



# Know Before You Go: Prescription Checklist

Let's make sure you have what you need to get the best coverage for XIFAXAN (rifaximin).

If you have challenges with receiving optimal coverage, here are some helpful questions to ask your doctor's office or pharmacist—screenshot and save for later.

○ **Check with the pharmacy or your doctor's office that the prescription was written correctly for IBS-D.**

- 14 days of therapy, 3 pills per day, #42 tablets total with diagnosis of IBS-D and ICD-10 code of K58.0

The ICD-10 code and all other patient-access-related information are provided for informational purposes only. It is the treating physician's responsibility to determine the proper diagnosis, treatment, and applicable ICD-10 code. Salix Pharmaceuticals does not guarantee coverage or reimbursement for the product.

Reference: ICD-10. Centers for Medicare & Medicaid Services. Updated September 26, 2024. Accessed November 27, 2024. [www.cms.gov/Medicare/Coding/ICD10](http://www.cms.gov/Medicare/Coding/ICD10)

○ **Ask your doctor's office if any other additional information was needed (like a Prior Authorization).**

- If yes, you can ask if that has been sent and if proof of other IBS-D medications have been noted.

○ **Ask the pharmacy if the copay card was applied.**

- If it wasn't, go to [xifaxan.copaysavingsprogram.com](http://xifaxan.copaysavingsprogram.com) to activate it. This is done automatically most of the time, so you may only need to do this if you have trouble.†

# 94%

of eligible,† commercially insured patients who had coverage for XIFAXAN paid \$10 or less for their prescription when a copay card or e-voucher was applied in the last year (October 2023 to October 2024).‡



# 98%

of commercially insured patients have coverage for XIFAXAN.‡,§

## INDICATION

XIFAXAN® (rifaximin) 550 mg tablets are indicated for the treatment of irritable bowel syndrome with diarrhea (IBS-D) in adults.

## IMPORTANT SAFETY INFORMATION

- XIFAXAN is not for everyone. Do not take XIFAXAN if you have a known hypersensitivity to rifaximin, any of the rifamycin antimicrobial agents, or any of the components in XIFAXAN.
- If you take antibiotics, like XIFAXAN, there is a chance you could experience diarrhea caused by an overgrowth of bacteria (C. difficile). This can cause symptoms ranging in severity from mild diarrhea to life-threatening colitis. Contact your healthcare provider if your diarrhea does not improve or worsens.
- Talk to your healthcare provider before taking XIFAXAN if you have severe hepatic (liver) impairment, as this may cause increased effects of the medicine.
- Tell your healthcare provider if you are taking drugs called P-glycoprotein and/or OATPs inhibitors (such as cyclosporine) because using these drugs with XIFAXAN may lead to an increase in the amount of XIFAXAN absorbed by your body.

- In clinical studies, the most common side effects of XIFAXAN in IBS-D were nausea (feeling sick to your stomach) and an increase in liver enzymes.
- XIFAXAN may affect warfarin activity when taken together. Tell your healthcare provider if you are taking warfarin because the dose of warfarin may need to be adjusted to maintain proper blood-thinning effect.
- If you are pregnant, planning to become pregnant, or nursing, talk to your healthcare provider before taking XIFAXAN because XIFAXAN may cause harm to an unborn baby or nursing infant.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch/](http://www.fda.gov/medwatch/) or call 1-800-FDA-1088.

For product information, adverse event reports, and product complaint reports, please contact:  
Salix Product Information Call Center  
Phone: 1-800-321-4576 | Fax: 1-510-595-8183

[Click here for full Prescribing Information.](#)



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†Patient is not eligible if he/she participates in, seeks reimbursement or submits a claim for reimbursement to any federal or state healthcare program with prescription drug coverage, such as Medicaid, Medicare, Medigap, VA, DOD, TRICARE, or any similar federal or state healthcare program (each a Government Program), or where prohibited by law. Patient must be enrolled in, and must seek reimbursement from or submit a claim for reimbursement to, a commercial insurance plan. Offer excludes full-cash-paying patients. Maximum benefits and other restrictions apply. Visit <https://xifaxan.copaysavingsprogram.com> or call 1-866-XIFAXAN for full eligibility criteria, terms, and conditions. ‡Salix Pharmaceuticals does not guarantee coverage or reimbursement for the product. §Formulary status subject to change. References: 1. Data on file. Patient Copay October 2023 to October 2024. Salix Pharmaceuticals, Bridgewater, NJ. 2. Data on file. MMIT October 2024. Salix Pharmaceuticals, Bridgewater, NJ.