

Neighborhood Health Plan of Rhode Island
Formulary Change Document



January 2025 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
ACCU-CHEK KIT AVIVA PL	Pharmacy Benefit	Removing product from formulary
ACCU-CHEK KIT GUIDE	Pharmacy Benefit	Removing product from formulary
ACCU-CHEK KIT NANO	Pharmacy Benefit	Removing product from formulary
ACCU-CHEK LIQ GUIDE	Pharmacy Benefit	Removing product from formulary
ACCU-CHEK SOL COMPACT	Pharmacy Benefit	Removing product from formulary
ACCU-CHEK TES COMPACT	Pharmacy Benefit	Removing product from formulary
OMNIPOD DASH KIT INTRO	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 10UNT/DY	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 15UNT/DY	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 20UNT/DY	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 25UNT/DY	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 30UNT/DY	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 35UNT/DY	Pharmacy Benefit	Adding product to formulary
OMNIPOD GO KIT 40UNT/DY	Pharmacy Benefit	Adding product to formulary
OXBRYTA TAB 300MG	Pharmacy Benefit	Removing product from formulary
OXBRYTA TAB 500MG	Pharmacy Benefit	Removing product from formulary
PURIXAN SUS 20MG/ML	Pharmacy Benefit	Adding product to formulary
REXTOVY SPR 4/0.25ML	Pharmacy Benefit	Adding product to formulary
RIVIVE SPR 3/0.1ML	Pharmacy Benefit	Adding product to formulary
TRUQAP PAK 160MG	Pharmacy Benefit	Adding product to formulary
TRUQAP PAK 200MG	Pharmacy Benefit	Adding product to formulary
TYENNE INJ 162/0.9	Pharmacy Benefit	Adding product to formulary
TYENNE INJ 162MG	Pharmacy Benefit	Adding product to formulary
VIJOICE GRA 50MG	Pharmacy Benefit	Adding product to 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.