# **PROVIDER QUICK POINTS** PROVIDER INFORMATION



February 15, 2018

## **Pharmacy Benefit Exclusion for Ryplazim**

Upon launch, Ryplazim (plasminogen) will be excluded from pharmacy benefit coverage due to its intravenous and clinician-administered route of administration. The anticipated launch date of Ryplazim is April 18, 2018.

#### **Drug Name**

RYPLAZIM (plasminogen) for Intravenous Infusion

#### **Products Impacted**

This notice applies to commercial lines of business **and** the following Minnesota Health Care Programs:

- Blue Advantage Prepaid Medical Assistance Program (PMAP)
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+)
- SecureBlue (MSHO)

#### **Products Not Impacted:**

Federal Employee Program, Platinum Blue, and Medicare Supplement subscribers are not impacted.

### **Questions?**

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