

PROVIDER NOTICE

Provider Relations Department: 888-895-4998 (Option 4)

Priority Partners Formulary Change: New Prior Authorization Requirements for Self-administered Adalimumab Products

Effective Date: Oct. 1, 2023

Health Plan(s) Affected: Priority Partners

Type of Change: Prior Authorization, Formulary Change

Explanation of Change:

Effective Oct. 1, 2023, Priority Partners will remove Humira® (adalimumab) from the formulary. However, the following biosimilar products, which are direct alternatives to Humira®, will be added to the formulary: Hadlima® (adalimumab-bwwd), Adalimumab-fkjp (unbranded version of Hulio®), and Adalimumab-adaz (unbranded version of Hyrimoz®). These preferred biosimilar products will require prior authorization for coverage.

How to submit prior authorization requests:

- An electronic prior authorization (ePA) request may be submitted using the <u>CoverMyMeds</u>®* or <u>Surescripts</u>®* online submission tools.
 - For assistance, use these helpful step-by-step navigation guides: <u>CoverMyMeds</u> | <u>Surescripts</u>
- If a provider is unable to submit an ePA request, a completed Pharmacy Prior Authorization Form may be faxed to Priority Partners at the fax number listed on the form.
- Please visit Priority Partners Forms for a list of available pharmacy prior authorization forms.
- Please provide clinical documentation to support all prior authorization requests that are submitted electronically or by fax.
- Please visit Priority Partners Pharmacy Benefits for more information.

^{*}This link is from an external website that is not provided or maintained by or in any way affiliated with Johns Hopkins Health Plans. Please note Johns Hopkins Health Plans does not guarantee the accuracy, relevance, timeliness, or completeness of any information on this external website.