



Pharmacy Formulary Updates for July 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. 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 July 2021:

Drug Name	Tufts Health Public Plan Formulary
	Tufts Health Together ACO - MA
Cabenuva XR	MB;PA
Bafiertam	\$3.65;PA;SP
Vumerity	\$3.65;PA;SP
Fotivda	NC
Pepaxto	MB
Verquvo	NC
Prolate	\$3.65;PA;QL
Elepsia XR	\$3.65;PA
Roszet	NC
Kesimpta	\$3.65;PA;QL;SP
Lupkynis	\$3.65;PA
Evkeeza	MB;PA

Key:

BP: Brand Preferred

MB: Medical Benefit

NC: Not covered

NTM: New-to-market

PA: Prior Authorization

QL: Quantity Limitation

SP: Specialty Pharmacy - provided through CVS/specialty

ST: Step Therapy

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