

# Criteria-Based Consultation Prescribing Program

## CRITERIA FOR DRUG COVERAGE

### suzetrigine (Journavx)

#### Notes:

- Quantity Limits: Yes
- \* Intolerance excludes adverse drug reactions that are expected, mild in nature, resolve with continued treatment, and do not require medication discontinuation

**Initiation (new start) criteria:** Non-formulary **suzetrigine (Journavx)** will be covered on the prescription drug benefit when the following criteria are met:

- Patient is at least 18 years of age
- Prescribed by Plastic Surgery or Podiatry for moderate to severe pain related to abdominoplasty or bunionectomy
- Postoperative numeric pain rating scale (NRS) score  $\geq 7$  within 48 hours
- Patient has failed trial of or has an allergy or intolerance\* to OTC acetaminophen, OTC lidocaine cream/patches
- Patient has failed trial of or unable to take nonsteroidal anti-inflammatory drugs (NSAIDs) based on any of the following:
  - History of stomach ulcer/bleeding
  - History of bariatric surgery
  - Undergoing coronary artery bypass graft (CABG) surgery
  - Allergies to the entire NSAID class
  - History of stroke or myocardial infarction
  - Taking blood thinners
- Patient is not a candidate for opioids due to opioid use disorder (OUD) or opioid dependence