

Pharmacy Formulary Updates for January 2021

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 January 2021:

Drug Name	Tufts Health Public Plan Formulary
	Tufts Health RITogether
Forteo	NC;QL
Teriparatide	Generic;PA;QL
Humalog 75/25	NC
Novolog 70/30	NC
Arnuity Ellipta	Brand
Asmanex	NC
Flovent	NC
Pulmicort	NC
Evzio	NC;QL
Viltepso	MB;PA
Upneeq	Brand;PA
Ibandronate	Generic;QL
Kesimpta	Brand
Reditrex	NC
Conjupri	NC
Qdolo	NC;QL
Impelko	NC
Fosfomycin tromethamine	Generic

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