Supporting Information for Step Therapy Exception Request

Pursuant to Minnesota Statutes <u>620.181</u>

Determination required within: 72 hours (Emergency) 5 days (Normal)	
Pursuant to 62Q.181 of the Minnesota Statutes, the patient qualifies protocol because any one of the following conditions has been met: The required prescription drug is contraindicated. The required drug will likely cause and adverse reaction, p ability of the patient to maintain or achieve reasonable fun activities. The patient has had a trial of the required prescription drug pharmacologic class or with the same mechanism of action discontinued due to lack of effectiveness or an adverse every The patient is receiving a positive therapeutic outcome medical condition under consideration, received coverage or immediately preceding health plan, and the required cause harm.	shysical or mental harm, or decrease the ctional ability in performing daily g or another drug in the same and the prescription drug was ent. on a prescription drug for the age for such drug under their current
Rationale for Request	
Signature:	Date:

Attn: Department of Commerce

Phone: 651-539-1600 /Complaint: https://mn.gov/commerce/consumers/file-a-

complaint/complaints/