# PROVIDER QUICK POINTS PROVIDER INFORMATION



March 27, 2024

## MHCP Pharmacy Benefit Exclusion for Amtagvi® and Pemrydi RTU™

Effective **March 27, 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**

Amtagvi® (lifileucel) suspension for intravenous (IV) infusion

Pemrydi RTU™ (pemetrexed) solution for intravenous (IV) infusion

### **Products Impacted**

These exclusions apply to Minnesota Health Care Programs:

- Families and Children
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+)

#### **Questions?**

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**. For all other questions, contact provider services at **(651) 662-5200** or **1-800-262-0820**.

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