

PHP Care Complete FIDA-IDD Plan (Medicare - Medicaid Plan) Future Formulary Changes

October 2025

The following brand name drug will be removed from our formulary due to the addition of a new generic equivalent.

CMS Formulary ID	Effective Date	Brand Drug Name (To be Removed)	Generic Replacement Drugs and Tier (New Replacement)
25242	10/1/2025	ENTRESTO 49 MG-51MG ORAL TABLET	SACUBITRIL-VALSARTAN 49 MG-51MG ORAL TABLET-1
25242	10/1/2025	ENTRESTO 97MG-103MG ORAL TABLET	SACUBITRIL-VALSARTAN 97MG-103MG ORAL TABLET-1
25242	10/1/2025	FYCOMPA 2 MG ORAL TABLET	PERAMPANEL 2 MG ORAL TABLET-1
25242	10/1/2025	FYCOMPA 4 MG ORAL TABLET	PERAMPANEL 4 MG ORAL TABLET-1
25242	10/1/2025	FYCOMPA 8 MG ORAL TABLET	PERAMPANEL 8 MG ORAL TABLET-1
25242	10/1/2025	ENTRESTO 24 MG-26MG ORAL TABLET	SACUBITRIL-VALSARTAN 24 MG-26MG ORAL TABLET-1
25242	10/1/2025	FYCOMPA 12 MG ORAL TABLET	PERAMPANEL 12 MG ORAL TABLET-1
25242	10/1/2025	FYCOMPA 6 MG ORAL TABLET	PERAMPANEL 6 MG ORAL TABLET-1
25242	10/1/2025	JYNARQUE 15 MG ORAL TABLET	TOLVAPTAN 15 MG ORAL TABLET-1
25242	10/1/2025	JYNARQUE 30 MG ORAL TABLET	TOLVAPTAN 30 MG ORAL TABLET-1
25242	10/1/2025	FYCOMPA 10 MG ORAL TABLET	PERAMPANEL 10 MG ORAL TABLET-1

The following drug will be removed from the formulary due to FDA mandated market withdrawal.

CMS Formulary ID	Effective Date	Drug Name
25242	8/30/2025	IXCHIQ 1000 TCID INTRAMUSC. VIAL