

PROVIDER QUICK POINTS

PROVIDER INFORMATION



December 13, 2023

Commercial Pharmacy Benefit Exclusion for Cosentyx® and Omvoh™

Effective **January 1, 2024**, 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.

Drug Names
Cosentyx® (secukinumab) solution for intravenous (IV) infusion
Omvoh™ (mirikizumab-mrkz) solution for intravenous (IV) infusion

Products Impacted

These exclusions apply to commercial lines of business.

Questions?

Please contact provider services at **(651) 662-5200** or **1-800-262-0820**.