

July 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
AIRSUPRA AER 90-80MCG	Pharmacy Benefit	Adding product to formulary
APRETUDE SUS 600MG ER	Pharmacy Benefit	Adding product to formulary
CABENUVA SUS 400-600	Pharmacy Benefit	Adding product to formulary
CABENUVA SUS 600-900	Pharmacy Benefit	Adding product to formulary
CONDYLOX GEL 0.5%	Pharmacy Benefit	Removing product from formulary due to generic availability
EMFLAZA TAB 6MG	Pharmacy Benefit	Removing product from formulary due to generic availability
EMFLAZA TAB 18MG	Pharmacy Benefit	Removing product from formulary due to generic availability
EMFLAZA TAB 30MG	Pharmacy Benefit	Removing product from formulary due to generic availability
EMFLAZA TAB 36MG	Pharmacy Benefit	Removing product from formulary due to generic availability
ESTRADIOL GEL 0.06% (0.75 MG/1.25 GM METERED-DOSE PUMP)	Pharmacy Benefit	Adding product to formulary
NALOXONE HCL SPR 4MG	Pharmacy Benefit	Adding product to formulary
OMNIPOD 5 G7 KIT INTRO	Pharmacy Benefit	Adding product to formulary
OMNIPOD 5 G7 MIS PODS	Pharmacy Benefit	Adding product to formulary
ORFADIN CAP 20MG	Pharmacy Benefit	Removing product from formulary due to generic availability
PRADAXA CAP 110MG	Pharmacy Benefit	Removing product from formulary due to generic availability
XCOPRI TAB 25MG	Pharmacy Benefit	Adding product to formulary
XOLAIR INJ 75/0.5	Pharmacy Benefit	Adding product to formulary
XOLAIR INJ 150MG/ML	Pharmacy Benefit	Adding product to formulary
XOLAIR INJ 300/2ML	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.