

Neighborhood Health Plan of Rhode Island  
Formulary Change Document



February 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.

<b>Drug Name</b>	<b>Benefit</b>	<b>Description of Coding Change</b>
EVEROLIMUS TAB 1MG	Pharmacy Benefit	Adding generic product to the formulary
ATROPINE SULFATE OPHTH SOLN 1%	Pharmacy Benefit	Adding generic product to the formulary
EPCLUSA PAK 150-37.5	Pharmacy Benefit	Add to the Formulary with Prior Authorization and Quantity Limit
EPCLUSA PAK 200-50MG	Pharmacy Benefit	Add to the Formulary with Prior Authorization and Quantity Limit

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