

Tiered Biologics Reimbursement Policy Overview

Tier 1							
Product Name	Generic Name	Rheumatoid Arthritis (RA)	Ankylosing Spondylitis (AS)	Plaque Psoriasis (PsO)	Psoriatic Arthritis (PsA)	Crohn's/ Fistulizing Crohn's Disease (CD)	Ulcerative Colitis (UC)
Abrilada	adalimumab	X	X	X	X	X	X
Amgevita	adalimumab	X	X	X	X	X	X
Avsola	infliximab	X	X	X	X	X	X
Actemra	tocilizumab	X					
Bimzelx	bimekizumab			X			
Brenzys	etanercept	X	X	X	X		
Cimzia	certolizumab pegol	X	X		X		
Cosentyx	secukinumab		X	X	X		
Entyvio	vedolizumab					X	X
Erelzi	etanercept	X	X	X	X		
Hadlima	adalimumab	X	X	X	X	X	X
Hulio	adalimumab	X	X	X	X	X	X
Hyrimoz	adalimumab	X	X	X	X	X	X
Idacio	adalimumab	X	X	X	X	X	X
Ilumya	tildrakizumab			X			
Inflectra	infliximab	X	X	X	X	X	X
*Jamteki	ustekinumab			X	X		
Kevzara	sarilumab	X					
Olumiant	baricitinib	X					
Orencia	abatacept	X					
Renflexis	infliximab	X	X	X	X	X	X
Rinvoq	upadacitinib	X	*X		X	*X	*X
Riximyo	rituximab	X					
Ruxience	rituximab	X					
*Rymti	etanercept	X	X	X	X		
Siliq	brodalumab			X			
Simlandi	adalimumab	X	X	X	X	X	X
Simponi	golimumab	X	X		X		X

*Effective August 27, 2024

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Simponi IV	golimumab	X					
Skyrizi	risankizumab			X		*X	
Truxima	rituximab	X					
Taltz	ixekizumab			X	X		
Tremfya	guselkumab			X	X		
*Wezlana	ustekinumab			X	X	X	X
*Wezlana IV	ustekinumab					X	X
Xeljanz	tofacitinib	X					X
Xeljanz XR	tofacitinib	X					
Yuflyma	adalimumab	X	X	X	X	X	X
Tier 2							
Enbrel	etanercept	X	X	X	X		
Humira	adalimumab	X	X	X	X	X	X
Kineret	anakinra	X					
Remicade	infliximab	X	X	X	X	X	X
Rituxan	rituximab	X					
Stelara	ustekinumab			X			

- Prescribing Criteria for all products (including pediatrics if applicable) can be found here: [Exception Drug Status \(EDS\) \(gov.mb.ca\)](https://www.gov.mb.ca/health/pharmacare/exceptiondrugstatus/)
- For information on Health Canada's review and recommendations, please see: <https://health-products.canada.ca/dpd-bdpp/index-eng.jsp>

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