Step Therapy

Insurance companies have policies, such as step therapy, that are designed to help control costs but sometimes block patients' access to medications and limit the decision making of patients and physicians.1

**STEP THERAPY requires patients to:**

1. **TAKE OTHER POTENTIALLY INEFFECTIVE MEDICATIONS FIRST**
2. **FAIL ON THESE MEDICATIONS**
3. **BEFORE INSURERS PAY FOR DOCTOR'S ORIGINAL PRESCRIPTION**

There is little oversight and few regulations that require insurers to prove the effectiveness of their step therapy policies in ensuring quality patient care.

**STEP THERAPY is on the rise:**

In some cases, patients must step through FDA branded boxed warning drugs before being prescribed FDA branded non-boxed warning drugs.1

**WARNING**

These policies may not take into account a person's medical situation or history.

**STEP THERAPY POLICIES BY HEALTH INSURANCE PLANS**

- 2005: 27%
- 2013: 67%

**Major health conditions affected by STEP THERAPY:**

- cancer
- diabetes
- mental illness
- rheumatoid arthritis
- psoriasis
- psoriatic arthritis
- hypertension
- pain
- hepatitis C
- HIV/AIDS
- mental illness
- hepatitis C
- HIV/AIDS

For example:

- Patients with psoriasis and psoriatic arthritis, treatment access was delayed or denied.
- 48% denied at initial approval due to step therapy
- 39% had to appeal a denied or incomplete request
- 52% failed to receive original Rx (process took >90 days)
- Takes doctors' staff up to 2 hours/patient to manage requests & appeals (taking critical time away from patient care)

**REFERENCES:**


If you or a loved one has been affected by step therapy, speak with an advocacy group in your disease area. Visit [www.prescriptionprocess.com/steptherapy](http://www.prescriptionprocess.com/steptherapy) for more information/tips and to share your story.