

PROVIDER QUICK POINTS

PROVIDER INFORMATION



May 8, 2024

MHCP Pharmacy Benefit Exclusion for Alyglo™ and Lenmeldy™

Effective **May 8, 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
Alyglo™ (immune globulin, intravenous, human-stwk) solution for intravenous (IV) infusion
Lenmeldy™ (atidarsagene autotemcel) suspension 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**.