

December 16, 2019

Step Therapy Tier Changes

The following changes will take effect January 1, 2020. Complete tier lists and prior authorization (PA) criteria can be found on our website at www.okhca.org/pa. Pharmacy prior authorization forms can be found at www.okhca.org/rxforms.

Atypical Antipsychotics

- Perseris® (risperidone extended-release injectable) will move from Tier 3 to Tier 1

Diabetic Medications

- Glyxambi® (empagliflozin/linagliptin) will move from Tier-3 to Tier-2

Hepatitis C Antiviral Medications

- Harvoni® (ledipasvir/sofosbuvir) and Zepatier® (elbasvir/grazoprevir) will be non-preferred
- Epclusa® (sofosbuvir/velpatasvir) and Mavyret™ (glecaprevir/pibrentasvir) will be preferred

Narcotic Analgesics

- Hysingla ER™ (hydrocodone bitartrate extended-release) will move from Tier-2 to Tier-3
- Butrans® (buprenorphine transdermal) will be brand preferred; the generic formulation will require reasoning why the brand formulation is not appropriate

Ocular Allergy

- Pazeo® (olopatadine) will move from Tier-3 to Tier-2

Pediculicides

- Vanalice® (piperonyl butoxide/pyrethrum gel) will be available without prior authorization for children younger than 18 years of age

Prenatal Vitamins

- Provida OB™ will now be preferred
- Select-OB®, Vitafole®, and Vitafole® FE+ will no longer be preferred
- For a complete list of preferred prenatal vitamins, visit our website at www.okhca.org/rx.

Pulmonary Hypertension Medications

- Letairis® (ambrisentan) will be brand preferred; the generic formulation will require reasoning why the brand formulation is not appropriate

Respiratory Medications

- Spiriva® Resimat® (tiotropium soft mist inhaler) and Utibron® Neohaler® (indacaterol/glycopyrrolate) will be available in Tier-1 without a prior authorization
- Proventil® (albuterol HFA) and Ventolin® (albuterol HFA) will be brand preferred; the generic formulation will require reasoning why the brand formulation is not appropriate

Maintenance Drug List

- Also effective January 1, 2020, many maintenance medications can be run for a 90-day supply without the need for an override. Please consider writing for/dispensing 90-day supplies of chronic maintenance medications, where appropriate, in an effort to increase compliance and reduce copays for members. A complete list of maintenance drugs can be found on our website at www.okhca.org/rx.

Continuous Glucose Monitoring (CGM)

- Beginning January 1, 2020, CGM will be available through the pharmacy point of sale system with a prior authorization (PA). Covered NDCs and PA criteria can be found on our website at www.okhca.org/bgsupplies.

Thank you for the services you provide to Oklahomans insured by SoonerCare!