

## Pharmacy Formulary Updates for July 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. With the exception of new-to-market medications, the changes below are reflected in our online Preferred Drug List.

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

Drug Name	Tufts Health Public Plan Formulary
	Tufts Health Direct Formulary
phytonadione tablets	T2
Mephyton	NC
colesevelam 625 mg tablets	T2
Welchol 625 mg tablets	NC
Arnuity Ellipta 50 mcg inhaler	T3;QL
Esbriet	T3;SP;QL
Ofev	T3;QL
Promacta	T2;SP;QL
Nplate	MB
Gattex	T2;SP;QL
Dovonex cream	NC;QL
amphetamine-dextroamphetamine ER	T1;PA(25 and older);QL
Adderall XR	NC;QL
Adzenys XR-ODT	NC;QL
Adzenys suspension	NC;QL
methamphetamine	T1;PA(25 and older);QL
Desoxyn	NC;QL
dextroamphetamine sulfate ER	T1;PA(25 and older);QL
Dexedrine spansule	NC;QL
Dyanavel XR	T3;PA(25 and older);STPA;QL
Evekeo	NC;QL
Mydayis	NC;QL
Steglatro	NC
Giapreza	MB
Steglujan	NC
Segluromet	NC

<b>Osmolex ER</b>	NC
<b>Balcoltra</b>	T3
<b>Hemlibra</b>	T2;SP;PA
<b>Sublocade</b>	MB;PA

**Key:**

**MB:** Medical Benefit                    **QL:** Quantity Limitation  
**NC:** Not covered                        **SP:** Specialty Pharmacy - provided  
**NTM:** New-to-market                through CVS/specialty  
**PA:** Prior Authorization            **ST:** Step Therapy