

Did You Know...

The Duke Health Plans including Duke Basic, Duke Select, and Duke BCBS plans (Duke Care and Duke Options) utilize the Express Scripts National Preferred Formulary to determine medication coverage. This formulary does not apply to those who are ≥65 years of age and covered by the Duke retiree plan. Beginning July 1, 2022 several changes went into effect regarding drug coverage.

The medications below were excluded from the formulary and thus will no longer be covered. Each has covered alternatives within their respective drug class.

Each of the multi-source branded products indicated with * have generic formulations available which **WILL** be covered. Other product covered alternatives can be found on the full exclusion list (attached).

SINGLE-SOURCE BRAND EXCLUSIONS		
ABSORICA LD	ANTARA	BONJESTA
BUPROPION XL 450MG	CAROSPIR	ERTACZO
FABIOR	FORFIVO XL	HALOBETASOL 0.05% FOAM
HEMANGEOL	IMPOYZ	INDOCIN
LEXETTE	NORITATE	ORACEA
QBREXZA	SERNIVO	TAZORAC GEL & 0.05% CREAM
ULTRAVATE	VEREGEN	XERESE
MULTI-SOURCE BRANDS* (the generic version will be covered)		
AFINITOR* & AFINITOR DISPERZ*	DUREZOL*	

For a full list of all the excluded medications, please refer to the handout attached. These formulary changes will affect <0.1% of those covered by the Duke plan.

For any patient who is unable to use one of the alternative medications due to a clinical reason, a clinical exception process is in place. A provider or their staff may call 1-800-753-2851, provide the clinical rationale, and request coverage. The rationale will be reviewed by Express Scripts and a coverage determination will be made accordingly.