

Supporting Information for Step Therapy Exception Request

Pursuant to South Dakota Codified Laws [58-17H-55](#)

Determination required within:

- 72 hours (urgent)
- 5 calendar days

Pursuant to South Dakota Codified Laws [58-17H-55](#), the patient qualifies for an exception to the step therapy protocol because any **one** of the following conditions has been met:

- The required drug is contraindicated.
- Due to a documented adverse event with a previous use, or a documented medical condition, the required prescription drug is likely to:
 - Cause an adverse reaction.
 - Cause physical or mental harm.
 - Decrease ability to achieve or maintain reasonable functional ability performing daily activity.
- The patient has discontinued a therapeutically equivalent dose of the required drug due to ineffectiveness after allowing sufficient time for a positive treatment outcome.
- The patient is currently receiving a positive therapeutic outcome on a drug other than the required drug.

Rationale for Request

Signature:

Date:

Attn: Department of Financial Regulation

Phone: 605.773.3563 / Complaint: https://dlr.sd.gov/insurance/doi_complaint.aspx