## Neighborhood Health Plan of Rhode Island Formulary Change Document



## January 2022 Updates:

The following changes to the Neighborhood Commercial 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
ESOMEPRAZOLE MAGNESIUM TAB	Pharmacy Benefit	Add to the Formulary with a Quantity
DELAYED RELEASE 20 MG		Limit
ACCU-CHEK KIT NANO	Pharmacy Benefit	Removing product from Formulary
ACCU-CHEK KIT COMPACT	Pharmacy Benefit	Removing product from Formulary
AMPHETAMINE EXTENDED	Pharmacy Benefit	Add to the Formulary with a Quantity
RELEASE SUSP 1.25 MG/ML		Limit
Nexviazyme 4mg inj	Medical Benefit	Add with Authorization Required
Saphnelo 1mg inj	Medical Benefit	Add with Authorization Required
Cyclophosphamide 10mg inj	Medical Benefit	Add with Authorization Required
Zynrelef 1mg/0.03mg	Medical Benefit	Add with No Authorization Required
Xaracoll	Medical Benefit	Add with No Authorization Required
Camcevi 1mg inj	Medical Benefit	Add with Authorization Required
Rylaze 0.1mg inj	Medical Benefit	Add with Authorization Required
Rybrevant 2mg inj	Medical Benefit	Add with Authorization Required
Jemperli 10mg inj	Medical Benefit	Add with Authorization Required
BAL in oil inj	Medical Benefit	Change to Authorization Required
Edetate calcium disodium inj	Medical Benefit	Change to Authorization Required

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