



Ellen M. Buettner | Chief Executive Officer

J. Kevin Stitt | Governor

OHCA 2024-28

December 13, 2024

RE: Prior Authorization of Alymsys[®], Avzivi[®] and Vegzelma[®] — effective Jan. 13, 2025

Dear Provider,

As authorized by [OAC 317:30-5-77-2](#), effective Jan. 13, 2025, the Oklahoma Health Care Authority (OHCA) will require a prior authorization (PA) for Alymsys[®] (bevacizumab-maly), Avzivi[®] (bevacizumab-tnjn) and Vegzelma[®] (bevacizumab-adcd). No PA is required for Avastin[®] (bevacizumab), Mvasi[®] (bevacizumab-awwb) and Zirabev[®] (bevacizumab-bvzr).

If a SoonerCare member is currently on therapy with Alymsys, Avzivi or Vegzelma, the medication will be approved for continuation of therapy.

Since medical claims typically lag behind the treatment date, we may be unable to verify current therapy. In order to avoid a disruption in therapy and to ensure uninterrupted therapy, we recommend submitting a PA request for those members who started therapy after Dec. 1, 2024. Dates of previous doses must be listed on the PA form if a member has already received therapy.

The specific PA requirements for the bevacizumab products are located on the [OHCA website](#) in the “Oncologic” therapeutic category. A [drug-specific PA form](#) is required for Alymsys, Avzivi and Vegzelma[®] (PHARM-166), which is located on the OHCA website.

All medication PA requests are submitted to the Pharmacy Prior Authorization Unit at the fax number located at the bottom of the PA form. Please do **not** submit the requests to the Medical Authorization Unit or online via the provider portal.

If the member is enrolled with a SoonerSelect health plan, please use their PA process or contact the specific SoonerSelect plan’s provider support line. If you have questions for members with traditional SoonerCare benefits, please contact the SoonerCare Pharmacy Prior Authorization Unit at 800-522-0114, option 4.



ADDRESS

4345 N. Lincoln Blvd.
Oklahoma City, OK 73105



WEBSITES

oklahoma.gov/ohca
mysoonerCare.org



PHONE

Admin: 405-522-7300
Helpline: 800-987-7767

Thank you for your continued service to Oklahoma's SoonerCare and SoonerSelect members.

Sincerely,

A handwritten signature in black ink, reading "Traylor Rains". The signature is written in a cursive style with a long, sweeping tail on the letter "s".

Traylor Rains
State Medicaid Director