

# PROVIDER QUICK POINTS

## PROVIDER INFORMATION



April 8, 2020

### **Commercial Pharmacy Benefit Exclusion for Beovu<sup>®</sup>, Quzyttir<sup>™</sup>, Reblozyl<sup>®</sup>, Recarbrio<sup>™</sup> and Vyepti<sup>™</sup>**

Effective April 8, 2020, the drugs listed in the table below will be excluded from pharmacy benefit coverage due to clinician-administered route of administration and may be available for medical benefit coverage for subscribers who are eligible.

| <b>Drug Name</b>                                                                                              |
|---------------------------------------------------------------------------------------------------------------|
| Beovu <sup>®</sup> (brolucizumab-dbl) 6 mg/0.05ml intravitreal solution                                       |
| Quzyttir <sup>™</sup> (cetirizine hydrochloride) 10 mg/ml intravenous (IV) solution                           |
| Reblozyl <sup>®</sup> (luspatercept-aamt) 25 mg and 75 mg subcutaneous injection                              |
| Recarbrio <sup>™</sup> (imipenem, cilastatin, and relebactam) 1.25 GM injection for intravenous (IV) solution |
| Vyepti <sup>™</sup> (eptinezumab-jjmr) 100 mg/ml intravenous (IV) solution                                    |

### **Products Impacted**

This applies to commercial lines of business.

### **Questions?**

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.