



PROVIDER QUICK TIPS

#271

Medical Assistance Coverage of Zulresso (brexanolone) and Zurzuvae (zuranolone)

The Department of Human Services (Department) is reminding Medical Assistance (MA) providers that the MA program covers Zulresso (brexanolone) and Zurzuvae (zuranolone). Both Zulresso (brexanolone) and Zurzuvae (zuranolone) are FDA-approved for the treatment of postpartum depression.

Prior authorization guidelines to determine medical necessity of Zulresso (brexanolone) and Zurzuvae (zuranolone) in the Fee-For-Service (FFS) delivery system can be found on the Department's website: [Pharmacy Services Prior Authorization Clinical Guidelines](#)

For instructions on how to request a prior authorization in the FFS delivery system, please go to the Department's website: [Fee-for-Service Pharmacy Prior Authorization General Requirements and Procedures](#)

Providers rendering services in the MA managed care delivery system should address any questions related to prior authorization of Zulresso (brexanolone) and Zurzuvae (zuranolone) to the appropriate Physical Health HealthChoices or Community HealthChoices managed care organization.

Thank you for your service to our Medical Assistance beneficiaries.
We value your participation.
Check the Department's website often at: www.dhs.pa.gov