

November 28, 2016

Dear SoonerCare Provider,

The purpose of this fax is to provide updates regarding butalbital containing medications and topical corticosteroid coverage.

Effective December 19th, 2016, Esgic[®] capsules (butalbital/acetaminophen/caffeine 50mg/325mg/40mg) will require prior authorization. Fioricet[®] tablets (butalbital/acetaminophen/caffeine 50mg/325mg/40mg) will be preferred to Esgic[®] capsules due to the large difference in cost between the two formulations. The following prior authorization criteria will apply for Esgic[®] capsules:

Esgic[®] Capsules (Butalbital/Acetaminophen/Caffeine 50mg/325mg/40mg) Approval Criteria:

1. A patient-specific, clinically significant reason why the member cannot use Fioricet[®] tablets (butalbital/acetaminophen/caffeine 50mg/325mg/40mg).

Members currently utilizing Esgic[®] capsules will not be “grandfathered.” Members must switch to Fioricet[®] tablets, or submit a manual prior authorization for consideration of reimbursement of Esgic[®] capsules. Prior authorization request forms can be found online at www.okhca.org/forms (PHARM-04). Updated versions of prior authorization criteria for butalbital containing medications can be downloaded from www.okhca.org/pa, by selecting “Central Nervous System/Behavioral Health.”

Effective December 19th, 2016, the following changes will be made to the Topical Corticosteroid category:

1. The following topical corticosteroids will move from Tier-1 to Tier-2:
 - a. hydrocortisone butyrate 0.1% solution
 - b. Lidex E[®] (fluocinonide emollient)
 - c. Temovate[®] (clobetasol propionate 0.05% gel and solution)
2. Beta-Val[®] (betamethasone valerate 0.1% ointment and lotion) and Diprolene[®] (augmented betamethasone dipropionate gel) will be moved from Tier-2 to Tier-1 and will no longer require prior authorization.

Members currently utilizing Tier-1 topical corticosteroids that are moving to Tier-2 will not be “grandfathered.” Members must switch to a Tier-1 alternative, or submit a manual prior authorization for consideration of reimbursement of the prior authorized medication. Prior authorization request forms can be found online at www.okhca.org/forms (PHARM-04). Updated versions of prior authorization criteria for topical corticosteroids can be downloaded from www.okhca.org/pa, by selecting “Topical.”

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