

Neighborhood Health Plan of Rhode Island  
Formulary Change Document



April 2023 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
AMOX/K CLAV CHW 400MG	Pharmacy Benefit	Added to Formulary
DALIRESP TAB 250MCG	Pharmacy Benefit	Removed Brand Product from Formulary
DALIRESP TAB 500MCG	Pharmacy Benefit	Removed Brand Product from Formulary
DEXTROAMPHET CAP 10MG ER	Pharmacy Benefit	Added to Formulary
DEXTROAMPHET CAP 15MG ER	Pharmacy Benefit	Added to Formulary
DEXTROAMPHET CAP 5MG ER	Pharmacy Benefit	Added to Formulary
PIRFENIDONE CAP 267MG	Pharmacy Benefit	Added to Formulary with Quantity Limit
METHYLPHENIDATE TD PATCH 10 MG/9HR	Pharmacy Benefit	Added to Formulary with Step Therapy and Quantity Limit
METHYLPHENIDATE TD PATCH 15 MG/9HR	Pharmacy Benefit	Added to Formulary with Step Therapy and Quantity Limit
METHYLPHENIDATE TD PATCH 20 MG/9HR	Pharmacy Benefit	Added to Formulary with Step Therapy and Quantity Limit
METHYLPHENIDATE TD PATCH 20 MG/9HR	Pharmacy Benefit	Added to Formulary with Step Therapy and Quantity Limit
METHYLPHENIDATE TD PATCH 30 MG/9HR	Pharmacy Benefit	Added to Formulary with Step Therapy and Quantity Limit
NIACIN ER TAB 500MG	Pharmacy Benefit	Added to Formulary
NIACIN ER TAB 750MG	Pharmacy Benefit	Added to Formulary
PRADAXA CAP 110 MG	Pharmacy Benefit	Removed Brand Product from Formulary
PRADAXA CAP 150 MG	Pharmacy Benefit	Removed Brand Product from Formulary
PRADAXA CAP 75 MG	Pharmacy Benefit	Removed Brand Product from Formulary
QUILLICHEW TAB 20, 30, 40 MG	Pharmacy Benefit	Added to Formulary with Prior Authorization and Quantity Limit
VELETRI INJ 0.5MG/ FLOLAN INJ 0.5 MG	Pharmacy Benefit	Removed Brand Products from Formulary
VELETRI INJ 1.5MG/ FLOLAN INJ 1.5 MG	Pharmacy Benefit	Removed Brand Products from Formulary

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