

Specialty Guideline Management

Zurzuvae

Products Referenced by this Document

Drugs that are listed in the following table include both brand and generic and all dosage forms and strengths unless otherwise stated. Over-the-counter (OTC) products are not included unless otherwise stated.

Brand Name	Generic Name
Zurzuvae	zuranolone

Indications

The indications below including FDA-approved indications and compendial uses are considered a covered benefit provided that all the approval criteria are met and the member has no exclusions to the prescribed therapy.

FDA-approved Indications¹

Zurzuvae is indicated for the treatment of postpartum depression (PPD) in adults.

All other indications are considered experimental/investigational and not medically necessary.

Coverage Criteria

Post-Partum Depression (PPD)¹

Authorization of 1 month may be granted for treatment of post-partum depression in adults when all of the following criteria are met:

Reference number(s)
6270-A

- Member has moderate to severe post-partum depression and had a major depressive episode with onset of symptoms that began no earlier than the third trimester of pregnancy and no later than the first 4 weeks following delivery, documented by standardized rating scales that reliably measure depressive symptoms (e.g., Beck Depression Inventory [BDI], Hamilton Depression Rating Scale [HDRS], Montgomery-Asberg Depression Rating Scale [MADRS], etc.).
- Member is 12 months postpartum or less.
- Member will not receive more than one 14-day treatment course per pregnancy/childbirth.

References

1. Zurzuvae [package insert]. Cambridge, MA: Sage Therapeutics, Inc.; July 2024.