

# Specialty Quantity Limit

## Hympavzi

### Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Hympavzi	marstacimab-hncq

### Program Description

The standard limit is designed to allow a quantity sufficient for the most common uses of the medication. The recommended dosing parameters for all FDA-approved indications fall within the standard limits. Coverage of an additional quantity may be reviewed on a case-by-case basis upon request.

### Covered Quantities

Medication	Standard Limit
Hympavzi (marstacimab-hncq) 150 mg/mL single-dose prefilled syringe	8 syringes per 28 days
Hympavzi (marstacimab-hncq) 150 mg/mL single-dose prefilled pen	8 pens per 28 days

### FDA-recommended Dosing

Loading dose

300 mg (two 150 mg subcutaneous injections).

Reference number(s)
6710-H

### Maintenance dose

One week after the loading dose, initiate maintenance dosing of 150 mg every week by subcutaneous injection on the same day each week, at any time of day.

### Dose adjustment during treatment

Consider a dose adjustment to 300 mg subcutaneous injection weekly in patients weighing greater than or equal to 50 kg when control of bleeding events is judged to be inadequate by the healthcare provider. Safety and efficacy at doses above 300 mg weekly have not been established.

## References

1. Hymovavzi [package insert]. New York, NY: Pfizer Inc.; October 2024.