

## Humira Drug Formulary Change

This letter is to inform you about some important changes that are taking place regarding Humira®, an injectable biologic used to treat various inflammatory conditions such as rheumatoid arthritis, plaque psoriasis, psoriatic arthritis, ankylosing spondylitis, and hidradenitis suppurative. Effective 1/1/2026, Humira® will be removed from our Medicare formulary. Our new preferred injectable biologics will include Adalimumab-fkjp and Simlandi, interchangeable biosimilars of Humira® used to treat the same indications.

If your patient is already taking Humira®, please consider changing to one of our formulary alternatives listed below to avoid any interruption in care. **Please note that the new formulary biosimilars in the table below will require a prior authorization for 2026.**

**Our alternatives for Humira® that will be on formulary with prior authorization effective 1/1/2026 include:**

Drug	Tier	Notes and Restrictions
<b>Adalimumab-fkjp</b> (2 Pen) Subcutaneous Auto-injector Kit 40 MG/0.8ML	5	Prior Authorization; Quantity Limit 6/28-day
<b>Adalimumab-fkjp</b> (2 Syringe) Subcutaneous Prefilled Syringe Kit 20 MG/0.4ML	5	Prior Authorization; Quantity Limit 4/28-day
<b>Adalimumab-fkjp</b> (2 Syringe) Subcutaneous Prefilled Syringe Kit 40 MG/0.8ML	5	Prior Authorization; Quantity Limit 6/28-day
<b>Simlandi</b> (1 Pen) Subcutaneous Auto-injector Kit 40 MG/0.4ML	5	Prior Authorization; Quantity Limit 6/28-day
<b>Simlandi</b> (1 Pen) Subcutaneous Auto-injector Kit 80 MG/0.8ML	5	Prior Authorization; Quantity Limit 3/28-day
<b>Simlandi</b> (1 Syringe) Subcutaneous Prefilled Syringe Kit 80 MG/0.8ML	5	Prior Authorization; Quantity Limit 3/28-day
<b>Simlandi</b> (2 Pen) Subcutaneous Auto-injector Kit 40 MG/0.4ML	5	Prior Authorization; Quantity Limit 6/28-day
<b>Simlandi</b> (2 Syringe) Subcutaneous Prefilled Syringe Kit 20 MG/0.2ML	5	Prior Authorization; Quantity Limit 4/28-day
<b>Simlandi</b> (2 Syringe) Subcutaneous Prefilled Syringe Kit 40 MG/0.4ML	5	Prior Authorization; Quantity Limit 6/28-day

For additional information about what drugs are on our 2026 formulary, please visit our plan's website at [www.keystonefirstvipchoice.com/provider](http://www.keystonefirstvipchoice.com/provider). For any additional questions, please contact Provider Services at 1-800-521-6007.