

Reference number(s)
6981-A

This document applies to the following:

Formulary	Applies
Advanced Control (ACF)	<input checked="" type="checkbox"/>
Advanced Control Formulary Chart (ACFC)	<input checked="" type="checkbox"/>
Advanced Control – Choice (ACCF)	<input checked="" type="checkbox"/>
Basic Control (BC)	<input type="checkbox"/>
Basic Control Chart (BCC)	<input type="checkbox"/>
Standard Control (SF)	<input checked="" type="checkbox"/>
Standard Control Formulary Chart (SFC)	<input checked="" type="checkbox"/>
Standard Control – Choice (SCCF)	<input checked="" type="checkbox"/>
Value (VF)	<input checked="" type="checkbox"/>
Value Formulary Chart (VFC)	<input checked="" type="checkbox"/>

Formulary	Applies
Managed Medicaid Template (MMT)	<input type="checkbox"/>
Marketplace (MF)	<input type="checkbox"/>
Aetna Small Group Affordable Care Act (SG ACA) Aetna Health Exchange (AHE)	<input type="checkbox"/>
Aetna Individual Lives (IVL)	<input type="checkbox"/>
Aetna Fully Insured Advanced Control Formulary (Aetna FI ACF)	<input checked="" type="checkbox"/>
Aetna Fully Insured Advanced Control Formulary Chart (Aetna FI ACFC)	<input type="checkbox"/>
Aetna Fully Insured Standard Opt-Out (Aetna FI SOO)	<input type="checkbox"/>

Exception Criteria Zepbound

This document informs prescribers of preferred products when the target drug is requested.

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths except the vials, which are covered under the LillyDirect manufacturer program. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Zepbound	tirzepatide

Indications

FDA-approved Indications

Zepbound is indicated in combination with a reduced-calorie diet and increased physical activity:

- to reduce excess body weight and maintain weight reduction long term in adults with obesity or adults with overweight in the presence of at least one weight-related comorbid condition.
- to treat moderate to severe obstructive sleep apnea (OSA) in adults with obesity.

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Limitations of Use

- Zepbound contains tirzepatide. Coadministration with other tirzepatide-containing products or with any glucagon-like peptide-1 (GLP-1) receptor agonist is not recommended.

Plan Design Summary

Primary Formulary Alternative	Secondary Alternative	Non-Formulary Agent
Wegovy (semaglutide)	Mounjaro (tirzepatide)	Zepbound (tirzepatide)

This document informs prescribers of the availability of the primary formulary alternative (Wegovy) and secondary alternative (tirzepatide [Brand Mounjaro]).

Medications considered formulary or preferred on your plan may still require a clinical prior authorization review.

Primary Formulary Alternative

Authorization may be granted for the primary formulary alternative (Wegovy) when the following criteria is met:

- The patient can be treated with Wegovy.

Secondary Alternative

Authorization may be granted for the secondary alternative (tirzepatide [Brand Mounjaro]) when ALL of the following criteria are met:

- The patient cannot be treated with the primary formulary alternative (Primary Formulary Alternative: Wegovy).
- The patient has experienced an inadequate treatment response, intolerance, or has a contraindication to Wegovy. [ACTION REQUIRED: Documentation is required for approval.]
- The patient can be treated with tirzepatide (Brand Mounjaro).

References

1. Zepbound [package insert]. Indianapolis, IN: Lilly USA, LLC; December 2024.