

Pharmacy Formulary Updates for May 2020

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 Preferred Drug List.

The following is a list of drugs that changed formulary status May 2020:

Drug Name	Tufts Health Public Plans Formulary
	Tufts Health RITogether
Flonase Sensimist	Brand;PA
Vyondys 53	MB;PA
Oxbryta	Brand;PA
Adakveo	MB;PA
Ayvakit	Brand;PA;QL(1/day)
Tazverik	Brand;PA
Ruxience	MB;PA
Asceniv	MB/RX;PA
Caplyta (lumateperon tosylate)	Brand;PA;QL (1/day)
HIZENTRA INJ 2GM/10ML	MB/RX;PA
HIZENTRA INJ 1GM/5ML	MB/RX;PA
HIZENTRA SOL 20%	MB/RX;PA
Zinplava	MB
Tysabri	MB
Aliqopa	MB
Kynamro	Brand;QL (4 units/28 days)
Generic Proventil HFA	Generic;Covered
Generic Levalbuterol HFA	Generic;Covered
Prasugrel	Generic;Covered
Nitisinone 2 mg, 5 mg, 10 mg capsule	Generic;Covered
Aspirin/dipyridamole	Generic;Covered
Eszopiclone	Generic;Covered
Celecoxib	Generic;Covered;QL(2/day)
Diclofenac sodium 1%	Generic;Covered
Rizatriptan tablet	Generic;QL (9 tabs/30 days)

Rizatriptan oral dis tablet	Generic;QL (9 tabs/30 days)
Pregabalin	Generic;PA;QL (3/day)
Moxifloxacin 0.5%	Generic;Covered
Penicillamine	Generic;Covered

Key

MB: Medical Benefit

QL: Quantity Limitation

NC: Not covered

SP: Specialty Pharmacy - available

PA: Prior Authorization

through CVS/specialty

ST: Step Therapy

MB/RX: Drug can be dispensed through Medical Benefit or Prescription Benefit