

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](http://www.okhca.org/pa). Pharmacy prior authorization forms can be found at [www.okhca.org/rxforms](http://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](http://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](http://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](http://www.okhca.org/bgsupplies).

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