Name of Affected Drug	Description of Change	Reason for Change	Alternative Drug(s)	Essential	Enhanced	Effective Date	Submitted to CMS	Approved by CMS
				Aternative Drug	Aternative Drug			
				Tier	Tier			
AUSTEDO XR ONCE DAILY, 4 WEEK TITRATION PACK	Removed from formulary	Removed from the market	AUSTEDO XR	5	5	7/1/2025	6/2/2025	6/24/2025
BRILINTA 90 MG	Removed from formulary	New generic now available	TICAGRELOR 90 MG	3	2	7/1/2025	6/2/2025	6/24/2025
FUZEON 90 MG INJ	Removed from formulary	Removed from the market	EMTRICITABINE-TENOFOVIR DF	4	4	7/1/2025	6/2/2025	6/24/2025
LIBERVANT	Removed from formulary	Removed from the market	VALTOCO	4	4	7/1/2025	6/2/2025	6/24/2025
STELARA 90 MG	Removed from formulary	New generic now available	PYZCHIVA & SELARSDI 90 MG	5	5	7/1/2025	6/2/2025	6/24/2025