

Neighborhood Health Plan of Rhode Island
Formulary Change Document



June 2023 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
CLENPIQ SOL	Pharmacy Benefit	Adding product to formulary
DILTIAZEM HCL TAB ER 24HR 120 MG	Pharmacy Benefit	Adding product to formulary
HUMIRA PEN INJ 40MG/0.8	Pharmacy Benefit	Adding new NDC to formulary
HUMIRA PEN INJ 80/0.8ML	Pharmacy Benefit	Adding new NDC to formulary
ROTARIX SUS	Pharmacy Benefit	Adding product to formulary
TERIFLUNOMIDE TAB 7 MG	Pharmacy Benefit	Adding product to formulary
TERIFLUNOMIDE TAB 14 MG	Pharmacy Benefit	Adding product to formulary

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