



**Commercial/Healthcare Exchange Quantity Limit Criteria**  
*Effective: May 8<sup>th</sup>, 2019*

**Quantity Limit Name:** Aemcolo

**Products Affected:** Aemcolo (rifamycin delayed-release tablets)

**Type of Quantity Limit:**

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

**Limits to be applied:**

12 tablets per 30 days

**References:**

1) Aemcolo™ delayed-release tablets [prescribing information]. San Diego, CA: Aries Pharmaceuticals, Inc.; November 2018.

**Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	4/15/2019

Last Res. April 15, 2019



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