

Neighborhood Health Plan of Rhode Island
Formulary Change Document



September 2021 Updates

The following changes to the Neighborhood Medicaid 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
Empaveli (pegcetacoplan)	Pharmacy Benefit	Added to Formulary with Prior Authorization and Quantity Limit
Lumakras (sotorasib)	Pharmacy Benefit	Added to Formulary with Prior Authorization and Quantity Limit
Truseltiq (infigratinib)	Pharmacy Benefit	Added to Formulary with Prior Authorization and Quantity Limit

Please call the Pharmacy Help Desk at 1-401-459-6020 for pharmacy authorization requests or for further information on the Neighborhood Medicaid formulary.