![Neighborhood Health Plan of Rhode Island logo]

September 2020 Updates

The following changes to the Neighborhood Exchange 6Tier Formulary were recently approved by the Pharmacy and Therapeutics (P&T) Committee or a recent generic became available for a formulary medication. All changes to the formulary are effective immediately unless otherwise noted.

Drug Name	Benefit	Description of Coding Change
ABRAXANE	Medical Benefit	Auth Required
ACTIMMUNE	Medical Benefit	Diagnosis Driven Auth Required
ADCETRIS	Medical Benefit	Auth Required
ADRIAMYCIN	Medical Benefit	Auth Required
ADRUCIL	Medical Benefit	Auth Required
AFINITOR	Medical Benefit	Diagnosis Driven Auth Required
AKYNZEO (INJECTION)	Medical Benefit	Diagnosis Driven Auth Required
AKYNZEO (ORAL)	Medical Benefit	Diagnosis Driven Auth Required
ALIMTA	Medical Benefit	Auth Required
ALIQOPA	Medical Benefit	Auth Required
ALKERAN	Medical Benefit	Auth Required
ALOXI	Medical Benefit	Diagnosis Driven Auth Required
AREDIA	Medical Benefit	Diagnosis Driven Auth Required
ARRANON	Medical Benefit	Auth Required
ARZERRA	Medical Benefit	Auth Required
ASPARLAS	Medical Benefit	Auth Required
ATGAM	Medical Benefit	Diagnosis Driven Auth Required
BELEODAQ	Medical Benefit	Auth Required
BELRAPZO	Medical Benefit	Auth Required
BENDEKA	Medical Benefit	Auth Required
BESPONSA	Medical Benefit	Auth Required
BICNU	Medical Benefit	Auth Required
BLENOXANE	Medical Benefit	Auth Required
BLINCYTO	Medical Benefit	Auth Required
BORTEZOMIB	Medical Benefit	Auth Required
BUSULFEX	Medical Benefit	Auth Required
CAMPTOSAR	Medical Benefit	Auth Required
CINVANTI	Medical Benefit	Diagnosis Driven Auth Required
CLOLAR	Medical Benefit	Auth Required
COSMEGEN	Medical Benefit	Auth Required
CYRAMZA	Medical Benefit	Auth Required
CYTOSAR-U	Medical Benefit	Auth Required
CYTOXAN	Medical Benefit	Diagnosis Driven Auth Required
DACOGEN	Medical Benefit	Auth Required

DARZALEX	Medical Benefit	Auth Required
DAUNORUBICIN	Medical Benefit	Auth Required
DEPOCYT	Medical Benefit	Auth Required
DESFERAL	Medical Benefit	Diagnosis Driven Auth Required
DOXIL	Medical Benefit	Auth Required
DRONABINOL ORAL	Medical Benefit	Diagnosis Driven Auth Required
DTIC-DOME	Medical Benefit	Auth Required
ELIGARD	Medical Benefit	Diagnosis Driven Auth Required
ELITEK	Medical Benefit	Auth Required
ELLENCE	Medical Benefit	Auth Required
ELOXATIN	Medical Benefit	Auth Required
ELZONRIS	Medical Benefit	Auth Required
EMEND	Medical Benefit	Diagnosis Driven Auth Required
EMEND TRIPAK 125-80 MG CAP	Medical Benefit	Diagnosis Driven Auth Required
EMPLICITI	Medical Benefit	Auth Required
ERBITUX	Medical Benefit	Auth Required
ETHYOL	Medical Benefit	Auth Required
EVOMELA	Medical Benefit	Auth Required
FASLODEX	Medical Benefit	Auth Required
FIRMAGON	Medical Benefit	Auth Required
FLUDARA	Medical Benefit	Auth Required
FOLOTYN	Medical Benefit	Auth Required
FUDR	Medical Benefit	Auth Required
FULSILEV	Medical Benefit	Auth Required
GAMASTAN S/D	Medical Benefit	Diagnosis Driven Auth Required
GAZYVA	Medical Benefit	Auth Required
GEMZAR	Medical Benefit	Auth Required
HALAVEN	Medical Benefit	Auth Required
HERZUMA	Medical Benefit	Auth Required
HYCAMTIN	Medical Benefit	Auth Required
HYPERRHO/RHOGAM	Medical Benefit	Diagnosis Driven Auth Required
IDAMYCIN	Medical Benefit	Auth Required
IFEX	Medical Benefit	Auth Required
IMLYGIC	Medical Benefit	Auth Required
Inj crizanlizumab-tmca 5mg	Medical Benefit	Auth Required
Inj enfort vedo-ejfv 0.25mg	Medical Benefit	Auth Required
Inj fam-trastu deru-nxki 1mg	Medical Benefit	Auth Required
Inj luspatercept-aamt 0.25mg	Medical Benefit	Auth Required
Inj pegfilgrastim-bmez 0.5mg	Medical Benefit	Auth Required

Inj ruxience, 10 mg	Medical Benefit	Auth Required
Inj. infugem, 100 mg	Medical Benefit	Auth Required
Inj. xembify, 100 mg	Medical Benefit	Auth Required
Inj., evomela, 1 mg	Medical Benefit	Auth Required
INTRON-A	Medical Benefit	Diagnosis Driven Auth Required
INVANZ	Medical Benefit	Diagnosis Driven Auth Required
IRESSA	Medical Benefit	Auth Required
ISTODAX	Medical Benefit	Auth Required
IXEMPRA KIT	Medical Benefit	Auth Required
JEVTANA	Medical Benefit	Auth Required
KADCYLA	Medical Benefit	Auth Required
KANJINTI	Medical Benefit	Auth Required
KEPIVANCE	Medical Benefit	Auth Required
KYPROLIS	Medical Benefit	Auth Required
KYTRIL	Medical Benefit	Diagnosis Driven Auth Required
LEUCOVORIN	Medical Benefit	Auth Required
LEUKINE	Medical Benefit	Diagnosis Driven Auth Required
LEUSTATIN	Medical Benefit	Auth Required
LIPODOX	Medical Benefit	Auth Required
LUMOXITI	Medical Benefit	Auth Required
LUPRON DEPOT	Medical Benefit	Diagnosis Driven Auth Required
LUPRON INJECTION (SELF-ADMINISTERED)	Medical Benefit	Diagnosis Driven Auth Required
MARQIBO	Medical Benefit	Auth Required
MESNEX	Medical Benefit	Auth Required
METHOTREXATE	Medical Benefit	Diagnosis Driven Auth Required
MOZOBIL	Medical Benefit	Auth Required
MUSTARGEN	Medical Benefit	Auth Required
MUTAMYCIN	Medical Benefit	Auth Required
MVASI	Medical Benefit	Auth Required
MYLERAN	Medical Benefit	Auth Required
MYLOTARG	Medical Benefit	Auth Required
NAVELBINE	Medical Benefit	Auth Required
NEULASTA	Medical Benefit	Auth Required
NIPENT	Medical Benefit	Auth Required
NOVANTRONE	Medical Benefit	Auth Required
OGIVRI	Medical Benefit	Auth Required
ONCASPAR	Medical Benefit	Auth Required
ONCOVIN	Medical Benefit	Auth Required
ONIVYDE	Medical Benefit	Auth Required
ONTRUZANT	Medical Benefit	Auth Required
PARAPLATIN	Medical Benefit	Auth Required
PERJETA	Medical Benefit	Auth Required
PHOTOFRIN	Medical Benefit	Auth Required
PLATINOL	Medical Benefit	Auth Required

POLIVY	Medical Benefit	Auth Required
PORTRAZZA	Medical Benefit	Auth Required
POTELIGEO	Medical Benefit	Auth Required
PROLEUKIN	Medical Benefit	Auth Required
PROLIA	Medical Benefit	Diagnosis Driven Auth Required
RECLAST	Medical Benefit	Diagnosis Driven Auth Required
RELISTOR	Medical Benefit	Diagnosis Driven Auth Required
SANDOSTATIN	Medical Benefit	Diagnosis Driven Auth Required
SANDOSTATIN LAR	Medical Benefit	Diagnosis Driven Auth Required
SODIUM IODINE ORAL CAPSULE	Medical Benefit	Auth Required
SOMATULINE DEPOT	Medical Benefit	Diagnosis Driven Auth Required
SUPPRELIN LA	Medical Benefit	Auth Required
SYNRIBO	Medical Benefit	Auth Required
TAXOL	Medical Benefit	Auth Required
TAXOTERE	Medical Benefit	Auth Required
TEMODAR	Medical Benefit	Auth Required
THIOPLEX	Medical Benefit	Auth Required
THYROGEN	Medical Benefit	Auth Required
TICE	Medical Benefit	Auth Required
TORISEL	Medical Benefit	Auth Required
TRAZIMERA	Medical Benefit	Auth Required
TREANDA	Medical Benefit	Auth Required
TRELSTAR	Medical Benefit	Auth Required
TRISENOX	Medical Benefit	Auth Required
TRUXIMA	Medical Benefit	Auth Required
UDENYCA	Medical Benefit	Auth Required
VALSTAR	Medical Benefit	Auth Required
VANTAS	Medical Benefit	Auth Required
VARUBI	Medical Benefit	Diagnosis Driven Auth Required
VECTIBIX	Medical Benefit	Auth Required
VELBAN	Medical Benefit	Auth Required
VELCADE	Medical Benefit	Auth Required
VEPESID	Medical Benefit	Auth Required
VIDAZA	Medical Benefit	Auth Required
Vitrase	Medical Benefit	Auth Required
VUMON	Medical Benefit	Auth Required
VYXEOS	Medical Benefit	Auth Required
WINRHO SDF	Medical Benefit	Diagnosis Driven Auth Required
XELODA	Medical Benefit	Auth Required
XGEVA	Medical Benefit	Diagnosis Driven Auth Required
XOFIGO	Medical Benefit	Auth Required
YONDELIS	Medical Benefit	Auth Required
ZALTRAP	Medical Benefit	Auth Required
ZANOSAR	Medical Benefit	Auth Required
ZARXIO	Medical Benefit	Auth Required

ZEVALIN	Medical Benefit	Auth Required
ZINECARD	Medical Benefit	Auth Required
ZIRABEV	Medical Benefit	Auth Required
ZOLADEX	Medical Benefit	Diagnosis Driven Auth Required
ZOMETA 4MG/5ML	Medical Benefit	Diagnosis Driven Auth Required
DEFERIPRONE (TWICE DAILY) TAB 1000 MG	Pharmacy Benefit	Add to Formulary with Prior Authorization Required
DICLOFENAC SODIUM GEL 1%	Pharmacy Benefit	Add to Formulary with Quantity Limit
TOLVAPTAN TAB 30 MG	Pharmacy Benefit	Add to Formulary with Prior Authorization Required

Please call Member Services at 1-855-321-9244 for pharmacy authorization requests or for further information on the Neighborhood Exchange formulary.