

An Independent Licensee of the Blue Cross Blue Shield Association

## **BIOSIMILAR MEDICATIONS**

Your prescribing practices can influence the patient experience

## What is a biosimilar medication?

A biosimilar is a biologic medication that the FDA has evaluated and approved after determining that:

- 1. The biosimilar has been proven to be almost identical to the original reference biologic.
- 2. There are no substantive clinical differences in terms of safety and efficacy.
- 3. There are only minor differences in the inactive components.<sup>1</sup>

The use of preferred biosimilars can lower cost share for members by an average of 15%-20%.

Effective	<ul> <li>No clinical difference compared to the reference biologic</li> <li>Identical in dosage form and route of administration</li> </ul>		
Safe	<ul> <li>Same use indications</li> <li>Manufactured under the same FDA standards</li> </ul>		
Positive Patient Experience	<ul> <li>Same health outcomes</li> <li>Average cost of a preferred biosimilar may be 15%-20% less than a non-preferred product</li> </ul>		

## How you can help increase the use of preferred biosimilars

- Prescribe the *preferred* biosimilar products for your patients—see list below. For certain biosimilar medications, we require use of the preferred products.
- Help patients understand the effectiveness, safety, and potential savings of preferred biosimilars. The FDA website offers useful biosimilar information for <u>patients</u> and <u>consumers</u>.
- Stay up to date on new biosimilars and clinical information shared by the FDA.

## Preferred biosimilar status

We require the use of preferred biosimilar(s). The list below, from our <u>Biosimilar Therapy criteria</u>, shows the preferred products that must be prescribed before a non-preferred option will be covered.

Medication	Product	Code	Preferred Status
Bevacizumab	Zirabev™ (biosimilar)	Q5118	Preferred
	Avastin® (brand reference)	J9035	Preferred
	Alymsys® (biosimilar)	Q5126	Non-preferred
	Mvasi® (biosimilar)	Q5107	Non-preferred
	Vegzelma® (biosimilar)	J3590	Non-preferred
Filgrastim	Nivestym® (biosimilar)	Q5110	Preferred
	Neupogen® (brand reference)	J1442	Preferred

<sup>&</sup>lt;sup>1</sup> Source: FDA, "Biosimilar and Interchangeable Biologics: More Treatment Choices"

	Granix® (biosimilar)	J1447	Non-preferred
	Releuko® (biosimilar)	Q5125	Non-preferred
	Zarxio® (biosimilar)	Q5101	Non-preferred
Infliximab	Avsola® (biosimilar)	Q5121	Preferred
	Infliximab (biosimilar)	J1745	Preferred
	Renflexis® (biosimilar)	Q5104	Preferred
	Remicade® (brand reference)	J1745	Preferred
	Inflectra® (biosimilar)	Q5103	Non-preferred
	Fulphilia® (biosimilar)	Q5108	Preferred
	Neulasta®/Neulasta® Onpro® (brand reference)	J2506	Preferred
	Fylnetra® (biosimilar)	J3590	Non-preferred
Pegfilgrastim	Nyvepria® (biosimilar)	Q5122	Non-preferred
	Stimufend® (biosimilar)	J3590	Non-preferred
	Udenyca® (biosimilar)	Q5111	Non-preferred
	Ziextenzo® (biosimilar)	Q5120	Non-preferred
Rituximab	Ruxience® (biosimilar)	Q5119	Preferred
	Rituxan® (brand reference)	J9312	Preferred
	Riabni® (biosimilar)	Q5123	Non-preferred
	Truxima® (biosimilar)	Q5115	Non-preferred
Trastuzumab	Kanjinti® (biosimilar)	Q5117	Preferred
	Ogivri® (biosimilar)	Q5114	Preferred
	Herceptin® (brand reference)	J9355	Preferred
	Herzuma® (biosimilar)	Q5113	Non-preferred
	Ontruzant® (biosimilar)	Q5112	Non-preferred
	Trazimera™ (biosimilar)	Q5116	Non-preferred

Note: The brand reference is the biologic that was first to market and the product to which biosimilars are compared.

<sup>1</sup>Source: FDA, "Biosimilar and Interchangeable Biologics: More Treatment Choices"

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