



Commercial/Healthcare Exchange PA Criteria

Effective: July 28, 2023

Prior Authorization: Inpefa

Products Affected: Inpefa (sotagliflozin) oral tablets

Medication Description: Inpefa, a sodium-glucose co-transporter-2 (SGLT-2) inhibitor, is indicated to reduce the risk of cardiovascular (CV) death, hospitalization for heart failure (HHF), and urgent heart failure visit in adults with heart failure OR type 2 diabetes, chronic kidney disease (CKD), and other CV risk factors.

Covered Uses:

1. **Heart failure:** Risk reduction of cardiovascular mortality, hospitalization for heart failure, and urgent heart failure visits in adults with heart failure.
2. **Cardiovascular risk reduction:** Risk reduction of cardiovascular mortality, hospitalization for heart failure, and urgent heart failure visits in adults with type 2 diabetes, chronic kidney disease, and other cardiovascular risk factors.

Exclusion Criteria:

1. Type 1 Diabetes. Inpefa is not approved for glycemic control.

Required Medical Information:

1. Diagnosis

Prescriber Restriction: None

Age Restriction: 18 years of age and older

Coverage Duration: 12 months

Other Criteria:

Initial Approval Criteria

1. **Heart Failure, to reduce the risk of cardiovascular death, hospitalization for heart failure, and urgent heart failure visit.** Approve for 1 year if the patient is ≥ 18 years of age.
2. **Type 2 Diabetes, to reduce the risk of cardiovascular death, hospitalization for heart failure, and urgent heart failure visit.** Approve for 1 year if the patient meets the following criteria (A, B, **AND** C):
 - A. Patient is ≥ 18 years of age; **AND**
 - B. Patient has chronic kidney disease; **AND**
 - C. Patient has one or more cardiovascular risk factor(s), according to the prescriber.

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Renewal Criteria

- A. Patient meets all initial authorization criteria; **AND**
- B. Patient achieves or maintains a positive clinical response after at least 3 months of therapy with Inpefa as evidenced by low disease activity or improvement in signs and symptoms of the condition

References:

- 1. Inpefa™ tablets [prescribing information]. Lexicon; The Woodlands, TX: July 2023.

Policy Revision history

Rev #	Type of Change	Summary of Change	Sections Affected	Date
1	New Policy	New Policy	All	07/28/2023