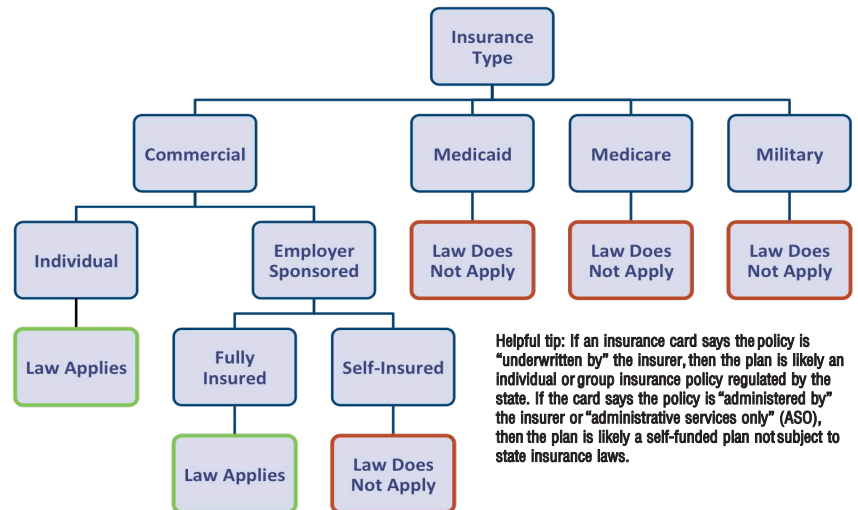


Submitting an Exception Request

Patients and prescribing providers must have access to a clear, readily accessible, and convenient process to request a step therapy exception. The process must be accessible on the reviewing entity's website.

Because state law creates required exceptions criteria that may differ from a payer's standard medical necessity and appropriateness criteria, it is advisable to provide a citation for the specific criteria in the law you believe a patient meets, and information that supports that judgment with your exception request.



Exceptions Criteria

Under Title 18 §3381, certain health plans must grant an override to a step therapy protocol if any of the following conditions exist:

- The required drug is contraindicated;
- The required drug is likely to:
 - Cause an adverse reaction;
 - Cause physical or mental harm;
 - To be ineffective.
- The required drug, or another drug in the same pharmacologic class, or with the same mechanism of action, was previously discontinued due to ineffectiveness, diminished effect, or an adverse event;
- The required drug is not in the patient's best interest based on medical necessity;
- The patient is stable on a drug prescribed under their current or previous health plan.*

*The drug must still be covered by the health plan.

Response Timeframe

The reviewing entity must grant or deny the request within 2 business days of receipt, or within 24 hours when exigent circumstances exist. Requests are considered granted if the reviewing entity does not provide the required response within the required timeframes.

Further Appeals

Any denial of a request for a step therapy exception is subject to further appeal. The payer's notice should include reason for denial and information about the payer's appeals process. A payer's appeals policy may also be found in the member or provider handbook, the payer's website, or by calling the customer service number found on the back of a member's insurance card.

Complaints

Department of Insurance
Phone: 302.674.7310
insurance.delaware.gov/services/filecomplaint/