

**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 1/1/2022*. For all other medications not listed below, refer to the January 2022 Student Formulary for information on formulary status.

**For Texas plans: State law in Texas 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
Move to Preferred Status (Move to Tier 2)

ANTIMIGRAINE PREPARATIONS	NURTEC UBRELVY
ADRENERGICS, AROMATIC, NON-CATECHOLAMINE	MYDAYIS
AGENTS TO TREAT MULTIPLE SCLEROSIS	VUMERITY
CONTRACEPTIVES, ORAL	LO LOESTRIN FE
INTESTINAL MOTILITY STIMULANTS	MOTTEGRITY
OTIC PREPARATIONS, ANTI-INFLAMMATORY-ANTIBIOTICS	CIPROFLOX-FLUOCINLN 0.3-0.025%
PLATELET AGGREGATION INHIBITORS	ASPIRIN-OMEPRAZOL DR
TOPICAL ANTIFUNGALS	BUTENAFINE HCL 1% CREAM
VITAMIN B PREPARATIONS	FABB TABLET

Move to Non-Preferred Status (Move to Tier 3 from Excluded)

ANTIBIOTICS, EYE ANTIBIOTIC AND GLUCOCORTICOID COMBINATIONS	PRED-G 1% EYE DROPS
ANTIBIOTICS, TOPICAL ANTIBIOTICS	XEPI 1% CREAM
ANTIFUNGALS, TOPICAL ANTIFUNGALS	LULICONAZOLE 1% CREAM
ANTIHISTAMINES, EYE ANTIHISTAMINES	LASTACAFT 0.25% EYE DROPS

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ANTIHYPERGLYCEMICS, INSULINS	APIDRA
ANTIVIRALS, HEP C	SOVALDI VIEKIRA
GASTROINTESTINAL, PROTON-PUMP INHIBITORS	CVS OMEPRAZOLE-BICARB 20-1,100

Remove Step Therapy

INSULINS	BASAGLAR
ADRENERGICS, AROMATIC, NON-CATECHOLAMINE	MYDAYIS
ADRENERGICS, AROMATIC, NON-CATECHOLAMINE	VYVANSE
INTESTINAL MOTILITY STIMULANTS	MOTEGRITY

Negative Changes

Add Quantity Limit

ANTIMIGRAINE PREPARATIONS	NURTEC
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Move to Excluded (Covered Preferred Product in Parentheses)

ANALGESICS / ANALGESIC, NON-SALICYLATE, BARBITURATE, XANTHINE COMB	FIORICET (BUTALB/ACETAMINOPHEN/CAFFEINE) PHRENILIN (BUTALB/ACETAMINOPHEN/CAFFEINE)
ANALGESICS / ANTIMIGRAINE PREPARATIONS	REYVOW (UBRELVY, NURTEC)
ANALGESICS / OPIOID ANALGESIC AND NON-SALICYLATE ANALGESICS	VICODIN (HYDROCODONE/ACETAMINOPHEN)
ANALGESICS / OPIOID ANALGESICS	BELBUCA (BUPRENORPHINE HCL) HYSINGLA ER (HYDROCODONE BITARTRATE ER)
ANALGESICS / LOCAL ANESTHETICS	XYLOCAINE (LIDOCAINE HCL/EPINEPHRINE BIT)
ANTIARTHRITICS / COLCHICINE	COLCRYS (COLCHICINE)
ANTIASTHMATICS	PERFORMIST (FORMOTEROL FUMARATE)
ANTIBIOTICS / ANTIBIOTIC, ANTIBACTERIAL, MISC.	URETRON (PHOSPHASAL TABLET) UTIRA-C (PHOSPHASAL TABLET)
ANTIBIOTICS / TETRACYCLINE ANTIBIOTICS	ORACEA (DOXYCYCLINE MONO 100MG) SOLOXIDE (DOXYCYCLINE HYCLATE)

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ANTI-HISTAMINES / EYE ANTI-HISTAMINES	BEPREVE (BEPOTASTINE BESILATE)
ANTI-HYPERGLYCEMICS / ANTI-HYPERGLYCEMICS / MIMETIC (GLP-1 RECEPTOR AGONIST)	BYETTA (TRULICITY, OZEMPIC) BYDUREON (TRULICITY, OZEMPIC)
ANTI-HYPERGLYCEMICS / INSULINS	INSULIN LISPRO (HUMALOG)
ANTI-INFECTIVES/MISCELLANEOUS / ANTHELMINTICS	ALBENZA (ALBENDAZOLE)
AUTONOMIC DRUGS / ANAPHYLAXIS THERAPY AGENTS	EPIPEN (EPINEPHRINE)
ANTIVIRALS / ANTIVIRALS, HIV-SPECIFIC	INTELENCE (ETRAVIRINE) EMTRIVA (EMTRICITABINE) KALETRA (LOPINAVIR/RITONAVIR)
BLOOD / ANTIFIBRINOLYTIC AGENTS	AMICAR (AMINOCAPROIC ACID)
CARDIOVASCULAR / ANTI-HYPERLIPIDEMIC-HMGCOA REDUCTASE INHIBITORS (STATINS)	LIVALO (ATORVASTATIN)
CNS DRUGS / ANTICONVULSANTS	LAMICTAL (LAMOTRIGINE) BANZEL (RUFINAMIDE)
COUGH/COLD PREPARATIONS / OPIOID ANTI-TUSSIVE-ANTICHOLINERGIC COMBINATIONS	TUSSIGON (HYDROCODONE BIT/HOMATROP ME-BR)
DIAGNOSTIC / BLOOD SUGAR DIAGNOSTICS	CONTOUR (ONETOUGH) FREESTYLE (ONETOUGH) PRECISION (ONETOUGH)
EENT PREPS / EYE ANTI-INFLAMMATORY AGENTS	LOTEMAX (LOTEPREDNOL ETABONATE)
EENT PREPS / EYE LOCAL ANESTHETICS	FLUROX (BENOXINATE HCL/FLUORESCEIN SOD)
EENT PREPS / MIOTICS AND OTHER INTRAOCULAR PRESSURE REDUCERS	AZOPT (BRINZOLAMIDE)
EENT PREPS / NASAL ANTI-HISTAMINE AND ANTI-INFLAM. STEROID COMB.	DYMISTA (AZELASTINE/FLUTICASONE)
GASTROINTESTINAL / IRRITABLE BOWEL SYND. AGENT, 5-HT4 PARTIAL AGONIST	ZELNORM (LINZESS, TRULANCE, MOTEGRITY)
GASTROINTESTINAL / LIPOTROPICS	VASCEPA (ICOSAPENT ETHYL)
HORMONES / GLUCOCORTICOIDS	VERIPRED (PREDNISOLONE SODIUM PHOSPHATE)
MUSCLE RELAXANTS / SKELETAL MUSCLE RELAXANTS	ORPHENGESIC (ORPHENADRINE/ASPIRIN/CAFFEINE)

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PSYCHOTHERAPEUTIC DRUGS / ANTIPSYCHOTICS, ATYP, D2 PARTIAL AGONIST/5HT MIXED	REXULTI (ARIPIRAZOLE)
SKIN PREPS / ACNE AGENTS,SYSTEMIC	ISOTRETINOIN (ISOTRETINOIN AMNEAL PHARMA)
SKIN PREPS / TOPICAL ANTI- INFLAMMATORY STEROIDAL	ALA-SCALP (HYDROCORTISONE LOTION)
SKIN PREPS / TOPICAL VIT D ANALOG/ANTI-INFLAMMATORY STEROID	TACLONEX (CALCIPOTRIENE/BETAMETHASONE)
SKIN PREPS / VITAMIN A DERIVATIVES	AVITA (TRETINOIN)
UNCLASSIFIED DRUG PRODUCTS / KIDNEY STONE AGENTS	THIOLA 100 MG (TIOPRONIN)
UNCLASSIFIED DRUG PRODUCTS / OPIOID WITHDRAWAL THERAPY AGENTS, OPIOID-TYPE	SUBOXONE (BUPRENORPHINE HCL/NALOXONE HCL)

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 (Move to Tier 2)

ANTIARTHRITICS / NSAIDS, CYCLOOXYGENASE INHIBITOR - TYPE ANALGESICS	FENOPROFEN 600 MG TABLET
ANTIHISTAMINES / ANTIHISTAMINES - 1ST GENERATION	DEXCHLORPHENIRAMINE 2 MG/5 ML
CARDIAC DRUGS / VASODILATORS,CORONARY	ISOSORBIDE DINITRATE 40 MG TAB
CARDIOVASCULAR / ANTIHYPERLIPIDEMIC- HMGCOA REDUCTASE INHIB(STATINS)	FLUVASTATIN ER 80 MG TABLET FLUVASTATIN SODIUM 20 MG CAP FLUVASTATIN SODIUM 40 MG CAP
CARDIOVASCULAR / LIPOTROPICS	FENOFIBRATE 120 MG TABLET FENOFIBRATE 40 MG TABLET FENOFIBRIC ACID 105 MG TABLET

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DERMATOLOGY – ANTIINFECTIVE / TOPICAL SULFONAMIDES	SOD SULFACET-SULFUR 10-4% PAD
GASTROINTESTINAL / LAXATIVES AND CATHARTICS	LACTULOSE 10 GM PACKET
GASTROINTESTINAL / PROTON-PUMP INHIBITORS	PANTOPRAZOLE SOD DR 40 MG TAB
SKIN PREPS / ACNE AGENTS,SYSTEMIC	CLARAVIS

Zero Cost Drug List 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 List

ANTIDEPRESSANTS	FLUOXETINE
ANTIDEPRESSANTS	CITALOPRAM 20 MG TABLET
ANTIDEPRESSANTS	CITALOPRAM 40 MG TABLET
ANTIDEPRESSANTS	SERTRALINE
BIPOLAR/SCHIZOPHRENIA	OLANZAPINE 20 MG TABLET
BIPOLAR/SCHIZOPHRENIA	QUETIAPINE FUMARATE 300 MG TAB
BIPOLAR/SCHIZOPHRENIA	LITHIUM CARBONATE

Removals from List

ANTIDEPRESSANTS	PAROXETINE
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*Zero Cost Drugs 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 Drugs” section included in the Student Formulary applicable to your plan, this program is unavailable.