MedStar Family Choice
DISTRICT OF COLUMBIA

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MEDSTAR FAMILY CHOICE DISTRICT OF COLUMBIA FORMULARY UPDATES
May 2025 Pharmacy and Therapeutics Committee Meetings

MedStar Family Choice District of Columbia (MFC-DC) Pharmacy and Therapeutics Committee meets quarterly. During the May 2025 meeting, the formulary changes below were made for DC Healthcare Alliance. Listed medications are generic. **Please email feedback or requests for formulary additions or changes to: MFC-FormularyFeedback@MedStar.net.**

CHANGES BELOW WILL BECOME EFFECTIVE ON OR AROUND June 1, 2025

Managed Drug Limits:
Limited the number of fills from four (4) to one (1) For HIV Antiretroviral medications before guided toward the ADAP program:
Dolutegravir
Raltegravir
Darunavir
Ritonavir
Emtricitabine
Lamivudine
Zidovudine
Tenofovir Disoproxil Fumarate
Lamivudine-Zidovudine
Lopinavir-Ritonavir

For ADAP program information, please contact the DC ADAP Hotline at (202)671-4815, or Ramsell PBM Customer Service at (888)311-7632.

*Please see the Prior Authorization and Step Therapy Table for clinical criteria. **The table is updated regularly.** Please use the most current version found on the MFC-DC Providers page: MedStarFamilyChoiceDC.com/providers/pharmacy