



## Step Therapy Guideline

Medications requiring Step Therapy first go through trial and failure of formulary agent prior to approval

If prerequisite medications have been filled within specified time frame, prescription will automatically process at the pharmacy

Prior Authorization will be required for prescriptions that do not process automatically at pharmacy

**For Mercy Care, see detailed document:**

<https://client.formularynavigator.com/Search.aspx?siteCode=9034180552>

### **Duration of Approval if Requirements Are Met**

#### **Initial Approval:**

One year

#### **Renewal Approval:**

One year

#### ***Requires:***

Member response to treatment