

Neighborhood Health Plan of Rhode Island
Formulary Change Document



March 2024 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
PODOFILOX GEL 0.5%	Pharmacy Benefit	Adding product to formulary
QUINAPRIL-HYDROCHLOROTHIAZIDE TAB 10-12.5 MG	Pharmacy Benefit	Adding product to formulary
ZENPEP CAP 60000UNT	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.