

Mental Health Parity and Addiction Equity Act Disclosure Prescription Drug Frequently Asked Questions

This document includes standard responses to questions related to Mental Health Parity (MHP) and Non-Quantitative Treatment Limitations (NQTL). This communication is not intended, nor should it be treated as legal advice. Federal and state laws and regulations are subject to change. The content provided is for informational purposes only and is not medical advice. Decisions about medical care should be made by the doctor and patient. Please note, your plan documents govern all benefit determinations and in the case of conflict with this document your plan controls. Always refer to your plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the ID card.

The following explanations apply to both medical/surgical benefits and mental health/substance use disorder benefits unless stated otherwise.

Why does my health plan require prior authorization for prescription drugs?

Medical/Surgical Benefits

Mental Health/Substance Use Disorder Benefits

Prior authorization means getting approval from your health insurance plan before they pay for your prescription drugs. Your Plan uses prior authorization to:

- Check and prevent too much use of prescription drugs
- Manage expensive drugs
- Ensure drugs are safe and work well
- Decide if a drug is covered by your benefits and not experimental or unproven

What is step therapy and how does it affect prior authorization?

Medical/Surgical Benefits

Mental Health/Substance Use Disorder Benefits

Step therapy means you need to try a cheaper or similar drug or treatment first before your health plan will pay for a more expensive one. You might need to do step therapy before getting approval for some prescription drugs.

What factors and sources of information are involved in determining if prior authorization or step therapy is required?

Medical/Surgical Benefits

Mental Health/Substance Use Disorder Benefits

Here are the factors considered:

- · How the drug fits into treatment
- Availability of cheaper, similar drugs
- Value of using prior authorization or step therapy
- Safety and effectiveness
- Preventing unapproved drugs or unproven uses

Food and Drug Administration (FDA) approved product labeling, peer-reviewed medical literature, including clinical studies, drug comparison studies, pharmacoeconomic studies, outcomes research data, published clinical practice guidelines, comparisons of effectiveness, side effects, potential for off-label use, and claims data analysis as relevant.

Sources of information include:

- Whether or not the Food and Drug Administration, also known as the FDA, has approved the drug
- · Medical studies and articles
- Clinical guidelines
- Comparisons of drug effectiveness and side effects
- Claims data analysis

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Pharmacy Frequently Asked Questions (FAQ)
Applicable Benefit Classifications: All Prescription Drugs

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What is a Prescription Drug List (PDL) (also called a Formulary)?

Medical/Surgical Benefits

Mental Health/Substance Use Disorder Benefits

A Prescription Drug List (PDL), sometimes called a formulary, is a list of common medicines that doctors prescribe. It includes both brand-name and generic prescription drugs approved by the FDA. The medicines are grouped by typed and placed in levels that show how much you have to pay. The levels are called tiers.

The list helps make sure you use the right medicines and that you can get them easily. The cost and coverage depend on how well the medicine works, how often it's used, its price, and other available options.

What factors and sources are involved in determining if a drug is included on a Prescription Drug List?

Medical/Surgical Benefits

Mental Health/Substance Use Disorder Benefits

Here are the factors considered:

- How the drug fits into treatment
- · Availability of cheaper, similar drugs
- Value of using prior authorization or step therapy
- Similar drugs with the same effectiveness and side effects
- · Safety and effectiveness

The same factors are used for mental health and substance use disorder drugs as for other medical drugs.

Sources of information include:

- FDA-approved labels
- Medical studies and articles
- · Clinical guidelines
- Comparisons of drug effectiveness and side effects
- Claims data analysis

When your Plan performs prior authorization, implements step therapy or reviews the Prescription Drug List, does your Plan treat Mental Health/Substance Use Disorder differently than Medical/Surgical "as written"? Are mental health/substance use disorder decisions made any differently than medical/surgical decisions in practice ("in operation")?

Medical/Surgical Benefits

Mental Health/Substance Use Disorder Benefits

No. Your Plan found that the rules and processes for mental health and substance use disorder drugs are the same as for medical and surgical drugs. They make sure both types of decisions are made the same way. This means the rules are not stricter for mental health/substance use disorder services "as written" and "in operation."

Pharmacy Frequently Asked Questions (FAQ) Applicable Benefit Classifications: All Prescription Drugs

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