STATE OF WEST VIRGINIA
DEPARTMENT OF HUMAN SERVICES
BUREAU FOR MEDICAL SERVICES

Cynthia A. Persily, Ph.D.
Cabinet Secretary

Cynthia Beane
Commissioner

Office of Pharmacy Services
Prior Authorization Criteria
Veozah (fezolinetant)
Effective 9/25/2024
Prior Authorization Request Form

VEOZAH is a neurokinin 3 (NK3) receptor antagonist indicated for the treatment of moderate to severe vasomotor symptoms due to menopause.

CRITERIA FOR APPROVAL:

1. The patient has a diagnosis of menopause with moderate to severe vasomotor symptoms; **AND**

2. Patient is within the age range as recommended by the FDA label; **AND**

3. Documentation detailing the frequency and severity of the vasomotor symptoms must be provided; **AND**

4. The patient has had a 30-day trial of ONE hormone replacement therapy (HRT) agent (unless contraindicated) **AND** has had a 30-day trial of ONE non-hormonal therapy (such as an SSRI, SNRI, gabapentin, pregabalin or clonidine) which failed to provide sufficient relief OR TWO 30-day trials of non-hormonal therapies (ONLY if a hormonal therapy cannot be tolerated) which failed to provide sufficient relief; **AND**

5. Patient must have baseline liver function tests prior to initiating therapy* and every month for the first three months after patients start treatment, and then at months 6 and 9 of treatment; **AND**

6. Patient does not have severe renal impairment or end-stage renal disease.

Initial approvals may be authorized for 90 days. Further approvals may be granted for 1 year after all the continuation of therapy criteria has been met.

Do not start VEOZAH if concentration of ALT or AST is equal to or exceeds two times the ULN

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CONTINUATION OF THERAPY CRITERIA:

1) Patient continues to meet all initial approval criteria; **AND**
2) Demonstrate continued documented compliance; **AND**
3) Documentation of positive clinical response to therapy must be provided (such as decrease in frequency of symptoms and/or improvement in severity of vasomotor symptoms); **AND**
4) Patient has not experienced any treatment-restricting adverse effects (e.g., ALT or AST > 3 times the ULN).

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