



2022 Formulary Change Notice

Effective: August 1, 2022

CarePartners of Connecticut

The coverage listed below is effective for CarePartners of Connecticut plans.

Drug name	Type of Change	Coverage	Notes
pirfenidone	Addition	T5; PA; QL	Generic Esbriet® 267mg: QL (270/30) 801mg: QL (90/30)
Vonjo™	Addition	T5; PA	

Key:

PA Prior Authorization

QL Quantity Limit