
To: PerformRx ACNH Formulary Update Distribution List (LOB 800)
From: Formulary Management
Date: 4/27/2026
Subject: Formulary Update

AmeriHealth Caritas New Hampshire Medicaid **5/4/2026 FORMULARY UPDATE**

The following are the Q1 2026 P&T formulary updates **effective 5/4/26** If you have any questions, please contact the formulary department.

Formulary Changes:

1. Bethkis add QL 240/30
2. Tobi add QL 240/30
3. Tobramycin 300/5 add QL 300/30
4. Novolin N flexpen add QL 30/30
5. Novolin N relion Flexpen add QL 30/30
6. Thophylline ER oral tablet 200mg NF
7. Ranitidine 150mg and 300mg tab NF
8. Perampanel Tier 1

Prior Authorization Criteria Changes:

Retired Criteria:

1. Adrenal enzyme inhibitors for cushings disease

New Criteria:

1. Papzimeos
2. Forzinity
3. Rhapsido

Updated Criteria with Changes:

1. GLP1 Receptor Agonists (Wegovy/Zepbound) for Non-Weight Loss Indications
2. Adrenal Enzyme Inhibitors for Cushings Syndrome

3. Biologic Agents for Nasal Polyposis
4. Specialty Biologic agents
5. Thrombocytopenia
6. Immunoglobulin A nephropathy agents
7. Antifibrotic Respiratory Tract Agents
8. Antifungal Medications
9. Corlanor
10. Presbyopia
11. Primary Hyperoxaluria Agents
12. Pulmonary Biologics for Respiratory and Eosinophilic conditions
13. Skysona
14. SMN2 Splicing modifiers for the treatment of SMA
15. Sohonos
16. Tavneos

Reviewed/Updated Criteria with No Clinical Changes:

1. Endari
2. Adakveo
3. Gene Therapy for Sickle Cell Disease
4. Cystic Fibrosis transmembrane conductance regulator
5. Corticotropin
6. Injectable/Infusible bone Modifying Agents for Osteoporosis and Paget's disease
7. Adrenergic, Alpha receptor blocking agents
8. Agents for Atopic dermatitis
9. Agents for Homozygous Familial Hypercholesterolemia
10. Agents for the treatment of Postpartum Depression
11. Alpha 1 proteinase inhibitors
12. Amifampridine
13. Benlysta
14. Carisoprodol
15. Corticosteroids for Duchenne Muscular Dystrophy
16. Dojolvi
17. Enzyme replacement therapy for ASMD (Xenpozyme)
18. Gene Therapy for RBC transfusion Dependent BThalassemia
19. Gycopyrrolate
20. Growthy Hormone
21. Hemophilia Factor VIII
22. HiF-PH Inhibitors for CKD Anemia
23. Injectable/Infusible bone modifying agents for oncology
24. Inpen
25. Lodoco
26. Nemluvio for Prurigo Nodularis
27. Niemann-Pick Disease Type C

- 28. Pompe Disease agents
- 29. Tzield
- 30. Yorvipath