

Bulletin # 1050

April 21, 2021

## NB Drug Plans Formulary Update

This update to the New Brunswick Drug Plans Formulary is effective April 21, 2021.

**Included in this bulletin:**

- Biosimilars Initiative

If you have any questions, please contact our office at 1-800-332-3691.

The Formulary Updates are available online: <http://www.gnb.ca/0212/BenefitUpdates-e.asp>. To unsubscribe from the NB Drug Plans email announcements, please send a message to [info@nbdruqs-medicamentsnb.ca](mailto:info@nbdruqs-medicamentsnb.ca).

## Biosimilars Initiative

The New Brunswick Department of Health is introducing a Biosimilars Initiative which will change the coverage of certain biologic drugs for patients on the New Brunswick Drug Plans.

It follows the successful implementations of similar initiatives by British Columbia and Alberta where tens of thousands of patients have been transitioned without compromise to patient safety, effectiveness or quality of care.

This initiative involves switching patients from originator biologic drugs to their biosimilar versions. Increasing the use of lower cost biosimilars will provide savings that will be used to cover new drugs and contribute to the sustainability of the public drug plans.

Between April 21, 2021 and November 30, 2021, patients who use certain originator biologics (listed in the table below) must switch to a biosimilar brand to maintain their coverage under the New Brunswick Drug Plans. During this period, both the originator biologic and its biosimilar versions will be covered to allow prescribers and patients time to discuss treatment options and to switch to a biosimilar. Coverage of the originator biologics will end on November 30, 2021 or on the last day of the current special authorization (SA) approval, whichever is sooner.

SA requests do not need to be submitted for patients switching to the biosimilars.

- Insulin lispro (Admelog<sup>®</sup>), insulin glargine (Basaglar<sup>™</sup>) and glatiramer (Glatect<sup>™</sup>) are regular benefits so SA is not required.
- SA approvals for Humira<sup>®</sup>, Enbrel<sup>®</sup>, Remicade<sup>®</sup>, and Rituxan<sup>®</sup> already include the respective biosimilar brands listed below. Annual SA renewal requests will not be required for continued coverage of these biosimilars for patients being switched.

For patients who are unable to switch for medical reasons, a patient's prescriber may submit a SA request for exceptional coverage of the originator biologic. Exceptional requests are reviewed on a case-by-case basis.

More information and resources, including the Biosimilars Initiative Guide for Prescribers and Health Professionals and Guide for Patients, are available online at [www.gnb.ca/biosimilars](http://www.gnb.ca/biosimilars).

## Drugs Included in the Biosimilars Initiative

| Drug                          | Originator<br>(Switch from) | Biosimilar<br>(Switch to)                              | Indications   |
|-------------------------------|-----------------------------|--|---|
| <b>Adalimumab</b>             | Humira®                     | Idacio®<br>Amgevita™<br>Hadlima®<br>Hyrimoz®<br>Hulio® | Ankylosing Spondylitis<br>Plaque Psoriasis<br>Psoriatic Arthritis<br>Rheumatoid Arthritis<br>Crohn's Disease<br>Ulcerative Colitis<br>Polyarticular Juvenile Idiopathic Arthritis<br>Hidradenitis Suppurativa<br>Non-Infectious Uveitis |
| <b>Etanercept</b>             | Enbrel®                     | Brenzys®<br>Erelzi®                                    | Ankylosing Spondylitis<br>Plaque Psoriasis<br>Psoriatic Arthritis<br>Polyarticular Juvenile Idiopathic Arthritis<br>Rheumatoid Arthritis  |
| <b>Infliximab</b>             | Remicade®                   | Inflectra®<br>Renflexis™<br>Avsola™                    | Ankylosing Spondylitis<br>Plaque Psoriasis<br>Psoriatic Arthritis<br>Rheumatoid Arthritis<br>Crohn's Disease<br>Ulcerative Colitis  |
| <b>Insulin glargine</b>       | Lantus®                     | Basaglar™  | Diabetes  |
| <b>Insulin lispro</b>         | Humalog®                    | Admelog®   | Diabetes  |
| <b>Rituximab</b>              | Rituxan®                    | Ruxience™<br>Truxima™<br>Riximyo®                      | Rheumatoid Arthritis<br>Vasculitis<br>Autoimmune Diseases   |
| <b>Glatiramer<sup>1</sup></b> | Copaxone®                   | Glatect™   | Multiple Sclerosis  |

<sup>1</sup>Non-biologic complex drug