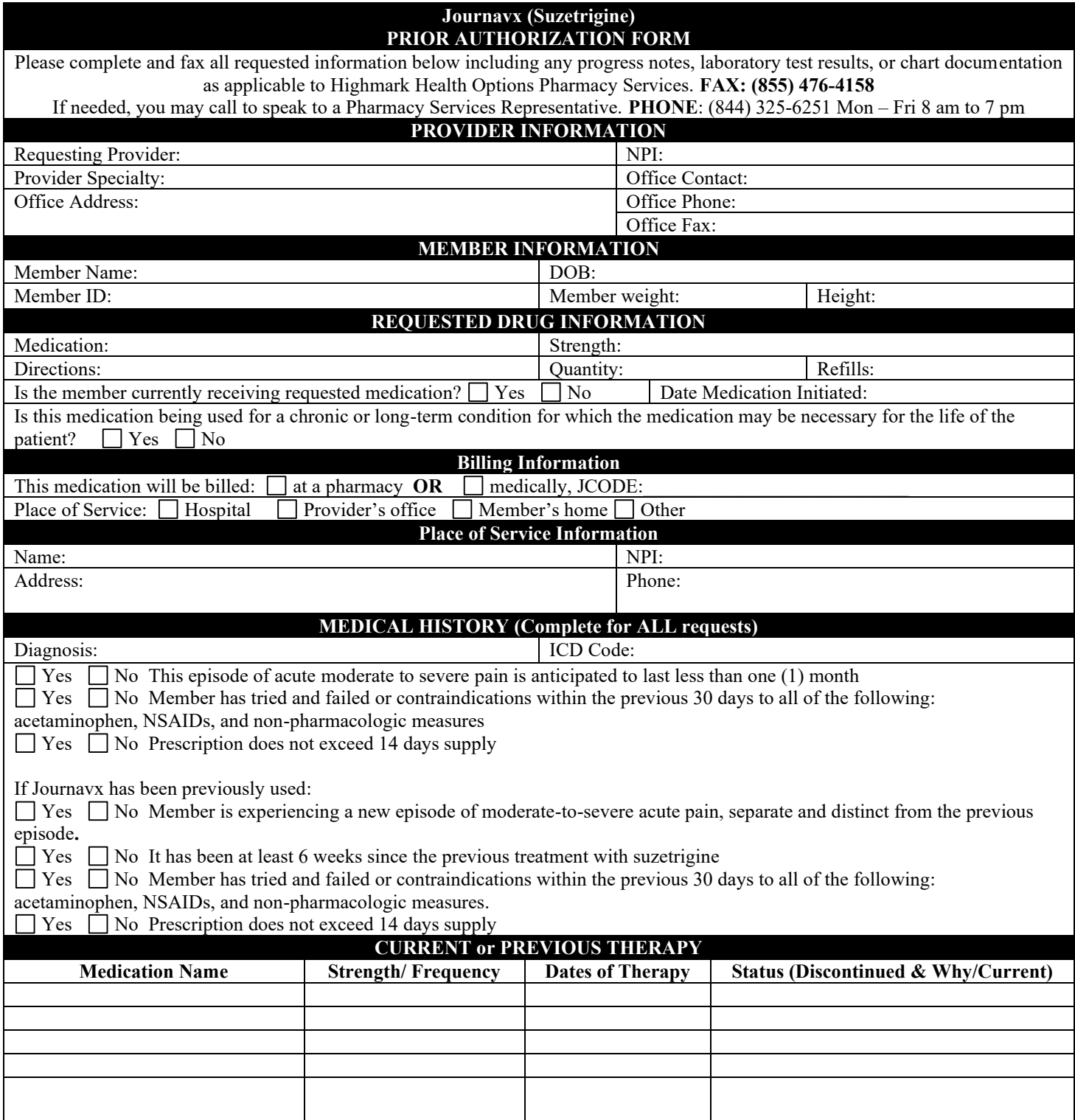




Journavx (Suzetrigine) no longer requires Prior Authorization effective 1/5/2026

Journavx is limited up to a 14 day supply (quantity max 29 tablets based on FDA approved dosing) and 1 prescription every 60 days.





Journavx (Suzetrigine)

PRIOR AUTHORIZATION FORM (CONTINUED) – PAGE 2 OF 2

Please complete and fax all requested information below including any progress notes, laboratory test results, or chart documentation as applicable to Highmark Health Options Pharmacy Services. **FAX: (855) 476-4158**

If needed, you may call to speak to a Pharmacy Services Representative. **PHONE: (844) 325-6251** Mon – Fri 8:00am to 7:00pm

MEMBER INFORMATION

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|--------------|----------------|---------|
| Member Name: | DOB: | |
| Member ID: | Member weight: | Height: |

SUPPORTING INFORMATION or CLINICAL RATIONALE

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Prescribing Provider Signature

Date

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