



Clay Bullard | Chief Executive Officer

J. Kevin Stitt | Governor

OHCA 2025-23

November 26, 2025

RE: Prior Authorization of Photrexa®/Photrexa® Viscous Cross-Linking Kit - Effective January 1, 2026

Dear Provider,

As authorized by [OAC 317:30-5-77-2](#), effective Jan. 1, 2026, the Oklahoma Health Care Authority (OHCA) will require a prior authorization (PA) for Photrexa®/Photrexa® Viscous (riboflavin 5'-phosphate) Cross-Linking Kit.

The specific PA requirements for Photrexa®/Photrexa® Viscous are listed below and are located on the [OHCA Prior Authorization page](#) in the Ocular/Otic therapeutic category. Form [PHARM-18](#) is used for medical PA requests and can be found on the [OHCA Pharmacy Forms page](#).

Photrexa®/Photrexa® Viscous (Riboflavin 5'-Phosphate) Approval Criteria:

- An FDA-approved diagnosis of one of the following:
 - Progressive keratoconus.
 - Corneal ectasia following refractive surgery.
- Must be prescribed by and administered by an optometrist or ophthalmologist trained in the corneal cross-linking procedure.
- Must be used in combination with the KXL® System in the corneal cross-linking procedure.
- Must be administered using the epithelial-off procedure as specified in the package labeling.
- A quantity limit of 1 kit (6mL) per eye will apply.

If approved, the appropriate drug HCPCS and procedure CPT codes will be approved at the same time.



ADDRESS

4345 N. Lincoln Blvd.
Oklahoma City, OK 73105



WEBSITES

oklahoma.gov/ohca
mysoonerhealth.org



PHONE

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

All medication PA requests must be submitted to the Pharmacy Prior Authorization Unit via the fax number located at the bottom of the PA form. Do not submit requests to the Medical Authorization Unit or online via the provider portal.

If the member is enrolled in 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.

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

Sincerely,

A handwritten signature in black ink, appearing to read "S White", with a stylized, flowing script.

Sherri White
Chief Operating Officer