



Medi-Cal Rx

Medical Supplies: Updates to the List of Contracted Pen Needles, Effective July 1, 2025

June 1, 2025

The [List of Contracted Pen Needles](#) has been updated on the [Medi-Cal Rx Web Portal](#). The effective date of the changes is July 1, 2025.

The following products have been added to the *List*:

Manufacturer	Product Label Name	Medi-Cal 11-digit Billing Number (NDC)	MAC per each
Embecta Medical II	Ultra-Fine™ Pen Needles 8 mm 31 G 5 bevel TW 100 ct	83017010903	\$0.4267
Embecta Medical II	Ultra-Fine™ Pen Needles 5 mm 31 G 5 bevel TW 100 ct	83017011903	\$0.4318
Embecta Medical II	Nano™ Pen Needles 4 mm 32 G 5 bevel UTW 100 ct	83017012203	\$0.4626
Embecta Medical II	Nano™ 2nd Gen Pen Needles 4 mm 32 G 5 bevel UTW 100 ct	83017055003	\$0.4626
Embecta Medical II	Ultra-Fine™ Pen Needles 6 mm 32 G 3 bevel TW 100 ct	83017074903	\$0.4318
Embecta Medical II	Ultra-Fine™ Pen Needles 12.7 mm 29 G 3 bevel TW 100 ct	83017820303	\$0.4494
HTL-Strefa, Inc.	Droplet Pen Needles 32 G x 4 mm	57273000209	\$0.3128
HTL-Strefa, Inc.	Droplet Pen Needles 32 G x 5 mm	57273000228	\$0.3128
HTL-Strefa, Inc.	Droplet Pen Needles 32 G x 6 mm	57273000227	\$0.3128
HTL-Strefa, Inc.	Droplet Pen Needles 32 G x 8 mm	57273000226	\$0.3128

Manufacturer	Product Label Name	Medi-Cal 11-digit Billing Number (NDC)	MAC per each
HTL-Strefa, Inc.	Droplet Pen Needles 31 G x 6 mm	57273000224	\$0.2861
HTL-Strefa, Inc.	Droplet Pen Needles 31 G x 5 mm	57273000225	\$0.2861
HTL-Strefa, Inc.	Droplet Pen Needles 31 G x 8 mm	57273000223	\$0.2861
HTL-Strefa, Inc.	Droplet Pen Needles 29 G x 12 mm	57273000221	\$0.2861

Contractors have guaranteed that Medi-Cal Rx providers may purchase, upon request, for dispensing to eligible Medi-Cal members, covered products at or below the Maximum Acquisition Cost (MAC). Providers can locate MAC price suppliers by calling the manufacturer phone numbers referenced in the *Lists* on the [Contract Drugs & Covered Products Lists](#) page on the [Medi-Cal Rx Web Portal](#).

Product addition or inclusion on the *List* does not guarantee supply or individual-specific coverage.

Medi-Cal members denied coverage of a requested Medi-Cal Rx product have the right to a State Hearing. A State Hearing may be requested by contacting the California Department of Social Services, State Hearings Division, at the following address:

[State Hearings](#)

P.O. Box 944243, MS 21-37
Sacramento, CA 94244-2430

Toll Free: 1-800-743-8525 or 1-855-795-0634
Fax: 1-833-281-0905

Medi-Cal members have the right and are encouraged to consult their primary care provider or prescriber to determine if an appropriate substitute product is available and covered by Medi-Cal Rx.

Contact Information

You can call the Medi-Cal Rx Customer Service Center (CSC) at 1-800-977-2273, which is available 24 hours a day, 7 days a week, 365 days per year.

For other questions, email Medi-Cal Rx Education & Outreach at MediCalRxEducationOutreach@primetherapeutics.com.