

Pharmacy Formulary Updates for May 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 in May 2021:

Drug Name	Tufts Health Public Plan Formulary
	Tufts Health Direct Formulary
Samsca (brand)	NC; QL
levothyroxine capsules	Tier 2
loteprednol etabonate ophth gel 0.5%	Tier 2
droxidopa	Tier 2; PA
Margenza (margetuximab)	MB
Orladeyo (berotralstat)	Tier 2; PA; QL (1 unit/day)
Vocabria (cabotegravir)	Tier 2
Cabenuva (cabotegravir and rilpivirine)	MB
Klisyri (tirbanibulin)	NC
Winlevi (clascoterone)	Tier 3; PA
Mayzent starter pak (siponimod fumarate)	Tier 2; SP, QL (1 fill per lifetime)
Xtandi (enzalutamide)	Tier 2, PA, SP, QL; CM (40 mg: 4/day; 80 mg: 2/day)
Reltone (ursodiol)	NC
Thyquidity (levothyroxine sodium)	Tier 3
Sutab (sodium sulfate, magnesium sulfate, KCl)	Tier 3; ACA (may be covered at no copayment for members age 50 through 74)
imiquimod cream 3.75% packet	Tier 2; QL 1 box or 1 pump bottle/30 days
hydrocodone bitartrate tab er 24hr deter 100, 120mg	Tier 3; PA; QL 2/day
hydrocodone bitartrate tab er 24hr deter 20, 30, 40, 60, 80mg	Tier 3; QL 2/day
brinzolamide suspension 1%	Tier 2
icosapent ethyl 1 mg (generic)	NC
Intuniv	NC
guanfacine ER	Tier 1

Key:

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