



PEI Pharmacare
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Programmes provinciaux de médicaments
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PEI Pharmacare Bulletin

Issue (2025-09) April 15, 2025

NEW PRODUCT(S) ADDED TO THE PEI PHARMACARE FORMULARY
(EFFECTIVE DATE: MAY 1, 2025)

Product (Generic name)	Product (Brand name)	Strength	Dosage Form	DIN	MFR
-	Flexi-T 300	-	IUD	66127954	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				
-	Flexi-T +300	-	IUD	66128087	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				
-	Flexi-T +380	-	IUD	66128088	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				
Drospirenone & Ethinyl Estradiol	Drospirenone & Ethinyl Estradiol	3mg & 0.02mg	Tablet	02462060	GLM
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				
-	Liberté UT 380 Short	-	IUD	66128089	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				
-	Liberté UT 380 Standard	-	IUD	66128090	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				
-	Liberté TT 380 Short	-	IUD	66128091	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Liberté TT 380 Standard	-	IUD	66128092	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Liberté UT 380 Silver-Copper Standard	-	IUD	66128387	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Liberté UT 380 Silver-Copper Short	-	IUD	66128388	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Mona Lisa 10	-	IUD	66128153	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Mona Lisa 5 Mini	-	IUD	66128154	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Mona Lisa 5 Standard	-	IUD	66128390	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

-	Mona Lisa N	-	IUD	66128158	-
Criteria	Open benefit				
Program Eligibility	National Pharmacare Program				

CRITERIA UPDATE

Effective May 1, 2025, special authorization criteria for currently listed **empagliflozin (Jardiance)** have been amended to the following:

- For the treatment of adult patients with type 2 diabetes when added to metformin for patients who have inadequate glycemic control on metformin.
- OR
- As an adjunct to diet, exercise, and standard care therapy to reduce the incidence of cardiovascular (CV) death in patients with type 2 diabetes mellitus and established cardiovascular disease, if the following criteria are met:
 - Patients have inadequate glycemic control despite an adequate trial of metformin
 - Clinical Notes:
 - For patients who cannot take metformin due to contraindications or intolerances, details must be provided.
 - Established cardiovascular disease is defined as one of the following (details must be provided):
 - History of myocardial infarction (MI).
 - Multi-vessel coronary artery disease in two or more major coronary arteries (irrespective of revascularization status).
 - Single-vessel coronary artery disease with significant stenosis and either a positive non-invasive stress test or discharged from hospital with a documented diagnosis of unstable angina within 12 months prior to selection.

- Last episode of unstable angina ≥ 2 months prior with confirmed evidence of coronary multi-vessel or single-vessel disease.
- History of ischemic or hemorrhagic stroke.
- Occlusive peripheral artery disease.

Effective May 1, 2025, special authorization criteria for currently listed **canagliflozin (Invokana)**, **linagliptin (Trajenta)**, **saxagliptin (Onglyza)**, and **sitagliptin (Januvia)** have been amended to the following:

- For the treatment of adult patients with type 2 diabetes when added to metformin for patients who have inadequate glycemic control on metformin.
- Clinical Notes:
 - For patients who cannot take metformin due to contraindications or intolerances, details must be provided.

Effective May 1, 2025, special authorization criteria for currently listed **sitagliptin & metformin (Janumet and Janumet XR)** have been amended to the following:

- For the treatment of type 2 diabetes for patients who are already stabilized on therapy with sitagliptin and metformin, to replace the individual components of sitagliptin and metformin.

DIABETES DRUG PROGRAM ENROLLMENT

Enrollment in the Diabetes Drug Program will still be required for patients accessing blood glucose test strips and diabetes medications not covered in the National Pharmacare Program, as well as for reimbursement of eligible pharmacy clinical services (e.g. compliance packaging and diabetes medication reviews).