



## SoonerCare Pharmacy Update

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](mailto:pharmacy@okhca.org) OHCA Website: [www.okhca.org](http://www.okhca.org)

September 16, 2013

**REMINDER** - Synagis<sup>®</sup> will again require prior authorization for the 2013-14 RSV Season. Approval is based on the 2012 American Academy of Pediatrics Guidelines.

- The Synagis<sup>®</sup> petition form will be available on the OHCA website on October 1, 2013. The form, Pharm-7, updated 9/18/2012, must be signed by the prescriber. **Outdated petition forms will not be accepted.** <http://www.okhca.org/providers.aspx?id=1160>
- Approval dates for Synagis<sup>®</sup> will be November 1, 2013 thru March 31, 2014.
- **Petitions will NOT be accepted prior to October 14<sup>th</sup>.** Petitions submitted prior to this date will be denied and will have to be resubmitted after October 14<sup>th</sup>.
- The maximum duration of therapy is **5 doses (including any administered in the hospital)** with a dose to be administered not more often than every 30 days. Infants born at 32-34 weeks gestation will receive up to 3 doses. Members given doses more frequently than every 30 days will not be authorized for additional doses.
- Because Synagis is a weight-based drug, weights must have been taken within three weeks so that an appropriate number of vials for the season can be approved. Older weights will not be accepted.
- Only those doses that require greater than a vial's dose +10% may use the next vial size or an additional vial. See table below.
- Quantity limits will be set to ensure that excessive vials are not being used.
- To avoid unnecessary risk to the patient, multiple patients are **not** to be treated from a single vial. Failure to follow this recommendation will result in referral of the provider to the Quality Assurance Committee of the Oklahoma Health Care Authority.

The **Supplemental Synagis Dosing Form** should be completed and faxed with each subsequent administration to document the members' weight and dosage. This data will be tracked in an effort to ensure optimal quantities are available for each member.

Weight Range	Dose (mg)	50 mg Vial	100 mg vial
0 - 3.67 kg	0-55	1	
3.7 - 7.3 kg	56-110		1
7.4 - 11.0 kg	111-165	1	1
11.1 - 14.67 kg	166-220		2

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