Neighborhood Health Plan of Rhode Island Formulary Change Document



March 2025 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
ADALIMU-ADAZ INJ 20/0.2ML	Pharmacy Benefit	Adding Product to Formulary
AVANAFIL TAB 100 MG	Pharmacy Benefit	Adding Product to Formulary
AVANAFIL TAB 200 MG	Pharmacy Benefit	Adding Product to Formulary
AVANAFIL TAB 50 MG	Pharmacy Benefit	Adding Product to Formulary
HYDROCORTISONE SODIUM	Pharmacy Benefit	Adding Product to Formulary
SUCCINATE PF FOR INJ 100 MG		

Please call Member Services at 1-855-321-9244 for pharmacy authorization requests or for further information on the Neighborhood Commercial formulary.