADS 70 %  
 EXTERNAL ..... 29, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

MEIJER ALCOHOL SWABS PAD 70 % ..... 29, 37	MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2 ..... 29, 37
MEIJER PEN NEEDLES 29G X 12MM 29, 37	MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16 ..... 29, 37
MEIJER PEN NEEDLES 31G X 6 MM . 29, 37	morphine sulfate er capsule extended release 24 hour 10 mg oral..... 1
MEIJER PEN NEEDLES 31G X 8 MM . 29, 37	morphine sulfate er capsule extended release 24 hour 100 mg oral..... 1
memantine hcl er capsule extended release 24 hour 14 mg oral..... 41	morphine sulfate er capsule extended release 24 hour 20 mg oral..... 1
memantine hcl er capsule extended release 24 hour 21 mg oral..... 41	morphine sulfate er capsule extended release 24 hour 30 mg oral..... 1
memantine hcl er capsule extended release 24 hour 28 mg oral..... 41	morphine sulfate er capsule extended release 24 hour 50 mg oral..... 1
memantine hcl er capsule extended release 24 hour 7 mg oral..... 41	morphine sulfate er capsule extended release 24 hour 60 mg oral..... 1
methotrexate (anti-rheumatic) tablet 2.5 mg oral ..... 6	morphine sulfate er capsule extended release 24 hour 80 mg oral..... 1
methotrexate sodium tablet 2.5 mg oral..... 6	MS INSULIN SYRINGE 30G X 5/16 29, 37
MICRODOT PEN NEEDLE 31G X 6 MM ..... 29, 37	MS INSULIN SYRINGE 31G X 5/16 29, 37
MICRODOT PEN NEEDLE 32G X 4 MM ..... 29, 37	<b>N</b>
MICRODOT PEN NEEDLE 33G X 4 MM ..... 29, 37	NEXLETOL TABLET 180 MG ORAL ... 15
MIRASORB SPONGES 2..... 29, 37	NEXLIZET TABLET 180-10 MG ORAL 15
MM PEN NEEDLES 31G X 6 MM ... 29, 37	NOVOFINE AUTOCOVER 30G X 8 MM ..... 29, 37
MM PEN NEEDLES 32G X 4 MM ... 29, 37	NOVOFINE PEN NEEDLE 32G X 6 MM ..... 29, 37
MONOJECT INSULIN SYRINGE 25G X 5/8 ..... 29, 37	NOVOFINE PLUS PEN NEEDLE 32G X 4 MM ..... 30, 37
MONOJECT INSULIN SYRINGE 27G X 1/2 ..... 29, 37	NOVOTWIST PEN NEEDLE 32G X 5 MM ..... 30, 37
MONOJECT INSULIN SYRINGE 28G X 1/2 ..... 29, 37	<b>O</b>
MONOJECT INSULIN SYRINGE 29G X 1/2 ..... 29, 37	omega-3-acid ethyl esters capsule 1 gm oral ..... 14
MONOJECT INSULIN SYRINGE 30G X 5/16 ..... 29, 37	OPIPZA FILM 10 MG ORAL..... 3
MONOJECT INSULIN SYRINGE 31G X 5/16 ..... 29, 37	OPIPZA FILM 2 MG ORAL..... 3
MONOJECT INSULIN SYRINGE U-100 1 ML..... 29, 37	OPIPZA FILM 5 MG ORAL..... 3
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2 ..... 29, 37	<b>P</b>
	pantoprazole sodium packet 40 mg oral ..... 2
	PC UNIFINE PENTIPS 31G X 5 MM30, 37
	PC UNIFINE PENTIPS 31G X 6 MM30, 37
	PC UNIFINE PENTIPS 31G X 8 MM30, 37
	PEN NEEDLE/5-BEVEL TIP 31G X 8 MM ..... 30, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

PEN NEEDLE/5-BEVEL TIP 32G X 4 MM ..... 30, 37	PREVENT SAFETY PEN NEEDLES 31G X 8 MM..... 30, 37
PEN NEEDLES 30G X 5 MM ..... 30, 37	PRO COMFORT ALCOHOL PAD 70 %30, 37
PEN NEEDLES 30G X 8 MM ..... 30, 37	PRO COMFORT INSULIN SYRINGE 30G X 1/2..... 30, 37
PEN NEEDLES 32G X 5 MM ..... 30, 37	PRO COMFORT INSULIN SYRINGE 30G X 5/16..... 30, 37
PENTIPS 29G X 12MM..... 30, 37	PRO COMFORT INSULIN SYRINGE 31G X 5/16..... 30, 37
PENTIPS 31G X 5 MM..... 30, 37	PRO COMFORT PEN NEEDLES 32G X 4 MM ..... 30, 37
PENTIPS 31G X 8 MM..... 30, 37	PRO COMFORT PEN NEEDLES 32G X 5 MM ..... 30, 37
PENTIPS 32G X 4 MM..... 30, 37	PRO COMFORT PEN NEEDLES 32G X 6 MM ..... 30, 37
PENTIPS GENERIC PEN NEEDLES 29G X 12MM..... 30, 37	PRO COMFORT PEN NEEDLES 32G X 8 MM ..... 30, 37
PENTIPS GENERIC PEN NEEDLES 31G X 6 MM..... 30, 37	PRODIGY INSULIN SYRINGE 28G X 1/2 ..... 30, 37
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM..... 30, 37	PRODIGY INSULIN SYRINGE 31G X 5/16 ..... 30, 37
perampanel suspension 0.5 mg/ml oral.... 43	PURE COMFORT ALCOHOL PREP PAD ..... 30, 37
perampanel tablet 10 mg oral..... 43	PURE COMFORT PEN NEEDLE 32G X 4 MM ..... 30, 37
perampanel tablet 12 mg oral..... 43	PURE COMFORT PEN NEEDLE 32G X 5 MM ..... 30, 37
perampanel tablet 2 mg oral..... 43	PURE COMFORT PEN NEEDLE 32G X 6 MM ..... 30, 37
perampanel tablet 4 mg oral..... 43	PURE COMFORT PEN NEEDLE 32G X 8 MM ..... 30, 37
perampanel tablet 6 mg oral..... 43	PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM..... 30, 37
perampanel tablet 8 mg oral..... 43	PURE COMFORT SAFETY PEN NEEDLE 31G X 6 MM..... 31, 37
PHARMACIST CHOICE ALCOHOL PAD ..... 30, 37	PURE COMFORT SAFETY PEN NEEDLE 32G X 4 MM..... 31, 37
PIP PEN NEEDLES 31G X 5MM 31G X 5 MM ..... 30, 37	PX SHORTLENGTH PEN NEEDLES 31G X 8 MM..... 31, 37
PIP PEN NEEDLES 32G X 4MM 32G X 4 MM ..... 30, 37	<b>Q</b>
PRECISION SURE-DOSE SYRINGE 30G X 5/16..... 30, 37	QC ALCOHOL 70 % EXTERNAL ... 31, 37
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2..... 30, 37	QC ALCOHOL SWABS PAD 70 %.. 31, 37
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2..... 30, 37	QC BORDER ISLAND GAUZE PAD 2. 31, 37
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16..... 30, 37	
PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM..... 30, 37	
PREVENT DROPSAFE PEN NEEDLES 31G X 6 MM..... 30, 37	
PREVENT DROPSAFE PEN NEEDLES 31G X 8 MM..... 30, 37	
PREVENT SAFETY PEN NEEDLES 31G X 6 MM..... 30, 37	

## Tribute Select 2026 Formulary Step Therapy Criteria

QUICK TOUCH INSULIN PEN NEEDLE 29G X 12.7MM.....	31, 37	RASUVO SOLUTION AUTO-INJECTOR 22.5 MG/0.45ML SUBCUTANEOUS .	42
QUICK TOUCH INSULIN PEN NEEDLE 31G X 4 MM.....	31, 37	RASUVO SOLUTION AUTO-INJECTOR 25 MG/0.5ML SUBCUTANEOUS .....	42
QUICK TOUCH INSULIN PEN NEEDLE 31G X 5 MM.....	31, 37	RASUVO SOLUTION AUTO-INJECTOR 30 MG/0.6ML SUBCUTANEOUS .....	42
QUICK TOUCH INSULIN PEN NEEDLE 31G X 6 MM.....	31, 37	RASUVO SOLUTION AUTO-INJECTOR 7.5 MG/0.15ML SUBCUTANEOUS ...	42
QUICK TOUCH INSULIN PEN NEEDLE 31G X 8 MM.....	31, 37	RAYA SURE PEN NEEDLE 29G X 12MM .....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 32G X 4 MM.....	31, 37	RAYA SURE PEN NEEDLE 31G X 4 MM .....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 32G X 5 MM.....	31, 37	RAYA SURE PEN NEEDLE 31G X 5 MM .....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 32G X 6 MM.....	31, 37	RAYA SURE PEN NEEDLE 31G X 6 MM .....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 32G X 8 MM.....	31, 37	REALITY INSULIN SYRINGE 28G X 1/2 .....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 33G X 4 MM.....	31, 37	REALITY INSULIN SYRINGE 29G X 1/2 .....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 33G X 5 MM.....	31, 37	REALITY SWABS PAD.....	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 33G X 6 MM.....	31, 37	RELION ALCOHOL SWABS PAD ..	31, 37
QUICK TOUCH INSULIN PEN NEEDLE 33G X 8 MM.....	31, 37	RELI-ON INSULIN SYRINGE 29G 0.3 ML.....	31, 37
<b>R</b>		RELION INSULIN SYRINGE 31G X 15/64 .....	31, 37
RA ALCOHOL SWABS PAD 70 %..	31, 37	RELION MINI PEN NEEDLES 31G X 6 MM .....	31, 37
RA INSULIN SYRINGE 29G X 1/2..	31, 37	RELION PEN NEEDLES 29G X 12MM	31, 37
RA INSULIN SYRINGE 30G X 5/16	31, 37	RELION PEN NEEDLES 31G X 6 MM.	31, 37
ra isopropyl alcohol wipes 70 % external	31, 37	RELION PEN NEEDLES 31G X 8 MM.	31, 37
RA PEN NEEDLES 31G X 5 MM.....	31, 37	REPATHA PUSHTRONEX SYSTEM SOLUTION CARTRIDGE 420 MG/3.5ML SUBCUTANEOUS .....	15
RA PEN NEEDLES 31G X 8 MM.....	31, 37	REPATHA SOLUTION PREFILLED SYRINGE 140 MG/ML SUBCUTANEOUS.....	15
RA STERILE PAD 2 .....	31, 37	REPATHA SURECLICK SOLUTION AUTO-INJECTOR 140 MG/ML SUBCUTANEOUS.....	15
RASUVO SOLUTION AUTO-INJECTOR 10 MG/0.2ML SUBCUTANEOUS .....	42	RESTORE CONTACT LAYER PAD 2..	31, 37
RASUVO SOLUTION AUTO-INJECTOR 12.5 MG/0.25ML SUBCUTANEOUS .	42		
RASUVO SOLUTION AUTO-INJECTOR 15 MG/0.3ML SUBCUTANEOUS .....	42		
RASUVO SOLUTION AUTO-INJECTOR 17.5 MG/0.35ML SUBCUTANEOUS .	42		
RASUVO SOLUTION AUTO-INJECTOR 20 MG/0.4ML SUBCUTANEOUS .....	42		

## Tribute Select 2026 Formulary Step Therapy Criteria

rufinamide suspension 40 mg/ml oral..... 44  
 rufinamide tablet 200 mg oral..... 44  
 rufinamide tablet 400 mg oral..... 44

**S**

SAFETY INSULIN SYRINGES 29G X 1/2  
 ..... 31, 37  
 SAFETY INSULIN SYRINGES 30G X 1/2  
 ..... 31, 37  
 SAFETY INSULIN SYRINGES 30G X  
 5/16 ..... 31, 37  
 SAFETY PEN NEEDLES 30G X 5 MM 32,  
 37  
 SAFETY PEN NEEDLES 30G X 8 MM 32,  
 37  
 SB ALCOHOL PREP PAD 70 %..... 32, 37  
 SB INSULIN SYRINGE 29G X 1/2 .. 32, 37  
 SB INSULIN SYRINGE 30G X 5/16 32, 37  
 SB INSULIN SYRINGE 31G X 5/16 32, 37  
 SECUADO PATCH 24 HOUR 3.8  
 MG/24HR TRANSDERMAL ..... 5  
 SECUADO PATCH 24 HOUR 5.7  
 MG/24HR TRANSDERMAL ..... 5  
 SECUADO PATCH 24 HOUR 7.6  
 MG/24HR TRANSDERMAL ..... 5  
 SECURESAFE INSULIN SYRINGE 29G  
 X 1/2..... 32, 37  
 SECURESAFE SAFETY PEN NEEDLES  
 30G X 8 MM..... 32, 37  
 SM ALCOHOL PREP PAD ..... 32, 37  
 SM ALCOHOL PREP PAD 6-70 %  
 EXTERNAL ..... 32, 37  
 SM ALCOHOL PREP PAD 70 %..... 32, 37  
 SM GAUZE PAD 2 ..... 32, 37  
 SPRITAM TABLET DISINTEGRATING  
 SOLUBLE 1000 MG ORAL ..... 46  
 SPRITAM TABLET DISINTEGRATING  
 SOLUBLE 250 MG ORAL ..... 46  
 SPRITAM TABLET DISINTEGRATING  
 SOLUBLE 500 MG ORAL ..... 46  
 SPRITAM TABLET DISINTEGRATING  
 SOLUBLE 750 MG ORAL ..... 46  
 STERILE GAUZE PAD 2 ..... 32, 37  
 STERILE PAD 2..... 32, 37  
 SURE COMFORT ALCOHOL PREP PAD  
 70 % ..... 32, 37

SURE COMFORT INSULIN SYRINGE  
 28G X 1/2..... 32, 37  
 SURE COMFORT INSULIN SYRINGE  
 29G X 1/2..... 32, 37  
 SURE COMFORT INSULIN SYRINGE  
 30G X 1/2..... 32, 37  
 SURE COMFORT INSULIN SYRINGE  
 30G X 5/16..... 32, 37  
 SURE COMFORT INSULIN SYRINGE  
 31G X 1/4..... 32, 37  
 SURE COMFORT INSULIN SYRINGE  
 31G X 5/16..... 32, 37  
 SURE COMFORT PEN NEEDLES 29G X  
 12.7MM ..... 32, 37  
 SURE COMFORT PEN NEEDLES 30G X  
 8 MM ..... 32, 37  
 SURE COMFORT PEN NEEDLES 31G X  
 5 MM ..... 32, 37  
 SURE COMFORT PEN NEEDLES 31G X  
 6 MM ..... 32, 37  
 SURE COMFORT PEN NEEDLES 31G X  
 8 MM ..... 32, 37  
 SURE COMFORT PEN NEEDLES 32G X  
 4 MM ..... 32, 37  
 SURE COMFORT PEN NEEDLES 32G X  
 6 MM ..... 32, 37  
 SURGICAL GAUZE SPONGE PAD 2 .. 32,  
 37

**T**

TECHLITE INSULIN SYRINGE 29G X  
 1/2 ..... 32, 37  
 TECHLITE PEN NEEDLES 32G X 4 MM  
 ..... 32, 37  
 THERAGAUZE PAD 2..... 32, 37  
 TODAYS HEALTH PEN NEEDLES 29G  
 X 12MM..... 32, 37  
 TODAYS HEALTH SHORT PEN  
 NEEDLE 31G X 8 MM ..... 32, 37  
 TOPCARE CLICKFINE PEN NEEDLES  
 31G X 6 MM..... 32, 37  
 TOPCARE CLICKFINE PEN NEEDLES  
 31G X 8 MM..... 33, 37  
 TOPCARE ULTRA COMFORT INS SYR  
 29G X 1/2..... 33, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

TOPCARE ULTRA COMFORT INS SYR 30G X 5/16..... 33, 37	TRUE COMFORT PRO PEN NEEDLES 33G X 5 MM..... 33, 37
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16..... 33, 37	TRUE COMFORT PRO PEN NEEDLES 33G X 6 MM..... 33, 37
topiramate solution 25 mg/ml oral..... 12	TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM..... 33, 37
TRUE COMFORT ALCOHOL PREP PADS PAD 70 %..... 33, 37	TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 5 MM..... 33, 37
TRUE COMFORT INSULIN SYRINGE 30G X 1/2..... 33, 37	TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 6 MM..... 33, 37
TRUE COMFORT INSULIN SYRINGE 30G X 5/16..... 33, 37	TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 8 MM..... 33, 37
TRUE COMFORT INSULIN SYRINGE 31G X 5/16..... 33, 37	TRUEPLUS 5-BEVEL PEN NEEDLES 32G X 4 MM..... 33, 37
TRUE COMFORT INSULIN SYRINGE 32G X 5/16..... 33, 37	TRUEPLUS INSULIN SYRINGE 28G X 1/2 ..... 34, 37
TRUE COMFORT PEN NEEDLES 31G X 5 MM ..... 33, 37	TRUEPLUS INSULIN SYRINGE 29G X 1/2 ..... 34, 37
TRUE COMFORT PEN NEEDLES 31G X 6 MM ..... 33, 37	TRUEPLUS INSULIN SYRINGE 30G X 5/16 ..... 34, 37
TRUE COMFORT PEN NEEDLES 32G X 4 MM ..... 33, 37	TRUEPLUS INSULIN SYRINGE 31G X 5/16 ..... 34, 37
TRUE COMFORT PRO ALCOHOL PREP PAD 70 %..... 33, 37	TRUEPLUS PEN NEEDLES 29G X 12MM ..... 34, 37
TRUE COMFORT PRO INSULIN SYR 30G X 1/2..... 33, 37	TRUEPLUS PEN NEEDLES 31G X 5 MM ..... 34, 37
TRUE COMFORT PRO INSULIN SYR 30G X 5/16..... 33, 37	TRUEPLUS PEN NEEDLES 31G X 6 MM ..... 34, 37
TRUE COMFORT PRO INSULIN SYR 31G X 5/16..... 33, 37	TRUEPLUS PEN NEEDLES 31G X 8 MM ..... 34, 37
TRUE COMFORT PRO INSULIN SYR 32G X 5/16..... 33, 37	TRUEPLUS PEN NEEDLES 32G X 4 MM ..... 34, 37
TRUE COMFORT PRO PEN NEEDLES 31G X 5 MM..... 33, 37	<b>U</b>
TRUE COMFORT PRO PEN NEEDLES 31G X 6 MM..... 33, 37	ULTICARE INSULIN SAFETY SYR 29G X 1/2..... 34, 37
TRUE COMFORT PRO PEN NEEDLES 31G X 8 MM..... 33, 37	ULTICARE INSULIN SYRINGE 28G X 1/2 ..... 34, 37
TRUE COMFORT PRO PEN NEEDLES 32G X 4 MM..... 33, 37	ULTICARE INSULIN SYRINGE 29G X 1/2 ..... 34, 37
TRUE COMFORT PRO PEN NEEDLES 32G X 5 MM..... 33, 37	ULTICARE INSULIN SYRINGE 30G X 1/2 ..... 34, 37
TRUE COMFORT PRO PEN NEEDLES 32G X 6 MM..... 33, 37	ULTICARE INSULIN SYRINGE 30G X 5/16 ..... 34, 37
TRUE COMFORT PRO PEN NEEDLES 33G X 4 MM..... 33, 37	ULTICARE INSULIN SYRINGE 31G X 1/4 ..... 34, 37

## Tribute Select 2026 Formulary Step Therapy Criteria

ULTICARE INSULIN SYRINGE 31G X 5/16 .....	34, 37	ULTRA FLO INSULIN PEN NEEDLES 29G X 12MM.....	35, 37
ULTICARE MICRO PEN NEEDLES 32G X 4 MM.....	34, 37	ULTRA FLO INSULIN PEN NEEDLES 31G X 8 MM.....	35, 37
ULTICARE MINI PEN NEEDLES 30G X 5 MM .....	34, 37	ULTRA FLO INSULIN PEN NEEDLES 32G X 4 MM.....	35, 37
ULTICARE MINI PEN NEEDLES 31G X 6 MM .....	34, 37	ULTRA FLO INSULIN PEN NEEDLES 33G X 4 MM.....	35, 37
ULTICARE MINI PEN NEEDLES 32G X 6 MM .....	34, 37	ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 1/2.....	35, 37
ULTICARE PEN NEEDLES 29G X 12.7MM .....	34, 37	ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 5/16.....	35, 37
ULTICARE PEN NEEDLES 31G X 5 MM .....	34, 37	ULTRA FLO INSULIN SYR 1/2 UNIT 31G X 5/16.....	35, 37
ULTICARE SHORT PEN NEEDLES 30G X 8 MM.....	34, 37	ULTRA FLO INSULIN SYRINGE 29G X 1/2 .....	35, 37
ULTICARE SHORT PEN NEEDLES 31G X 8 MM.....	34, 37	ULTRA FLO INSULIN SYRINGE 30G X 1/2 .....	35, 37
ULTIGUARD SAFEPACK PEN NEEDLE 29G X 12.7MM.....	34, 37	ULTRA FLO INSULIN SYRINGE 30G X 5/16 .....	35, 37
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 5 MM.....	35, 37	ULTRA FLO INSULIN SYRINGE 31G X 5/16 .....	35, 37
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 6 MM.....	35, 37	ULTRA THIN PEN NEEDLES 32G X 4 MM .....	35, 37
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 8 MM.....	35, 37	ULTRACARE INSULIN SYRINGE 30G X 1/2 .....	35, 37
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 4 MM.....	35, 37	ULTRACARE INSULIN SYRINGE 30G X 5/16 .....	35, 37
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 6 MM.....	35, 37	ULTRACARE INSULIN SYRINGE 31G X 5/16 .....	35, 37
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2.....	35, 37	ULTRACARE PEN NEEDLES 31G X 5 MM .....	35, 37
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16.....	35, 37	ULTRACARE PEN NEEDLES 31G X 6 MM .....	35, 37
ULTILET ALCOHOL SWABS PAD	35, 37	ULTRACARE PEN NEEDLES 31G X 8 MM .....	36, 37
ULTILET PEN NEEDLE 29G X 12.7MM .....	35, 37	ULTRACARE PEN NEEDLES 32G X 4 MM .....	36, 37
ULTILET PEN NEEDLE 31G X 5 MM .	35, 37	ULTRACARE PEN NEEDLES 32G X 5 MM .....	36, 37
ULTILET PEN NEEDLE 31G X 8 MM .	35, 37	ULTRACARE PEN NEEDLES 32G X 6 MM .....	36, 37
ULTILET PEN NEEDLE 32G X 4 MM .	35, 37	ULTRACARE PEN NEEDLES 33G X 4 MM .....	36, 37
ULTRA COMFORT INSULIN SYRINGE 30G X 5/16.....	35, 37		

## Tribute Select 2026 Formulary Step Therapy Criteria

ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2.....	36, 37	UNIFINE SAFECONTROL PEN NEEDLE 31G X 8 MM.....	36, 37
ULTRA-THIN II INS SYR SHORT 30G X 5/16 .....	36, 37	UNIFINE SAFECONTROL PEN NEEDLE 32G X 4 MM.....	36, 37
ULTRA-THIN II INS SYR SHORT 31G X 5/16 .....	36, 37	UNIFINE ULTRA PEN NEEDLE 31G X 5 MM .....	36, 37
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2.....	36, 37	UNIFINE ULTRA PEN NEEDLE 31G X 6 MM .....	36, 37
ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM.....	36, 37	UNIFINE ULTRA PEN NEEDLE 31G X 8 MM .....	36, 37
ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM.....	36, 37	UNIFINE ULTRA PEN NEEDLE 32G X 4 MM .....	36, 37
ULTRA-THIN II PEN NEEDLES 29G X 12.7MM .....	36, 37	<b>V</b>	
UNIFINE OTC PEN NEEDLES 31G X 5 MM .....	36, 37	VALUE HEALTH INSULIN SYRINGE 29G X 1/2.....	36, 37
UNIFINE OTC PEN NEEDLES 32G X 4 MM .....	36, 37	VANISHPOINT INSULIN SYRINGE 29G X 5/16.....	36, 37
UNIFINE PEN NEEDLES 32G X 4 MM	36,	VANISHPOINT INSULIN SYRINGE 30G X 3/16.....	36, 37
37		VANISHPOINT INSULIN SYRINGE 30G X 5/16.....	36, 37
UNIFINE PENTIPS 29G X 12MM....	36, 37	VERIFINE INSULIN PEN NEEDLE 29G X 12MM.....	36, 37
UNIFINE PENTIPS 31G X 6 MM.....	36, 37	VERIFINE INSULIN PEN NEEDLE 31G X 5 MM.....	36, 37
UNIFINE PENTIPS 31G X 8 MM.....	36, 37	VERIFINE INSULIN PEN NEEDLE 32G X 6 MM.....	37
UNIFINE PENTIPS 32G X 4 MM.....	36, 37	VERIFINE INSULIN SYRINGE 28G X 1/2 .....	37
UNIFINE PENTIPS PLUS 29G X 12MM .....	36, 37	VERIFINE INSULIN SYRINGE 29G X 1/2 .....	37
UNIFINE PENTIPS PLUS 31G X 6 MM	36,	VERIFINE INSULIN SYRINGE 30G X 1/2 .....	37
37		VERIFINE INSULIN SYRINGE 30G X 5/16 .....	37
UNIFINE PENTIPS PLUS 32G X 4 MM	36,	VERIFINE INSULIN SYRINGE 31G X 5/16 .....	37
37		VERIFINE PLUS PEN NEEDLE 31G X 5 MM .....	37
UNIFINE PROTECT PEN NEEDLE 30G X 5 MM .....	36, 37	VERIFINE PLUS PEN NEEDLE 31G X 8 MM .....	37
UNIFINE PROTECT PEN NEEDLE 30G X 8 MM .....	36, 37	VERIFINE PLUS PEN NEEDLE 32G X 4 MM .....	37
UNIFINE PROTECT PEN NEEDLE 32G X 4 MM .....	36, 37	VERSACLOZ SUSPENSION 50 MG/ML ORAL.....	8
UNIFINE SAFECONTROL PEN NEEDLE 30G X 5 MM.....	36, 37		
UNIFINE SAFECONTROL PEN NEEDLE 30G X 8 MM.....	36, 37		
UNIFINE SAFECONTROL PEN NEEDLE 31G X 5 MM.....	36, 37		
UNIFINE SAFECONTROL PEN NEEDLE 31G X 6 MM.....	36, 37		

## Tribute Select 2026 Formulary Step Therapy Criteria

VP INSULIN SYRINGE 29G X 1/2 ..... 37  
 VRAYLAR CAPSULE 0.5 MG ORAL ..... 7  
 VRAYLAR CAPSULE 0.75 MG ORAL ... 7  
 VRAYLAR CAPSULE 1.5 MG ORAL ..... 7  
 VRAYLAR CAPSULE 3 MG ORAL ..... 7  
 VRAYLAR CAPSULE 4.5 MG ORAL ..... 7  
 VRAYLAR CAPSULE 6 MG ORAL ..... 7  
 VRAYLAR CAPSULE THERAPY PACK  
 1.5 & 3 MG ORAL ..... 7

**W**  
 WEBCOL ALCOHOL PREP LARGE PAD  
 70 % ..... 37  
 WEGMANS UNIFINE PENTIPS PLUS  
 31G X 8 MM..... 37  
**X**  
 XARELTO TABLET 2.5 MG ORAL ..... 48  
 XATMEP SOLUTION 2.5 MG/ML ORAL6  
**Z**  
 ZEVRX STERILE ALCOHOL PREP PAD  
 PAD 70 % ..... 37