Pharmaceutical Management Agency New Zealand Pharmaceutical Schedule

Section H Update

for Hospital Pharmaceuticals

November 2019

Cumulative for August, September, October and November 2019



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Summary of decisions EFFECTIVE 1 NOVEMBER 2019

- Adrenaline (DBL Adrenaline) inj 1 in 1,000, 1 ml ampoule amended brand name
- Amisulpride (Sulprix) tab 400 mg price increase and addition of HSS
- Amoxicillin (Alphamox) cap 250 mg and 500 mg new listing and addition of HSS
- Amoxicillin (Apo-Amoxi) cap 250 mg and 500 mg to be delisted 1 April 2020
- Benzocaine with tetracaine hydrochloride (e.g. ZAP Topical Anaesthetic Gel) gel 18% with tetracaine hydrochloride 2% new listing
- Benzylpenicillin sodium [penicillin G] (Pan-Penicillin G Sodium) inj 600 mg (1 million units) vial – new listing
- Bupivacaine hydrochloride with fentanyl (Biomed) inj 0.625 mg with fentanyl
 2 mcg per ml, 200 ml bag new listing and addition of HSS
- Buprenorphine with naloxone (Buprenorphine Naloxone BNM) tab 2 mg with naloxone 0.5 mg and 8 mg with naloxone 2 mg new listing and addition of HSS
- Buprenorphine with naloxone (Suboxone) tab 2 mg with naloxone 0.5 mg and 8 mg with naloxone 2 mg – to be delisted 1 April 2020
- Clarithromycin tab 250 mg and 500 mg (Apo-Clarithromycin), grans for oral liq 50 mg per ml (Klacid) and inj 500 mg vial (Martindale) – amended restriction criteria
- Compound electrolytes (Electral) powder for oral soln new listing and addition of HSS
- Compound electrolytes (Enerlyte) powder for oral soln to be delisted 1 April 2020
- Disulfiram (Antabuse) tab 200 mg price increase
- Enteral feed 2kcal/ml (Nutrison Concentrated) liquid 7.5 g protein, 20 g carbohydrate and 10 g fat per 100 ml, bottle new Pharmacode listing
- Eptacog alfa [recombinant factor VIIA] (NovoSeven RT) inj 1 mg, 2 mg, 5 mg and 8 mg syringe – amended restriction criteria
- Extensively hydrolysed formula powder 1.6 g protein, 7.5 g carbohydrate and 3.1 g fat per 100 ml, 900 g can (Allerpro 1) and powder 1.6 g protein, 7.8 g carbohydrate and 3.2 g fat per 100 ml, 900 g can (Allerpro 2) new listing
- Factor eight inhibitor bypassing fraction (FEIBA NF) inj 500 u, 1,000 U and 2,500 U – amended restriction criteria
- Famotidine tab 20 mg, 40 mg and inj 10 mg per ml, 4 ml vial new listing

Summary of decisions – effective 1 November 2019 (continued)

- Fluoxetine hydrochloride (Fluox) tab dispersible 20 mg, scored and cap 20 mg
 new listing and addition of HSS
- Fluoxetine hydrochloride (Arrow-Fluoxetine) tab dispersible 20 mg, scored and cap 20 mg – to be delisted 1 April 2020
- Iron polymaltose (Ferrum H) inj 50 mg per ml, 2 ml ampoule to be delisted
 1 February 2020
- Loratadine (Lorafix) tab 10 mg price increase and addition of HSS
- Levomepromazine hydrochloride (Nozinan) inj 25 mg per ml, 1 ml ampoule
 new listing and addition of HSS
- Levomepromazine hydrochloride (Wockhardt) inj 25 mg per ml, 1 ml ampoule
 to be delisted 1 April 2020
- Levonorgestrel (Jaydess) intra-uterine device 13.5 mg new listing and addition of HSS
- Levonorgestrel (Mirena) intra-uterine device 52 mg addition of HSS, amended presentation description and restriction criteria removed
- Metaraminol inj 0.5 mg per ml, 5 ml and 10 ml syringe new listing
- Moroctocog alfa [recombinant factor VIII] (Xyntha) inj 250 iu, 500 iu, 1,000 iu, 2,000 iu and 3,000 iu prefilled syringe – price increase and amended restriction criteria
- Moxifloxacin (Moxifloxacin Kabi) inj 1.6 mg per ml, 250 ml bottle new listing and addition of HSS
- Moxifloxacin (Avelox IV 400) inj 1.6 mg per ml, 250 ml bottle to be delisted 1 April 2020
- Octocog alfa [recombinant factor VIII] (Advate) inj 250 iu, 500 iu, 1,000 iu, 1,500 iu. 2,000 iu and 3,000 iu vial – amended restriction criteria
- Octocog alfa [recombinant factor VIII] (Kogenate FS) inj 250 iu, 500 iu, 1,000 iu, 2,000 iu and 3,000 iu vial – amended restriction criteria
- Ondansetron (Onrex) tab 4 mg and 8 mg new listing and addition of HSS
- Ondansetron (Apo-Ondansetron) tab 4 mg and 8 mg to be delisted 1 April 2020
- \bullet Paraffin (healthE) white soft, 450 g new listing and addition of HSS
- Prilocaine hydrochloride inj 2%, 5 ml ampoule new listing
- Ranitidine tab 150 mg and 300 mg (Ranitidine Relief), oral liq 150 mg per 10 ml (Peptisoothe) and inj 25 mg per ml, 2 ml ampoule (Zantac) – restriction added
- Tocilizumab (Actemra) inj 20 mg per ml, 4 ml, 10 ml and 20 ml vial
 amended restriction criteria

Price	
(ex man. Excl. GST)	
\$	Per

Brand or Generic Manufacturer

Section H changes to Part II

Effective 1 November 2019

ALIMENTARY TRACT AND METABOLISM

7 FAMOTIDINE (new listing)

Tab 20 mg

Tab 40 mg

Inj 10 mg per ml, 4 ml vial

7 RANITIDINE - restriction added

TIS II TITLE TOOLIOGOTI GGGGG			
→ Tab 150 mg – 1% DV Oct-17 to 2020	12.91	500	Ranitidine Relief
→ Tab 300 mg - 1% DV Oct-17 to 2020	18.21	500	Ranitidine Relief
→ Oral liq 150 mg per 10 ml - 1% DV Oct-17 to 2020	5.14	300 ml	Peptisoothe
→ Ini 25 mg per ml. 2 ml ampoule	8 75	5	7antac

Restricted

Initiation

Either:

- 1 For continuation use: or
- 2 Routine prevention of allergic reactions.

18 IRON POLYMALTOSE (delisting)

BLOOD AND BLOOD FORMING ORGANS

27 EPTACOG ALFA [RECOMBINANT FACTOR VIIA] (amended restriction criteria)

→ Inj 1 mg syringe	1,178.30	1	NovoSeven RT
→ Inj 2 mg syringe	2,356.60	1	NovoSeven RT
→ Inj 5 mg syringe	5,891.50	1	NovoSeven RT
→ Ini 8 mg syringe	9 426 40	1	NovoSeven RT

Restricted

Initiation

For patients with haemophilia. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group. Rare Clinical Circumstances Brand of bypassing agent for >14 days predicted use. Access to funded treatment for >14 days predicted use is by named patient application to the Haemophilia Treaters Group, subject to access criteria.

27 FACTOR EIGHT INHIBITOR BYPASSING FRACTION (amended restriction criteria)

→	· Inj 500 U	1,315.00	¹ 1	FEIBA NF
→	Inj 1,000 U	2,630.00	1	FEIBA NF
→	Inj 2,500 U	6,575.00	1	FEIBA NF

Restricted

Initiation

For patients with haemophilia. **Preferred Brand of bypassing agent for >14 days predicted use**. Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group.

Price		Brand or
(ex man. Excl. GST	Γ)	Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 November 2019 (continued)

27 MOROCTOCOG ALFA [RECOMBINANT FACTOR VIII] († price and amended restriction criteria)

→ Inj 250 iu prefilled syringe	287.50	1	Xyntha
→ Inj 500 iu prefilled syringe		1	Xyntha
→ Inj 1,000 iu prefilled syringe	1,150.00	1	Xyntha
→ Inj 2,000 iu prefilled syringe	2,300.00	1	Xyntha
→ Inj 3,000 iu prefilled syringe	3.450.00	1	Xvntha

Restricted

Initiation

For patients with haemophilia. Rare Clinical Circumstances Brand of short half-life recombinant factor VIII.

Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group, subject to criteria.

28 OCTOCOG ALFA [RECOMBINANT FACTOR VIII] (ADVATE) (amended restriction criteria)

COTOCOGNET (ILECONDITURE TO TOTO TOTT VIII) (VIII	b vitte) (airionada rodandad	11 0111011	u)
→ Inj 250 iu vial	210.00	1	Advate
→ Inj 500 iu vial		1	Advate
→ Inj 1,000 iu vial	840.00	1	Advate
→ Inj 1,500 iu vial	1,260.00	1	Advate
→ Inj 2,000 iu vial	1,680.00	1	Advate
→ Inj 3,000 iu vial	2,520.00	1	Advate

Restricted

Initiation

For patients with haemophilia. **Preferred Brand of short half-life recombinant factor VIII.** Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group.

28 OCTOCOG ALFA [RECOMBINANT FACTOR VIII] (KOGENATE FS) (amended restriction criteria)

→ Inj 250 iu vial	237.50	1	Kogenate FS
→ Inj 500 iu vial	475.00	1	Kogenate FS
→ Inj 1,000 iu vial	950.00	1	Kogenate FS
→ Inj 2,000 iu vial	1,900.00	1	Kogenate FS
→ Inj 3,000 iu vial	2,850.00	1	Kogenate FS

Restricted

Initiation

For patients with haemophilia. Rare Clinical Circumstances Brand of short half-life recombinant factor VIII.

Access to funded treatment is managed by the Haemophilia Treaters Group in conjunction with the National Haemophilia Management Group, subject to criteria.

35 COMPOUND ELECTROLYTES (brand change)

CARDIOVASCULAR SYSTEM

47 METARAMINOL (new listing)

Inj 0.5 mg per ml, 5 ml syringe Inj 0.5 mg per ml, 10 ml syringe

Price (ex man. Excl. GST) \$ Per Brand or Generic Manufacturer

Changes to Section H Part II - effective 1 November 2019 (continued)

DERMATOLOGICALS

53 PARAFFIN (new listing)

GENITO-URINARY SYSTEM

58 LEVONORGESTREL (new listing)

Intra-uterine device 13.5 mg

- 1% DV Nov-19 to 31 Oct 2022215.60 1 Jaydess

58 LEVONORGESTREL (addition of HSS, amended presentation description and restriction criteria removed)
Intra-uterine system, 20 meg per day device 52 mg

Restricted

Initiation - heavy menstrual bleeding

Obstetrician or gynaecologist

All of the following:

- 1 The patient has a clinical diagnosis of heavy menstrual bleeding; and
- The patient has failed to respond to or is unable to tolerate other appropriate pharmaceutical therapies as perthe Heavy Menstrual Bleeding Guidelines; and
- 3 Any of the following:
 - 3.1 Serum ferritin level < 16 mcg/l (within the last 12 months); or
 - 3.2 Haemoglobin level < 120 g/l; or
 - 3.3 The patient has had a uterine ultrasound and either a hysteroscopy or endometrial biopsy.

Continuation - heavy menstrual bleeding

Obstetrician or gynaecologist

Fither:

- 1 Patient demonstrated clinical improvement of heavy menstrual bleeding; or
- 2 Previous insertion was removed or expelled within 3 months of insertion.

Initiation - endometriosis

Obstetrician or gynaecologist

The patient has a clinical diagnosis of endometriosis confirmed by laparoscopy.

Continuation - endometriosis

Obstetrician or gynaecologist

Either:

- 1 Patient demonstrated satisfactory management of endometriosis; or
- 2 Previous insertion was removed or expelled within 3 months of insertion.

Note: endometriosis is an unregistered indication.

Price		Bı
(ex man. Excl. GS	ST)	G
\$	Per	M

rand or eneric /lanufacturer

Changes to Section H Part II – effective 1 November 2019 (continued)

INFEC	CTIONS		
75	CLARITHROMYCIN (amended restriction criteria – affected criteria shown on → Tab 250 mg – 1% DV Sep-17 to 2020	14 14 50 ml 1	
76	AMOXICILLIN (brand change) Cap 250 mg – 1% DV Apr-20 to 2022	500 500	Alphamox Alphamox
76	BENZYLPENICILLIN SODIUM [PENICILLIN G] Inj 600 mg (1 million units) vial25.88	25	Pan-Penicillin G Sodium
77	MOXIFLOXACIN (brand change) → Inj 1.6 mg per ml, 250 ml bottle – 1% DV Apr-20 to 202239.00 Note – Avelox IV 400 inj 1.6 mg per ml, 250 ml bottle to be delisted from 1 A	1 pril 2020.	Moxifloxacin Kabi
NERV	OUS SYSTEM		
105	BENZOCAINE WITH TETRACAINE HYDROCHLORIDE (new listing) Gel 18% with tetracaine hydrochloride 2%		e.g. ZAP Topical Anaesthetic Gel
105	BUPIVACAINE HYDROCHLORIDE WITH FENTANYL (new listing) Inj 0.625 mg with fentanyl 2 mcg per ml, 200 ml bag - 1% DV Apr-20 to 2022305.00	10	Biomed
106	PRILOCAINE HYDROCHLORIDE (new listing) Inj 2%, 5 ml ampoule		
111	FLUOXETINE HYDROCHLORIDE (brand change) Tab dispersible 20 mg, scored – 1% DV Apr-20 to 2022	30 84	Fluox Fluox

Note – Arrow-Fluoxetine tab dispersible 20 mg, scored and cap 20 mg to be delisted from 1 April 2020.

	(Price ex man. Excl. GS \$	ST) Per	Brand or Generic Manufacturer
Char	nges to Section H Part II – effective 1 November	2019 (continu	ued)	
116	ONDANSETRON (brand change) Tab 4 mg – 1% DV Apr-20 to 2022 Tab 8 mg – 1% DV Apr-20 to 2022 Note – Apo-Ondansetron tab 4 mg and 8 mg to be delisted	4.57	50 50 0.	Onrex Onrex
117	AMISULPRIDE († price and addition of HSS) Tab 400 mg – 1% DV Feb-20 to 2022	29.78	60	Sulprix
118	LEVOMEPROMAZINE HYDROCHLORIDE (brand change) Inj 25 mg per ml, 1 ml ampoule – 1% DV Apr-20 to 2022 Note – Wockhardt inj 25 mg per ml, 1 ml ampule to be delis		10 2020.	Nozinan
125	BUPRENORPHINE WITH NALOXONE (brand change) Tab 2 mg with naloxone 0.5 mg – 1% DV Apr-20 to 202	22 18.37	28	Buprenorphine Naloxone BNM
	→ Tab 8 mg with naloxone 2 mg - 1% DV Apr-20 to 2022	53.12	28	Buprenorphine Naloxone BNM
	Note – Suboxone tab 2 mg with naloxone 0.5 mg and tab 8 2020.	mg with naloxor	ne 2 mg to	
126	DISULFIRAM († price) Tab 200 mg	153.00	100	Antabuse
ONC	OLOGY AGENTS AND IMMUNOSUPPRESSANTS			
179	TOCILIZUMAB (amended restriction – affected criteria show → Inj 20 mg per ml, 4 ml vial → Inj 20 mg per ml, 10 ml vial → Inj 20 mg per ml, 20 ml vial	220.00 550.00	1 1 1	Actemra Actemra Actemra

Either

- 1 All of the following:
 - 1.1 The patient is enrolled in the Children's Oncology Group AALL1731 trial; and
 - 1.2 The patient has developed grade 3 or 4 cytokine release syndrome (CRS) associated with the administration of blinatumomab for the treatment of acute lymphoblastic leukaemia; and
 - 1.3 Tocilizumab is to be administered at doses no greater than 8 mg/kg IV for a maximum of 3 doses (if less than 30kg, maximum of 12 mg/kg); or
- 2 All of the following:
 - 2.1 The patient is enrolled in the Malaghan Institute of Medical Research Phase I ENABLE trial: and
 - 2.2 The patient has developed CRS or CAR T-Cell Related Encephalopathy Syndrome (CRES) associated with the administration of CAR T-cell therapy for the treatment of relapsed or refractory B-cell non-Hodgkin lymphoma; and
 - 2.3 Tocilizumab is to be administered according to the consensus guidelines for CRS and CRES for CAR T-cell therapy (Neelapu et al. Nat Rev Clin Oncol 2018;15:47-62) at doses no greater than 8 mg/kg IV for a maximum of 3 doses

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Price		Br
(ex man. Excl. GS	ST)	Ge
\$	Per	Ma

Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 November 2019 (continued)

RESPIRATORY SYSTEM AND ALLERGIES

189	LORATADINE († price and addition of HSS)		
	Tab 10 mg – 1% DV Feb-20 to 2022	100	Lorafix

SPECIAL FOODS

221	ENTERAL FEED 2 KCAL/ML (Pharmacode change) → Liquid 7.5 g protein, 20 g carbohydrate and 10 g fat per 100 ml, bottle	500 ml to be delisted	
223	EXTENSIVELY HYDROLYSED FORMULA (new listing) → Powder 1.6 g protein, 7.5 g carbohydrate and 3.1 g fat per 100 ml, 900 g can	900 g 900 g	Allerpro 1 Allerpro 2

Price		В
(ex man. Excl. G	ST)	0
\$	Per	Λ

Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 October 2019

ALIMENTARY TRACT AND METABOLISM

5 CALCIUM CARBONATE (amended restriction criteria)

Restricted

Initiation

Only for use in children under 12 years of age for use as a phosphate binding agent when prescribed for patients unable to swallow calcium carbonate tablets or where calcium carbonate tablets are inappropriate.

BLOOD AND BLOOD FORMING ORGANS

32 UROKINASE (new listing) Ini 5.000 iu vial

CARDIOVASCULAR SYSTEM

- 42 NICARDIPINE HYDROCHLORIDE (amended restriction criteria)
 - → Inj 2.5 mg per ml, 10 ml vial

Restricted

Initiation

Anaesthetist, intensivist, cardiologist or paediatric cardiologist

- 1 Patient is a Paediatric Patient; and
- 2—Any of the following:
 - 2.1 Patient has hypertension requiring urgent treatment with an intravenous agent; or
 - 2.2 Patient has excessive ventricular afterload: or
 - 2.3 Patient is awaiting or undergoing cardiac surgery using cardiopulmonary bypass.
- 42 VERAPAMIL HYDROCHLORIDE (brand change)

ILOPROST (1 price and addition of HSS)

→ Nebuliser soln 10 mcg per ml. 2 ml.

46 GLYCERYL TRINITRATE (delisting)

Note - Glytrin oral spray, 400 mcg per dose to be delisted from 1 May 2020.

DERMATOLOGICALS

50

53 CETOMACROGOL WITH GLYCEROL (brand change)

Crm 90% with glycerol 10% – **1% DV Mar-20 to 2022**2.35 500 ml **Boucher** 3.10 1,000 ml **Boucher**

Note – Pharmacy Health Sorbolene with glycerine crm 90% with glycerol 10%, 500 ml and 1,000 ml pack to be delisted from 1 March 2020.

Price		Brand or
(ex man. Excl. GS	T)	Generic
\$	Per	Manufacturer

56	SUNSCREEN, PROPRIETARY (delisting) Crm Note – sunscreen, proprietary crm to be delisted from 1 March 2020.		
56	SUNSCREEN, PROPRIETARY (addition of HSS) Lotn – 1% DV Mar-20 to 2022	200 g	Marine Blue Lotion SPF 50+
	Note - Marine Blue Lotion SPF 50+ lotn, 100 g pack to be delisted from 1 M	larch 2020.	
GENI	TO-URINARY SYSTEM		
57	CLOTRIMAZOLE († price and addition of HSS) Vaginal crm 1% with applicator – 1% DV Jan-20 to 20222.50 Vaginal crm 2% with applicator – 1% DV Jan-20 to 20223.00	35 g 20 g	Clomazol Clomazol
57	ETHINYLOESTRADIOL WITH NORETHISTERONE (new listing) Tab 35 mcg with norethisterone 1 mg and 7 inert tab – 1% DV Mar-20 to 2022	84	Brevinor 1/28
60	TAMSULOSIN HYDROCHLORIDE († price and addition of HSS) → Cap 400 mcg – 1% DV Jan-20 to 202217.73	100	Tamsulosin-Rex
61	TOLTERODINE TARTRATE (delisting) → Tab 1 mg14.56 Note – Arrow-Tolteroine tab 1 mg to be delisted from 1 March 2020.	56	Arrow-Tolterodine
HOR	MONE PREPARATIONS		
65	NORETHISTERONE (addition of HSS) Tab 5 mg – 1% DV Dec-19 to 2021 18.29	100	Primolut N
INFE	CTIONS		
76	BENZYLPENICILLIN SODIUM [PENICILLIN G] (new listing) Inj 600 mg (1 million units) vial	100	Sandoz
76	PHENOXYMETHYLPENICILLIN [PENICILLIN V] († price and addition of HSS) Grans for oral liq 125 mg per 5 ml – 1% DV Jan-20 to 20222.99 Grans for oral liq 250 mg per 5 ml – 1% DV Jan-20 to 20223.99	100 ml 100 ml	AFT AFT

CLINDAMYCIN (brand change)

24

Dalacin C

78

Price (ex man. Excl. GST) \$ Per Brand or Generic Manufacturer

Teva

Changes to Section H Part II – effective 1 October 2019 (continued)

90 EMTRICITABINE WITH TENOFOVIR DISOPROXIL (amended restriction criteria - affected criteria shown only)

→ Tab 200 mg with tenofovir disoproxil 245 mg (300.6 mg as a succinate)

Initiation - Pre-exposure prophylaxis

Re-assessment required after 3 months

All of the following Both:

- Applicant has an up to date knowledge of the safety issues and is competent to prescribe pre-exposure prophylaxis (refer to local health pathways or https://ashm.org.au/HIV/PrEP/ for training materials); and
- 2 Patient has undergone testing for HIV, syphilis, Hep B if not immune and a full STI screen in the previous two weeks; and
- 3 Patient has had renal function testing (creatinine, phosphate and urine protein/creatinine ratio) within the last 3 months and is not contraindicated for treatment; and
- 4 Patient has received advice regarding the reduction of risk of HIV and sexually transmitted infections and how to reduce those risks; and
- 5 + Patient has tested HIV negative and is not at risk of HIV seroconversion; and
- 6 2 Either:
 - **6.1** 2.1 All of the following:
 - **6.1.1** Patient is male or transgender; and
 - 6.1.2 2.1.2 Patient has sex with men; and
 - **6.1.3** 2.1.3 Patient is likely to have multiple episodes of condomless anal intercourse in the next 3 months: and
 - **6.1.4** 2.1.4 Any of the following:
 - **6.1.4.1** 2.1.4.1 Patient has had at least one episode of condomless receptive anal intercourse with one or more casual male partners in the last 3 months; or
 - **6.1.4.2** 2.1.4.2 A diagnosis of rectal chlamydia, rectal gonorrhoea, or infectious syphilis within the last 3 months; or
 - **6.1.4.3** 2.1.4.3 Patient has used methamphetamine in the last three months; or
 - **6.2** 2.2 All of the following:
 - 6.2.1 2.2.1 Patient has a regular partner who has HIV infection; and
 - 6.2.2 2.2.2 Partner is either not on treatment or has a detectable viral load; and
 - **6.2.3** 2.2.3 Condoms have not been consistently used.

Continuation – Pre-exposure prophylaxis

Re-assessment required after 3 months

All of the following:

- 1 Applicant has an up to date knowledge of the safety issues and is competent to prescribe pre-exposure prophylaxis (refer to local health pathways or https://ashm.org.au/HIV/PrEP/ for training materials); and
- 2 Patient has undergone testing for HIV, syphilis, Hep B if not immune and a full STI screen in the previous two weeks: and
- 3 Patient has had renal function testing (creatinine, phosphate and urine protein/creatinine ratio) within the last 12 months and is not contraindicated for treatment; and
- 4 Patient has received advice regarding the reduction of risk of HIV and sexually transmitted infections and how to reduce those risks; and
- 5 Patient has tested HIV negative and is not at risk of HIV seroconversion; and
- 6 Either:
 - 6.1 All of the following:
 - 6.1.1 Patient is male or transgender; and
 - 6.1.2 Patient has sex with men: and
 - 6.1.3 Patient is likely to have multiple episodes of condomless anal intercourse in the next 3 months; and

continued...

Price	
(ex man. Excl. GST)	
\$	Per

Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 October 2019 (continued)

- 6.1.4 Any of the following:
 - 6.1.4.1 Patient has had at least one episode of condomless receptive anal intercourse with one or more casual male partners in the last 3 months; or
 - 6.1.4.2 A diagnosis of rectal chlamydia, rectal gonorrhoea, or infectious syphilis within the last 3 months; or
 - 6.1.4.3 Patient has used methamphetamine in the last three months; or
- 6.2 All of the following:
 - 6.2.1 Patient has a regular partner who has HIV infection; and
 - 6.2.2 Partner is either not on treatment or has a detectable viral load; and
 - 6.2.3 Condoms have not been consistently used.

MUSCULOSKELETAL SYSTEM

100	PANCURONIUM BROMIDE (delisting)	

NERVOUS SYSTEM

104	ROPINIROLE HYDROCHLORIDE	(brand change)
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Tab 0.25 mg – 1% DV Mar-20 to 2022	84	Ropin
Tab 1 mg – 1% DV Mar-20 to 2022	84	Ropin
Tab 2 mg – 1% DV Mar-20 to 2022	84	Ropin
Tab 5 mg – 1% DV Mar-20 to 2022	84	Ropin

Note – Apo-Ropinirole tab 0.25 mg, 1 mg, 2 mg and 5 mg to be delisted from 1 March 2020.

109 MORPHINE SULPHATE († price and addition of HSS
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Cap long-acting 10 mg – 1% DV Jan-20 to 2022	10	m-Eslon
Cap long-acting 30 mg – 1% DV Jan-20 to 2022	10	m-Eslon
Cap long-acting 60 mg – 1% DV Jan-20 to 2022	10	m-Eslon
Cap long-acting 100 mg – 1% DV Jan-20 to 20227.13	10	m-Eslon

111 PAROXETINE (brand change)

111 SERTRALINE (brand change)

Tab 50 mg – 1% DV Mar-20 to 2022	0.92	30	Setrona
Tab 100 mg – 1% DV Mar-20 to 2022	1.61	30	Setrona
Note - Arrow-Sertraline tab 50 mg and 100 mg to be delisted from	om 1 March	1 2020.	

116 METOCI OPRAMIDE HYDROCHI ORIDE (Liprice and addition of HSS)

110	WE TOOLOT MANIBE TITDITOOTLEGITIDE (+ price and addition of 1100)		
	Inj 5 mg per ml, 2 ml ampoule – 1% DV Jan-20 to 20229.50	10	Pfizer

Price (ex man. Excl. G	ST)	Brand or Generic
` \$	Per	Manufacturer

Changes to Section H Part II – effective 1 October 2019 (continued)

126 VARENICLINE (amended restriction criteria)

7	Tab 0.5 mg \times 11 and 1 mg \times 42 –	1% DV Mar-19 to 202125.64	53	Varenicline Pfizer
-	Tab 1 mg - 1% DV Mar-19 to 2021	27.10	56	Varenicline Pfizer

Restricted

Initiation

All of the following:

- 1 Short-term therapy as an aid to achieving abstinence in a patient who has indicated that they are ready to cease smoking; and
- 2 The patient is part of, or is about to enrol in, a comprehensive support and counselling smoking cessation programme, which includes prescriber or nurse monitoring; and
- 3 Fither:
 - 3.1 The patient has tried but failed to quit smoking after at least two separate trials of nicotine replacement therapy, at least one of which included the patient receiving comprehensive advice on the optimal use of nicotine replacement therapy; or
 - 3.2 The patient has tried but failed to quit smoking using bupropion or nortriptyline; and
- 4 The patient has not used funded varenicline in the last 12 months The patient has not had a Special Authority for varenicline approved in the last 6 months; and
- 5 Varenicline is not to be used in combination with other pharmacological smoking cessation treatments and the patient has agreed to this; and
- 6 The patient is not pregnant; and
- 7 The patient will not be prescribed more than 12 weeks' funded varenicline in a 12 month period.

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

134	TEMOZOLOMIDE (brand change)		
	→ Cap 20 mg – 1% DV May-20 to 2022	5	Temaccord
	→ Cap 100 mg – 1% DV May-20 to 2022	5	Temaccord
	→ Cap 140 mg – 1% DV May-20 to 202250.12	5	Temaccord
	→ Cap 250 mg – 1% DV May-20 to 2022	5	Temaccord
	Note – Orion Temozolomide cap 20 mg, 100 mg and 250 mg to be delis	sted from 1 Mag	y 2020.
4.40	OALOUM FOLINATE (A		
142	CALCIUM FOLINATE († price and addition of HSS)		
	Inj 10 mg per ml, 5 ml vial – 1% DV Jan-20 to 2022 7.28	1	Calcium Folinate Sandoz
	Inj 10 mg per ml, 100 ml vial – 1% DV Mar-20 to 202272.00	1	Calcium Folinate
			Sandoz
142	CALCIUM FOLINATE (delisting)		
	Inj 10 mg per ml, 100 ml vial	1	Calcium Folinate
	,,		Ebewe
	Note – Calcium Folinate Ebewe inj 10 mg per ml, 100 ml vial to be delist	ted from 1 Mar	ch 2020.

Price		Brand or
(ex man. Excl. G	ST)	Generic
 \$	Per	Manufacturer

Changes to Section H Part II – effective 1 October 2019 (continued)

151 ADALIMUMAB (amended restriction – new criteria shown only)

-	Inj 20 mg per 0.4 ml syringe	1,599.96	2	Humira
)	Inj 40 mg per 0.8 ml pen	1,599.96	2	HumiraPen
-	Inj 40 mg per 0.8 ml syringe	1,599.96	2	Humira

Restricted

Initiation – hidradenitis suppurativa

Dermatologist

Re-assessment required after 4 months.

All of the following:

- 1 Patient has hidradenitis suppurativa Hurley Stage II or Hurley Stage III lesions in distinct anatomic areas; and
- 2 Patient has tried, but had an inadequate response to at least a 90 day trial of systemic antibiotics or patient has demonstrated intolerance to or has contraindications for systemic antibiotics; and
- 3 The patient has 3 or more active lesions (e.g. inflammatory nodules, abscesses, draining fistulae); and
- 4 The patient has a Dermatology Quality of Life Index of 10 or more and the assessment is no more than 1 month old at time of application; and
- 5 Following the initial loading doses, adalimumab is to be administered at doses no greater than 40mg every 7 days.

Continuation – hidradenitis suppurativa

Dermatologist

Re-assessment required after 6 months.

All of the following:

- 1 The patient has a reduction in active lesions (e.g. inflammatory nodules, abscesses, draining fistulae) of 25% or more from baseline; and
- 2 The patient has a Dermatology Quality of Life Index improvement of 4 or more from baseline; and
- 3 Adalimumab is to be administered at doses no greater than 40mg every 7 days. Fortnightly dosing has been considered.

VARIOUS

205	POVIDONE-IODINE (new listing) Soln 10% – 1% DV Dec-19 to 2021	15 ml	Riodine
205	POVIDONE-IODINE (\$\psi\$ price and addition of HSS) Soln 10% - 1% DV Dec-19 to 2021	500 ml	Riodine

SPECIAL FOODS

222	$\Delta MINIO$	ACID	FORMUI	Δ	(new	lictina)

222 AMINO ACID FORMULA (delisting)

→ Powder 16 g protein, 51.4 g carbohydrate and

222 HIGH PROTEIN ENTERAL FEED 1.25 KCAL/ML (amended presentation description)

→ Liquid 6.3 g protein, 14.2 g carbohydrate and 4.9 g fat per 100 ml, 1,000 ml bag bottle

e.g. Nutrison Protein Plus

	Price		Brand or
(ex	man. Excl. G	ST)	Generic
	\$	Per	Manufacturer

Changes to Section H Part II – effective 1 September 2019

ALIMENTARY TRACT AND METABOL	.ISM	
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6	SULFASALAZINE († price and addition of HSS) Tab EC 500 mg – 1% DV Dec-19 to 2022	100	Salazopyrin EN
17	CALCIUM CARBONATE (new listing) Tab eff 1.75 g (1 g elemental)		
18	ZINC SULPHATE (addition of HSS) Cap 137.4 mg (50 mg elemental) – 1% DV Dec-19 to 2022 11.00	100	Zincaps
BLO	DD AND BLOOD FORMING ORGANS		
31	ASPIRIN († price) Tab 100 mg1.95	90	Ethics Aspirin EC
31	LYSINE ACETYLSALICYLATE [LYSINE ASPIRIN] (amended chemical name) \rightarrow Inj 500 mg		e.g. Aspegic
35	WATER (new listing) Inj 20 ml ampoule	20	Fresenius Kabi
CAR	DIOVASCULAR SYSTEM		
37	CILAZAPRIL (brand change) Tab 2.5 mg – 1% DV Feb-20 to 2022	90 90 20.	Zapril Zapril
39	ADENOSINE (new listing) Inj 3 mg per ml, 2 ml vial – 1% DV Feb-20 to 2022	6	Adenocor
39	AMIODARONE HYDROCHLORIDE (brand change) Inj 50 mg per ml, 3 ml ampoule – 1% DV Feb-20 to 2022 16.37 Note – Cordarone-X and Lodi inj 50 mg per ml, 3 ml ampoule to be delisted f	10 rom 1 Febru	Max Health lary 2020.
39	FLECAINIDE ACETATE (brand change) Tab 50 mg – 1% DV Feb-20 to 2022 19.95 Note – Tambocor tab 50 mg to be delisted from 1 February 2020.	60	Flecainide BNM
44	CHLORTALIDONE [CHLORTHALIDONE] (‡ price and addition of HSS) Tab 25 mg – 1% DV Dec-19 to 2022	50	Hygroton
47			

	Price (ex man. Excl.	GST)	Brand or Generic
	\$	Per	Manufacturer
Char	nges to Section H Part II – effective 1 September 2019 (co	ontinued)	
47	NICORANDIL (↓ price and addition of HSS) Tab 10 mg – 1% DV Dec-19 to 2022	60 60	lkorel Ikorel
49	SILDENAFIL (amended restriction – affected criteria shown only) → Tab 25 mg – 1% DV Sep-18 to 2021	4 4 12	Vedafil Vedafil Vedafil
	 For use in weaning patients from inhaled nitric oxide; or For perioperative use in cardiac surgery patients; or For use in intensive care as an alternative to nitric oxide; or For use in the treatment of erectile dysfunction secondary to spinal in a spinal unit. 	cord injury in	patients being treated
DERI	MATOLOGICALS		
53	CETOMACROGOL WITH GLYCEROL (‡ price, addition of HSS and note) Crm 90% with glycerol 10% – 1% DV Dec-19 to 2022	100 g	healthE
GENI	TO-URINARY SYSTEM		
58	MEDROXYPROGESTERONE ACETATE († price and addition of HSS) Inj 150 mg per ml, 1 ml syringe – 1% DV Dec-19 to 20227.98	1	Depo-Provera
INFE	CTIONS		
75	CLARITHROMYCIN (↑ price) → Grans for oral liq 50 mg per ml192.00	50 ml	Klacid
75	ERYTHROMYCIN (AS LACTOBIONATE) (\$\frac{1}{2}\$ price and addition of HSS) Inj 1 g vial - 1% DV Dec-19 to 202210.00	1	Erythrocin IV
88	RALTEGRAVIR POTASSIUM (new listing) → Tab 600 mg1,090.00	60	Isentress HD
NER\	OUS SYSTEM		
104	KETAMINE (pack size change) Inj 1 mg per ml, 100 ml bag – 1% DV Feb-20 to 2022 270.00 Inj 10 mg per ml, 10 ml syringe – 1% DV Feb-20 to 2022 70.00 Note – Biomed inj 1 mg per ml, 100 ml bag; 1 pack and inj 10 mg per ml from 1 February 2020.	10 5 , 10 ml syring	Biomed Biomed e; 1 pack to be delisted

		Price (ex man. Excl. 6 \$	SST) Per	Brand or Generic Manufacturer
Char	nges to Section H Part II – effective 1 Septer	mber 2019 (con	tinued)	
104	PROPOFOL (amended presentation description) Inj 10 mg per ml, 20 ml vial ampoule – 10% DV Dec-19 to 2022	4.35	5	Fresofol 1% MCT/LCT
108	SUCROSE (new listing) Oral liq 25% – 1% DV Feb-20 to 2022	13.00	25 ml	Biomed
115	SUMATRIPTAN († price) Inj 12 mg per ml, 0.5 ml prefilled pen	81.15	2	Clustran
117	AMISULPRIDE (delisting) Oral liq 100 mg per ml Note – Solian oral liq 100 mg per ml to be delisted from		60 ml	Solian
ONC	DLOGY AGENTS AND IMMUNOSUPPRESSANT	s		
129	CARMUSTINE (new listing) Inj 100 mg vial	1,387.00	1	Bicnu Heritage
136	OXALIPLATIN (brand change) Inj 5 mg per ml, 20 ml vial – 1% DV Feb-20 to 2021 Note – Oxaliccord inj 5 mg per ml, 20 ml vial to be delis		1 y 2020.	Oxaliplatin Accord
142	DEXRAZOXANE (new listing) → Inj 500 mg			e.g. Cardioxane
	Restricted Initiation Medical oncologist, paediatric oncologist, haematologis All of the following: Patient is to receive treatment with high dose anthrace Based on current treatment plan, patient's cumulative doxorubicin equivalent or greater; and Dexrazoxane to be administered only whilst on anthrace Hither: A.1 Treatment to be used as a cardioprotectant for	cycline given with c e lifetime dose of ar acycline treatment; a child or young adı	urative intent othracycline and ult; or	
145	4.2 Treatment to be used as a cardioprotectant for	secondary mangnar	icy.	
140	TACROLIMUS (new listing) → Cap 0.75 mg	99.30	100	Tacrolimus Sandoz
145	TACROLIMUS (↓ price) → Cap 0.5 mg → Cap 1 mg → Cap 5 mg	84.30	100 100 50	Tacrolimus Sandoz Tacrolimus Sandoz Tacrolimus Sandoz

Price		Brand or
(ex man. Excl. GST)		Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 September 2019 (continued)

151 ADALIMUMAB (amended restriction – new criteria shown only)

→ Inj 20 mg per 0.4 ml syringe	1,599.96	2	Humira
→ Inj 40 mg per 0.8 ml pen	1,599.96	2	HumiraPen
→ Inj 40 mg per 0.8 ml syringe	1,599.96	2	Humira

Restricted

Initiation – severe ocular inflammation

Re-assessment required after 4 months

Either

- 1 Both:
 - 1.1 The patient has had an initial Special Authority approval for infliximab for severe ocular inflammation; and
 - 1.2 Either:
 - 1.2.1 The patient has experienced intolerable side effects from infliximab; or
 - 1.2.2 The patient has received insufficient benefit from infliximab to meet the renewal criteria for infliximab for severe ocular inflammation; or
- 2 Both:
 - 2.1 Patient has severe, vision-threatening ocular inflammation requiring rapid control; and
 - 2.2 Any of the following:
 - 2.2.1 Treatment with high-dose steroids (intravenous methylprednisolone) followed by high dose oral steroids has proven ineffective at controlling symptoms; or
 - 2.2.2 Patient developed new inflammatory symptoms while receiving high dose steroids; or
 - 2.2.3 Patient is aged under 8 years and treatment with high dose oral steroids and other immunosuppressants has proven ineffective at controlling symptoms.

Continuation - severe ocular inflammation

Re-assessment required after 12 months

Both

- 1 Any of the following:
 - 1.1 The patient has had a good clinical response following 3 initial doses: or
 - 1.2 Following each 12-month treatment period, the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria < ½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or
 - 1.3 Following each 12-month treatment period, the patient has a sustained steroid sparing effect, allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18 years old: and</p>
- 2 Adalimumab to be administered at doses no greater than 40 mg every 14 days.

Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if adalimumab is withdrawn.

Initiation - chronic ocular inflammation

Re-assessment required after 4 months

Either

- 1 Both:
 - 1.1 The patient has had an initial Special Authority approval for infliximab for chronic ocular inflammation; and
 - 1.2 Either:
 - 1.2.1 The patient has experienced intolerable side effects from infliximab; or
 - 1.2.2 The patient has received insufficient benefit from infliximab to meet the renewal criteria for infliximab for chronic ocular inflammation: or
- 2 Both:
 - 2.1 Patient has severe uveitis uncontrolled with treatment of steroids and other immunosuppressants with a severe risk of vision loss; and

continued...

Price (ex man. Excl. GST) \$ Per Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 September 2019 (continued) continued...

- 2.2 Any of the following:
 - 2.2.1 Patient is 18 years or older and treatment with at least two other immunomodulatory agents has proven ineffective; or
 - 2.2.2 Patient is under 18 years and treatment with methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or
 - 2.2.3 Patient is under 8 years and treatment with steroids or methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or disease requires control to prevent irreversible vision loss prior to achieving a therapeutic dose of methotrexate.

Continuation – chronic ocular inflammation Re-assessment required after 12 months

Both

- 1 Any of the following:
 - 1.1 The patient has had a good clinical response following 12 weeks' initial treatment; or
 - 1.2 Following each 12-month treatment period, the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria < ½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or
 - 1.3 Following each 12-month treatment period, the patient has a sustained steroid sparing effect, allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18 years old; and</p>
- 2 Adalimumab to be administered at doses no greater than 40 mg every 14 days.

Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if adalimumab is withdrawn.

160 INFLIXIMAB (amended restriction criteria – affected criteria shown only)

→ Inj 100 mg - 10% DV Mar-15 to 29 Feb 2020806.00 1 Remicade

Initiation – severe ocular inflammation

Re-assessment required after 3 doses

Either

- 1 Both:
 - 1.1 The patient has had an initial Special Authority approval for adalimumab for severe ocular inflammation; and
 - 1.2 Either:
 - 1.2.1 The patient has experienced intolerable side effects from adalimumab; or
 - 1.2.2 The patient has received insufficient benefit from adalimumab to meet the renewal criteria for adalimumab for severe ocular inflammation; or
- 2 Fither Both:
 - 2.1 Patient has severe, vision-threatening ocular inflammation requiring rapid control; and
 - 2.2 Either Any of the following:
 - 2.2.1 Treatment with high-dose steroids (intravenous methylprednisolone) followed by high dose oral steroids has proven ineffective at controlling symptoms; or
 - **2.**2.2 Patient developed new inflammatory symptoms while receiving high dose steroids; or
 - 2.2.3 Patient is aged under 8 years and treatment with high dose oral steroids and other immunosuppressants has proven ineffective at controlling symptoms.

Continuation – severe ocular inflammation

Re-assessment required after 12 months

Any of the following:

- 1 The patient has had a good clinical response following 3 initial doses: or
- 2 Following each 12-month treatment period, 7the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria < ½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or

continued...

Price	
(ex man. Excl. GST)	
\$	Per

Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 September 2019 (continued)

3 **Following each 12-month treatment period,** 7the patient has a sustained steroid sparing effect, allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18 years old.

Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if infliximab is withdrawn.

Initiation - chronic ocular inflammation

Re-assessment required after 3 doses

Both Either

- 1 Both:
 - 1.1 The patient has had an initial Special Authority approval for adalimumab for chronic ocular inflammation; and
 - 1.2 Either:
 - 1.2.1 The patient has experienced intolerable side effects from adalimumab; or
 - 1.2.2 The patient has received insufficient benefit from adalimumab to meet the renewal criteria for adalimumab for chronic ocular inflammation; or
- 2 Fither Both:
 - 2.1 Patient has severe uveitis uncontrolled with treatment of steroids and other immunosuppressants with a severe risk of vision loss; and
 - 2.2 Either Any of the following:
 - 2.2.1 Patient is 18 years or older and treatment with at least two other immunomodulatory agents has proven ineffective; or
 - 2.2.2 Patient is under 18 years and treatment with methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or
 - 2.2.3 Patient is under 8 years and treatment with steroids or methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or disease requires control to prevent irreversible vision loss prior to achieving a therapeutic dose of methotrexate.

Continuation - chronic ocular inflammation

Re-assessment required after 12 months

Any of the following:

- 1 The patient has had a good clinical response following 3 initial doses; or
- 2 Following each 12-month treatment period, 7the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria < ½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or
- 3 **Following each 12-month treatment period,** 7the patient has a sustained steroid sparing effect, allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18 years old.

Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if infliximab is withdrawn.

SENSORY ORGANS

200 CARBACHOL (new listing) Inj 150 mcg vial

VARIOUS

Price		Brand or
(ex man. Excl. G	ST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 August 2019

ALIMENTARY TRACT AND METABOLISM

6	HYDROCORTISONE ACETATE WITH PRAMOXINE HYDROCHLORIDE (new listing)
	Topical aerosol foam, 1% with pramoxine hydrochloride 1%

	Topical acrosor toath, 170 with pramoxine hydrochloride 170		
7	RANITIDINE († price) Inj 25 mg per ml, 2 ml ampoule13.40	5	Zantac
12	LACTULOSE († price and addition of HSS) Oral liq 10 g per 15 ml – 1% DV Nov-19 to 2022	500 ml	Laevolac
12	SODIUM CITRATE WITH SODIUM LAURYL SULPHOACETATE († price and	d addition of H	SS)
	Enema 90 mg with sodium lauryl sulphoacetate 9 mg per ml, 5 ml – 1% DV Nov-19 to 2022 29.98	50	Micolette
18	FERROUS SULPHATE SULFATE (amended chemical name, † price and ac	ddition of HSS))
	Oral liq 30 mg (6 mg elemental) per ml - 1% DV Nov-19 to 202212.08	500 ml	Ferodan
18	IRON POLYMALTOSE (new listing) Inj 50 mg per ml, 2 ml ampoule	5	Ferrum H
19	HYALURONIC ACID WITH LIDOCAINE [LIGNOCAINE] (new listing) Inj 20 mg per ml		
21	PYRIDOXINE HYDROCHLORIDE (new listing) Inj 100 mg per ml, 2 ml vial		

lnj 100 mg per ml, 2 ml vial

31 LYSINE ACETYLSALICYLATE (new listing)

→ Inj 500 mg

Restricted Initiation

Both:

- 1 For use when an immediate antiplatelet effect is required prior to an urgent interventional neuro-radiology or interventional cardiology procedure; and
- 2 Administration of oral aspirin would delay the procedure.

BLOOD AND BLOOD FORMING ORGANS

29 DALTEPARIN (delisting)

Inj 2,500 iu in 0.2 ml syringe	19.97	10	Fragmin
Inj 5,000 iu in 0.2 ml syringe	39.94	10	Fragmin
Inj 7,500 iu in 0.75 ml syringe	60.03	10	Fragmin
Inj 10,000 iu in 1 ml syringe	77.55	10	Fragmin

Note – Fragmin inj 2,500 iu in 0.2 ml syringe, 5,000 iu in 0.2 ml syringe, 7,500 iu in 0.75 ml syringe and 10,000 iu in 1 ml syringe to be delisted from 1 April 2020.

e.g. Aspegic

	(Price (ex man. Excl. G \$	ST) Per	Brand or Generic Manufacturer
Char	nges to Section H Part II – effective 1 August 2	019 (continue	d)	
29	DALTEPARIN (delisting)			
	Inj 12,500 iù in 0.5 ml syringe Inj 15,000 iu in 0.6 ml syringe Inj 18,000 iu in 0.72 ml syringe Note – Fragmin inj 12,500 iu in 0.5 ml syringe, 15,000 iu in be delisted from 1 January 2020.	120.05 158.47	10 10 10 and 18,000	Fragmin Fragmin Fragmin iu in 0.72 ml syringe to
30	WARFARIN SODIUM († price)			
	Tab 1 mg		100	Marevan
	Tab 3 mg		100	Marevan
	Tab 5 mg	13.50	100	Marevan
31	ASPIRIN (4 price and addition of HSS) Tab 100 mg – 10% DV Nov-19 to 2022	10.80	990	Ethics Aspirin EC
CAR	DIOVASCULAR SYSTEM			
38	PHENOXYBENZAMINE HYDROCHLORIDE (new listing) Inj 50 mg per ml, 1 ml ampoule			
39	DIGOXIN († price and addition of HSS) Tab 62.5 mcg – 1% DV Nov-19 to 2022 Tab 250 mcg – 1% DV Nov-19 to 2022	7.00 15.20	240 240	Lanoxin PG Lanoxin
41	LABETALOL (delisted) Tab 400 mg Note – labetalol tab 400 mg delisted 1 August 2019.			
43	FUROSEMIDE [FRUSEMIDE] (brand change) Tab 40 mg – 1% DV Dec-19 to 2022 Note – Diurin 40 tab 40 mg to be delisted from 1 December		1,000	Apo-Furosemide
43	FUROSEMIDE [FRUSEMIDE] (new listing) Oral liq 10 mg per ml – 1% DV Jan-20 to 2022 Inj 10 mg per ml, 25 ml ampoule – 1% DV Jan-20 to 202		30 ml 6	Lasix Lasix
44	SPIRONOLACTONE († price and addition of HSS) Oral liq 5 mg per ml – 1% DV Nov-19 to 2022	30.60	25 ml	Biomed
50	ILOPROST (brand change) Inj 50 mcg in 0.5 ml ampoule – 1% DV Jan-20 to 2022 Note – llomedin inj 50 mcg in 0.5 ml ampoule to be delisted		5 / 2020.	Clinect
DERI	MATOLOGICALS			
54	CLOBETASOL PROPIONATE (4 price and addition of HSS) Crm 0.05% – 1% DV Nov-19 to 2022 Oint 0.05% – 1% DV Nov-19 to 2022		30 g 30 g	Dermol Dermol

		Price (ex man. Excl. G	SST)	Brand or Generic
		\$	Per	Manufacturer
Cha	nges to Section H Part II – effective 1 August	2019 (continue	ed)	
55	CLOBETASOL PROPIONATE (4 price and addition of HSS Scalp app 0.05% – 1% DV Nov-19 to 2022		30 ml	Dermol
GEN	ITO-URINARY SYSTEM			
58	INTRA-UTERINE DEVICE (‡ price and addition of HSS) IUD 29.1 mm length × 23.2 mm width – 1% DV Nov-19 to 2022	18.45	1	Choice TT380 Short
	IUD 33.6 mm length × 29.9 mm width – 1% DV Nov-19 to 2022	18.45	1	Choice TT380 Standard
	IUD 35.5 mm length × 19.6 mm width – 1% DV Nov-19 to 2022	15.50	1	Choice Load 375
INF	CTIONS			
73	CEFALEXIN (\$\dagger\$ price and addition of HSS) Cap 250 mg - 1% DV Nov-19 to 2022	3.33	20	Cephalexin ABM
73	CEFUROXIME († price and addition of HSS) Tab 250 mg – 1% DV Feb-20 to 2022	45.93	50	Zinnat
73	CEFTRIAXONE (brand change) Inj 500 mg vial – 1% DV Jan-20 to 2022 Inj 1 g vial – 1% DV Jan-20 to 2022 Note – DEVA inj 500 mg and 1 g vial to be delisted from 1	3.99	1 5	Ceftriaxone-AFT Ceftriaxone-AFT
73	CEFTRIAXONE (4 price and addition of HSS) Inj 2 g vial – 1% DV Jan-20 to 2022	1.98	1	Ceftriaxone-AFT
75	ROXITHROMYCIN († price) → Tab dispersible 50 mg	8.29	10	Rulide D
80	ITRACONAZOLE († price and addition of HSS) → Cap 100 mg – 1% DV Nov-19 to 2022	4.27	15	Itrazole
84	PENTAMIDINE ISETHIONATE († price and addition of HSS → Inj 300 mg vial – 1% DV Nov-19 to 2022		5	Pentacarinat
MUS	CULOSKELETAL SYSTEM			
94	PYRIDOSTIGMINE BROMIDE († price and addition of HSS Tab 60 mg – 1% DV Nov-19 to 2022		100	Mestinon

	Price		Brand or
(ex	(ex man. Excl. GST)		Generic
	\$	Per	Manufacturer

Changes to Section H Part II – effective 1 August 2019 (continued)

NERVOUS SYSTEM

104	KETAMINE (new listing) Inj 100 mg per ml, 2 ml vial	155.60	5	Ketamine-Claris
105	BUPIVACAINE HYDROCHLORIDE WITH FENTANYL († price and	addition of HS	S)	
	Inj 1.25 mg with fentanyl 2 mcg per ml,			
	100 ml bag – 1% DV Nov-19 to 2022	225.00	10	Bupafen
	Inj 1.25 mg with fentanyl 2 mcg per ml,			
	200 ml bag – 1% DV Nov-19 to 2022	235.00	10	Bupafen
106	LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE († price and addi	tion of UCC)		
100	Inj 2%, 5 ml ampoule – 1% DV Nov-19 to 2022		25	Lidocaine-Claris
	inj 270, 0 mi ampodio – 170 DV NOV-13 to 2022	0.20	20	Liuocailic-olaris
106	LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE WITH ADRENALI	NE († price and	l addition of	HSS)
	Inj 1% with adrenaline 1:100,000, 5 ml ampoule			
	– 1% DV Nov-19 to 2022	29.00	10	Xylocaine
107	DADACETAMOL (* price and addition of UCC)			
107	PARACETAMOL († price and addition of HSS) Suppos 25 mg – 1% DV Nov-19 to 2022	58 50	20	Biomed
	Suppos 50 mg – 1% DV Nov-19 to 2022		20	Biomed
	capped so mg 170 B1 Not 10 to 2022	00.00		Diomou
108	FENTANYL († price and addition of HSS)			
	Inj 10 mcg per ml, 100 ml bag – 1% DV Nov-19 to 2022	220.00	10	Biomed
112	ETHOSUXIMIDE (pack size change)	140.00	100	Zavantin
	Cap 250 mg		100 or 2010	Zarontin
	Note – the 200 tab pack (Filannacode 200070) to be delisted i		CI 2013.	
117	AMISULPRIDE († price and addition of HSS)			
	Tab 100 mg – 1% DV Nov-19 to 2022	5.15	30	Sulprix
	Tab 200 mg – 1% DV Nov-19 to 2022	14.96	60	Sulprix
447	OUR ODDDOMATINE UNIDOCULI ODIDE (
117	CHLORPROMAZINE HYDROCHLORIDE (new listing) Tab 10 mg – 1% DV Jan-20 to 2022	14.00	100	Lauractil
	Tab 25 mg – 1% DV Jan-20 to 2022		100	Largactil Largactil
	Tab 100 mg – 1% DV Jan-20 to 2022		100	Largactil
	Inj 25 mg per ml, 2 ml ampoule – 1% DV Jan-20 to 2022		10	Largactil
	, 31 , 1			3
ONCO	LOGY AGENTS AND IMMUNOSUPPRESSANTS			
130	FLUDARABINE PHOSPHATE († price and addition of HSS)			
130	Inj 50 mg vial – 1% DV Nov-19 to 2022	576 45	5	Fludarabine Ebewe
	ing 55 ing viai - 1/0 DV 110V-13 to 2022		J	. Idualabilic EbcWC
142	CALCIUM FOLINATE († price and addition of HSS)			
	Inj 10 mg per ml, 10 ml vial – 1% DV Jan-20 to 2022	9.49	1	Calcium Folinate
				Sandoz
	Inj 10 mg per ml, 35 ml vial – 1% DV Nov-19 to 2022	25.14	1	Calcium Folinate
				Sandoz

Price		Brand or
(ex man. Excl. G	ST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II - effective 1 August 2019 (continued)

142	CALCIUM FOLINATE (delisting) Inj 10 mg per ml, 10 ml vial7.33 Note – Calcium Folinate Ebewe inj 10 mg per ml, 10 ml vial to be delisted f		Calcium Folinate Ebewe ary 2020.
142	MESNA († price and addition of HSS)		
	Tab 400 mg – 1% DV Nov-19 to 2022	50	Uromitexan
	Tab 600 mg – 1% DV Nov-19 to 2022	50	Uromitexan
	Inj 100 mg per ml, 4 ml ampoule – 1% DV Nov-19 to 2022 177.45	15	Uromitexan
	Inj 100 mg per ml, 10 ml ampoule – 1% DV Nov-19 to 2022 407.40	15	Uromitexan
151	ADALIMUMAB (amended restriction criteria – new criteria shown only)		
	→ Inj 20 mg per 0.4 ml syringe	2	Humira
	→ Inj 40 mg per 0.8 ml pen	2	HumiraPen
	→ Inj 40 mg per 0.8 ml syringe	2	Humira

Restricted

Initiation - severe Behcet's disease

Any relevant practitioner

Re-assessment required after 3 months

All of the following:

- 1 The patient has severe Behcet's disease that is significantly impacting the patient's quality of life (see Notes); and
- 2 Either:
 - 2.1 The patient has severe ocular, neurological, gastrointestinal, rheumatological, mucocutaneous and/or vasculitic symptoms and has not responded adequately to treatment with infliximab (see Notes); or
 - 2.2 The patient has severe ocular, neurological, gastrointestinal, rheumatological, mucocutaneous and/or vasculitic symptoms and has experienced intolerable side effects from treatment with infliximab; and
- 3 The patient is experiencing significant loss of quality of life; and
- 4 Adalimumab to be administered at doses no greater than 40 mg every 14 days.

Notes: Behcet's disease diagnosed according to the International Study Group for Behcet's disease. Lancet 1990;335(8697):1078-80. Quality of life measured using an appropriate quality of life scale such as that published in Gilworth et al, J Rheumatol. 2004;31:931-7

Continuation - severe Behcet's disease

Any relevant practitioner

Re-assessment required after 6 months

Both:

- 1 Patient has had a good clinical response to initial treatment with measurably improved quality of life; and
- 2 Adalimumab to be administered at doses no greater than 40 mg every 14 days.

Changes to Section H Part II - effective 1 August 2019 (continued)

159 BEVACIZUMAB (amended restriction criteria)

- → Inj 25 mg per ml, 4 ml vial
- → Inj 25 mg per ml, 16 ml vial

Restricted

Initiation - Recurrent Respiratory Papillomatosis

Otolaryngologist

Re-assessment required after 12 months

All of the following:

- 1 Maximum of 6 doses: and
- 2 The patient has recurrent respiratory papillomatosis; and
- 3 The treatment is for intra-lesional administration

Continuation - Recurrent Respiratory Papillomatosis

Otolarvngologist

Re-assessment required after 12 months

All of the following:

- 1 Maximum of 6 doses: and
- 2 The treatment is for intra-lesional administration; and
- 3 There has been a reduction in surgical treatments or disease regrowth as a result of treatment.

Initiation - ocular conditions

Fither:

- 1 Ocular neovascularisation: or
- 2 Exudative ocular angiopathy.

169 RITUXIMAB (amended restriction criteria – new criteria shown only)

→	Inj 10 mg per ml,	10 ml vial	1	,075.50	2	Mabthera
→	Inj 10 mg per ml,	50 ml vial	2	,688.30	1	Mabthera

Restricted

Initiation - Neuromyelitis Optica Spectrum Disorde (NMOSD)

Relevant specialist or medical practitioner on the recommendation of a relevant specialist.

Re-assessment required after 6 months

Both:

- 1 One of the following dose regimens is to be used: 2 doses of 1,000 mg rituximab administered fortnightly, or 4 doses of 375 mg/m² administered weekly for four weeks; and
- 2 Either:
 - 2.1 The patient has experienced a severe episode or attack of NMOSD (rapidly progressing symptoms and clinical investigations supportive of a severe attack of NMOSD); or
 - 2.2 All of the following:
 - 2.2.1 The patient has experienced a breakthrough attack of NMOSD; and
 - 2.2.2 The patient is receiving treatment with mycophenolate; and
 - 2.2.3 The patients is receiving treatment with corticosteroids.

Continuation - Neuromyelitis Optica Spectrum Disorder (NMOSD)

Relevant specialist or medical practitioner on the recommendation of a relevant specialist.

Re-assessment required after 2 years

All of the following:

- 1 One of the following dose regimens is to be used: 2 doses of 1,000 mg rituximab administered fortnightly, or 4 doses of 375 mg/m² administered weekly for four weeks; and
- 2 The patients has responded to the most recent course of rituximab; and
- 3 The patient has not received rituximab in the previous 6 months.

continued...

Price		Brand or
(ex man. Excl. G	ST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II - effective 1 August 2019 (continued)

continued...

Initiation - Severe Refractory Myasthenia Gravis

Neurologist or medical practitioner on the recommendation of a neurologist.

Re-assessment required after 2 years

Both

- 1 One of the following dose regimens is to be used: 375 mg/m² of body surface area per week for a total of four weeks, or 500 mg once weekly for four weeks, or two 1,000 mg doses given two weeks apart; and
- 2 Either:
 - 2.1 Treatment with corticosteroids and at least one other immunosuppressant for at least a period of 12 months has been ineffective; or
 - 2.2 Both:
 - 2.2.1 Treatment with at least one other immunosuppressant for a period of at least 12 months; and
 - 2.2.2 Corticosteroids have been trialed for at least 12 months and have been discontinued due to unacceptable side effects.

Continuation - Severe Refractory Myasthenia Gravis

Neurologist or medical practitioner on the recommendation of a neurologist.

Re-assessment required after 2 years

All of the following:

- 1 One of the following dose regimens is to be used: 375 mg/m² of body surface area per week for a total of four weeks, or 500 mg once weekly for four weeks, or two 1,000 mg doses given two weeks apart; and
- 2 An initial response lasting at least 12 months was demonstrated; and
- 3 Either:

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- 3.1 The patient has relapsed despite treatment with corticosteroids and at least one other immunosuppressant for a period of at least 12 months; or
- 3.2 Both

Δ7ΔΤΗΙΟΡΒΙΝΕ (brand change)

- 3.2.1 The patient's myasthenia gravis has relapsed despite treatment with at least one immunosuppressant for a period of at least 12 months; and
- 3.2.2 Corticosteroids have been trialed for at least 12 months and have been discontinued due to unacceptable side effects.

100	Tab 25 mg – 1% DV Jan-20 to 2022	60 100	Azamun Azamun
186	AZATHIOPRINE († price and addition of HSS) Inj 50 mg vial – 1% DV Nov-19 to 2022199.00	1	lmuran
RESP	IRATORY SYSTEM AND ALLERGIES		
189	CETIRIZINE HYDROCHLORIDE († price and addition of HSS) Tab 10 mg – 1% DV Nov-19 to 2022	100	Zista
189	IPRATROPIUM BROMIDE († price and addition of HSS) Nebuliser soln 250 mcg per ml, 2 ml ampoule - 1% DV Jan-20 to 2022	20	Univent
193	MONTELUKAST (brand change) Tab 4 mg – 1% DV Jan-20 to 2022	28 28 2020.	Montelukast Mylan Montelukast Mylan

	(e:	Price x man. Excl. (\$	GST) Per	Brand or Generic Manufacturer
Char	nges to Section H Part II – effective 1 August 20	19 (continu	ed)	
194	CAFFEINE CITRATE († price and addition of HSS) Oral liq 20 mg per ml (caffeine 10 mg per ml) – 1% DV Nov-19 to 2022		25 ml 5	Biomed Biomed
194	THEOPHYLLINE (new listing) Tab long-acting 250 mg – 1% DV Jan-20 to 2022 Oral liq 80 mg per 15 ml – 1% DV Jan-20 to 2022		100 500 ml	Nuelin-SR Nuelin
194	SODIUM CHLORIDE († price and addition of HSS) Nebuliser soln 7%, 90 ml bottle – 1% DV Nov-19 to 2022 .	24.50	90 ml	Biomed
SENS	SORY ORGANS			
196	CHLORAMPHENICOL (addition of HSS) Eye drops 0.5% – 1% DV Nov-19 to 2022	1.54	10 ml	Chlorafast
198	SODIUM CROMOGLICATE (new listing) Eye drops 2% – 1% DV Jan-20 to 2022	1.79	5 ml	Rexacrom
200	TIMOLOL (delisting) Eye drops 0.25%, gel forming Note – Timoptol XE eye drops 0.25%, gel forming to be delist		2.5 ml nuary 2020.	Timoptol XE
EXTE	MPORANEOUSLY COMPOUNDED PREPARATIONS			
211	COAL TAR († price and addition of HSS) Soln BP – 1% DV Nov-19 to 2022	36.25	200 ml	Midwest
212	MAGNESIUM HYDROXIDE (new listing) Suspension			
212	SODIUM BICARBONATE (new listing) Powder BP – 1% DV Jan-20 to 2022	10.05	500 g	Midwest
213	SYRUP (pack size change) Liq (pharmaceutical grade) – 1% DV Jan-20 to 2022 Note – Midwest lig (pharmaceutical grade) 2 000 ml bottle p		500 ml	Midwest

Note – Midwest liq (pharmaceutical grade), 2,000 ml bottle pack to be delisted from 1 January 2020.

Price		Brand or
(ex man. Excl. G	ST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 August 2019 (continued)

VACCINES

HUMAN PAPILLOMAVIRUS (6, 11, 16, 18, 31, 33, 45, 52 AND 58) VACCINE [HPV] (amended restriction criteria – new criteria shown only)

→ Inj 270 mcg in 0.5 ml syringe – 0% DV Jun-17 to 20200.00 10 Gardasil 9

Restricted

Initiation - (Recurrent Respiratory Papillomatosis)

All of the following:

- 1 Either:
 - 1.1 Maximum of two doses for children aged 14 years and under; or
 - 1.2 Maximum of three doses for people aged 15 years and over.
- 2 The patient has recurrent respiratory papillomatosis; and
- 3 The patient has not previously had an HPV vaccine.

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