

PROVIDER QUICK POINTS

PROVIDER INFORMATION



February 10, 2021

Commercial Pharmacy Benefit Exclusion for Emtricitabine-Tenofovir Disoproxil Fumarate Tablet 100-150 mg, 133-200 mg, and 167-250 mg

Effective upon launch of the medication, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will not cover emtricitabine-tenofovir disoproxil fumarate tablet 100-150 mg, 133-200 mg, and 167-250 mg. Members must use a medication alternative that is covered under the pharmacy benefit plan or pay full price for use of the medication. A summary of the excluded medications and preferred formulary alternatives can be found below.

Excluded Medications	Preferred Formulary Alternatives
emtricitabine-tenofovir disoproxil fumarate tablet 100-150 mg	Truvada [®] tablet 100-150 mg
emtricitabine-tenofovir disoproxil fumarate tablet 133-200 mg	Truvada [®] tablet 133-200 mg
emtricitabine-tenofovir disoproxil fumarate tablet 167-250 mg	Truvada [®] tablet 167-250 mg

Products Impacted

This exclusion applies to commercial lines of business.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.