Commercial PA Criteria

Effective: December 18, 2023

Prior Authorization: Zurzuvae (zuranolone)

Products Affected: Zurzuvae (zuranolone) oral capsules

Medication Description: The mechanism of action of zuranolone in the treatment of postpartum depression (PPD) is not fully understood, but is thought to be related to its positive allosteric modulation of GABA-A receptors

Covered Uses:

1. Treatment of postpartum depression (PPD)

Exclusion Criteria: None

Required Medical Information:

1. Diagnosis

Prescriber Restriction: Medication is prescribed by or in consultation with a psychiatrist or an obstetrician-gynecologist

Age Restriction: 18 years and older

Coverage Duration: 14 days

Other Criteria:

Initial Approval Criteria

1. Postpartum Depression.

A. Patient meets **BOTH** of the following (i and ii):
   i. Patient has been diagnosed with severe depression; **AND**
   ii. Symptom onset began during the third trimester of pregnancy or up to 4 weeks post-delivery; **AND**

B. Patient is ≤ 12 months postpartum; **AND**

C. Patient is not currently pregnant

References:

1. Product Information: ZURZUVAE™ oral capsules, zuranolone oral capsules. Biogen Inc (per FDA), Cambridge, MA, 2023

Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	12/18/2023