

## Supporting Information for Step Therapy Exception Request

Pursuant to Oklahoma Statutes [§63-7310](#)

Determination required within:

- 24 hours (urgent)
- 72 hours

Pursuant to OS [§63-7310](#), the patient qualifies for an exception to the step therapy protocol because any **one** of the following conditions has been met:

- The required prescription drug is contraindicated or will likely cause an adverse reaction or physical or mental harm.
- The required drug is expected to be ineffective.
- The patient has tried the required drug under their current or a previous health plan and the drug was discontinued due to a lack of efficacy, effectiveness, diminished effect, or an adverse event.
- The patient is stable on a prescription drug other than the required drug while on their current or a previous health plan.
- The required drug is not in the best interest of the patient based on medical necessity\*

### Rationale for Request

Signature:

Date:

**Attn: Department of Insurance**

Email: 800-522-0071 /Complaint: <https://www.oid.ok.gov/consumers/file-an-online-complaint/>

\*Medical Necessity means under the applicable standard of care, a health service or supply is appropriate to improve or preserve health, life or function, to slow the deterioration of health, life or function or for the early screening, prevention, evaluation, diagnosis or treatment of a disease condition, illness or injury.