

# PROVIDER QUICK POINTS

## PROVIDER INFORMATION



October 9, 2019

### Pharmacy Benefit Exclusion for Pazeo<sup>®</sup>, Bepreve<sup>®</sup>, and Rasuvo<sup>®</sup>

Effective October 1, 2019, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will no longer cover Pazeo<sup>®</sup>, Bepreve<sup>®</sup>, and Rasuvo<sup>®</sup> under the pharmacy benefit plan. Members must use a medication alternative that is covered under the pharmacy benefit plan or pay full price for continued use of their current medication. A summary of the excluded medications and preferred formulary alternatives can be found below.

Excluded Medication(s)	Preferred Alternative Medication(s)
<b>Pazeo<sup>®</sup></b> (olopatadine hydrochloride) ophthalmic solution 0.7% <b>Bepreve<sup>®</sup></b> (bepotastine besilate) ophthalmic solution 1.5%	<b>azelastine hcl ophthalmic solution 0.05%</b>
<b>Rasuvo<sup>®</sup></b> (methotrexate) injection	<b>Otrexup<sup>®</sup></b> (methotrexate) injection

### Products Impacted

This notice applies to commercial lines of business.

### Questions?

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

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