



**Commercial/Healthcare Exchange Quantity Limit Criteria**  
*Effective: November 22, 2019*

**Quantity Limit Name:** Trikafta

**Products Affected:** Trikafta (elexacaftor/tezacaftor/ivacaftor) oral tablet therapy pack

**Type of Quantity Limit:**

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

**Limits to be applied:**

Trikafta (elexacaftor/tezacaftor/ivacaftor) oral tablet therapy pack 84 tablets per 28 days

**References:**

1. Product Information: TRIKAFTA(TM) oral tablets, elexacaftor, tezacaftor, ivacaftor oral tablets; ivacaftor oral tablets. Vertex Pharmaceuticals Incorporated (per manufacturer), Boston, MA, 2019.

**Policy Revision history**

| Rev # | Type of Change | Summary of Change | Sections Affected | Date       |
|-------|----------------|-------------------|-------------------|------------|
| 1     | New Policy     | New Policy        | All               | 11/19/2019 |

Last Res. 11.19.19



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