

Neighborhood Health Plan of Rhode Island  
Formulary Change Document



May 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
ROFLUMILAST TAB 250MCG	Pharmacy Benefit	Removed ST requirements
ROFLUMILAST TAB 500MCG	Pharmacy Benefit	Removed ST requirements
CINQAIR INJ	Pharmacy Benefit	Removed from formulary, available on Neighborhood's Medicaid Medical Benefit
FANAPT TAB 1MG	Pharmacy Benefit	Removed from formulary
FANAPT TAB 2MG	Pharmacy Benefit	Removed from formulary
FANAPT TAB 4MG	Pharmacy Benefit	Removed from formulary
FANAPT TAB 6MG	Pharmacy Benefit	Removed from formulary
FANAPT TAB 8MG	Pharmacy Benefit	Removed from formulary
FANAPT TAB 10MG	Pharmacy Benefit	Removed from formulary
FANAPT TAB 12MG	Pharmacy Benefit	Removed from formulary
FANAPT PAK	Pharmacy Benefit	Removed 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.