



Pharmacy Formulary Updates for June 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 June 2021:

Drug Name	Tufts Health Public Plan Formulary
	Tufts Health Together MCO - MA
Gemtesa	\$3.65;PA
Cosela	MB;PA
Bronchitol	\$3.65;PA;QL
Vesicare LS	\$3.65;PA
Cystaran	\$3.65
CystaDrops	\$3.65

Key

- BP:** Brand Preferred
- MB:** Medical Benefit
- NC:** Not covered
- NTM:** New-to-market
- PA:** Prior Authorization
- MB/RX:** Drug can be dispensed through Medical Benefit or Prescription Benefit
- QL:** Quantity Limitation
- SP:** Specialty Pharmacy - provided through CVS/specialty
- ST:** Step Therapy