



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

**Quantity Limit Name:** Tiglutik

**Products Affected:** Tiglutik (riluzole) oral suspension

**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.

Tiglutik (riluzole)

Quantity Limit: 600 mL per 30 days

**References:**

1. Tiglutik [package insert]. Berwyn, PA; ITF Pharma; September 2018.

**Policy Revision history**

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	03/08/2019

Last Res. March 8, 2019