

Commercial/Health Care Exchange Quantity Limit Criteria

Effective: July 3rd, 2019

| Quantity Limit Name: Qtern | |
|--|-------------------|
| Products Affected: Qtern dapagliflozin/saxagliptin 5/5 mg oral tablets and 10/5 | 5 mg oral tablets |
| Type of Quantity Limit: | |
| □FDA maximum | |
| | |
| □Split fill | |
| ☐Other (Please specify): | |

Limits to be applied:

30 tablets per 30 days

References:

Policy Revision history

| Rev# | Type of Change | Summary of Change | Sections Affected | Date |
|------|----------------|---|-------------------|--------|
| 1 | New Policy | Addition of Quantity Limit for Qtern | All | 7/3/19 |