



2018 Formulary Change Notice

Effective April 1, 2018

Tufts Medicare Preferred HMO Individual

Tufts Health Plan Senior Care Options

The coverage listed below is effective for our Tufts Medicare Preferred HMO Individual and Tufts Health Plan Senior Care Options (SCO) plans. For changes affecting our Tufts Health Plan Medicare Preferred Employer Group, Tufts Health Plan Medicare Preferred PDP, and Tufts Health Unify, please reference the applicable plan's formulary.

Drug Name	Type of Change	Coverage	Notes
Cinvanti	Addition	T3; BvD	
Shingrix	Addition	T3	
Vabomere	Addition	T5	Part B

Key:

PA Prior Authorization

HI Home Infusion

BvD Part B versus Part D Determination