

Reference number(s)
7480-H

# Specialty Quantity Limit

## Veppanu

### 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
Veppanu	vepdegestrant

### Program Description

The standard limit is designed to allow a quantity sufficient for the most common uses of the medication. If the member's plan allows a quantity limit exception review for the requested medication, coverage of an additional quantity may be provided up to the exception limit with prior authorization.

### Covered Quantities

Coverage up to the exception limits may be provided with prior authorization via the Specialty Post Limit Quantity Exception Criteria for approval.

Medication	Standard Limit	Exception Limit
Veppanu (vepdegestrant) 100mg tablet	30 per 30 days	90 per 30 days
Veppanu (vepdegestrant) 200mg tablet	30 per 30 days	Not Applicable

### FDA-recommended Dosing

200mg once daily

Dose modifications may be necessary for adverse reactions:

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- 100mg once daily

Dose modification for concomitant use with:

- Strong CYP3A inhibitors: 100mg once daily
- Strong CYP3A inducers: 300mg once daily

## References

1. Veppanu [package insert]. New York, NY: Pfizer Inc.; May 2026.