

Neighborhood Health Plan of Rhode Island  
Formulary Change Document



June 2019 Updates

The following changes to the Neighborhood Exchange 6T Individual 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.

Product	Formulary Changes
PYRIDOSTIGMI SOL 60MG/5ML	Formulary with no Restriction
PENTAMIDINE INJ 300MG	Formulary with Prior Authorization and Quantity Limit

Please call Member Services at 1-401-459-6020 for pharmacy authorization requests or for further information on the Neighborhood Exchange formulary.