

Pharmacy Services

(800) 522-0114, option 4

Dear SoonerCare Provider,

Inhaler Assist Device (Spacer) Coverage Update:

Effective March 2, 2016 Inhaler assist devices (spacers) will have maximum allowable cost (MAC) pricing applied when billed as a pharmacy claim. The MAC rate will be \$18.00 when billed through the pharmacy point of sale system. This rate is equal to the reimbursement if billed as a Durable Medical Equipment (DME) provider. Spacers will continue to be payable as a DME item with HCPCS code A4627.

A survey of the market shows several spacer products available to pharmacies at or below the \$18.00 MAC rate. If contracted rates of AWP - 12% or WAC + 5.6% are lower than the \$18.00 MAC rate the lower rate will apply.

A quantity limit of 2 spacers per year will apply allowed as one spacer per claim, 2 claims per year. Please submit spacer claims with a quantity of 1 and day supply of 30.

Brand Name Abilify® Update:

Effective February 26, 2016 generic Abilify® (aripiprazole) tablets will be preferred to brand-name Abilify® for SoonerCare members. Previously brand-name Abilify® (aripiprazole) formulations were preferred for SoonerCare members.

Beginning March 26, 2016 brand-name Abilify® (aripiprazole) tablets will require prior authorization. Claims submitted for brand-name Abilify® (aripiprazole) will deny with the NCPDP edit 75, *Prior Authorization Required*. Requests for prior authorization of the brand-name formulation will not be approved without a medically necessary reason why the SoonerCare member cannot take generic Abilify® (aripiprazole). Please note that generic Abilify® (aripiprazole) will remain a Tier-2 product and the criteria for Tier-2 authorization will still apply.

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