

May 4, 2026

--- PHARMACY EXCEPTION REQUEST ---

Drug Name: TOUJEO (INSULIN GLARGINE U-300) 300 UNITS/ML INJECTION

Prescribing Provider: AVERY SOLIS (1493015826)

Exception Type: Non-Formulary

Review Type: Standard 72-hour

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Dear Avery Solis,

This letter confirms that Mojave Crest Assurance Company has completed the review of your Pharmacy Exception Request for Toujeo for patient Jules Arden.

Decision: Your request is DENIED.

Reason for the decision: The documentation provided does not sufficiently demonstrate that: the formulary-preferred alternatives have been tried and failed; or the formulary alternatives are contraindicated or likely to cause adverse clinical outcomes; or the requested medication is required to maintain clinical stability where switching would pose a significant medical risk. As outlined in your patient's Evidence of Coverage, brand-name medications with available generic or preferred alternatives are not covered unless medical necessity is clearly established in accordance with Plan guidelines.

You, your patient, or an authorized representative have the right to request an appeal of this decision. An appeal may be submitted with additional clinical documentation supporting medical necessity, including prior treatment history, adverse reactions, or other relevant information. Upon receipt of an appeal, the Plan will conduct a new review and notify you of the determination within applicable regulatory timeframes.

Sincerely,

Dr. Jules Henning, PharmD

Pharmacy Director

Mojave Crest Assurance Company