## Supporting Information for Step Therapy Exception Request Pursuant to Maryland Insurance Article §15–142

Pursuant to Maryland <u>Insurance Article §15–142</u> , the patient qualit	fies for an exception to the step therapy	
protocol because any <b>one</b> of the following conditions has been met:		
The required drug has not been approved by the FDA for the		
☐ A prescription drug covered by the plan was ordered for the		
based on the prescriber's judgement it was effective in treat	ting the disease or condition.	
The required drug is contraindicated		
The required drug will likely cause an adverse reaction		
The required drug is expected to be ineffective based on the patient and drug regiment	e known clinical characteristics of the	
☐ The patient tried and failed a drug in the same pharmacolog	gic class or with the same mechanism of	
action as the required drug and it was discontinued due to la		
diminished effect, or an adverse event while under their cur	rent or any preceding source of	
coverage		
☐ The patient is stable on a prescription drug other than the re	equired drug	
Rationale for Request		
Signature:	Date:	
# C		

**Attn: Department of Insurance** 

Fax: 410-468-2270 / Complaint: <a href="https://enterprise.insurance.maryland.gov/consumer/ConsumerPortalWelcomePage.aspx">https://enterprise.insurance.maryland.gov/consumer/ConsumerPortalWelcomePage.aspx</a>