

Neighborhood Health Plan of Rhode Island
Formulary Change Document



October 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.

Drug Name	Benefit	Description of Coding change
ASTAGRAF XL CAP 0.5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ASTAGRAF XL CAP 1MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ASTAGRAF XL CAP 5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
DAPAGLIFLOZIN FREE BASE-METFORMIN HCL TAB ER 24HR 10-1000 MG	Pharmacy Benefit	Adding product to formulary
DAPAGLIFLOZIN FREE BASE-METFORMIN HCL TAB ER 24HR 10-500 MG	Pharmacy Benefit	Adding product to formulary
DAPAGLIFLOZIN FREE BASE-METFORMIN HCL TAB ER 24HR 5-1000 MG	Pharmacy Benefit	Adding product to formulary
DAPAGLIFLOZIN FREE BASE-METFORMIN HCL TAB ER 24HR 5-500 MG	Pharmacy Benefit	Adding product to formulary
DAPAGLIFLOZIN TAB 5 MG	Pharmacy Benefit	Add product to formulary
DAPAGLIFOZIN TAB 10 MG	Pharmacy Benefit	Adding product to formulary
EDURANT TAB 25MG	Pharmacy Benefit	Removing product from formulary due to generic availability
FLUAD INJ 2025-26	Pharmacy Benefit	Removing product from formulary
FLUAD INJ 2026-27	Pharmacy Benefit	Adding product to formulary
FLUMIST NASA LIQ 2025-26	Pharmacy Benefit	Removing product from formulary
FLUMIST NASA LIQ 2026-27	Pharmacy Benefit	Adding product to formulary
LITFULO CAP 50MG	Pharmacy Benefit	Removing product from formulary
LUMIGAN SOL 0.01% OP	Pharmacy Benefit	Removing product from formulary due to generic availability
MACITENTAN TAB 10 MG	Pharmacy Benefit	Adding product to formulary
OFEV CAP 100MG	Pharmacy Benefit	Removing product from formulary due to generic availability
OFEV CAP 150MG	Pharmacy Benefit	Removing product from formulary due to generic availability
POMALYST CAP 1MG	Pharmacy Benefit	Removing product from formulary due to generic availability
POMALYST CAP 2MG	Pharmacy Benefit	Removing product from formulary due to generic availability
REVLIMID CAP 2.5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
POMALYST CAP 3MG	Pharmacy Benefit	Removing product from formulary due to generic availability
POMALYST CAP 4MG	Pharmacy Benefit	Removing product from formulary due to generic availability
REVLIMID CAP 5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
REVLIMID CAP 10MG	Pharmacy Benefit	Removing product from formulary due to generic availability

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REVLIMID CAP 15MG	Pharmacy Benefit	Removing product from formulary due to generic availability
REVLIMID CAP 20MG	Pharmacy Benefit	Removing product from formulary due to generic availability
REVLIMID CAP 25MG	Pharmacy Benefit	Removing product from formulary due to generic availability
SAVELLA MIS TTTR PAK	Pharmacy Benefit	Removing product from formulary due to generic availability
SAVELLA TAB 12.5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
SAVELLA TAB 25MG	Pharmacy Benefit	Removing product from formulary due to generic availability
SAVELLA TAB 50MG	Pharmacy Benefit	Removing product from formulary due to generic availability
SAVELLA TAB 100MG	Pharmacy Benefit	Removing product from formulary due to generic availability
SKYRIZI INJ 55/0.37	Pharmacy Benefit	Adding product to formulary
TOFACITINIB CITRATE ORAL SOLN 1 MG/ML (BASE EQUIVALENT)	Pharmacy Benefit	Adding product to formulary
TOFACITINIB CITRATE TAB 5 MG (BASE EQUIVALENT)	Pharmacy Benefit	Adding product to formulary
TOFACITINIB CITRATE TAB 10 MG (BASE EQUIVALENT)	Pharmacy Benefit	Adding product to formulary
TOFACITINIB CITRATE TAB ER 24HR 11 MG (BASE EQUIVALENT)	Pharmacy Benefit	Adding product to formulary
TOFACITINIB CITRATE TAB ER 24HR 22 MG (BASE EQUIVALENT)	Pharmacy Benefit	Adding product to formulary
XELJANZ SOL 1MG/ML	Pharmacy Benefit	Removing product from formulary due to generic availability
XELJANZ TAB 5MG	Pharmacy Benefit	Removing product from formulary due to generic availability
XELJANZ TAB 10MG	Pharmacy Benefit	Removing product from formulary due to generic availability
XELJANZ XR TAB 11MG	Pharmacy Benefit	Removing product from formulary due to generic availability
XELJANZ XR TAB 22MG	Pharmacy Benefit	Removing product from formulary due to generic availability