

Public Canadian drug plans looking to implement non-medical switching should consider these exceptions:

pregnant women



those with **mental health conditions**



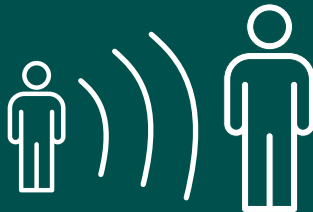
those with **severe disease & high-risk patients**



provide a longer time frame for switching **children**



individuals transferring from **pediatric to adult care**



elderly patients



geographic & logistical considerations in **accessing care**



If patients fail on a biosimilar after switching, a good policy will allow them to **return to their previous originator biologic** therapy – instead of switching them to a different biosimilar.