IEHP Medi-Cal Formulary Change for Invokana, Invokamet, and Invokamet XR

Dear IEHP Provider,

As of February 2019, the IEHP Pharmacy and Therapeutics Subcommittee approved the following Medi-Cal Formulary changes:

- **Effective May 1, 2019** Invokana (canagliflozin), Invokamet (canagliflozin/metformin), and Invokamet XR (canagliflozin/metformin) will be **REMOVED** from the Medi-Cal Formulary.
- Members who have filled Invokana, Invokamet, and Invokamet XR within 180 days prior to May 1, 2019 will be allowed a transitional fill period to consult with their providers on therapy options. This transitional fill period will end June 30, 2019.

The IEHP Medi-Cal Formulary currently covers all strengths of the preferred SGLT2 inhibitors: Steglatro (ertugliflozin), Steglujan (ertugliflozin/sitagliptin), and Segluromet (ertugliflozin/metformin) through step therapy with metformin; as well as Jardiance (empagliflozin) through a Prescription Drug Prior Authorization (RxPA).

To assist your patients with the transition of Invokana, Invokamet, and Invokamet XR formulary changes, IEHP recommends the following:

- Re-evaluate all patients on canagliflozin (Invokana) therapy.
  - For patients without established ASCVD, CHF, or CKD, we recommend that they be converted to an ertugliflozin (Steglatro) product.
  - For patients with established ASCVD, CHF, or CKD, we recommend that they be converted to an empagliflozin (Jardiance) product.
- If your patient is starting on a SGLT2 inhibitor therapy
  - Prescribe an IEHP preferred SGLT2

If your patient should remain on canagliflozin or a canagliflozin product, prescriber must submit a Prescription Drug Prior Authorization (RxPA) with medical justification why other formulary alternatives cannot be used in lieu.
IEHP understands that this transition can be difficult for our Providers and Members. We ask you to evaluate the risk and patient specific factors and discuss appropriate treatment options.

If you have any additional questions, please feel free to contact us at (909) 890-2049 between 8:00 AM -5:00 PM Monday through Friday. Thank you for your attention to this matter.

Sincerely,

IEHP Pharmaceutical Services