October 31, 2007

Children’s Cough & Cold Coverage

An updated list of cough and cold products that are covered for children under age 21 is available online at www.okhca.org. Please note that all infant drop formulations that contain cough suppressants and decongestants are no longer covered.

Prior Authorization Changes

- Vyvanse™ is a Tier-1 medication and does not require prior authorization for members under age 21. (For members age 21 and older, all ADHD/Narcolepsy medications require prior authorization.)

- Veramyst™ is a Tier-1 nasal allergy medication and does not require prior authorization. A quantity limit of one 10gm spray bottle per 30 days applies.

- Brovana™ requires prior authorization effective November 1, 2007.
  
  **Criteria for approval**
  - Member must be age 18 or older
  - Diagnosis of COPD, chronic bronchitis, or emphysema
  - Prior trial with Advair®, Serevent®, or Foradil® within the past 45 days
  - Clinical exception for members who are unable to effectively use hand-actuated devices or are stable on nebulized therapy
  - Quantity limit of 120 ml for a 30 day supply

- Exforge® is a Tier-2 ARB and requires prior authorization.
  
  **Criteria for approval**
  - FDA approved indication
  - Prior trial with a Tier-1 ACE Inhibitor
  - Members with diabetes are exempt from step therapy requirements
  - Quantity limit of 30 tablets for a 30 day supply

We appreciate the services you provide to Oklahomans insured by SoonerCare.