

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

September 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	9/1/2025	COMPLERA 200-25-300 ORAL TABLET	EMTRICITABINE-RILPIVIRNE-TENOF 200-25-300 ORAL TABLET-1
25242	9/1/2025	PROMACTA 12.5 MG ORAL POWD PACK	ELTROMBOPAG OLAMINE 12.5 MG ORAL POWD PACK-1
25242	9/1/2025	PROMACTA 25 MG ORAL POWD PACK	ELTROMBOPAG OLAMINE 25 MG ORAL POWD PACK-1
25242	9/1/2025	PROMACTA 25 MG ORAL TABLET	ELTROMBOPAG OLAMINE 25 MG ORAL TABLET-1
25242	9/1/2025	PROMACTA 50 MG ORAL TABLET	ELTROMBOPAG OLAMINE 50 MG ORAL TABLET-1
25242	9/1/2025	PROMACTA 75 MG ORAL TABLET	ELTROMBOPAG OLAMINE 75 MG ORAL TABLET-1
25242	9/1/2025	PROMACTA 12.5 MG ORAL TABLET	ELTROMBOPAG OLAMINE 12.5 MG ORAL TABLET-1