

Neighborhood Health Plan of Rhode Island  
Formulary Change Document



May 2026 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.

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

<b>Drug Name</b>	<b>Benefit</b>	<b>Description of Coding Change</b>
ADZENYS XR TAB 3.1MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ADZENYS XR TAB 6.3MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ADZENYS XR TAB 9.4MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ADZENYS XR TAB 12.5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ADZENYS XR TAB 15.7 MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ADZENYS XR TAB 18.8MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ARNUTY ELPT INH 50MCG	Pharmacy Benefit	Removing product from formulary due to generic availability
ARNUTY ELPT INH 100MCG	Pharmacy Benefit	Removing product from formulary due to generic availability
ARNUTY ELPT INH 200MCG	Pharmacy Benefit	Removing product from formulary due to generic availability
DIFICID TAB 200MG	Pharmacy Benefit	Removing product from formulary due to generic availability
DISKETS TAB 40MG	Pharmacy Benefit	Removing product from formulary
PREMARIN TAB 0.3MG	Pharmacy Benefit	Removing product from formulary due to generic availability
PREMARIN TAB 0.45MG	Pharmacy Benefit	Removing product from formulary due to generic availability
PREMARIN TAB 0.625MG	Pharmacy Benefit	Removing product from formulary due to generic availability
PREMARIN TAB 0.9MG	Pharmacy Benefit	Removing product from formulary due to generic availability
PREMARIN TAB 1.25MG	Pharmacy Benefit	Removing product from formulary due to generic availability
RILPIVIRINE HCL TAB 25 MG (BASE EQUIVALENT)	Pharmacy Benefit	Adding product to formulary
TAPENTADOL HCL TAB 100 MG	Pharmacy Benefit	Adding product to formulary
TAPENTADOL HCL TAB 50 MG	Pharmacy Benefit	Adding product to formulary
TAPENTADOL HCL TAB 75 MG	Pharmacy Benefit	Adding product to formulary