## PROVIDER QUICK POINTS PROVIDER INFORMATION



July 14, 2021

## MHCP Pharmacy Benefit Exclusion for Rybrevant™

Upon launch, the drug listed in the table below will be excluded from pharmacy benefit coverage due to clinicianadministered route of administration and may be available for medical benefit coverage for subscribers who are eligible.

**Drug Name** 

Rybrevant<sup>TM</sup> (amivantamab-vmjw) injection for intravenous (IV) use

## **Products Impacted**

This exclusion applies to the following Minnesota Health Care Programs:

- Families and Children [formerly known as Prepaid Medical Assistance Program (PMAP)]
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+)

## **Ouestions?**

If you have questions for a member enrolled in a Minnesota Health Care Programs (MHCP) plan, please contact provider services at **1-866-518-8448**. Please contact provider services at **(651) 662-5200** or **1-800-262-0820** for all other questions.