

BACKGROUND & OBJECTIVE

- The treatment landscape for rheumatoid arthritis (RA) continues to evolve, with biosimilars and novel drug classes introduced in recent years.
- Step therapy can shape access to these therapies, but how requirements vary across health plans remains poorly characterized.
- Objective: To evaluate step therapy requirements and first-line treatment options for specialty RA therapies across large US commercial health plans.

METHODS

Data Source

- We used coverage data from the Tufts Medical Center Specialty Drug Evidence and Coverage (SPEC) Database, which tracks specialty drug coverage policies across 18 large US commercial health plans.
- We identified active coverage policies for 32 FDA-approved specialty RA therapies as of August 2025.

Analyses

- We assessed step therapy requirements, including required line of therapy and use of non-biologic DMARDs as first-line treatment.
- We characterized biologic access by recalculating line of therapy after excluding DMARD requirements, allowing us to assess the number of treatment options available as first-line biologic therapy.
- We examined variation in step therapy requirements across health plans.

RESULTS

- We identified 466 active policies across the 32 RA drugs and 18 health plans.
 - 85% required step therapy beyond the FDA-labeled line of therapy.
 - 81% required methotrexate or another nonbiologic DMARD as first-line therapy.
- Mean line of therapy varied substantially by health plan (2.1-3.6) and drug (1.9-4.6).
- Step therapy requirements varied. 47% of policies imposed one step, while 3% required five or more (Figure 1).
- Step therapy use varied across health plans, ranging from 64% of coverage policies in one plan to 100% in three plans (Figure 2).
- Access to first-line biologics varied across health plans, with two plans offering only one drug class and one offering five (Figure 3).
- After excluding non-biologic DMARD requirements, 58% of policies still required ≥1 additional treatment step.

Figure 1. Number of Required Treatment Steps for 32 RA Specialty Therapies Across 18 US Commercial Health Plans

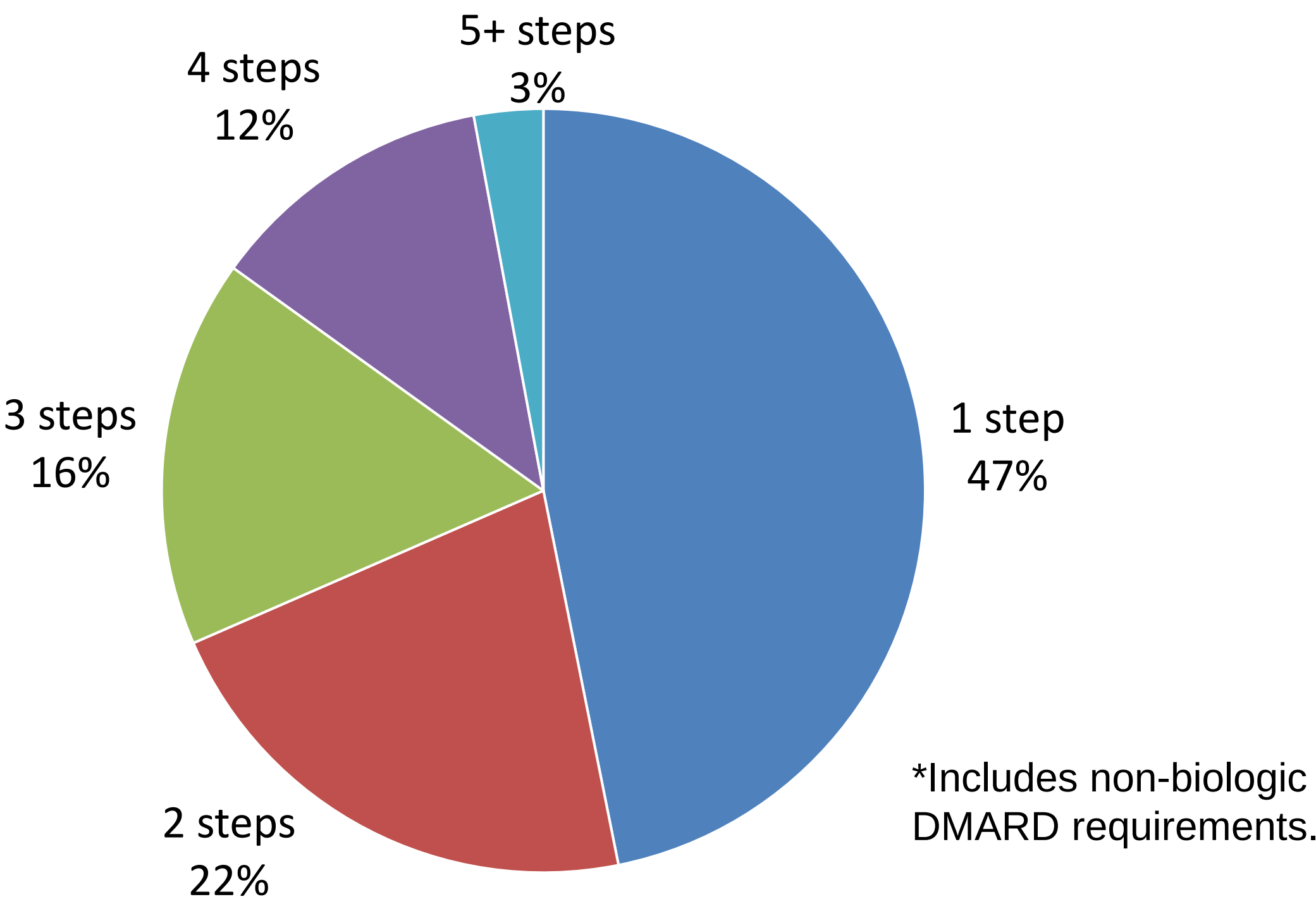


Figure 2. Frequency of Use of Step Therapy in Coverage Policies for 32 RA Specialty Therapies Across 18 US Commercial Health Plans

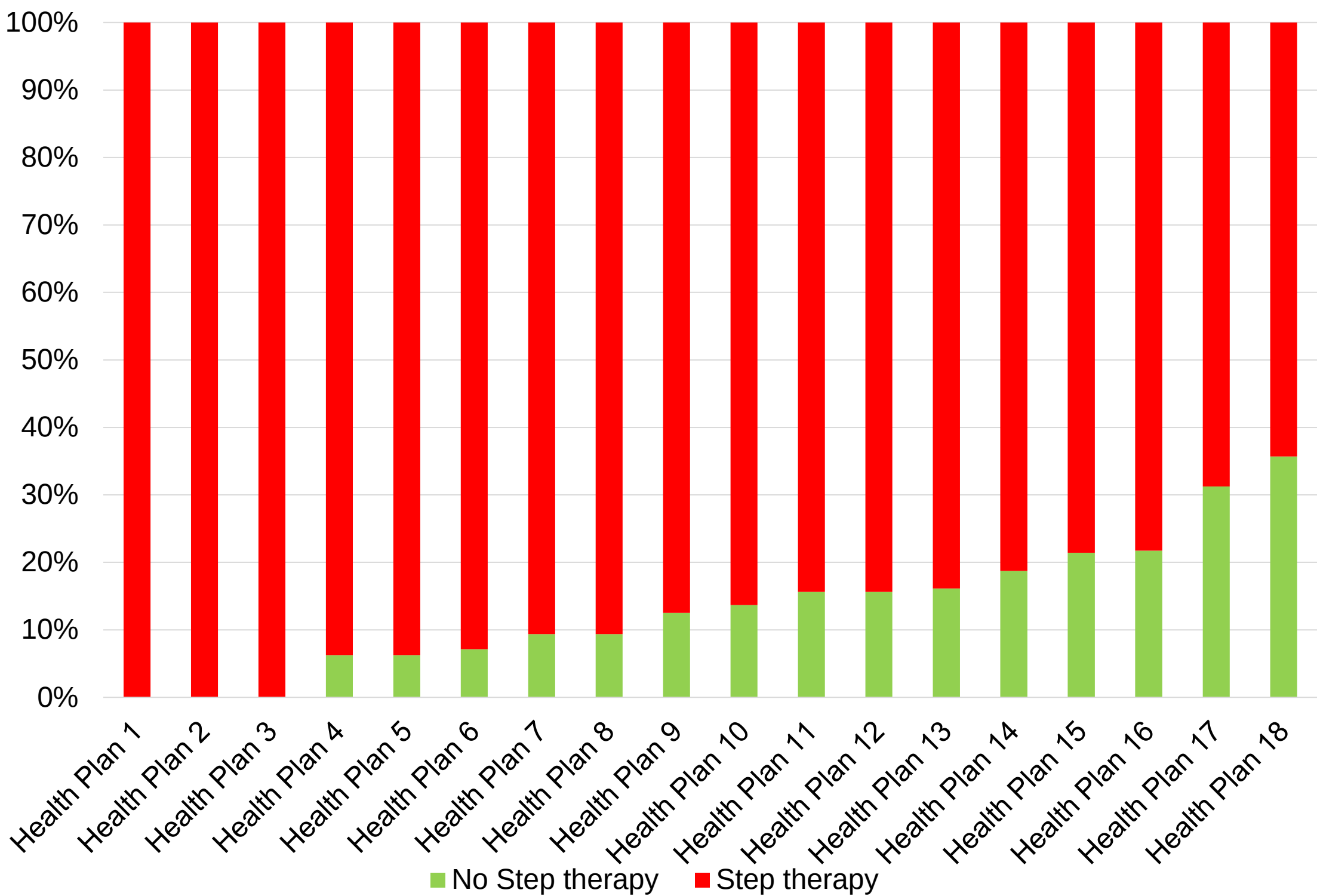
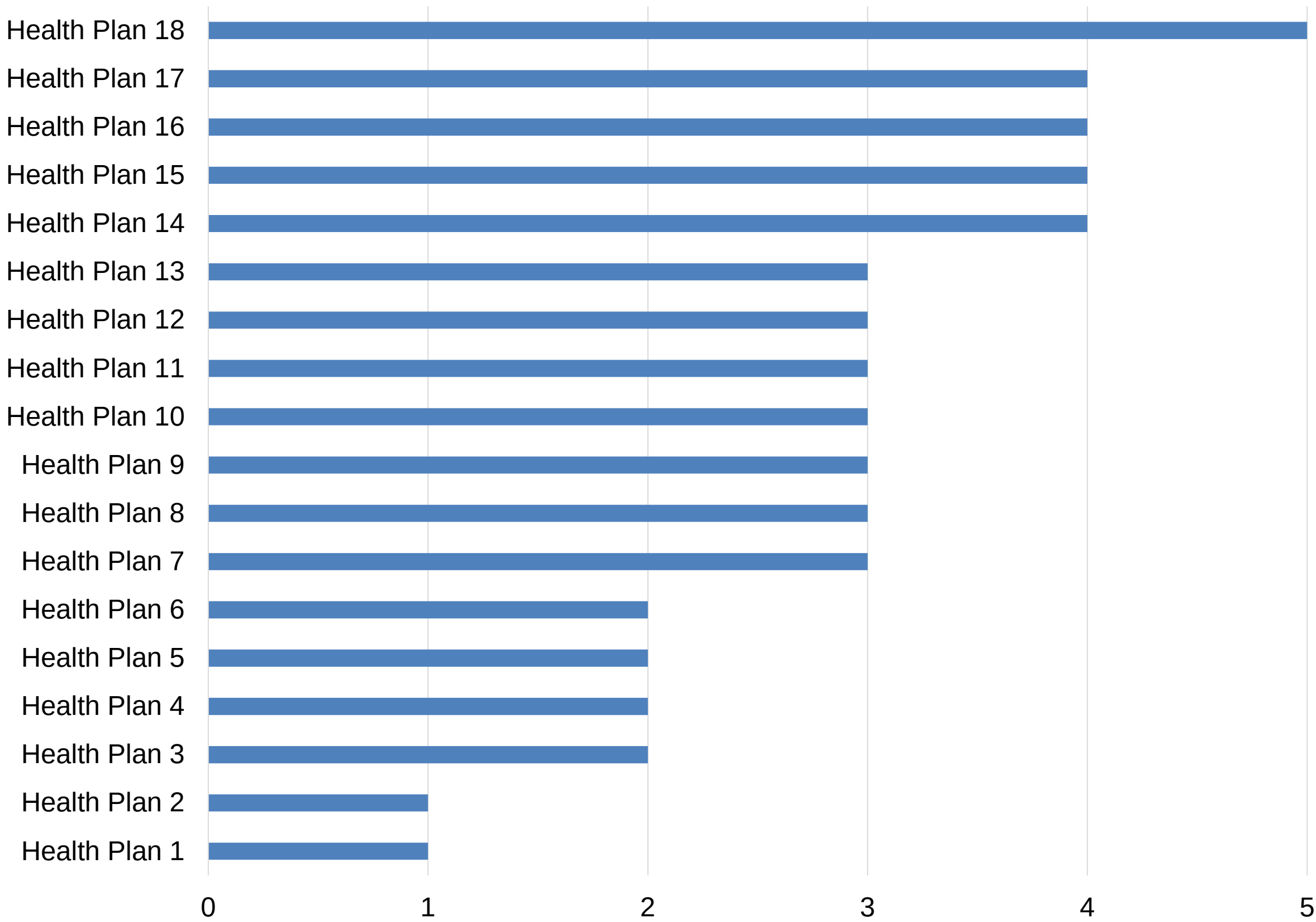


Figure 3. Number of Drug Classes Available as First-Line Biologic Options, by Health Plan



CONCLUSION

- Step therapy was common for RA specialty therapies, but its use varied considerably across commercial health plans.
- Health plans also differed substantially in the number of drug classes available as first-line biologic options.
- These differences suggest that patients' access to first-line biologic therapies may depend importantly on their health plan enrollment.

REFERENCES

1. Patil SJ, Thorat VM, Koparde AA, Bhinge SD, Chavan DD, Bhosale RR. Unlocking the Future: New Biologic Therapies for Rheumatoid Arthritis. Cureus. 2024 Oct 27;16(10):e72486.

FUNDING

This research had no outside funding.

CONTACT

For more information about the SPEC Database, please contact James Chambers (james.chambers@tuftsmedicine.org).