



2023 Formulary Change Notice

Effective: March 1, 2023

CarePartners of Connecticut

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

Drug name	Type of Change	Coverage	Notes
estradiol topical gel	Addition	T3	Generic Divigel®
roflumilast tablet	Addition	T3	Generic Daliresp®

Key:

PA Prior Authorization

QL Quantity Limit