

Formulary Exceptions (FE) Checklist



For assistance
call us at:

1-888-BLUPRNT (1-888-258-7768)
Monday-Friday, 8 am-8 pm Eastern Time (ET)
Fax 1-866-370-3082

Formulary Exceptions Forms and Documentation

Some insurers may have insurer specific FE forms that can be obtained through the insurer's website or by contacting the insurer's customer service. YourBlueprint™ will contact the insurer and provide you with the correct FE form, if applicable.

- Complete any plan specific appeal forms or required documents
- Provide prior authorization (PA) denial case identification number
- Provide a copy of Letter of Medical Necessity submitted with PA

Patient's Information

- Patient's First Name and Last Name
- Patient's Date of Birth
- Patient's Gender
- Patient's Address
- Plan Identification Number

Prescriber's Information

- Prescriber's First Name and Last Name
- Prescriber's Specialty
- Prescriber's NPI
- Prescriber's office address
- Prescriber's phone and fax

Additional Information for Formulary Exceptions Letter

- Rationale for treatment**
 - Insert a clear summary statement for the reason(s) for medication
 - Include medication NDC, strength, frequency, quantity, days of supply, route of administration, and duration of treatment
 - Include trial data supporting the FDA approval of the requested treatment, as well as the medication's dosing and administration information (USPI)
- Summary of the patient's diagnosis**
 - Diagnosis (ICD-10-CM) and date of diagnosis
 - Patient medical records
 - Diagnostic test results and imaging results
 - Current severity of the patient's condition, including any comorbidities or intolerance to other therapies
- Summary of the patient's history**
 - Previously administered treatment(s)/procedure(s) and dates
 - Response to the intervention(s)
 - Recent symptoms and condition
 - Physician opinion of patient prognosis or disease progression
- Relevant information regarding the treatment decision**
 - Expert practice guidelines (eg, ASCO, NCCN)
 - Peer-reviewed journal articles

Sample Letter of Formulary Exception provided via fax or [download here](#) 

