What’s Step Therapy?
The Step Therapy program encourages the use of lower-cost, clinically appropriate medications to treat your condition. These are typically generics or preferred brands. You have to try these medications first before your plan covers more expensive brand name medications. Generic equivalent medications have the same strength and active ingredients as brand name medications, but often cost much less – in some cases, up to 80–85% less.**

Medications included in Step Therapy
Certain high-cost brand name medications are part of the Step Therapy program. These medications have a (ST) next to them on your drug list. Step Therapy medications aren’t covered by your plan unless your doctor requests and receives approval from Cigna.***

Step Therapy medications are used to treat these common conditions:
› ADD/ADHD
› Allergies
› Bladder problems
› Breathing problems
› Depression
› Heartburn/ulcer
› High blood pressure
› High cholesterol
› Mental health
› Osteoporosis
› Pain (non-narcotic pain relievers)
› Skin conditions
› Sleep disorders

How Step Therapy works
In Step Therapy, you have to follow a series of steps before your higher-cost brand name medication may be covered by your plan.*** For example, you may need to try one or more lower-cost alternatives before your medication may be covered. When you fill a prescription for a Step Therapy medication, we’ll send you and your doctor a letter that lets you know the specific steps you need to take before your next refill.

Log into myCigna.com to learn more about how your plan covers your medications. You can also call the number on the back of your Cigna ID card if you have questions.

Together, all the way.*

* Step Therapy program requirements may vary depending on our employer’s plan design. Due to state regulations, this program may not apply to insured health plans. Review your plan documents for the details of your specific health plan.
** U.S. Food and Drug Administration (FDA) website, “Facts About Generic Drugs.” Last updated 06/28/16.
*** 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. If you use a pharmacy that does not participate in your plan’s network, your prescription may not be covered, or reimbursement may be limited by your plan’s copayment, coinsurance or deductible requirements. Refer to your plan documents for costs and complete details of your plan’s prescription drug coverage.