

How to Use This Document

This document is intended to summarize changes to the Wellfleet Rx Student Formulary that will go into effect as of 1/1/2021*. For all other medications not listed below, refer to the July 2020 Student Formulary for information on formulary status.

**For Texas and Louisiana plans: State laws in Texas and Louisiana require your plan to cover your medications at your current benefit level until your plan renews. This means that if your medication is taken off the drug list, is moved to a higher cost-share tier or needs approval, these changes will not go into effect until your renewal date.*

Positive Changes
Remove Quantity Limit

Cardiovascular Disease	NEXLETOL (MAINTAIN PA)
Eye – General Disorders	ZIOPTAN (ADD ST)
Infectious Disease	BAXDELA (MAINTAIN PA)
Neoplastic Disease	KANJINTI (MAINTAIN PA) MVASI (MAINTAIN PA) RUXIENCE (MAINTAIN PA) TRAZIMERA (MAINTAIN PA) ZIRABEV (MAINTAIN PA)
Other Drugs	ORFADIN (MAINTAIN PA)

Remove Specialty Indicator

ABACAVIR	ABACAVIR-LAMIVUDINE	ACITRETIN	APTIVUS
ATAZANAVIR SULFATE	ATRIPLA	BIKTARVY	CIMDUO
COMBIVIR	COMPLERA	DESCOVY	EDURANT
EFAVIRENZ	ETOPOPHOS	ETOPOSIDE	EUFLEXXA
FOSAMPRENAVIR CALCIUM	FUZEON	GENVOYA	HEPAGAM B
HYALGAN	HYPERHEP B S-D	HYPERRHO S-D	HYQVIA HY COMPONENT
INTELENCE	INVIRASE	ISENTRESS	ISENTRESS HD
JETREA	JULUCA	KALETRA	LEXIVA
LOPINAVIR-RITONAVIR	MICRHOGAM ULTRA-FILTERED PLUS	MODERIBA	NORVIA
ODEFSEY	OTREXUP	PREVYMIS	PREZCOBIX
PREZISTA	RASUVO	REBETOL	RETISERT
REVATIO	REYATAZ	RIASTAP	RIBASPHERE
RIBASPHERE RIBAPAK	RIBAVIRIN	RIDAURA	RILUZOLE

RITONAVIR	SELZENTRY	STIMATE	SUPARTZ
SYMTUZA	SYNVISC	SYNVISC-ONE	TEMIXYS
TENOFOVIR DISOPROXIL FUMARATE	THERACYS	THROMBATE III	TIVICAY
TRIUMEQ	TRIZIVIR	TROGARZO	TRUVADA
VINCASAR PFS	VIRACEPT	VIRAZOLE	VIREAD

Negative Changes

Move to Excluded

Dermatology

CLOCORTOLONE

Add Specialty Indicator

ABILIFY MAINTENA	ADASUVA	ADCIRCA	AGGRASTAT
ALIQOPA	ALKERAN	ANAGRELIDE HCL	ANDEXXA
ARGATROBAN	ARGATROBAN-0.9% NAACL	ARGATROBAN-SODIUM CHLORIDE	ARISTADA
ASTAGRAF XL	ATGAM	ATRYN	AVONEX
AVONEX PEN	AZEDRA DOSIMETRIC	AZEDRA THERAPEUTIC	BELEODAQ
BICNU	BIVALIRUDIN	BIVALIRUDIN-0.9% NAACL	CARBOPLATIN
CERDELGA	CETROTIDE	COSMEGEN	CUPRIMINE
CYCLOSPORINE MODIFIED	CYTARABINE	DEFLUX	DEPEN
DOCEFREZ	DOCETAXEL	D-PENAMINE	EMCYT
EMPLICITI	ENOXAPARIN SODIUM	ENVARBUS XR	EPIRUBICIN HCL
EPTIFIBATIDE	FARYDAK	FLOXURIDINE	FLUDARABINE PHOSPHATE
FONDAPARINUX SODIUM	FRAGMIN	GAMMAPLEX	GEMCITABINE HCL
GENGRAF	GILENYA	GLIADEL	HERCEPTIN
IDARUBICIN HCL	IFOSFAMIDE	IFOSFAMIDE-MESNA	ILUMYA
IMLYGIC	INVEGA TRINZA	IRINOTECAN HCL	IXINITY
KALYDECO	KCENTRA	KEYTRUDA	LEUKERAN
LEUPROLIDE ACETATE	LOVENOX	MARQIBO	MENOPUR
MITOXANTRONE HCL	MUSTARGEN	MYCOPHENOLATE MOFETIL	MYCOPHENOLIC ACID
MYFORTIC	NEORAL	NILUTAMIDE	NULOJIX

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OBIZUR	ODOMZO	ONIVYDE	PANHEMATIN
PANRETIN	PANZYGA	PHOTOFRIN	PRAXBIND
PRIVIGEN	PROBUPHINE	PROGRAF	PROVENGE
RAPAMUNE	REBINYN	REOPRO	RISPERDAL CONSTA
RIXUBIS	SANDIMMUNE	SENSIPAR	SIMULECT
SIROLIMUS	SYNAREL	TABLOID	TACROLIMUS
TARGRETIN	TECENTRIQ	TEMODAR	TENIPOSIDE
THYMOGLOBULIN	TREANDA	TRELSTAR	UNITUXIN
VEMLIDY	VINORELBINE TARTRATE	VIVITROL	WILATE
WINRHO SDF	ZEVALIN	ZOLGENSMA	ZORBTIVE
ZORTRESS	ZYKADIA	ZYPREXA RELPREVV	

High Cost Generic Updates

To help students and their providers make informed decisions and drive them towards the lowest cost preferred generic option, some high cost generics are placed in a higher formulary tier and be associated with higher copays. Each high cost generic and the corresponding lower cost generic alternative is reviewed for clinical comparativeness to ensure similar efficacy, clinical indication, and side effect profiles. Listed below are updates to the High Cost Generic Formulary Changes.

Additions to High Cost Generics List

Dermatology	CLINDAMYCIN 1% FOAM (CLINDAMYCIN 1% GEL, SOLUTION) TRETINOIN 0.025% GEL (TRETINOIN CREAM)
Mental Health	BUPROPION XL 450 MG (150 MG x 3 TABS)

Deletions from High Cost Generics List

Dermatology	FLUOCINONIDE NYSTATIN-TRIAMCINOLONE CREAM, OINTMENT
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Zero Cost Generic Updates

In addition to the \$0 medications available under ACA preventive requirements, the Wellfleet Rx Student Formulary offers 40+ antibiotic, dermatology, and behavioral health medications at no copay.*

Additions to \$0 Generics List

Opioid Overdose Reversal Agent	NALOXONE (LIMITED TO ONE \$0 FILL/YEAR) NARCAN (LIMITED TO ONE \$0 FILL/YEAR)
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*Zero Cost Generics program may vary by school or may not be available to certain schools. See applicable Student Formulary for more details. If there is no “Zero Cost Generics” section included in the Student Formulary applicable to your plan, this program is unavailable.