



2018 Formulary Change Notice

Effective August 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
Ciprofloxacin otic	Addition	T2	
Colesevelam	Addition	T3	
Intrarosa	Addition	T4	
Norvir powder	Addition	T3	
Osphena	Addition	T4	
Symdeko	Addition	T5;PA	
Symfi	Addition	T5	
Synjardy	Addition	T3	
Tasigna	Addition	T5;PA	

Key:

PA Prior Authorization