

# List of Covered Drugs June 2022 Updates

Commonwealth Care Alliance reviews and makes changes to the Drug List, also known as the formulary. We may add or remove drugs on the Drug List during the year. Some changes may include:

- Change our rules or limits of a drug.
- Removing the brand name drug and adding the new generic drug.
- The Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List immediately.

In some of these instances, we will notify you of the Drug List changes at least 60 days before the date the change becomes effective. If you have questions, please call Commonwealth Care Alliance at 866-610-2273 (TTY 711), 8 a.m. – 8 p.m., 7 days a week from October 1st through March 31st. (April 1st through September 30th, Monday – Friday, 8 a.m. – 8 p.m. and Saturday and Sunday, 8 a.m. – 6 p.m.). Our comprehensive formulary can be found on our website at

<https://www.commonwealthcarealliance.org/ma>

## **Change Effective as of 06/01/2022:**

Drug	Senior Care Options	One Care	CCA Medicare Preferred & CCA Medicare Value
AZTREONAM 2000MG INJECTION	Formulary	Formulary	Formulary
24 (ETHINYL ESTRADIOL 0.02 MG / NORETHINDRONE ACETATE 1 MG ORAL CAPSULE) / 4 (FERROUS FUMARATE 75 MG ORAL CAPSULE)	Formulary	Formulary	Formulary
ZEGALOGUE 1 MG/ML AUTO-INJECTOR	Formulary	Formulary	Formulary
ZEGALOGUE PREFILLED SYRINGE	Formulary	Formulary	Formulary
GVOKE 5MG/ML INJECTION	Formulary	Formulary	Formulary
BETAINE 1000MG POWDER FOR ORAL SOLUTION	Formulary	Formulary	Formulary
LACOSAMIDE 50MG, 100MG, 150MG, 200MG	Formulary	Formulary	Formulary
VIMPAT 50MG, 100MG, 150MG, 200MG	NC	NC	NC
ANNOVERA	Formulary	Formulary	Formulary
NEXTSTELLIS 28 DAY	Formulary	Formulary	Formulary
BALCOLTRA 28 DAY	Formulary	Formulary	Formulary

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24 (DROSPIRENONE 3 MG / ETHINYL ESTRADIOL 0.02 MG / LEVOMEFOLATE CALCIUM 0.451 MG ORAL TABLET) / 4 (LEVOMEFOLATE CALCIUM 0.451 MG ORAL TABLET)} PACK	Formulary	Formulary	Formulary
GEMMILY 28 DAY	Formulary	Formulary	Formulary
FLUOXETINE 60MG ORAL TABLET	Formulary	Formulary	Formulary

<b>NC = Not Covered</b>		<b>generic = lowercase letters</b>		<b>BRAND = CAPITAL LETTERS</b>	
<b>FORMULARY</b>	Covered	<b>LD</b>	Limited Distribution	<b>ST</b>	Step Therapy
<b>OTC</b>	Over-the-Counter	<b>PA</b>	Prior Authorization	<b>ST_NSO</b>	ST New Starts Only
<b>QL</b>	Quantity Limit	<b>PA_NSO</b>	PA New Starts Only	<b>B/D</b>	Part B versus D determination
<b>NDS</b>	Limited to 30 day supply	<b>Tier</b>	Tier change	<b>N/A</b>	Not Applicable