



**Commercial/Healthcare Exchange Quantity Limit Criteria**  
*Effective: November 7<sup>th</sup>, 2018*

**Quantity Limit Name:** Lucemyra

**Products Affected:** Lucemyra (lofexidine) oral tablet

**Type of Quantity Limit:**

- FDA maximum
- Usual Daily Frequency
- Split fill
- Other (Please specify): \_\_\_\_\_

**Limits to be applied:**

Coverage will be provided only up to the limits specified below.

Lucemyra 0.18 mg Oral Tablet

Quantity Limit: 224 tablets per 365 days

**References:**

1. Lucemyra [package insert]. Louisville, KY; US WorldMeds; May 2018.

**Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	11/7/2018

Last Res November 7, 2018



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