

Step Therapy

Override(s)	Approval Duration
Step Therapy	1 year

Medications	Quantity Limit
Various	Subject to quantity limits

APPROVAL CRITERIA

- I. Individual has tried and has a documented therapeutic failure of the preferred product(s); **OR**
- II. Documentation is provided via clinical evidence/literature for the likelihood of **one** of the following:
 - a) Individual won't respond to therapy; **OR**
 - b) Adverse effects causing mental/physical harm; **OR**
 - c) Impediment to adherence; **OR**
 - d) Worsening of a comorbid condition; **OR**
 - e) Decreased functional status.

State Specific Mandates		
State name Indiana	Date effective 7.1.16	Mandate details (including specific bill if applicable)  IN Protocol Exception 27-8-5-30 ;

Key References:

Clinical Pharmacology [database online]. Tampa, FL: Gold Standard, Inc.: 2016. URL: <http://www.clinicalpharmacology.com>. Updated periodically.

DailyMed. Package inserts. U.S. National Library of Medicine, National Institutes of Health website. <http://dailymed.nlm.nih.gov/dailymed/about.cfm>.

DrugPoints® System (electronic version). Truven Health Analytics, Greenwood Village, CO. Updated periodically.

Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2016; Updated periodically.