

Frequently asked questions about Step Therapy.

What is Step Therapy?

Step Therapy is a prior authorization program. This means that certain medications in the Step Therapy program need approval from Cigna HealthcareSM before they're covered by your plan.

In Step Therapy, you need to try the most cost-effective, appropriate medications available before your plan covers more expensive brand name medications to treat your condition. Typically, you start by taking generics or lower-cost preferred brands. Generic medications have the same strength and active ingredients as brand name medications – but often cost much less – in some cases, up to 85% less.*

How does Step Therapy work?

In Step Therapy, you have to follow a series of steps before your higher-cost brand name medication may be covered by your plan.** Step Therapy varies by condition, but in general, it works like this:

- Try at least one lower-cost alternative.
- If you try one or more alternatives and your doctor feels they aren't right for you, you can receive coverage for the higher-cost brand.

When you fill a prescription for a Step Therapy medication (the higher-cost brand), we'll send you and your doctor a letter that lets you know the steps you need to take before your next refill.

Am I taking a Step Therapy medication?

Go to Cigna.com/ifp-drug-list to look up your medication. If there's an (ST) listed next to your medication, then it's part of the Step Therapy program. Once you're enrolled with Cigna, you can log in to the [myCigna® App](#) or [myCigna.com®](#) to learn more about how your plan covers your medication.

What do I need to do if my medication is part of the Step Therapy program?

Ask your doctor if a lower-cost alternative may be right for you. If your doctor wants you to continue to take a Step Therapy medication (the higher-cost brand), ask him or her to call us. Your plan will only cover your medication if your doctor requests and receives approval from Cigna Healthcare.

Questions?

Call **866.494.2111** or the number on your Cigna Healthcare ID card.

If you need language assistance, or have a disability, please call us at **866.494.2111** (For TTY services, dial 711). Accommodations are available and provided at no cost to you.

Individual and Family Plans

Cigna Health and Life Insurance Company or its affiliates





This information is for educational purposes only and is not an insurance solicitation.

* U.S. Food and Drug Administration (FDA) website, "Generic Drugs: Questions and Answers." Last updated 03/16/21. <https://www.fda.gov/drugs/questions-answers/generic-drugs-questions-answers>.

** If your doctor feels an alternative medication isn't right for you, he or she can ask Cigna to consider approving coverage of your medication.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

Plans contain exclusions and limitations and are not available in all areas. For costs and details of coverage, review your plan documents.

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