

January 2020 Changes National Preferred Formulary

How to Use This Document

This document is intended to summarize updates to the Wellfleet Rx National Preferred Formulary since the last formulary print version from 10/1/2019. These updates include both positive changes to existing formulary statuses and updates for newly approved medications. For all other medications not listed below, refer to the January 2020 National Preferred Formulary for information on formulary status.

Positive Changes Effective 1/1/2020 for All Users		
Move to Preferred Status		
Asthma and COPD	BEVESPI (QL) PULMICORT FLEXHALER (QL) TRELEGY ELLIPTA (QL, ST) YUPELRI (QL)	
Behavioral Health	ARISTADA	
Cardiovascular Disease	VASCEPA (QL, ST)	
Diabetes	INVOKANA (QL, ST) INVOKAMET (QL, ST) INVOKAMET XR (QL, ST) SEGLUROMET (QL, ST) STEGLATRO (QL, ST)	
Endocrine	GONAL-F ORILISSA (PA)	
Gastrointestinal Disorders	TRULANCE (QL) UCERIS FOAM ZENPEP	
Hematological Disorders	ELOCTATE	
Hepatitis C	VOSEVI (PA)	
Inflammatory Disease	EUFLEXXA (PA) MONOVISC (PA) ORTHOVISC (PA)	
Miscellaneous Agents	PROLASTIN C	
Neoplastic Disease	CABOMETYX (PA) LORBRENA (PA)	
Neurological Disease	AUSTEDO (PA) BETASERON (PA) COPAXONE (PA)	

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Other Drugs	NITYR (PA)
Pain Management	AIMOVIG (PA) AJOVY (PA) EMGALITY (PA) SUBOXONE
Seizure Disorder	EPIDIOLEX (PA)

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