Patient information
Switching to a biosimilar drug

BIOLOGICS VS BIOSIMILARS

Biologics are drugs made in, taken from or partly-made from living cells through a complex manufacturing process. The first version of a biologic drug is called an originator biologic drug but may also be called an innovator or reference biologic.

A biosimilar drug, or biosimilar, is a biologic drug that is very similar to but less expensive than its originator biologic drug. Biosimilars become available after the patent on the originator biologic drug expires. There are no expected differences in efficacy and safety between a biosimilar and the originator biologic drug.

WHY IS THIS CHANGE HAPPENING?

Alberta spent more than $238 million in the 2018 to 2019 fiscal year on biologic drugs, and these costs are increasing every year. Costs per patient for originator biologics can be more than $25,000 per patient per year, with biosimilar versions costing up to 50 per cent less than originator biologics.

Alberta is implementing the Biosimilar Initiative, which will save approximately $30 million annually that can be invested into other health care services for Albertans.

WHAT IS CHANGING?

Albertans using certain originator biologic drugs that are covered by an Alberta government sponsored drug plan will need to switch to the biosimilar version by the end of the designated switching period to continue coverage of that drug. At the end of the designated switching period, the Alberta government sponsored drug plans will no longer reimburse the originator biologic.

For individuals starting a biologic or changing their biologic drug, a tiered framework will apply requiring cost-effective biologic agents to be used first. However, there are several medication options available to continue to provide choice to patients and physicians.

IMPORTANT:

Call your health care professional to discuss switching.

Your health care professional can

- answer questions about switching from an originator biologic drug to a biosimilar,
- explain the process for switching,
- discuss biosimilar options,
- write a new prescription, and
- enroll you in a new patient support program if appropriate.

You are affected by these changes if you are an adult member enrolled in one of the following government sponsored drug plans provided through Alberta Blue Cross:

- Non-Group Coverage (Group 1)
- Coverage for Seniors (Group 66)
- Palliative Coverage (Group 20514)
- Child and Family Services (Group 20403)
- Alberta Child Health Benefit (Group 20400)
- Children and Youth Services (Group 19824)
- Income Support (Group 19823)
- Learners Program (Group 22128)
- Assured Income for the Severely Handicapped (Group 19823)
- Alberta Adult Health Benefit (Group 23609)

MORE INFORMATION

If you have any questions about these changes, you should speak to your health care professional. You may also contact Alberta Blue Cross at **1-800-661-6995**.

Alberta

ab.bluecross.ca/providers/pharmacy-resources.php

SAFETY AND EFFECTIVENESS

Health Canada must review and approve all drugs before they can be sold in Canada. Both originator biologics and biosimilar drugs are authorized for sale by Health Canada. Health Canada approves biosimilars for sale based on a thorough comparison to the originator biologic drug.

Health Canada says that patients and health care professionals can have confidence that biosimilars are effective and safe for each of their authorized health conditions. Tests are done to help ensure there are no expected differences in how the drug works and the safety of a biosimilar compared to the originator biologic drug.

SWITCHING

In Europe, where biosimilars have been used since 2006, more than 40 biosimilar products have been approved and are on the market, accounting for nearly a billion patient days of experience spanning 12 years. There are also numerous research studies showing that patients who have switched to a biosimilar experience little to no difference between the biosimilar and its biologic originator.

If you are using an originator biologic drug listed in the second column of the table below for one of the listed health conditions, you will need to speak to your health care professionals[1].

Drug name	Originator brand name	Biosimilar brand name	Health conditions	Patients must switch to the biosimilar version by **the following date**
etanercept	Enbrel	Brenzys	Ankylosing Spondylitis Psoriatic Arthritis Rheumatoid Arthritis	**January 15, 2021**
		Erelzi	Ankylosing Spondylitis Psoriatic Arthritis Rheumatoid Arthritis	**January 15, 2021**
infliximab	Remicade	Inflectra Renflexis	Ankylosing Spondylitis Plaque Psoriasis Psoriatic Arthritis Rheumatoid Arthritis Crohn's Disease Ulcerative Colitis	**January 15, 2021**
insulin glargine	Lantus	Basaglar	Diabetes (Type 1 and 2)	**January 15, 2021**
filgrastim	Neupogen	Grastofil	Neutropenia	**January 15, 2021**
pegfilgrastim	Neulasta	Lapelga Fuphila Ziextenzo	Neutropenia	**January 15, 2021**
rituximab	Rituxan	Truxima Riximyo Ruxience	Rheumatoid Arthritis	**January 15, 2021**
rituximab	Rituxan	Ruxience	Granulomatosis with Polyangiitis (GPA)Microscopic Polyangiitis (MPA)	**March 1, 2021**
glatiramer[2]	Copaxone	Glatect	Multiple Sclerosis	**January 15, 2021**

[1] Patients under the age of 18 years of age are not required to switch to the biosimilar at this time.
[2] Glatiramer is a non-biologic complex drug

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