

PROVIDER QUICK POINTS

PROVIDER INFORMATION



December 11, 2024

Commercial Pharmacy Benefit Exclusion for Aurlumyn™, MydCombi™, Pavblu™ and Vafseo®

Effective **December 11, 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

Drug Names
Aurlumyn™ (iloprost) solution for intravenous (IV) infusion
MydCombi™ (tropicamide-phenylephrine) ophthalmic spray
Pavblu™ (afibercept-ayyh) solution for intravitreal injection
Vafseo® (vadadustat) tablet

Products Impacted

These exclusions apply to commercial lines of business.

Questions?

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