



Ryplazim (plasminogen, human-tvmh)
Effective 11/01/2022

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization
Benefit	<input type="checkbox"/> Pharmacy Benefit <input checked="" type="checkbox"/> Medical Benefit (NLX)		<input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Specialty Limitations			
Contact Information	Specialty Medications		
	All Plans	Phone: 866-814-5506	Fax: 866-249-6155
	Non-Specialty Medications		
	MassHealth	Phone: 877-433-7643	Fax: 866-255-7569
	Commercial	Phone: 800-294-5979	Fax: 888-836-0730
	Exchange	Phone: 855-582-2022	Fax: 855-245-2134
	Medical Specialty Medications (NLX)		
	All Plans	Phone: 844-345-2803	Fax: 844-851-0882
Exceptions	N/A		

Overview

Ryplazim is plasma-derived human plasminogen indicated for the treatment of patients with plasminogen deficiency type 1 (hypoplasminogenemia).

Coverage Guidelines

Authorization may be reviewed for members new to the plan who are currently receiving treatment with requested medication excluding when the product is obtained as samples or via manufacturer’s patient assistance programs.

OR

Authorization may be granted for members when all the following criteria are met, and documentation is provided:

1. Member has a diagnosis plasminogen deficiency type 1 (hypoplasminogenemia)
2. Provider documentation of baseline plasminogen activity level of 45% or less
3. Documented history of lesions and symptoms consistent with a diagnosis plasminogen deficiency type 1 (e.g., ligneous conjunctivitis, ligneous gingivitis or gingival overgrowth, vision abnormalities, respiratory distress and/or obstruction, abnormal wound healing).

Continuation of Therapy

Reauthorization will be granted for plasminogen deficiency type 1 (hypoplasminogenemia) and provider documents benefit from therapy as evidenced by disease stability or disease improvement (e.g., improvement in lesion number and/or size, absence of new lesion development, improvement in respiratory function, increased quality of life).

Limitations

1. Initial approvals and reauthorizations will be granted for 12 months.

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Review History

09/21/2022 – Reviewed and created for Sept P&T. Effective 11/01/2022

References

1. Ryplazim [package insert]. Laval, Quebec, Canada: Prometic Bioproduction Inc; June 2021.
2. Shapiro AD, Nakar C, Parker JM, et al. Plasminogen replacement therapy for the treatment of children and adults with congenital plasminogen deficiency. *Blood*. 2018;131(12):1301-1310.
3. Celkan T. Plasminogen deficiency. *J Thromb Thrombolysis*. January, 2017; 43(1):132-138.

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