

**colchicine oral solution (GLOPERBA)**

**Diagnosis Considered for Coverage:**

- Gout flare prevention

**Coverage Criteria:**

**For diagnosis listed above:**

- Intolerance or contraindication to colchicine 0.6 mg tablet not expected with Gloperba, **and**
- Dose does not exceed 0.6 mg (10 mls) per day.

**Coverage Duration:** one year

Effective Date: 8/2/2023