SoonerCare Pharmacy Update

Pharmacy Help Desk Phone Numbers 405-522-6205 option 4 or 800-522-0114 option 4
Service Hours: Monday – Friday (8:30a – 7:00p); Saturday (9:00a – 5:00p); Sunday (11:00a – 5:00p)
Email: pharmacy@okhca.org  OHCA Website: www.okhca.org

September 22, 2006

Effective September 22, 2006 – Xopenex® and Xopenex HFA® will require prior authorization for use of these products in excess of 90 days of therapy in a 360 day period. A quantity limit of 30g (2 units) every 30 days will apply to Xopenex HFA®. A quantity limit of 288 units every 30 days will apply to Xopenex®.

• Criteria for approval:
  In the prior authorization request, the prescriber should explain why the client is unable to use long acting bronchodilators and/or inhaled corticosteroid (ICS) therapy for long-term control as recommended in the NAEPP guidelines. Also, the need for use of this product over albuterol should be stated.

REMINDER – Per OAC 317:30-3-5(d), a pharmacy participating in the Medicaid program may not deny medications to an eligible individual based on such individual's inability to pay the co-payment. A person's assertion of their inability to pay the co-payment establishes this inability.

Pharmacy rules are posted on the OHCA website:

REMINDER – Prescription Fill Process

• Prescription(s) received by pharmacy.

• Eligibility verified, if necessary, by Pharmacy calling the OHCA Pharmacy Help Desk, 405-522-6205 option 4 or 800-522-0114 option 4.

• Claims processing attempted.
  ➢ If claim processing succeeds, medication is dispensed.
  ➢ If claim denies, the pharmacy contacts the OHCA Pharmacy Help Desk for reason and/or solution.
  ➢ If prior authorization is necessary, the pharmacy completes their portion of the appropriate request form(s) and faxes it to the physician’s office where the prescription originated. The physician’s office completes the form(s) & faxes to OHCA Pharmacy Help Desk for review.

• For claims requiring a prior authorization, after the pharmacists at the Help Desk review the request(s), the response is faxed back to the requesting pharmacy. If the request has been approved, the claims should pay and the medication should
be dispensed. If the request is denied, the pharmacy relays the reason for denial to the physician’s office where the prescription originated.

Thank you for your continued service to Oklahoma’s SoonerCare clients.