



SoonerCare Fax Blast

July 24, 2013

ePocrates

Free up-to-date formulary information for SoonerCare and other health plans is available for your smartphone or portable device, or in a web-based format. See www.epocrates.com for details.

Topical Corticosteroids

Updates to Prior Authorization Tiers Take Effect August 6, 2013

- Tier 1 Products are available without prior authorization
- Tier 2 Approval Criteria
 1. Documented trials of all Tier 1 topical corticosteroids of similar potency in the past 30 days that did not yield adequate relief. If Tier 1 trials are completed and do not yield adequate relief, the prescriber must also document a clinical reason for requesting a Tier 2 in the same potency instead of trying a higher potency.
 2. When the same medication is available in Tier 1, a clinical reason must be documented for using a special dosage form of that medication in Tier 2 (foams, shampoos, kits, etc.)
- An updated tier list is included on the next page. Current drug tiers & prior authorization criteria for all therapeutic categories are available at www.okhca.org/providers/rx/PA.

We appreciate the services you provide to Oklahomans insured by SoonerCare.

Pharmacy Help Desk Phone Numbers (405)522-6205 option 4 or (800)522-0114 option 4

Service Hours: Monday – Friday (8:30a – 7:00p); Saturday (9:00a – 5:00p); Sunday (11:00a – 5:00p)

Email: pharmacy@okhca.org OHCA Website: www.okhca.org

PA Criteria/Step Therapy Tiers: www.okhca.org/providers/rx/pa PA forms: www.okhca.org/rx-forms



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SoonerCare Topical Corticosteroid Prior Authorization Tiers

| Tier 1 | Tier 2 |
|--|---|
| | Ultra high to high potency |
| Augmented betamethasone dipropionate (C) | Betamethasone dipropionate (C,O) |
| Clobetasol propionate 0.05% (C,G,O,So) | Fluocinonide 0.05% (G,So) |
| Fluocinonide 0.05% (C,O) | Diflorasone diacetate 0.05% (C, ApexiCon E [®] C, O) |
| Halobetasol propionate (Ultravate [®] C, O) | Amcinonide (C,O,L) |
| | Augmented betamethasone dipropionate (Diprolene [®] O,G,L) |
| | Clobetasol propionate 0.05% (Clobex [®] L,Sh,Spr; Olux [®] F, Olux-ETM F) |
| | Desoximetasone 0.25% (Topicort [®] C,O,) 0.05% (G) |
| | Fluocinonide 0.1% (Vanos [®] C) |
| | Halobetasol propionate (HalوناتM, F) |
| | Halobetasol propionate/lactic acid (Ultravate [®] X C) |
| | Halcinonide (Halog [®] C,O) |
| | medium potency |
| Med/high to Betamethasone dipropionate (L) | Mometasone furoate 0.1% (O) |
| Betamethasone valerate 0.1% (C) | Betamethasone valerate 0.1% (O,L) |
| Fluocinonide emollient (C) | Fluocinolone acetonide 0.025% (Synalar [®] C,O) |
| Fluticasone propionate (Cutivate [®] C,O) | Hydrocortisone valerate 0.2% (O) |
| Mometasone furoate 0.1% (Elocon [®] C,L) | Betamethasone dipropionate/calcipotriene (Taclonex [®] O, Sus, Spr) |
| Triamcinolone acetonide (PediadermTM, TrianexTM C,O,L) | Betamethasone valerate 0.12% (Luxiq [®] Foam) |
| Hydrocortisone valerate 0.2% (C) | Desoximetasone 0.05% (Topicort LP [®] C) |
| | Flurandrenolide tape (Cordran [®]) |
| | Fluticasone propionate (Cutivate [®] L) |
| | Hydrocortisone butyrate 0.1% So |
| | Hydrocortisone probutate (Pandel [®] C) |
| | Hydrocortisone valerate (Westcort [®] C,O) |
| | Prednicarbate (Dermatop [®] O,C) |
| | Triamcinolone acetonide (Kenalog [®] Spray) |
| | Low potency |
| Low Alclometasone dipropionate (Aclovate [®] C,O) | Fluocinolone acetonide 0.01% (C, So, Synalar [®] So) |
| Fluocinolone acetonide 0.01% (Synalar So, C; Derma-Smooth [®] ; Derma-Smooth FS [®] oil) | Coclorolone pivalate (Cloderm [®] C) |
| Hydrocortisone acetate 2.5% (C,O,L) | Desonide 0.05% (Desonate [®] G, Verdeso [®] F, L) |
| Hydrocortisone/urea (U-Cort [®] C) | Desonide 0.05% (C,O) |
| | Desonide/emollient (Desowen [®] kit C,O) |
| | Fluocinolone acetonide 0.01% (Capex [®] Sh) |
| | Hydrocortisone/lidocaine (C) |

C= Cream, O = Ointment, L = Lotion, G = Gel, Sh = Shampoo, So – Solution, Spr = Spray, Sus = Suspension, F = Foam

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