

**Pharmacy Services**  
**(800) 522-0114, option 4**

March 27, 2017

**RE: Prior Authorization of Medications Used to Treat Skin Cancer – Effective April 10, 2017**

Dear SoonerCare Provider,

Effective April 10, 2017, the Oklahoma Health Care Authority (OHCA) will require a prior authorization (PA) for the following medications: **Odomzo® (Sonidegib), Erivedge® (Vismodegib), Keytruda® (Pembrolizumab), Opdivo® (Nivolumab), Yervoy® (Ipilimumab), Tafinlar® (Dabrafenib), Zelboraf® (Vemurafenib), Cotellic® (Cobimetinib), Mekinist® (Trametinib), and Imlygic® (Talimogene Laherparepvec).**

If a SoonerCare member is currently on therapy with one of these medications, the medication will be “grandfathered”. If the drug is obtained through the pharmacy claim system, it will be automatically prior authorized based on past claims. Medical claims typically lag behind the treatment date, and we may be unable to see current therapy. In order to avoid a disruption in therapy we recommend submitting a PA for those members who started on therapy after 01/01/2017. Dates of previous doses must be listed on the PA form in order for our staff to know the patient has already received therapy.

The specific PA requirements for each drug are located on the Oklahoma Health Care Authority website and can be downloaded from [www.okhca.org/rx-pa](http://www.okhca.org/rx-pa), then clicking “Oncologic Therapies”. A drug specific prior authorization form is required for each of the above mentioned medications, which can be found online at [www.okhca.org/forms](http://www.okhca.org/forms) (PHARM-59 – PHARM-68).

If you have questions, please contact the pharmacy authorization unit at (800) 522-0114, option 4.

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