



Drugs moving to a higher tier for 2025

The following changes are effective for fill dates on or after **Jan. 1, 2025** for the following products:
Harvard Pilgrim Health Care Commercial, Tufts Health Plan Commercial, and Tufts Health Direct.

Drug name	Value	Premium	Core	Direct
ACCUTANE CAP 10MG, 20 mg, 30 mg, 40 mg		x		
ACTIMMUNE INJ 2MU/0.5	x		x	x
ALENDRONATE SOL 70/75ML	x	x	x	x
AMLOD/VALSAR TAB /HCTZ	x	x	x	x
ANAGRELIDE CAP 0.5MG, 1mg	x	x	x	x
BENZNIDAZOLE TAB 100MG, 12.5 mg	x	x	x	x
BIKTARVY TAB	x	x		x
BOSENTAN TAB 125MG, 62.5 mg	x		x	x
BROMFENAC SOL 0.09% OP	x	x	x	x
CALCIPOTRIEN CRE, OIN, SOL 0.005%		x		
CILOXAN OIN 0.3% OP		x		
CIMDUO TAB 300-300	x			x
CIPRO/DEXA SUS 0.3-0.1%	x	x	x	x
CLARAVIS CAP		x		
COMBIPATCH DIS	x	x	x	x
COMPLERA TAB	x			
CRINONE 4% GEL	x			x
CRINONE GEL 8% VAG	x			x
CROMOLYN SOD NEB 20MG/2ML	x	x	x	x
DEFERASIROX TAB 180MG, 360 mg, 90 mg	x		x	x
DESCOVY TAB 120/15MG, 200/25MG	x	x		x
DEXTROAMPHET SOL 5MG/5ML	x	x	x	x
DIAZOXIDE SUS 50MG/ML	x	x	x	x
DIHYDROERGOT INJ 1MG/ML	x	x	x	
DIHYDROERGOT SPR 4MG/ML		x		
DISOPYRAMIDE CAP 100MG, 150 mg	x	x	x	x
DOXYCYCL HYC TAB 100MG DR, 150 mg, 75 mg		x		
EDURANT TAB 25MG	x			
EMTRIVA SOL 10MG/ML	x			

Drug name	Value	Premium	Core	Direct
EPIVIR HBV SOL 5MG/ML	x	x	x	x
ESTRADIOL GEL 1.25MG			x	
EVOTAZ TAB 300-150		x		
FENOFIBRATE TAB 120MG, 40 MG	x	x	x	x
FENOFIBRIC TAB 105MG, 35 MG	x	x	x	x
FENTANYL DIS 37.5MCG, 62.5 MCG, 87.5 MCG	x	x	x	x
FENTANYL OT LOZ 200 MCG, 400 MCG, 600 MCG, 800 MCG, 1200MCG, 1600 MCG		x		
FLUVOXAMINE CAP 100MG ER, 150MG ER	x	x	x	x
FONDAPARINUX INJ 2.5/0.5ML, 5/0.4ML, 7.5/0.6ML, 10/0.8ML		x		
FRAGMIN INJ 15000UNT		x		
FROVATRIPTAN TAB 2.5MG	x	x	x	x
FUZEON INJ 90MG		x		
GENVOYA TAB	x	x		x
HYDROCORT ENE 100MG	x	x	x	x
HYDROMORPHON TAB 8MG ER, 12MG ER, 16 MG ER, 32 MG ER	x	x	x	x
ICATIBANT INJ 30MG/3ML	x			x
INTELENCE TAB 25MG		x		
ISENTRESS CHW 25MG	x			x
ISENTRESS HD TAB 600MG	x			x
ISENTRESS POW 100MG	x			x
ISENTRESS TAB 400MG	x			x
ISOTRETINOIN CAP 25MG, 35 MG		x		
JULUCA TAB 50-25MG	x			x
KALYDECO TAB 150MG		x		
LEVALBUTEROL AER 45/ACT	x	x	x	x
LEXIVA SUS 50MG/ML	x	x		
METFORMIN SOL 500/5ML	x	x	x	x

Value	Premium	Core	Direct

Drugs moving to a higher tier for 2025 (cont.)

Drug name	Value	Premium	Core	Direct	Drug name	Value	Premium	Core	Direct
METHYLPHENID CAP 60MG LA	x	x	x	x	SUMATRIPTAN INJ 4MG/0.5	x	x	x	x
MUSE SUP 250MCG, 500 MCG,1000MCG	x	x	x	x	SUMATRIPTAN INJ 6MG/.5ML	x	x	x	x
MYORISAN CAP		x			SUMATRIPTAN INJ 6MG/0.5	x	x	x	x
NAPROXEN SOD TAB 375MG CR, 500MG ER		x			SUNLENCA TAB 300MG	x			
NAPROXEN SUS 125/5ML	x	x	x	x	SYMTUZA TAB		x		
NORVIR POW 100MG	x	x			SYNAREL SOL 2MG/ML	x	x	x	x
NORVIR SOL 80MG/ML	x	x			TESTOSTERONE GEL 10MG/ACT	x	x	x	x
OLM MED/AMLO TAB /HCTZ	x	x	x		THEO-24 CAP 100MG CR, 200MG CR, 300MG, CR	x	x	x	x
PALIPERIDONE TAB ER 1.5MG, 3MG, 6MG, 9MG	x	x	x	x	THEO-24 CAP 400MG ER	x	x	x	x
PHENOXYBENZA CAP 10MG	x	x	x	x	TOBRADEX OIN 0.3-0.1%	x	x	x	
PHENYLBUTYRA POW SODIUM	x	x	x	x	TOBREX OIN 0.3% OP	x	x	x	x
PIRFENIDONE CAP 267MG	x			x	TOLVAPTAN TAB 30MG	x	x	x	
PIRFENIDONE TAB 267MG, 801 MG	x			x	TRANYLCYPROM TAB 10MG	x	x	x	x
PREZCOBIX TAB 800-150		x			TRETINOIN GEL 0.04%, 0.1%	x	x	x	x
PREZISTA SUS 100MG/ML	x	x	x	x	TRIUMEQ PD TAB	x		x	
PREZISTA TAB 75MG, 150MG	x	x	x	x	TRIUMEQ TAB	x			
QUINIDINE GL TAB 324MG ER	x	x	x	x	VARDENAFIL TAB 2.5MG, 5MG, 10MG, 20MG	x	x	x	x
REYATAZ POW 50MG	x	x	x	x	VENLAFAKINE TAB 225MG ER		x		
SANCUSO DIS 3.1MG	x			x	VIGABATRIN PAK 500MG	x	x	x	
SAPROPTERIN POW 100MG, 500MG	x	x	x		VIGABATRIN TAB 500MG	x	x	x	
SAPROPTERIN TAB 100MG	x	x	x		VIGADRONE POW 500MG	x	x	x	x
SAVELLA MIS TITR PAK	x			x	VIGADRONE TAB 500MG	x	x	x	x
SAVELLA TAB 12.5MG, 25MG, 50MG, 100MG	x			x	VIRACEPT TAB 250MG, 625MG	x	x	x	x
SELZENTRY SOL 20MG/ML	x	x	x	x	VIREAD POW 40MG/GM	x	x	x	x
SELZENTRY TAB 25MG, 75MG	x	x	x	x	VIREAD TAB 150MG, 200MG, 250MG	x	x	x	x
SODIUM PHENY TAB 500MG	x	x	x	x	ZENATANE CAP		x		
STRIBILD TAB	x	x	x	x	ZOLMITRIPTAN SPR 5MG	x	x		x