

## Pharmacy Formulary Updates for December 2018

To offer a pharmacy benefit that is clinically appropriate and cost effective, we constantly review how we cover prescription medications. Periodic adjustments are made to meet these goals. The changes below are reflected in our online drug list.

The following is a list of drugs that changed formulary status in December 2018:

Drug Name	Tufts Health Plan Commercial Formularies		
	Tufts Health Freedom Plan		
	Large Group 3-Tier Formulary	Large Group 4-Tier Formulary	Small Group/Individual 4-Tier (Exchange Formularies)
amphetamine sulfate (Evekeo)	NC;QL		
bupropion ER (Forfivo XL)	T2		
Forfivo XL	T3;STPA (no change)		NC
tadalafil 2.5, 10, and 20 mg tabs	T3;QL		
tadalafil 5 mg tabs	T3;PA;QL		
Cialis 5mg tabs	T3;PA;QL (no change)		NC;QL
testosterone 1.62% gel	T2		
Plenvu	T3 (May be covered at no copayment for members age 50-74)		
Clenpiq	T3 (May be covered at no copayment for members age 50-74)		
GaviLyte-C	T1 (May be covered at no copayment for members age 50-74)		
GaviLyte-G	T1 (May be covered at no copayment for members age 50-74)		
TriLyte	T1 (May be covered at no copayment for members age 50-74)		
GoLYTELY	T2 (May be covered at no copayment for members age 50-74)		
Ztlido patches	NC		
Zemdri	MB		
Tibsovo	T2;PA	T4;PA	
clobazam	T2;PA		
Onfi	NC		

**Key:**

<b>MM</b>	Managed Mail – must fill at mail order pharmacy	<b>SP</b>	Specialty Pharmacy
<b>NC</b>	Not covered	<b>ST<sup>PA</sup></b>	Step Therapy Prior Authorization
<b>PA</b>	Prior Authorization	<b>MB</b>	Medical Benefit
<b>QL</b>	Quantity Limitation	<b>SI</b>	Specialty Infusion