Supporting Information for Step Therapy Exception Request

Pursuant to O.C.G.A § 33-24-59.25

Request is:

Urgent (24 hours)

Normal (2 business days)

Pursuant to O.C.G.A <u>§ 33-24-59.25</u>, the patient qualifies for an exception to the step therapy protocol because any <u>one</u> of the following conditions has been met:

- The required prescription drug is contraindicated or will cause an adverse reaction, physical, or mental harm to the patient.
- The required drug is expected to be ineffective.
- The patient has tried the required drug or another drug in the same pharmacologic class or with the same mechanism of action while on their current or immediately preceding plan and the drug was discontinued due to a lack of efficacy, effectiveness, diminished effect, or an adverse event.

The patient is currently receiving a positive therapeutic outcome on a drug other than the required prescription drug, and received coverage for such drug while on their current or immediately preceding health plan, and the change required by the step therapy protocol is expected to be ineffective or cause harm to the patient.

Rationale for Request	

Signature:	Date:

Attn: Office of the Commissioner of Insurance and Safety Fire

Fax: 404.656.2070 /Complaint: <u>https://oci.georgia.gov/file-consumer-insurance-complaint</u>