



## **Exceptions Process**

The exception process ensures that you have access to prescription drugs you need, is unique to the drug benefit. It provides a straightforward process for you to obtain a covered Part D drug at a more favorable cost-sharing level or obtain a Part D drug that is not on HealthSun Health Plans, Inc. formulary. Members may request an exception under the following circumstances:

- The member is using a drug covered on the HSHP formulary that has been removed during plan year for reasons other than safety;
- The member's physician prescribed a non-formulary drug for the member that the physician believes is medically necessary;
- The member is using a drug that has been moved during the plan year from the preferred to the non-preferred cost sharing tier; or
- The member's physician prescribed a drug for the member that is included in HealthSun Health Plans, Inc.'s more expensive cost sharing tier because the prescribing physician believes the drug included in the less expensive cost sharing tier is medically inappropriate for the member.
- If we will not provide or pay for a Part D prescription drug that your doctor has prescribed for you because it is not on our formulary.
- If you disagree with the amount that we require you to pay for a Part D prescription drug that your doctor has prescribed for you.
- If you are being told that coverage for a Part D prescription drug that you been getting will be reduced or stopped.
- If there is a requirement that you try another drug before we pay for the drug your doctor prescribed, or if there is a limit on the quantity (or dose) of the drug and you disagree with the requirement or dosage limitation.
- A "**grievance**" is the type of complaint you make if you have any other type of problem with HealthSun Health Plans, Inc. or one of our plan providers.

For example, you would file a grievance if you have a problem with things such as:

- The quality of your care
- Waiting times for appointments or in the waiting room
- The way your doctors or other s behave
- Being able to reach someone by phone or get the information you need
- The cleanliness or condition of the doctor's office
- HealthSun Health Plans' decision not to expedite a request for an appeal
- HealthSun Health Plans' decision not to extend an appeal beyond the required time frame.

For more information on how to file a request for an exception, grievance or appeal, please contact HealthSun Health Plans' Member Services Department at 305-234-9292 for Miami-Dade County, 1-877- 207-4900 for all other counties or TTY 877-206-0500 for the hearing impaired. Our office hours are Monday through Friday from 8:30a.m. to 5:30p.m. Alternative technical assistance will be available Saturday, Sundays and holidays to return your call within one business day.

H5431 -EXCEP 2010 Apvd.xx.xx.xxxx