

Submitting an Exception Request

State law requires certain health plans to provide a process to request a step therapy exception. The process must be made accessible on the plan's website. Because the 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 with your request for the specific criteria in the law you believe a patient meets, and information that supports that judgment.

Exceptions Criteria

Certain health plans must grant an override of a step therapy protocol if at least one of the following conditions is established to exist based on submitted evidence:

- The required 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 or another drug in the same pharmacologic class or a drug with the same mechanism of action, and the drug was discontinued due to lack of efficacy, diminished effect, or an adverse event;
- The patient is stable on a prescription drug for the medical condition under consideration;
- The required drug is not in the best interest of the patient based on medical appropriateness.

Response Timeframe

West Virginia state law requires the process for requesting a step therapy exception to be accessible on the plan's website, where the plan's timeframes should be detailed. In the event a step therapy exception request meets any of the outlined criteria, the request must be expeditiously granted. The health plan must provide a prescription drug for treatment of the medical condition under consideration until a determination is made.

Appealing a Denial

If an exception request is denied, that determination may be appealed. 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

Office of the Insurance Commissioner
Fax: 304-558-4965
wvinsurance.gov/consumerservices/

