

The logo for PHARMAC (Te Pātaka Whaioranga) is a white circle containing the text 'PHARMAC' in a large, bold, sans-serif font, with 'TE PĀTAKA WHAIORANGA' in a smaller, all-caps, sans-serif font below it. The background of the entire page is a grey gradient with a large, intricate white pattern of concentric, overlapping circles and lines that create a sense of depth and movement, resembling a stylized DNA helix or a complex maze.

PHARMAC  
TE PĀTAKA WHAIORANGA

Pharmaceutical Management Agency  
New Zealand  
Pharmaceutical Schedule

# Update

February 2024

# Contents

Summary of Pharmac decisions effective 1 February 2024.....	3
Tender News .....	7
Looking Forward .....	8
Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024 .....	9
New Listings.....	23
Changes to Restrictions, Chemical Names and Presentations .....	27
Changes to Subsidy and Manufacturer’s Price.....	30
Delisted Items .....	32
Items to be Delisted .....	33
Index.....	35

# Summary of Pharmac decisions

EFFECTIVE 1 FEBRUARY 2024

## **New listings (pages 23-26)**

- Terbinafine (Apo-Terbinafine) tab 250 mg, s29 and wastage claimable
- Methenamine (hexamine) hippurate (Hiprex) tab 1 g – new Pharmacode listing
- Methotrexate (Methotrexate DBL S29) inj 2.5 mg per ml, 2 ml – PCT  
– Retail pharmacy – Specialist – new Pharmacode listing, s29 and wastage claimable
- Bicalutamide (Apo-Bicalutamide) tab 50 mg, s29 and wastage claimable
- Salbutamol (Salbutamol Cipla) nebuliser soln, 2 mg per ml, 2.5 ml ampoule  
– up to 30 neb available on a PSO, s29 and wastage claimable
- Aminoacid formula without methionine powder, 12.5 g sachets (HCU Explore 5) and powder, 25 g sachets (HCU Express 15) – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without valine, leucine and isoleucine powder, 12.5 g sachets (MSUD Explore 5) and powder, 25 g sachets (MSUD Express 15)  
– Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without phenylalanine powder (Neutral) (PKU Start), 400 g OP – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without phenylalanine powder (Neutral) 12.5 g sachets (PKU Explore 5) – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without phenylalanine (PKU Explore 10) powder (Raspberry), 25 g sachets and powder (Orange), 25 g sachets – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without phenylalanine (PKU Express 20) powder (Neutral, Orange, Lemon and Tropical), 34 g sachets – Special Authority – Hospital pharmacy [HP3]
- Glycomacropeptide and amino acid contains some phenylalanine (Camino Pro Bettermilk) powder (neutral) 40 g sachets – Special Authority – Hospital pharmacy [HP3]
- Glycomacropeptide and amino acid contains some phenylalanine (PKU Glytactin RTD 15) liquid (chocolate and neutral) 250 ml carton, 30 OP  
– Special Authority – Hospital pharmacy [HP3]
- Glycomacropeptide and amino acid contains some phenylalanine (PKU Glytactin RTD 15 Lite) liquid (vanilla and Coffee Mocha) 250 ml carton, 30 OP  
– Special Authority – Hospital pharmacy [HP3]
- Glycomacropeptide and amino acid contains some phenylalanine (PKU Build 10) powder (Neutral), 16 g sachets – Special Authority – Hospital pharmacy [HP3]

## Summary of Pharmac decisions – effective 1 February 2024 (continued)

- High amylopectin corn-starch (Glycosade) powder, 60 g sachets – Special Authority – Hospital pharmacy [HP3]
- Phenylalanine (Phenylalanine50) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Arginine (Arginine2000) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Citrulline (Citrulline1000) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Isoleucine (Isoleucine50) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Leucine (Leucine100) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Tyrosine (Tyrosine1000) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Valine (Valine50) powder, 4 g sachets – Special Authority – Hospital pharmacy [HP3]
- Influenza vaccine (Influvac Tetra (2024 formulation)) inj 60 mcg in 0.5 ml syringe (quadrivalent vaccine) – Maximum of 1 inj per prescription – only on a prescription – no patient co-payment payable
- Glycomacropeptide and amino acid contains some phenylalanine (PKU Restore Powder) powder (Berry and Orange), 20 g sachets – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without phenylalanine and tyrosine (TYR Explore 5) powder (Neutral), 12.5 g sachets – Special Authority – Hospital pharmacy [HP3]
- Glycomacropeptide and amino acid contains some tyrosine and phenylalanine (TYR Sphere 20) powder (Red Berry and Vanilla), 35 g sachets – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without methionine, threonine and valine powder 12.5 g sachets (MMA/PA Explore 5) and powder, 25 g sachets (MMA/PA Express 15) – Special Authority – Hospital pharmacy [HP3]
- Aminoacid formula without lysine powder 12.5 g sachets (GA Explore 5) and powder, 25 g sachets (GA Express 15) – Special Authority – Hospital pharmacy [HP3]

### Changes to restrictions (pages 27-29)

- Phenobarbitone tab 15 mg (PSM) and 30 mg (Noumed Phenobarbitone) – removal of stat dispensing

## Summary of Pharmac decisions – effective 1 February 2024 (continued)

- Fludarabine phosphate (Fludara Oral) tab 10 mg – addition of wastage claimable
- Nilotinib (Tasigna) cap 150 mg and 200 mg – amended Special Authority criteria
- Enteral feed with fibre 1.5kcal/ml (Ensure Plus HN RTH) liquid, 1,000 ml OP – amended brand name
- Enteral feed with fibre 1.2kcal/ml (Jevity Plus RTH) liquid, 1,000 ml OP – amended brand name
- Foods and supplements for inherited metabolic diseases – amended Therapeutic Group heading and Special Authority criteria
- Supplements For MSUD and short chain enoyl coA hydratase deficiency – amended Therapeutic Group heading
- Glycomacropeptide and amino acid contains some phenylalanine (PKU sphere 20 Banana, Chocolate, Lemon, Red Berry and Vanilla) powder 35 g sachets – chemical moved to new Therapeutic Group heading and new Special Authority
- Glycomacropeptide and amino acid contains some phenylalanine (PKU Build 20 Chocolate, Raspberry Lemonade, Smooth and Vanilla) powder 32 g sachets – chemical moved to new Therapeutic Group heading and new Special Authority
- Influenza vaccine (Influvac Tetra (2024 formulation)) inj 60 mcg in 0.5 ml syringe (quadrivalent vaccine) – amended restriction criteria

### Increased subsidy (pages 30-31)

- Acitretin (Novatretin) cap 10 mg and 25 mg
  - Flucloxacillin (Flucloxin) inj 250 mg vial and 500 mg vial
  - Alendronate sodium (Fosamax) tab 70 mg
  - Alendronate sodium with colecalciferol (Fosamax Plus) tab 70 mg with colecalciferol 5,600 iu
  - Amino acid formula powder (unflavoured), 400 g OP (Elecare) and powder (vanilla), 400 g OP (Elecare LCP and Elecare)
  - Diabetic enteral feed 1kcal/ml (Glucerna Select) liquid, 500 ml OP
  - Enteral feed 1.5kcal/ml liquid, 250 ml OP (Ensure Plus HN) and liquid, 1,000 ml OP (Ensure Plus HN RTH)
  - Enteral feed 1kcal/ml (Osmolite RTH) liquid, 1,000 ml OP
  - Enteral feed 2 kcal/ml (Ensure Two Cal HN RTH) liquid, 1,000 ml OP
  - Enteral feed with fibre 1 kcal/ml (Jevity RTH) liquid, 1,000 ml OP
  - Enteral feed with fibre 1.2kcal/ml (Jevity Plus RTH) liquid, 1,000 ml OP
-

## Summary of Pharmac decisions – effective 1 February 2024 (continued)

- Enteral feed with fibre 1.5kcal/ml (Jevity HiCal RTH) liquid, 1,000 ml OP
- Enteral/oral semi-elemental feed 1.5kcal/ml (Vital) liquid, 1,000 ml OP
- Morphine sulphate (Wockhardt) oral liq 2 mg per ml
- Paediatric enteral feed 1kcal/ml (Pediasure RTH) liquid, 500 ml OP
- Paediatric oral feed 1kcal/ml (Pediasure) liquid (chocolate), liquid (strawberry) and liquid (vanilla), 200 ml OP
- Paediatric oral feed 1kcal/ml (Pediasure) liquid (vanilla), 250 ml OP
- Paediatric oral feed 1.5kcal/ml (Pediasure Plus) liquid (vanilla), 500 ml OP
- Renal oral feed 1.8 kcal/ml (Nepro HP (strawberry) and Nepro HP (vanilla)) liquid, 220 ml OP

### **Decreased subsidy (page 30)**

- Dabigatran (Pradaxa) cap 75 mg, 110 mg and 150 mg

# Tender News

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) changes – effective 1 March 2024

Chemical Name	Presentation; Pack size	PSS/SSS	PSS/SSS brand (and supplier)
Amitriptyline	Tab 10 mg, 25 mg and 50 mg; 100 tabs	PSS	Arrow-Amitriptyline (Teva)
Bendroflumethiazide [Bendrofluazide]	Tab 2.5 mg and 5 mg; 500 tabs	PSS	Arrow-Bendrofluazide (Teva)
Cefazolin	inj 500 mg, 1 g and 2 g vial; 5 vials	PSS	Cefazolin-AFT
Diazepam	Tab 2 mg and 5 mg; 500 tabs	PSS	Arrow-Diazepam (Teva)
Entecavir	Tab 0.5 mg; 30 tabs	PSS	Entecavir (Rex)
Latanoprost with timolol	Eye drops 0.005% with timolol 0.5%; 2.5 ml OP	PSS	Arrow - Lattim (Teva)
Losartan potassium	Tab 12.5 mg, 25 mg, 50 mg and 100 mg; 84 tabs	PSS	Losartan Actavis (Teva)
Metoclopramide hydrochloride	Tab 10 mg; 100 tabs	PSS	Metoclopramide Actavis 10 (Teva)
Omeprazole	Cap 10 mg; 90 caps Cap 20 mg; 90 caps Cap 40 mg; 90 caps	PSS	Omeprazole actavis 10 (Teva) Omeprazole actavis 20 (Teva) Omeprazole actavis 40 (Teva)
Ondansetron	Tab disp 4 mg and 8 mg; 10 tabs	PSS	Periset ODT (Miro)
Prochlorperazine	Tab 5 mg; 250 tabs	PSS	Nausafix (Teva)
Risperidone	Tab 0.5 mg, 1 mg, 2 mg, 3 mg and 4 mg; 60 tabs Oral liq 1 mg per ml; 30 ml	PSS	Risperidone (Teva) (Teva) Risperon (Viatris)
Simvastatin	Tab 10 mg, 40 mg and 80 mg; 90 tabs Tab 20 mg; 90 tabs	PSS	Simvastatin Mylan (Viatris) Simvastatin Viatris (Viatris)
Timolol	Eye drops 0.25% and 0.5%; 5 ml OP	PSS	Arrow-Timolol (Teva)

## Looking Forward

*This section is designed to alert both pharmacists and prescribers to possible future changes to the Pharmaceutical Schedule. It may also assist pharmacists, distributors and wholesalers to manage stock levels.*

### **Decisions for implementation 1 March 2024**

- Pharmacy services (BSF Wockhardt) brand switch fee – removal of brand switch fee
- Goserelin (Teva) implant 3.6 mg, syringe and implant 10.8 mg, syringe – price increase
- Blood glucose test strips (visually impaired) blood glucose strips, 50 test OP – price increase

### **Possible decisions for future implementation 1 March 2024**

- Diphtheria, tetanus, pertussis and polio vaccine (Infanrix IPV) – removal of Xpharm
- Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine (Infanrix-hexa) – removal of Xpharm
- Haemophilus influenzae type B vaccine (Hibrex) – removal of Xpharm
- Pneumococcal (PCV13) conjugate vaccine (Prevenar 13) – removal of Xpharm
- Rotavirus oral vaccine (Rotarix) – removal of Xpharm
- Varicella vaccine [Chickenpox vaccine] (Varivax) – removal of Xpharm



## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Abacavir sulphate with lamivudine	Tab 600 mg with lamivudine 300 mg	Abacavir/Lamivudine Viatrix	2025
Acarbose	Tab 50 mg & 100 mg	Accarb	2024
Acetylcysteine	Inj 200 mg per ml, 10 ml ampoule	Martindale Pharma	2024
Aciclovir	Tab dispersible 400 mg & 800 mg	Lovir	2025
	Tab dispersible 200 mg Eye oint 3%, 4.5 g OP	ViruPOS	2024
Adalimumab (Amgevita)	Inj 20 mg per 0.4 ml prefilled syringe, inj 40 mg per 0.8 ml prefilled syringe & inj 40 mg per 0.8 ml prefilled pen	Amgevita	31/07/2026
Adrenaline	Inj 0.15 mg per 0.3 ml auto-injector, 1 OP	Epipen Jr	2025
	Inj 0.3 mg per 0.3 ml auto- injector, 1 OP	Epipen	
Ambrisentan	Tab 5 mg & 10 mg	Ambrisentan Viatrix	2026
Amiodarone hydrochloride	Inj 50 mg per ml, 3 ml ampoule	Max Health	2025
	Tab 100 mg & 200 mg	Aratac	
<b>Amlodipine</b>	<b>Tab 2.5 mg, 5 mg and 10 mg</b>	<b>Vasorex</b>	<b>2026</b>
<b>Amorolfine</b>	<b>Nail soln 5%, 5 ml OP</b>	<b>MycONail</b>	<b>2026</b>
<b>Amoxicillin</b>	<b>Grans for oral liq 125 mg per 5 ml</b>	<b>Alphamox 125</b>	<b>2026</b>
	<b>Grans for oral liq 250 mg per 5 ml</b>	<b>Alphamox 250</b>	
<b>Amoxicillin with clavulanic acid</b>	<b>Tab 500 mg with clavulanic acid 125 mg</b>	<b>Curam Duo 500/125</b>	<b>2026</b>
Anastrozole	Tab 1 mg	Anatrole	2026
Aprepitant	Cap 2 x 80 mg and 1 x 125 mg	Emend Tripack	2024
Aqueous cream	Crn, 500 g	GEM Aqueous Cream	2024
Ascorbic acid	Tab 100 mg	CVite	2025
Atazanavir sulphate	Cap 150 mg & 200 mg	Atazanavir Mylan	2025
Atenolol	Tab 50 mg	Viatrix	2024
	Tab 100 mg	Mylan Atenolol	
Atorvastatin	Tab 10 mg, 20 mg, 40 mg & 80 mg	Lorstat	2024
<b>Atropine sulphate</b>	<b>Eye drops 1%, 15 ml OP</b>	<b>Atropt</b>	<b>2026</b>
	Inj 600 mcg per ml, 1 ml ampoule	Martindale	2024
Azathioprine	Tab 25 mg	Azamun	2025
	Tab 50 mg		
Azithromycin	Tab 500 mg	Zithromax	2024
Bacillus calmette-guerin vaccine	Inj Mycobacterium bovis BCG (Bacillus Calmette-Guerin), Danish strain 1331, live attenuated, vial with diluent	BCG Vaccine	2024

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Baclofen	Inj 2 mg per ml, 5 ml ampoule	Medsurge	2024
<b>Benzylpenicillin sodium [Penicillin G]</b>	<b>Inj 600 mg (1 million units) vial</b>	<b>Sandoz</b>	<b>2026</b>
Bethahistine dihydrochloride	Tab 16 mg	Serc	2026
Betamethasone dipropionate with calcipotriol	Oint 500 mcg with calcipotriol 50 mcg per g, 30 g OP Gel 500 mcg with calcipotriol 50 mcg per g, 60 g OP	Daivobet	2024
Betamethasone valerate	Lotn 0.1%, 50 ml OP Oint 0.1%, 50 g OP Crm 0.1%, 50 g OP Scalp app 0.1%, 100 ml OP	Betnovate Beta Ointment Beta Cream Beta Scalp	2024
Bicalutamide	Tab 50 mg	Binarex	2026
Bimatoprost	Eye drops 0.03%, 3 ml OP	Bimatoprost Multichem	2024
Bisacodyl	Tab 5 mg Suppos 10 mg	Bisacodyl Viatris Pharmacy Health Lax-suppositories	2025 2024
Bosentan	Tab 62.5 mg & 125 mg	Bosentan Dr Reddy's	2024
Brimonidine tartrate	Eye drops 0.2%, 5 ml OP	Arrow-Brimonidine	2024
Brinzolamide	Eye drops 1%, 5 ml OP	Azopt	2024
Bezafibrate	Tab 200 mg Tab long-acting 400 mg	Bezalip Bezalip Retard	2024
Buprenorphine with naloxone	Tab sublingual 2 mg with naloxone 0.5 mg & 8 mg with naloxone 2 mg	Buprenorphine Naloxone BNM	2025
Buspirone hydrochloride	Tab 5 mg & 10 mg	Buspirone Viatris	2024
Calcitriol	Cap 0.25 mcg & 0.5 mcg	Calcitriol-AFT	2025
<b>Calcium carbonate</b>	<b>Tab 1.25 g (500 mg elemental)</b>	<b>Calci-Tab 500</b>	<b>2026</b>
Candesartan cilexetil	Tab 4 mg, 8 mg, 16 mg & 32 mg	Candestar	2024
Capecitabine	Tab 150 mg Tab 500 mg	Capecitabine Viatris	2025
Carbimazole	Tab 5 mg	Neo-Mercazole	2025
Cefaclor monohydrate	Cap 250 mg Grans for oral liq 125 mg per 5 ml	Ranbaxy Cefaclor	2025
Cefalexin	Cap 250 mg & 500 mg Grans for oral liq 25 mg per ml & 50 mg per ml	Cephalexin ABM Flynn	2025 2024
Ceftriaxone	Inj 500 mg & 1 g vial	Ceftriaxone-AFT	2025
Celecoxib	Cap 100 mg & 200 mg	Celecoxib Pfizer	2025

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Cetirizine hydrochloride	Tab 10mg Oral liq 1 mg per ml, 200 ml	Zista Hisatclear	2026 2024
Cetomacrogol	Crn BP, 500 g	Cetomacrogol-AFT	2024
Cetomacrogol with glycerol	Crn 90% with glycerol 10%, 500 ml OP Crn 90% with glycerol 10%, 1,000 ml OP	Evara	2025
Chloramphenicol	Eye drops 0.5% Eye oint 1%, 5 g OP	Chlorsig Devatis	2025
Chlortalidone [Chlorthalidone]	Tab 25 mg	Hygroton	2025
Cinacalcet	Tab 30 mg & 60 mg	Cinacalcet Devatis	2024
Ciprofloxacin	Eye drops 0.3%, 5 ml OP	Ciprofloxacin Teva	2024
Citalopram hydrobromide	Tab 20 mg	Celapram PSM Citalopram	2025 2024
Clarithromycin	Tab 250 mg & 500 mg	Klacid	2027
Clindamycin	Inj 150 mg per ml	Hameln	2025
Clobetasol propionate	Crn & oint 0.05%, 30 g OP Scalp app 0.05%, 30 ml OP	Dermol	2025
Clomipramine hydrochloride	Tab 10 mg & 25 mg	Clomipramine Teva	2024
<b>Clonidine</b>	<b>Patch 2.5 mg, 100 mcg per day Patch 5 mg, 200 mcg per day Patch 7.5 mg, 300 mcg per day</b>	<b>Mylan</b>	<b>2026</b>
Clonidine hydrochloride	Tab 25 mcg Inj 150 mcg per ml, 1 ml ampoule Tab 150 mcg	Clonidine Teva Medsurge Catapres	2025 2024
Clopidogrel	Tab 75 mg	Arrow – Clopid	2025
Clotrimazole	Vaginal crn 1% with applicators, 35 g OP Vaginal crn 2% with applicators, 20 g OP Crn 1%, 20 g OP	Clomazol	2025
Codeine phosphate	Tab 15 mg Tab 30 mg & 60 mg	Noumed	2025
Colchicine	Tab 500 mcg	Colgout	2025
Compound electrolytes	Powder for oral soln	Electral	2025
Crotamiton	Crn 10%, 20 g OP	Itch-soothe	2024
Cyclizine hydrochloride	Tab 50 mg	Nausicalm	2024
Cyclizine lactate	Inj 50 mg per ml, 1 ml ampoule	Hameln	2025
Cyclophosphamide	Tab 50 mg	Cylconex	2024
Cyproterone acetate	Tab 50 mg & 100 mg	Siterone	2024

*\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.*

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
<b>Cyproterone acetate with ethinyloestradiol</b>	<b>Tab 2 mg with ethinyloestradiol 35 mcg and 7 inert tablets</b>	<b>Ginet</b>	<b>2026</b>
<b>Darunavir</b>	<b>Tab 400 mg and 600 mg</b>	<b>Darunavir Viatrix</b>	<b>2026</b>
<b>Desmopressin acetate</b>	<b>Nasal spray 10 mcg per dose, 6 ml OP</b>	<b>Desmopressin-PH&amp;T</b>	<b>2026</b>
Dexamethasone	Tab 0.5 mg & 4 mg	Dexmethsone	2024
Dexamethasone phosphate	Inj 4 mg per ml, 1 ml & 2 ml ampoule	Hameln	2025
Dexamfetamine sulfate	Tab 5 mg	PSM	31/12/2023
Diazepam	Rectal tubes 5 mg	Stesolid	2025
Diclofenac	Eye drops 0.1%, 5 ml OP	Voltaren Ophtha	2024
Diclofenac sodium	Tab EC 25 mg & 50 mg	Diclofenac Sandoz	2024
Digoxin	Tab 62.5 mcg Tab 250 mcg	Lanoxin PG Lanoxin	2025
Dihydrocodeine tartrate	Tab long-acting 60 mg	DHC Continus	2025
Diltiazem hydrochloride	Cap long-acting 180 mg & 240 mg Cap long-acting 120 mg	Cardizem CD Diltiazem CD Clinect	2027 2025
Dimethicone	Crn 5% pump bottle, 500 ml OP  Lotn 4%, 200 ml OP	healthE Dimethicone 5% healthE Dimethicone 4%	2025
Diphtheria, tetanus and pertussis vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe	Boostrix	2024
Diphtheria, tetanus, pertussis and polio vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin and 80 D-antigen units poliomyelitis virus in 0.5ml syringe	Infanrix IPV	2024
Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin, 80 D-AgU polio virus, 10 mcg hepatitis B surface antigen in 0.5ml syringe	Infanrix-hexa	2024
Disulfiram	Tab 200 mg	Antabuse	2024
<b>Docusate sodium</b>	<b>Tab 50 mg and 120 mg</b>	<b>Coloxyl</b>	<b>2026</b>
Docusate sodium with sennosides	Tab 50 mg with sennosides 8 mg	Laxsol	2025
Domperidone	Tab 10 mg	Domperidone Viatrix	2025

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Dorzolamide with timolol	Eye drops 2% with timolol 0.5%, 5 ml OP	Dortimopt	2024
Emtricitabine with tenofovir disoproxil	Tab 200 mg with tenofovir disoproxil 245 mg (300 mg as a maleate)	Tenofovir Disoproxil Emtricitabine Viartis	2025
<b>Enalapril maleate</b>	<b>Tab 5 mg, 10 mg and 20 mg</b>	<b>Acetec</b>	<b>2026</b>
Entacapone	Tab 200 mg	Comtan	2024
Eplerenone	Tab 25 mg & 50 mg	Inspra	2024
Erythromycin (as lactobionate)	Inj 1 g	Erythromycin IV	2025
Escitalopram	Tab 10 mg & 20 mg	Escitalopram (Ethics)	2024
Etanercept	Inj 25 mg Inj 50 mg autoinjector Inj 50 mg prefilled syringe	Enbrel	2024
Ethinylestradiol with levonorgestrel	Tab 20 mcg with levonorgestrel 100 mcg and 7 inert tablets Tab 30 mcg with levonorgestrel 150 mcg and 7 inert tablets	Lo-Oralcon 20 ED  Oralcon 30 ED	2025
Exemestane	Tab 25 mg	Pfizer Exemestane	2026
Ezetimibe	Tab 10 mg	Ezetimibe Sandoz	2026
Felodipine	Tab long-acting 5 mg Tab long-acting 10 mg	Felo 5 ER Felo 10 ER	2024
Fentanyl	Inj 50 mcg per ml, 2ml ampoule Inj 50 mcg per ml, 10 ml ampoule Patch 12.5 mcg per hour Patch 25 mcg per hour Patch 50 mcg per hour Patch 75 mcg per hour Patch 100 mcg per hour	Boucher and Muir  Fentanyl Sandoz	2024
Ferrous fumarate	Tab 200 mg (65 mg elemental)	Ferro-tab	2024
Ferrous fumarate with folic acid	Tab 310 mg (100 mg elemental) with folic acid 350 mcg	Ferro-F-Tabs	2024
Ferrous sulfate	Tab long-acting 325 mg (105 mg elemental) Oral liq 30 mg (6 mg elemental) per ml	Ferrograd  Ferodan	2025
Filgrastim	Inj 300 mcg per 0.5 ml & 480 mcg per 0.5 ml	Nivestim	2024
Finasteride	Tab 5 mg	Ricit	2026
Flecainide acetate	Tab 50 mg Cap long-acting 100 mg & 200 mg	Flecainide BNM Flecainide Controlled Release Teva	2026

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
<b>Flucloxacillin</b>	<b>Inj 1 g vial</b> Cap 250 mg & 500 mg Grans for oral liq 25 mg per ml Grans for oral liq 50 mg per ml	<b>Flucil</b> Flucloxacillin-AFT AFT	<b>2026</b> 2024
Fluconazole	Cap 50 mg, 150 mg & 200 mg	Mylan	2026
Fludrocortisone acetate	Tab 100 mcg	Florinef	2025
Fluorouracil sodium	Crn 5%, 20 g OP	Efudix	2024
Fluoxetine hydrochloride	Cap 20 mg Tab dispersible 20 mg, scored	Arrow–Fluoxetine Fluox	2025
Fluticasone propionate	Metered aqueous nasal spray, 50 mcg per dose, 120 dose OP	Flixonase Hayfever & Allergy	2024
Folic acid	Tab 5 mg	Folic Acid Viatris	2027
Furosemide [Frusemide]	Inj 10 mg per ml, 2 ml ampoule Tab 40 mg	Furosemide-Baxter IPCA-Frusemide	2025 2024
Gabapentin	Cap 100 mg, 300 mg & 400 mg	Nupentin	2027
Glatiramer acetate	Inj 40 mg prefilled syringe	Copaxone	2025
Glibenclamide	Tab 5 mg	Daonil	2024
<b>Glliclazide</b>	<b>Tab 80 mg</b>	<b>Glizide</b>	<b>2026</b>
Glipizide	Tab 5 mg	Minidiab	2024
<b>Glucose [Dextrose]</b>	<b>Inj 50%, 10 ml ampoule</b> <b>Inj 50%, 90 ml bottle</b>	<b>Biomed</b>	<b>2026</b>
Glycerol	Suppos 4 g	Lax suppositories Glycerol	2025
Glyceryl trinitrate	Oint 0.2%, 30 g OP	Rectogesic	2024
Glycopyrronium bromide	Inj 200 mcg per ml, 1 ml ampoule	Robinul	2025
Heparin sodium	Inj 5,000 iu per ml, 5 ml vial	Heparin Sodium Panpharma	2025
Hepatitis A vaccine	Inj 1440 ELISA units in 1 ml syringe Inj 720 ELISA units in 0.5 ml syringe	Havrix Havrix Junior	2024
Hepatitis B recombinant vaccine	Inj 20 mcg per 1 ml prefilled syringe	Engerix-B	2024
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine [HPV]	Inj 270 mg in 0.5 ml syringe	Gardasil 9	2024
Hydrocortisone	Crn 1%, 500 g Crn 1%; 30 g OP Inj 100 mg vial	Noumed Ethics Solu-Cortef	2025 2024
Hydrocortisone butyrate	Oint 0.1%, 100 g OP Scalp lotn 0.1%, 100 ml OP Milky emuls 0.1%, 100 ml OP	Locoid Locoid Crelo	2024
Hydrocortisone with miconazole	Crn 1% with miconazole 2%, 15 g OP	Micreme H	2024

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Hydroxocobalamin	Inj 1 mg per ml, 1 ml ampoule	Hydroxocobalamin Panpharma	2024
Hydroxyurea [hydroxycarbamide]	Cap 500 mg	Devatis	2026
Hyoscine Butylbromide	Inj 20 mg, 1 ml	Spazmol	2026
Ibuprofen	Tab 200 mg	Relieve	2026
	Oral liq 20 mg per ml, 200 ml	Ethics	2024
	Tab long-acting 800 mg	Brufen SR	
Iloprost	Nebuliser soln 10 mcg per ml, 2 ml	Vebulis	2025
Imatinib Mesilate	Cap 100 mg & 400 mg	Imatinib-Rex	2026
<b>Indapamide</b>	<b>Tab 2.5 mg</b>	<b>Dapa-Tabs</b>	<b>2026</b>
Intra-uterine device	IUD 29.1 mm length x 23.2 mm width	Choice TT380 Short	2025
	IUD 33.6 mm length x 29.9 mm width	Choice TT380 Standard	
	IUD 35.5 mm length x 19.6 mm width	Choice Load 375	
Isoniazid	Tab 100 mg	PSM	2024
Isoniazid with rifampicin	Tab 100 mg with rifampicin 150 mg	Rifinah	2024
	Tab 150 mg with rifampicin 300 mg		
<b>Isosorbide mononitrate</b>	<b>Tab 20 mg</b> <b>Tab long-acting 40 mg</b> <b>Tab long-acting 60 mg</b>	<b>Ismo 20</b> <b>Ismo 40 Retard</b> <b>Duride</b>	<b>2026</b>
Isotretinoin	Cap 5 mg, 10 mg & 20 mg	Oratane	2024
<b>Ispaghula (psyllium) husk</b>	<b>Powder for oral soln, 500 g OP</b>	<b>Konsyl-D</b>	<b>2026</b>
Labetalol	Tab 100 mg & 200 mg	Trandate	2024
Lactulose	Oral liq 10 g per 15 ml, 500 ml	Laevolac	2025
<b>Lamivudine</b>	<b>Tab 100 mg</b> <b>Tab 150 mg</b>	<b>Zetlam</b> <b>Lamivudine Viatris</b>	<b>2026</b>
Lansoprazole	Cap 15 mg & 30 mg	Lanzol Relief	2024
Latanoprost	Eye drop 0.005%, 2.5 ml OP	Teva	2024
Leflunomide	Tab 10 mg & 20 mg	Arava	2026
Letrozole	Tab 2.5 mg	Letrole	2024
Levomepromazine hydrochloride	Inj 25 mg per ml, 1 ml ampoule	Wockhardt	2025
Levonorgestrel	Subdermal implant (2 × 75 mg rods)	Jadelle	2026
	Tab 1.5 mg	Levonorgestrel BNM	2025
	Intra-uterine device 13.5 mg	Jaydess	31/10/2024
	Intra-uterine device 52 mg	Mirena	31/10/2024
Lidocaine [Lignocaine]	Gel 2%, 11 ml urethral syringe	Instillagel lido	2025
Lisinopril	Tab 5 mg, 10 mg & 20 mg	Ethics Lisinopril	2025
Lithium carbonate	Tab long-acting 400 mg	Priadel	2024

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Loperamide hydrochloride	Cap 2 mg	Diamide Relief	2025
Lopinavir with ritonavir	Tab 100 mg with ritonavir 25 mg Tab 200 mg with ritonavir 50 mg	Lopinavir/Ritonavir Mylan	2024
Loratadine	Tab 10 mg	Lorafix	2025
Lorazepam	Tab 1 mg & 2.5 mg	Ativan	2024
Losartan potassium with hydrochlorothiazide	Tab 50 mg with hydrochlorothiazide 12.5 mg	Arrow-Losartan & Hydrochlorothiazide	2025
<b>Macrogol 3350 with potassium chloride, sodium bicarbonate and sodium chloride</b>	<b>Powder for oral soln 13.125 g with potassium chloride 46.6 mg, sodium bicarbonate 178.5 mg and sodium chloride 350.7 mg</b>	<b>Molaxole</b>	<b>2026</b>
Measles, mumps and rubella vaccine	Inj, measles virus 1,000 CCID <sub>50</sub> , mumps virus 5,012 CCID <sub>50</sub> , Rubella virus 1,000 CCID <sub>50</sub> ; prefilled syringe/ampoule of diluent 0.5 ml	Priorix	2024
Mebendazole	Tab 100 mg	Vermox	2024
Mebeverine hydrochloride	Tab 135 mg	Colofac	2026
Melatonin	Tab modified-release 2 mg	Vigisom	2024
Meningococcal (groups A, C, Y and W-135) conjugate vaccine	Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5 ml vial	Menactra	2024
Mercaptopurine	Tab 50 mg	Puri-nethol	2025
Metformin hydrochloride	Tab immediate-release 500 mg & 850 mg	Metformin Viatrix	2027
Methadone	Oral liq 2 mg per ml Oral liq 5 mg per ml Oral liq 10 mg per ml	Biodone Biodone Forte Biodone Extra Forte	2024
Methadone hydrochloride	Tab 5 mg	Methadone BNM	2025
Methenamine (hexamine) hippurate	Tab 1 g	Hiprex	2025
Methotrexate	Tab 2.5 mg & 10 mg	Trexate	2024
<b>Methylprednisolone aceponate</b>	<b>Crn 0.1%, 15 g OP Oint 0.1%, 15 g OP</b>	<b>Advantan</b>	<b>2026</b>
Metoclopramide	Inj 5 mg per ml, 2 ml ampoule	Baxter	2025
Metoprolol tartrate	Tab 50 mg & 100 mg	IPCA-Metoprolol	2027
Miconazole	Oral gel 20 mg per g, 40 g OP	Decozol	2024
Midodrine	Tab 2.5 mg & 5 mg	Midodrine Medsurge	2024
Mirtazapine	Tab 30 mg & 45 mg	Noumed	2024
Moclobemide	Tab 150 mg & 300 mg	Aurorix	2024

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.



## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Modafinil	Tab 100 mg	Modavigil	2024
Mometasone furoate	Crn 0.1%, 15 g OP Crn 0.1%, 50 g OP Oint 0.1%, 15 g OP Oint 0.1%, 50 g OP Lotn 0.1%, 30 ml OP	Elocon Alcohol Free  Elocon	2024
Montelukast	Tab 4 mg, 5 mg & 10 mg	Montelukast Viatris	2025
Morphine sulphate	Cap long-acting 10 mg, 30 mg, 60 mg & 100 mg Inj 5 mg per ml, 1 ml ampoule Inj 10 mg per ml, 1 ml ampoule Inj 15 mg per ml, 1 ml ampoule Inj 30 mg per ml, 1 ml ampoule	m-Eslon  Medsurge	2025
Multivitamins	Tab (BPC cap strength)	Mvite	2025
Nadolol	Tab 40 mg & 80 mg	Nadolol BNM	2024
Naloxone hydrochloride	Inj 400 mcg per ml, 1 ml ampoule	Hameln	2024
Naltrexone hydrochloride	Tab 50 mg	Naltraccord	2026
Naproxen	Tab 250 mg Tab 500 mg Tab long-acting 750 mg Tab long-acting 1 g	Noflam 250 Noflam 500 Naprosyn SR 750 Naprosyn SR 1000	2024
Neostigmine metilsulfate	Inj 2.5 mg per ml, 1 ml ampoule	Max Health	2024
Nevirapine	Tab 200 mg	Nevirapine Alphapharm	2024
Nitrofurantoin	Cap modified-release 100 mg Tab 50 mg & 100 mg	Macrobid Nifuran	2026 2024
Norethisterone	Tab 350 mcg	Noriday 28	2024
Nortriptyline hydrochloride	Tab 10 mg & 25 mg	Norpress	2025
<b>Nystatin</b>	<b>Vaginal crm 100,000 u per 5 g with applicator(s), 75 g OP</b> <b>Oral liq 100,000 u per ml, 24 ml OP</b>	<b>Nilstat</b>	<b>2026</b>
Octreotide	Inj 50 mcg per ml, 1 ml ampoule Inj 100 mcg per ml, 1 ml ampoule Inj 500 mcg per ml, 1 ml ampoule	Max Health	2024
Octreotide long-acting	Inj depot 10 mg, 20 mg & 30 mg prefilled syringe	Octreotide Depot Teva	2024
<b>Oestriol</b>	<b>Crn 1 mg per g with applicator, 15 g OP</b> <b>Tab 2 mg</b> <b>Pessaries 500 mcg</b>	<b>Ovestin</b>	<b>2026</b>
Oil in water emulsion	Crn, 500 g	Fatty Cream AFT	2024
<b>Olanzapine</b>	<b>Tab orodispersible 5 mg and 10 mg</b>	<b>Zypine ODT</b>	<b>2026</b>
Olopatadine	Eye drops 0.1%, 5 ml OP	Olopatadine Teva	2025

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Omeprazole	Inj 40 mg ampoule with diluent	Dr Reddy's Omeprazole	2025
Ondansetron	Tab 4 mg & 8 mg	Periset	2025
Ornidazole	Tab 500 mg	Arrow-Ornidazole	2024
Orphenadrine citrate	Tab 100 mg	Norflex	2024
Oxycodone hydrochloride	Inj 10 mg per ml, 1 ml and 2 ml ampoule Inj 50 mg per ml, 1 ml ampoule Tab controlled-release 5 mg, 10 mg, 20 mg, 40 mg & 80 mg Cap immediate-release 5 mg, 10 mg & 20 mg Oral liq 5 mg per 5 ml	Hameln  Oxycodone Sandoz  OxyNorm	2024
Oxytocin	Inj 5 iu per ml, 1 ml ampoule Inj 10 iu per ml, 1 ml ampoule	Oxytocin BNM	2025
Oxytocin with ergometrine maleate	Inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml ampoule	Syntometrine	2025
Pancreatic enzyme	Cap prancreatin 150 mg (amylase 8,000 Ph Eur U lipase 10,000 Ph Eur U, total protease 600 Ph Eur U) Cap prancreatin 300 mg (amylase 18,000 Ph Eur U lipase 25,000 Ph Eur U, total protease 1,000 Ph Eur U)	Creon 10000  Creon 25000	2024
Pantoprazole	Tab EC 20 mg & 40 mg	Panzop Relief Panzop Relief (Viatris)	2025
<b>Paracetamol</b>	<b>Suppos 125 mg, 250 mg and 500 mg</b> Tab 500 mg-bottle pack Tab 500 mg-blister pack Oral liq 120 mg per 5 ml Oral liq 250 mg per ml, 200 ml	<b>Gacet</b>	<b>2026</b>
		Noumed Paracetamol	
		Pacimol	
		Paracetamol (Ethics) Pamol	2025
Paracetamol with codeine	Tab paracetamol 500 mg with codeine phosphate 8 mg	Paracetamol + Codeine	2025
Paraffin	Oint liquid paraffin 50% with white soft paraffin 50%, 500 g OP	White Soft Liquid Paraffin AFT	2025
Paroxetine	Tab 20 mg	Loxamine	2025
Pegfilgrastim	Inj 6 mg per 0.6 ml syringe	Ziextenzo	2025
Perindopril	Tab 2 mg & 4 mg	Coversyl	2024
<b>Permethrin</b>	<b>Lotn 5%, 30 ml OP</b>	<b>A-Scabies</b>	<b>2026</b>
Pethidine hydrochloride	Tab 50 mg	Noumed Pethidine	2025
Phenobarbitone	Tab 30 mg	Noumed Phenobarbitone	2025

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Phenoxyethylpenicillin (Penicillin V)	Grans for oral liq 125 mg per 5 ml & 250 mg per 5 ml	AFT	2025
	Cap 250 mg	Cilicaine VK	2024
	Cap 500 mg		
<b>Pimecrolimus</b>	<b>Crn 1%, 15 g OP</b>	<b>Elidel</b>	<b>2026</b>
<b>Pine tar with trolamine laurilsulfate and fluorescein</b>	<b>Soln 2.3% with trolamine laurilsulfate and fluorescein sodium</b>	<b>Pinetarsol</b>	<b>2026</b>
Pioglitazone	Tab 15 mg, 30 mg & 45 mg	Vexazone	2024
Pneumococcal (PCV10) conjugate vaccine	Inj 1 mcg of pneumococcal polysaccharide serotypes 1, 5, 6B, 7F, 9V, 14 and 23F; 3 mcg of pneumococcal polysaccharide serotypes 4, 18C and 19F in 0.5 ml prefilled syringe	Synflorix	2024
Pneumococcal (PPV23) polysaccharide vaccine	Inj 575 mcg in 0.5 ml prefilled syringe (25 mcg of each 23 pneumococcal serotype)	Pneumovax 23	2024
Poliomyelitis vaccine	Inj 80D antigen units in 0.5 ml syringe	IPOL	2024
<b>Poloxamer</b>	<b>Oral drops 10%, 30 ml OP</b>	<b>Coloxyl</b>	<b>2026</b>
Posaconazole	Oral liq 40 mg per ml, 105 ml OP Tab modified-release 100 mg	Devatis Posaconazole Juno	2025
<b>Potassium iodate</b>	<b>Tab 253 mg (150 mcg elemental iodine)</b>	<b>NeuroTabs</b>	<b>2026</b>
Povidone iodine	Antiseptic solution 10%, 100 ml	Riodone	2024
Pramipexole hydrochloride	Tab 0.25 mg & 1 mg	Ramiprex	2025
Prednisolone	Oral liq 5 mg per ml, 30 ml OP	Redipred	2024
Progesterone	Cap 100 mg	Utrogestan	2025
Promethazine hydrochloride	Tab 10 mg & 25 mg	Allersoothe	2025
Propranolol	Tab 10 mg Tab 40 mg	Drofate IPCA-Propranolol	2027
<b>Pyridoxine hydrochloride</b>	<b>Tab 25 mg</b>	<b>Vitamin B6 25</b>	<b>2026</b>
<b>Quetiapine</b>	<b>Tab 25 mg, 100 mg, 200 mg &amp; 300 mg</b>	<b>Quetapel</b>	<b>2026</b>
Quinapril	Tab 5 mg	Arrow-Quinapril 5	2024
	Tab 10 mg	Arrow Quinapril 10	
	Tab 20 mg	Arrow-Quinapril 20	
Quinapril with hydrochlorothiazide	Tab 10 mg with hydrochlorothiazide 12.5 mg	Accuretic 10	2024
	Tab 20 mg with hydrochlorothiazide 12.5 mg	Accuretic 20	
Ramipril	Cap 1.25 mg, 2.5 mg, 5 mg & 10 mg	Tryzan	2024

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Rifampicin	Cap 150 mg & 300 mg Oral liq 100 mg per 5 ml	Rifadin	2026
Riluzole	Tab 50 mg	Rilutek	2024
Risedronate sodium	Tab 35 mg	Risedronate Sandoz	2025
Rivaroxaban	Tab 10 mg, 15 mg & 20 mg	Xarelto	2026
Rivastigmine	Patch 4.6 mg per 24 hour	Rivastigmine Patch BNM 5	2024
	Patch 9.5 mg per 24 hour	Rivastigmine Patch BNM 10	
<b>Rizatriptan</b>	<b>Tab orodispersible 10 mg</b>	<b>Rizamelt</b>	<b>2026</b>
Ropinirole hydrochloride	Tab 0.25 mg, 1 mg, 2 mg & 5 mg	Ropin	2025
Rosuvastatin	Tab 5 mg, 10 mg, 20 mg & 40 mg	Rosuvastatin Viatris	2026
Rotavirus oral vaccine	Oral susp live attenuated human rotavirus 1,000,000 CCID50 per dose, prefilled oral applicator	Rotarix	2024
Roxithromycin	Tab 150 mg & 300 mg	Arrow-Roxithromycin	2026
Salbutamol	Oral liq 400 mcg per ml, 150 ml Nebuliser soln 1 mg per ml, 2.5 ml ampoule	Ventolin Asthalin	2024
	Nebuliser soln 2 mg per ml, 2.5 ml ampoule		
Salbutamol with ipratropium bromide	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule	Duolin	2024
Sertraline	Tab 50 mg & 100 mg	Setrona	2025
Sildenafil	Tab 25 mg, 50 mg & 100 mg	Vedafil	2024
Sodium chloride	Inj 0.9%, 5 ml, 10 ml & 20 ml ampoule	Fresenius Kabi	2025
Sodium citrate with sodium lauryl sulphoacetate	Enema 90 mg with sodium lauryl sulphoacetate 9 mg per ml, 5 ml	Micolette	2025
<b>Sodium citro-tartrate</b>	<b>Grans eff 4 g sachets</b>	<b>Ural</b>	<b>2026</b>
Sodium cromoglicate	Eye drops 2%, 10 ml OP	Allerfix	2025
Sodium fusidate [Fusidic acid]	Crn 2%, 5 g OP	Foban	2024
	Oint 2%, 5 g OP		
Sodium hyaluronate [hyaluronic acid]	Eye drops 1 mg per ml, 10 ml OP	Hylo-Fresh	2024
Solifenacin succinate	Tab 5 mg and 10 mg	Solifenacin Viatris	2024
Somatropin (Omnitrope)	Inj 5 mg, 10 mg & 15 mg cartridge	Omnitrope	2024
Sotalol	Tab 80 mg & 160 mg	Mylan	2025
Spirolactone	Tab 25 mg & 100 mg	Spiractin	2025
Sumatriptan	Tab 50 mg & 100 mg	Sumagran	2027

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Sunitinib	Cap 12.5 mg, 25 mg & 50 mg	Sunitinib Pfizer	2024
Sunscreens, proprietary	Lotn, 200 g OP	Marine Blue Lotion SPF lotn 50+	2025
Tacrolimus	Oint 1 %; 30 g OP	Zematop	2026
Tamoxifen citrate	Tab 10 mg & 20 mg	Tamoxifen Sandoz	2026
Tamsulosin	Cap 400 mcg	Tamsulosin-Rex	2025
<b>Temazepam</b>	<b>Tab 10 mg</b>	<b>Normison</b>	<b>2026</b>
Tenofovir disoproxil	Tab 245 mg (300 mg as a maleate)	Tenofovir Disoproxil Viatris	2025
Tenoxicam	Tab 20 mg	Tilcotil	2025
<b>Terbinafine</b>	<b>Tab 250 mg</b>	<b>Deolate</b>	<b>2026</b>
Tetrabenazine	Tab 25 mg	Motetis	2025
Thiamine hydrochloride	Tab 50 mg	Thiamine multichem	2025
Ticagrelor	Tab 90 mg	Ticagrelor Sandoz	2024
Tobramycin	Soln for inhalation 60 mg per ml, 5 ml Inj 40 mg per ml, 2 ml vial	Tobramycin BNM Tobramycin Viatris	2026 2024
Tramadol hydrochloride	Cap 50 mg	Arrow-Tramadol	2026
Tranexamic acid	Tab 500 mg	Mercury Pharma	2025
Travoprost	Eye drops 0.004%, 2.5 ml OP	Travatan	2024
Tretinoin	Crn 0.5 mg per g, 50 g OP	ReTrieve	2024
<b>Triamcinolone acetonide</b>	<b>Paste 0.1%, 5 g OP</b> <b>Crn 0.02%, 100 g OP</b> <b>Oint 0.02%, 100 g OP</b> <b>Inj 10 mg per ml, 1 ml ampoule</b> <b>Inj 40 mg per ml, 1 ml ampoule</b>	<b>Kenalog in Orabase</b> <b>Aristocort</b>  <b>Kenacort-A 10</b> <b>Kenacort-A 40</b>	<b>2026</b>
Trimethoprim	Tab 300 mg	TMP	2024
Trimethoprim with sulphamethoxazole [co-trimoxazole]	Tab trimethoprim 80 mg and sulphamethoxazole 400 mg	Trisul	2024
Tuberculin PPD [Mantoux] test	Inj 5 TU per 0.1 ml, 1 ml vial	Tubersol	2024
<b>Ursodeoxycholic acid</b>	<b>Cap 250 mg</b>	<b>Ursosan</b>	<b>2026</b>
Valaciclovir	Tab 500 mg & 1,000 mg	Valclovir	2024
Valganciclovir	Tab 450 mg	Valganciclovir Viatris	2024
<b>Vancomycin</b>	<b>Inj 500 mg vial</b>	<b>Mylan</b>	<b>2026</b>
Varenicline tartrate	Tab 0.5 mg x 11 and 1 mg x 42, 53 OP Tab 1 mg	Varenicline Pfizer	2024
Varicella vaccine [Chickenpox vaccine]	Inj 1350 PFU prefilled syringe	Varivax	2024

\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.

## Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to February 2024

Generic Name	Presentation	Brand Name	Expiry Date*
Vinorelbine	Cap 20 mg, 30 mg & 80 mg	Vinorelbine Te Arai	2025
Water	Inj 10 ml ampoule Inj 20 ml ampoule	Multichem Fresenius Kabi	2025
Zinc and castor oil	Oint; 500 g	Evara	2025
Zoledronic acid	Inj 0.05 mg per ml, 100 ml bag  Inj 4 mg per 5 ml, vial	Zoledronic Acid Viatrix	2025  2024
Zopiclone	Tab 7.5 mg	Zopiclone Actavis	2024

**February 2024 changes are in bold type**

---

*\*Expiry date of the SSS/PSS period is 30 June of the year indicated unless otherwise stated. Please note that SSS/PSS may have been awarded for a wider scope than just those presentation(s) listed in the above table.*

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## New Listings

Effective 1 February 2024

107	TERBINAFINE * Tab 250 mg.....	4.48	42	✓ Apo-Terbinafine S29
	<b>Wastage claimable</b>			
118	METHENAMINE (HEXAMINE) HIPPURATE * Tab 1 g..... Note – new Pharmacode listing, 2671077	19.95	100	✓ Hiprex
160	METHOTREXATE * Inj 2.5 mg per ml, 2 ml – PCT – Retail pharmacy-Specialist .....	56.05	5	✓ Methotrexate DBL S29 S29
	<b>Wastage claimable</b> Note – new Pharmacode listing, 2671980			
175	BICALUTAMIDE Tab 50 mg.....	4.18	28	✓ Apo-Bicalutamide S29
	<b>Wastage claimable</b>			
253	SALBUTAMOL Nebuliser soln, 2 mg per ml, 2.5 ml ampoule – Up to 30 neb available on a PSO.....	14.15	30	✓ Salbutamol Cipla S29
	<b>Wastage claimable</b>			
284	Supplements For Homocystinuria AMINOACID FORMULA WITHOUT METHIONINE – Special Authority see SA2300 ††08 – Hospital pharmacy [HP3] Powder, 12.5 g sachets .....	349.65	30	✓ HCU Explore 5
	Powder, 25 g sachets .....	1,048.95	30	✓ HCU Express 15
284	Supplements For MSUD and short chain enoyl coA hydratase deficiency AMINOACID FORMULA WITHOUT VALINE, LEUCINE AND ISOLEUCINE – Special Authority see SA2300 ††08 – Hospital pharmacy [HP3] Powder, 12.5 g sachets .....	349.65	30	✓ MSUD Explore 5
	Powder, 25 g sachets .....	1,048.95	30	✓ MSUD Express 15

▲ Three months supply may be dispensed at one time if endorsed  
“certified exemption” by the prescriber or pharmacist

\* Three months or six months, as  
applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## New Listings – effective 1 February 2024 (continued)

285	Supplements for PKU AMINOACID FORMULA WITHOUT PHENYLALANINE – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder (Lemon), 34 g sachets.....	883.50	30	✓PKU Express 20
	Powder (Neutral), 12.5 g sachets.....	220.88	30	✓PKU Explore 5
	Powder (Neutral), 34 g sachets.....	883.50	30	✓PKU Express 20
	Powder (Orange), 25 g sachets.....	441.75	30	✓PKU Explore 10
	Powder (Orange), 34 g sachets.....	883.50	30	✓PKU Express 20
	Powder (Raspberry), 25 g sachets.....	441.75	30	✓PKU Explore 10
	Powder (Tropical), 34 g sachets.....	883.50	30	✓PKU Express 20
	Powder (Neutral).....	178.79	400 g OP	✓PKU Start
285	Supplements for PKU GLYCOMACROPEPTIDE AND AMINO ACID CONTAINS SOME PHENYLALANINE – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder (neutral) 40 g sachets.....	673.92	30	✓Camino Pro Bettermilk
	Liquid (chocolate), 250 ml carton.....	684.45	30 OP	✓PKU Glytactin RTD 15
	Liquid (neutral), 250 ml carton.....	684.45	30 OP	✓PKU Glytactin RTD 15
	Liquid (vanilla), 250 ml carton.....	684.45	30 OP	✓PKU Glytactin RTD 15 Lite
	Liquid (Coffee Mocha), 250 ml carton.....	684.45	30 OP	✓PKU Glytactin RTD 15 Lite
	Powder (Neutral), 16 g sachets.....	449.28	30	✓PKU Build 10
	Powder (Berry), 20 g sachets.....	449.28	60	✓PKU Restore Powder
	Powder (Orange), 20 g sachets.....	449.28	60	✓PKU Restore Powder
287	Supplements for Tyrosinaemia AMINOACID FORMULA WITHOUT PHENYLALANINE AND TYROSINE – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder (Neutral), 12.5 g sachets.....	349.65	30	✓TYR Explore 5
	GLYCOMACROPEPTIDE AND AMINO ACID CONTAINS SOME TYROSINE AND PHENYLALANINE – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder (Red Berry), 35 g sachets.....	1,398.60	30	✓TYR Sphere 20
	Powder (Vanilla), 35 g sachets.....	1,398.60	30	✓TYR Sphere 20
285	Supplements for Organic Acidaemias AMINOACID FORMULA WITHOUT METHIONINE, THREONINE AND VALINE – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder, 12.5 g sachets.....	349.65	30	✓MMA/PA Explore 5
	Powder, 25 g sachets.....	1,048.95	30	✓MMA/PA Express 15
285	Supplements for Glutaric Aciduria type 1 AMINOACID FORMULA WITHOUT LYSINE – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder, 12.5 g sachets.....	349.65	30	✓GA Explore 5
	Powder, 25 g sachets.....	1,048.95	30	✓GA Express 15
285	Supplements for Glycogen Storage Disease HIGH AMYLOPECTIN CORN-STARCH – Special Authority see <b>SA2300</b> ††08 – Hospital pharmacy [HP3]			
	Powder, 60 g sachets.....	241.62	30	✓Glycosade



Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## New Listings – effective 1 February 2024 (continued)

287	Single dose amino acids			
	ARGININE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	211.45	30	✓ Arginine2000
	CITRULLINE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	211.45	30	✓ Citrulline1000
	ISOLEUCINE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	141.05	30	✓ Isoleucine50
	LEUCINE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	141.05	30	✓ Leucine100
	PHENYLALANINE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	141.05	30	✓ Phenylalanine50
	TYROSINE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	211.45	30	✓ Tyrosine1000
	VALINE – Special Authority see <b>SA2300 4408</b> – Hospital pharmacy [HP3]			
	Powder, 4 g sachets .....	141.05	30	✓ Valine50
295	INFLUENZA VACCINE			
	Inj 60 mcg in 0.5 ml syringe (quadrivalent vaccine) .....	120.00	10	✓ Influvac Tetra (2024 formulation)
	a) Maximum of 1 inj per prescription			
	b) Only on a prescription			
	c) No patient co-payment payable			
	d)			
	A) Influenza Vaccine is available each year for people who meet the following criteria, as set by Pharmac:			
	a) all people 65 years of age and over; or			
	b) people under 65 years of age who:			
	i) have any of the following cardiovascular diseases:			
	a) ischaemic heart disease, or			
	b) congestive heart failure, or			
	c) rheumatic heart disease, or			
	d) congenital heart disease, or			
	e) cerebro-vascular disease; or			
	ii) have either of the following chronic respiratory diseases:			
	a) asthma, if on a regular preventative therapy, or			
	b) other chronic respiratory disease with impaired lung function; or			
	iii) have diabetes; or			
	iv) have chronic renal disease; or			
	v) have any cancer, excluding basal and squamous skin cancers if not invasive; or			
	vi) have any of the following other conditions:			
	a) autoimmune disease, or			
	b) immune suppression or immune deficiency, or			
	c) HIV, or			
	d) transplant recipients, or			
	e) neuromuscular and CNS diseases/disorders, or			
	f) haemoglobinopathies, or			
	g) are children on long term aspirin, or			

continued...

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

## New Listings – effective 1 February 2024 (continued)

*continued...*

- h) have a cochlear implant, or
- i) errors of metabolism at risk of major metabolic decompensation, or
- j) pre and post splenectomy, or
- k) Down syndrome, or
- vii) are pregnant; or
- c) children 4 years of age and under who have been hospitalised for respiratory illness or have a history of significant respiratory illness; or
- d) people under 65 years of age who:
  - i) have any of the following serious mental health conditions:
    - a) schizophrenia, or
    - b) major depressive disorder, or
    - c) bipolar disorder, or
    - d) schizoaffective disorder, or
  - ii) are currently accessing secondary or tertiary mental health and addiction services.

Unless meeting the criteria set out above, the following conditions are excluded from funding:

- a) asthma not requiring regular preventative therapy,
  - b) hypertension and/or dyslipidaemia without evidence of end-organ disease.
- B) Contractors will be entitled to claim payment for the supply of influenza vaccine to patients eligible under the above criteria pursuant to their contract with Te Whatu Ora - Health New Zealand for subsidised immunisation, and they may only do so in respect of the influenza vaccine listed in the Pharmaceutical Schedule.
- C) Contractors may only claim for patient populations within the criteria that are covered by their contract, which may be a sub-set of the population described in paragraph A above.

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Restrictions, Chemical Names and Presentations Effective 1 February 2024

133	PHENOBARBITONE (removal of stat dispensing) For phenobarbitone oral liquid refer Standard Formulae			
	* Tab 15 mg.....	40.00	500	✓ PSM
	* Tab 30 mg.....	398.50	500	✓ <b>Noumed</b> <b>Phenobarbitone</b>
159	FLUDARABINE PHOSPHATE (addition of wastage claimable) Tab 10 mg – PCT – Retail pharmacy-Specialist.....	412.00	20	✓ <b>Fludara Oral</b>
	<b>Wastage claimable</b>			
171	NILOTINIB – Special Authority see <b>SA2031 1489</b> – Retail pharmacy (amended Special Authority criteria – amended criteria shown only) Wastage claimable			
	Cap 150 mg .....	4,680.00	120	✓ <b>Tasigna</b>
	Cap 200 mg .....	6,532.00	120	✓ <b>Tasigna</b>
	<p>➔ <b>SA2031 1489</b> Special Authority for Subsidy Initial application only from a haematologist. Approvals valid for 6 months for applications meeting the following criteria: All of the following:</p> <ol style="list-style-type: none"> <li>1 Patient has a diagnosis of chronic myeloid leukaemia (CML) in blast crisis, <b>high risk chronic accelerated</b> phase, or in chronic phase; and</li> <li>2 Either:               <ol style="list-style-type: none"> <li>2.1 Patient has documented CML treatment failure* with a <b>tyrosine kinase inhibitor (TKI) imatinib</b>; or</li> <li>2.2 Patient has experienced treatment limiting toxicity with a <b>tyrosine kinase inhibitor (TKI) imatinib</b> precluding further treatment with <b>imatinib</b>; and</li> </ol> </li> <li>3 Maximum nilotinib dose of 800 mg/day; and</li> <li>4 Subsidised for use as monotherapy only.</li> </ol> <p>Note: *treatment failure as defined by Leukaemia Net Guidelines.</p>			
281	ENTERAL FEED 1.5KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] (amended brand name) Liquid.....	8.68	1,000 ml OP	✓ <b>Ensure Plus HN RTH</b> <b>Ensure-Plus-RTH</b>
281	ENTERAL FEED WITH FIBRE 1.2KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] (amended brand name) Liquid.....	7.87	1,000 ml OP	✓ <b>Jevity Plus RTH</b> <b>Jevity-Plus</b>
284	Foods And Supplements For <del>Inborn Errors Of Metabolism</del> <b>Inherited Metabolic Disease</b> (amended Therapeutic Group heading and Special Authority criteria) ➔ <b>SA2300 1108</b> Special Authority for Subsidy Initial application only from <b>any relevant practitioner</b> a dietitian, relevant specialist or vocationally-registered general practitioner. Approvals valid without further renewal unless notified for applications meeting the following criteria: <b>Either</b> Any of the following:			
	<p><b>1 Dietary management of inherited metabolic disease; or</b></p> <ol style="list-style-type: none"> <li>1 Dietary management of homocystinuria; or</li> <li>2 Dietary management of maple syrup urine disease; or</li> <li>3 Dietary management of phenylketonuria (PKU); or</li> <li>2 4 For use as a supplement to the Ketogenic diet in patients diagnosed with epilepsy.</li> </ol>			

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Restrictions – effective 1 February 2024 (continued)

284	Supplements For MSUD <b>and short chain enoyl coA hydratase deficiency</b> (amended Therapeutic Group heading)			
285	<b>Supplements for PKU</b> (chemical moved to new Therapeutic Group heading) GLYCOMACROPEPTIDE AND AMINO ACID CONTAINS SOME PHENYLALANINE – Special Authority see <b>SA2300 2229</b> – Hospital pharmacy [HP3]			
	Powder (Banana) 35 g sachets .....	930.00	30	✓ <b>PKU sphere20 Banana</b>
	Powder (Chocolate) 32 g Sachets .....	898.56	30	✓ <b>PKU Build 20 Chocolate</b>
	Powder (Chocolate) 35 g sachets .....	930.00	30	✓ <b>PKU sphere20 Chocolate</b>
	Powder (Lemon) 35 g sachets .....	930.00	30	✓ <b>PKU sphere20 Lemon</b>
	Powder (Raspberry Lemonade) 32 g Sachets.....	898.56	30	✓ <b>PKU Build 20 Raspberry Lemonade</b>
	Powder (Smooth) 32 g Sachets .....	898.56	30	✓ <b>PKU Build 20 Smooth</b>
	Powder (Vanilla) 32 g Sachets .....	898.56	30	✓ <b>PKU Build 20 Vanilla</b>
	Powder (Red Berry) 35 g sachets .....	930.00	30	✓ <b>PKU sphere20 Red Berry</b>
	Powder (Vanilla) 35 g sachets .....	930.00	30	✓ <b>PKU sphere20 Vanilla</b>
296	INFLUENZA VACCINE (amended restriction criteria) Inj 60 mcg in 0.5 ml syringe (quadrivalent vaccine) .....	120.00	10	✓ <b>Influvac Tetra (2024 formulation)</b>
	a) Maximum of 1 inj per prescription			
	b) Only on a prescription			
	c) No patient co-payment payable			
	d)			
	A) INFLUENZA VACCINE — <del>people 3 years and over</del>			
	is available each year for patients <del>aged 3 years and over</del> who meet the following criteria, as set by Pharmac:			
	a) all people 65 years of age and over; or			
	b) people under 65 years of age who:			
	i) have any of the following cardiovascular diseases:			
	a) ischaemic heart disease, or			
	b) congestive heart failure, or			
	c) rheumatic heart disease, or			
	d) congenital heart disease, or			
	e) cerebo-vascular disease; or			
	ii) have either of the following chronic respiratory diseases:			
	a) asthma, if on a regular preventative therapy, or			
	b) other chronic respiratory disease with impaired lung function; or			
	iii) have diabetes; or			
	iv) have chronic renal disease; or			
	v) have any cancer, excluding basal and squamous skin cancers if not invasive; or			
	vi) have any of the following other conditions:			
	a) autoimmune disease, or			
	b) immune suppression or immune deficiency, or			
	c) HIV, or			
	d) transplant recipients, or			

continued...

## Changes to Restrictions – effective 1 February 2024 (continued)

continued...

- e) neuromuscular and CNS diseases/disorders, or
  - f) haemoglobinopathies, or
  - g) are children on long term aspirin, or
  - h) have a cochlear implant, or
  - i) errors of metabolism at risk of major metabolic decompensation, or
  - j) pre and post splenectomy, or
  - k) Down syndrome, or
  - vii) are pregnant; or
  - c) children ~~3 and~~ 4 years of age **and under (inclusive)** who have been hospitalised for respiratory illness or have a history of significant respiratory illness; or
  - d) people under 65 years of age who:
    - i) have any of the following serious mental health conditions:
      - a) schizophrenia, or
      - b) major depressive disorder, or
      - c) bipolar disorder, or
      - d) schizoaffective disorder, or
    - ii) are currently accessing secondary or tertiary mental health and addiction services
- Unless meeting the criteria set out above, the following conditions are excluded from funding:
- a) asthma not requiring regular preventative therapy,
  - b) hypertension and/or dyslipidaemia without evidence of end-organ disease.
- B) Contractors will be entitled to claim payment for the supply of influenza vaccine to patients eligible under the above criteria pursuant to their contract with Te Whatu Ora for subsidised immunisation, and they may only do so in respect of the influenza vaccine listed in the Pharmaceutical Schedule.
- C) Contractors may only claim for patient populations within the criteria that are covered by their contract, which may be a sub-set of the population described in paragraph A above.

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Changes to Subsidy and Manufacturer's Price

Effective 1 February 2024

43	DABIGATRAN (↓ subsidy)				
	Cap 75 mg – No more than 2 cap per day.....	27.99	60	✓ Pradaxa	
	Cap 110 mg .....	27.99	60	✓ Pradaxa	
	Cap 150 mg .....	27.99	60	✓ Pradaxa	
76	ACITRETIN – Special Authority see SA2024 below – Retail pharmacy (↑ subsidy)				
	Cap 10 mg .....	26.20	60	✓ Novatretin	
	Cap 25 mg .....	57.37	60	✓ Novatretin	
101	FLUCLOXACILLIN (↑ subsidy)				
	Inj 250 mg vial.....	42.60	10	✓ Flucloxin	
	Inj 500 mg vial.....	45.63	10	✓ Flucloxin	
120	ALENDRONATE SODIUM (↑ subsidy)				
	* Tab 70 mg.....	3.10	4	✓ Fosamax	
120	ALENDRONATE SODIUM WITH COLECALCIFEROL (↑ subsidy)				
	* Tab 70 mg with colecalciferol 5,600 iu.....	1.99	4	✓ Fosamax Plus	
130	MORPHINE SULPHATE (↑ subsidy)				
	a) Only on a controlled drug form				
	b) No patient co-payment payable				
	c) Safety medicine; prescriber may determine dispensing frequency				
	Oral liq 2 mg per ml – Brand switch fee payable (Pharmacode 2669986).....	16.31	100 ml	✓ Wockhardt	S29
274	DIABETIC ENTERAL FEED 1KCAL/ML – Special Authority see SA1095 – Hospital pharmacy [HP3] (↑ subsidy)				
	Liquid .....	4.65	500 ml OP	✓ Glucerna Select	
275	PAEDIATRIC ENTERAL FEED 1KCAL/ML – Special Authority see SA1379 – Hospital pharmacy [HP3] (↑ subsidy)				
	Liquid .....	3.32	500 ml OP	✓ Pediasure RTH	
275	PAEDIATRIC ORAL FEED 1.5KCAL/ML – Special Authority see SA1379 – Hospital pharmacy [HP3] (↑ subsidy)				
	Liquid (vanilla) .....	8.67	500 ml OP	✓ Pediasure Plus	
276	PAEDIATRIC ORAL FEED 1KCAL/ML – Special Authority see SA1379 – Hospital pharmacy [HP3] (↑ subsidy)				
	Liquid (chocolate).....	1.33	200 ml OP	✓ Pediasure	
	Liquid (strawberry) .....	1.33	200 ml OP	✓ Pediasure	
	Liquid (vanilla).....	1.33	200 ml OP	✓ Pediasure	
		1.66	250 ml OP	✓ Pediasure	
277	RENAL ORAL FEED 1.8 KCAL/ML – Special Authority see SA1101 – Hospital pharmacy [HP3] (↑ subsidy)				
	Liquid .....	3.31	220 ml OP	✓ Nepro HP (strawberry) ✓ Nepro HP (vanilla)	
277	ENTERAL/ORAL SEMI-ELEMENTAL FEED 1.5KCAL/ML – Special Authority see SA1377 – Hospital pharmacy [HP3] (↑ subsidy)				
	Liquid .....	22.39	1,000 ml OP	✓ Vital	

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ **fully subsidised**

### Changes to Subsidy and Manufacturer's Price – effective 1 February 2024 (continued)

281	ENTERAL FEED 1.5KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] († subsidy)			
	Liquid.....	2.17	250 ml OP	✓ <b>Ensure Plus HN</b>
		8.68	1,000 ml OP	✓ <b>Ensure Plus HN RTH</b>
281	ENTERAL FEED 1KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] († subsidy)			
	Liquid.....	6.56	1,000 ml OP	✓ <b>Osmolite RTH</b>
281	ENTERAL FEED WITH FIBRE 1 KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] († subsidy)			
	Liquid.....	6.56	1,000 ml OP	✓ <b>Jevity RTH</b>
281	ENTERAL FEED WITH FIBRE 1.2KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] († subsidy)			
	Liquid.....	7.87	1,000 ml OP	✓ <b>Jevity Plus RTH</b>
281	ENTERAL FEED WITH FIBRE 1.5KCAL/ML – Special Authority see SA1859 – Hospital pharmacy [HP3] († subsidy)			
	Liquid.....	8.68	1,000 ml OP	✓ <b>Jevity HiCal RTH</b>
283	ENTERAL FEED 2 KCAL/ML – Special Authority see SA1195 – Hospital pharmacy [HP3] († subsidy)			
	Liquid.....	13.64	1,000 ml OP	✓ <b>Ensure Two Cal HN</b> <b>RTH</b>
287	AMINO ACID FORMULA – Special Authority see SA2092 – Hospital pharmacy [HP3] († subsidy)			
	Powder (unflavoured) .....	65.72	400 g OP	✓ <b>Elecare</b> ✓ <b>Elecare LCP</b>
	Powder (vanilla).....	65.72	400 g OP	✓ <b>Elecare</b>

▲ Three months supply may be dispensed at one time if endorsed  
“certified exemption” by the prescriber or pharmacist

\* Three months or six months, as  
applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

## Delisted Items

### Effective 1 February 2024

25	ISPAGHULA (PSYLLIUM) HUSK – Only on a prescription * Powder for oral soln .....	6.00	250 g OP	✓ Macro Organic Psyllium Husk
47	ENALAPRIL MALEATE * Tab 5 mg..... * Tab 10 mg..... * Tab 20 mg..... Note – this delist applies to the 100 tab pack size.	1.82 2.02 2.42	100 100 100	✓ Acetec ✓ Acetec ✓ Acetec
76	PERMETHRIN Crm 5.....	5.75	30 g OP	✓ Lyderm
110	TENOFOVIR DISOPROXIL Tenofovir disoproxil prescribed under endorsement for the treatment of HIV is included in the count of up to 4 subsidised antiretrovirals for the purposes of Special Authority SA2139 * Tab 245 mg (300 mg as a maleate) .....	15.00	30	✓ Tenofovir Disoproxil Mylan
111	VALGANCICLOVIR – Special Authority see SA1993 – Retail pharmacy Tab 450 mg.....	132.00	60	✓ Valganciclovir Mylan
137	PROCHLORPERAZINE Tab 5 mg – Up to 30 tab available on a PSO.....	10.00	100	✓ Prochlorperazine – AA <b>S29</b>
146	TRIAZOLAM – Subsidy by endorsement a) Safety medicine; prescriber may determine dispensing frequency b) Subsidised for patients who were taking triazolam prior to 1 June 2023 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of triazolam in the preceding 12 months. Tab 125 mcg..... (9.85) Tab 250 mcg..... (11.20)	5.10 4.10	100 100	Hypam Hypam
256	MONTELUKAST * Tab 4 mg..... * Tab 10 mg.....	3.10 2.90	28 28	✓ Montelukast Mylan ✓ Montelukast Mylan
295	INFLUENZA VACCINE Inj 30 mcg in 0.25 ml syringe (paediatric quadrivalent vaccine) – [Xpharm] .....	11.00	1	✓ Afluria Quad Junior (2023 formulation)
295	INFLUENZA VACCINE Inj 60 mcg in 0.5 ml syringe (quadrivalent vaccine).....	110.00	10	✓ Afluria Quad (2023 formulation)



## Items to be Delisted

Effective 1 March 2024

285	Supplements for PKU GLYCOMAGROPEPTIDE AND AMINO ACID CONTAINS SOME PHENYLALANINE – Special Authority see SAQQQQ 2229 – Hospital pharmacy [HP3]			
	Powder (Banana) 35 g sachets .....	930.00	30	✓ PKU sphere20 Banana
	Powder (Chocolate) 32 g Sachets .....	898.56	30	✓ PKU Build 20 Chocolate
	Powder (Chocolate) 35 g sachets .....	930.00	30	✓ PKU sphere20 Chocolate
	Powder (Lemon) 35 g sachets .....	930.00	30	✓ PKU sphere20 Lemon
	Powder (Raspberry Lemonade) 32 g Sachets .....	898.56	30	✓ PKU Build 20 Raspberry Lemonade
	Powder (Smooth) 32 g Sachets .....	898.56	30	✓ PKU Build 20 Smooth
	Powder (Vanilla) 32 g Sachets .....	898.56	30	✓ PKU Build 20 Vanilla
	Powder (Red Berry) 35 g sachets .....	930.00	30	✓ PKU sphere20 Red Berry
	Powder (Vanilla) 35 g sachets .....	930.00	30	✓ PKU sphere20 Vanilla

Effective 1 July 2024

22	INSULIN PUMP INFUSION SET (STEEL CANNULA) – Special Authority see SA1985 – Retail pharmacy a) Maximum of 3 set per prescription b) Only on a prescription c) Maximum of 13 infusion sets will be funded per year.			
	10 mm steel needle; 60 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Sure-T MMT-884A
	10 mm steel needle; 80 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Sure-T MMT-886A
23	INSULIN PUMP INFUSION SET (TEFLON CANNULA) – Special Authority see SA1985 – Retail pharmacy a) Maximum of 3 set per prescription b) Only on a prescription c) Maximum of 13 infusion sets will be funded per year.			
	13 mm teflon needle, 110 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Silhouette MMT-382A
	13 mm teflon needle, 45 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Silhouette MMT-368A
	13 mm teflon needle, 80 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Silhouette MMT-383A
	17 mm teflon needle, 80 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Silhouette MMT-384A
	6 mm teflon needle, 80 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Quick-Set MMT-387A
	9 mm teflon needle, 80 cm tubing × 10 .....	130.00	1 OP	✓ MiniMed Quick-Set MMT-386A

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

\* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details  
Schedule page ref

Subsidy  
(Mnfr's price)  
\$ Per

Brand or  
Generic Mnfr  
✓ fully subsidised

### Items to be Delisted – effective 1 July 2024 (continued)

118	METHENAMINE (HEXAMINE) HIPPURATE * Tab 1 g.....	19.95	100	✓ <b>Hiprex</b>
-----	--	-------	-----	-----------------

Note – this delist applies to Pharmacode 209538

### Effective 1 August 2024

277	RENAL ENTERAL FEED 1.8 KCAL/ML – Special Authority see SA1101 – Hospital pharmacy [HP3] Liquid.....	6.08	500 ml OP	✓ <b>Nepro HP RTH</b>
-----	--	------	-----------	-----------------------

# Index

Pharmaceuticals and brands

<b>A</b>		
Acetec .....	32	
ACITRETIN .....	30	
Afluria Quad (2023 formulation) .....	32	
Afluria Quad Junior (2023 formulation) .....	32	
ALENDRONATE SODIUM .....	30	
ALENDRONATE SODIUM WITH COLECALCIFEROL .....	30	
AMINO ACID FORMULA .....	31	
AMINOACID FORMULA WITHOUT LYSINE .....	24	
AMINOACID FORMULA WITHOUT METHIONINE.....	23	
AMINOACID FORMULA WITHOUT METHIONINE, THREONINE AND VALINE .....	24	
AMINOACID FORMULA WITHOUT PHENYLALANINE .....	24	
AMINOACID FORMULA WITHOUT PHENYLALANINE AND TYROSINE .....	24	
AMINOACID FORMULA WITHOUT VALINE, LEUCINE AND ISOLEUCINE .....	23	
Apo-Bicalutamide .....	23	
Apo-Terbinafine .....	23	
ARGININE .....	25	
Arginine2000 .....	25	
<b>B</b>		
BICALUTAMIDE .....	23	
<b>C</b>		
Camino Pro Bettermilk.....	24	
CITRULLINE .....	25	
Citrulline1000 .....	25	
<b>D</b>		
DABIGATRAN.....	30	
DIABETIC ENTERAL FEED 1KCAL/ML .....	30	
<b>E</b>		
Elecare .....	31	
Elecare LCP .....	31	
ENALAPRIL MALEATE.....	32	
Ensure Plus HN .....	31	
Ensure Plus HN RTH .....	27, 31	
Ensure Plus RTH .....	27	
Ensure Two Cal HN RTH .....	31	
ENTERAL FEED 1.5KCAL/ML .....	27, 31	
ENTERAL FEED 1KCAL/ML .....	31	
ENTERAL FEED 2 KCAL/ML .....	31	
ENTERAL FEED WITH FIBRE 1.2KCAL/ML .....	27, 31	
ENTERAL FEED WITH FIBRE 1.5KCAL/ML .....	31	
ENTERAL FEED WITH FIBRE 1 KCAL/ML .....	31	
ENTERAL/ORAL SEMI-ELEMENTAL FEED 1.5KCAL/ML .....	30	
<b>F</b>		
FLUCLOXACILLIN .....	30	
Flucloxin .....	30	
FLUDARABINE PHOSPHATE .....	27	
Fludara Oral .....	27	
Fosamax .....	30	
Fosamax Plus .....	30	
<b>G</b>		
GA Explore 5 .....	24	
GA Express 15 .....	24	
Glucerna Select .....	30	
GLYCOMACROPEPTIDE AND AMINO ACID CONTAINS SOME PHENYLALANINE ...	24, 28, 33	
GLYCOMACROPEPTIDE AND AMINO ACID CONTAINS SOME TYROSINE AND PHENYLALANINE .....	24	
Glycosade .....	24	
<b>H</b>		
HCU Explore 5 .....	23	
HCU Express 15 .....	23	
HIGH AMYLOPECTIN CORN-STARCH .....	24	
Hiprex .....	23, 34	
Hypam .....	32	
<b>I</b>		
INFLUENZA VACCINE .....	25, 28, 32	
Influvac Tetra (2024 formulation) .....	25, 28	
INSULIN PUMP INFUSION SET (STEEL CANNULA).....	33	
INSULIN PUMP INFUSION SET (TEFLON CANNULA) .....	33	
ISOLEUCINE .....	25	
Isoleucine50 .....	25	
ISPAGHULA (PSYLLIUM) HUSK .....	32	
<b>J</b>		
Jevity HiCal RTH .....	31	
Jevity Plus .....	27	
Jevity Plus RTH .....	27, 31	
Jevity RTH .....	31	
<b>L</b>		
LEUCINE .....	25	
Leucine100 .....	25	
Lyderm .....	32	
<b>M</b>		
Macro Organic Psyllium Husk .....	32	
METHENAMINE (HEXAMINE) HIPPURATE .....	23, 34	
METHOTREXATE .....	23	
Methotrexate DBL S29 .....	23	
MiniMed Quick-Set MMT-386A .....	33	
MiniMed Quick-Set MMT-387A .....	33	
MiniMed Silhouette MMT-368A .....	33	
MiniMed Silhouette MMT-382A .....	33	
MiniMed Silhouette MMT-383A .....	33	

# Index

## Pharmaceuticals and brands

MiniMed Silhouette MMT-384A .....	33	PKU Explore 10 .....	24
MiniMed Sure-T MMT-884A .....	33	PKU Express 20 .....	24
MiniMed Sure-T MMT-886A .....	33	PKU Glytactin RTD 15 .....	24
MMA/PA Explore 5 .....	24	PKU Glytactin RTD 15 Lite .....	24
MMA/PA Express 15 .....	24	PKU Restore Powder .....	24
MONTELUKAST .....	32	PKU sphere20 Banana .....	28, 33
Montelukast Mylan .....	32	PKU sphere20 Chocolate .....	28, 33
MORPHINE SULPHATE .....	30	PKU sphere20 Lemon .....	28, 33
MSUD Explore 5 .....	23	PKU sphere20 Red Berry .....	28, 33
MSUD Express 15 .....	23	PKU sphere20 Vanilla .....	28, 33
<b>N</b>		PKU Start .....	24
Nepro HP RTH .....	34	Pradaxa .....	30
Nepro HP (strawberry) .....	30	PROCHLORPERAZINE .....	32
Nepro HP (vanilla) .....	30	Prochlorperazine – AA .....	32
NILOTINIB .....	27	<b>R</b>	
Noumed Phenobarbitone .....	27	RENAL ENTERAL FEED 1.8 KCAL/ML .....	34
Novatrelin .....	30	RENAL ORAL FEED 1.8 KCAL/ML .....	30
<b>O</b>		<b>S</b>	
Osmolite RTH .....	31	SALBUTAMOL .....	23
<b>P</b>		Salbutamol Cipla .....	23
PAEDIATRIC ENTERAL FEED 1KCAL/ML .....	30	<b>T</b>	
PAEDIATRIC ORAL FEED 1.5KCAL/ML .....	30	Tasigna .....	27
PAEDIATRIC ORAL FEED 1KCAL/ML .....	30	TENOFOVIR DISOPROXIL .....	32
Pediasure .....	30	Tenofovir Disoproxil Mylan .....	32
Pediasure Plus .....	30	TERBINAFINE .....	23
Pediasure RTH .....	30	TRIAZOLAM .....	32
PERMETHRIN .....	32	TYR Explore 5 .....	24
PHENOBARBITONE .....	27	TYROSINE .....	25
PHENYLALANINE .....	25	Tyrosine1000 .....	25
Phenylalanine50 .....	25	TYR Sphere 20 .....	24
PKU Build 10 .....	24	<b>V</b>	
PKU Build 20 Chocolate .....	28, 33	VALGANCICLOVIR .....	32
PKU Build 20 Raspberry Lemonade .....	28, 33	Valganciclovir Mylan .....	32
PKU Build 20 Smooth .....	28, 33	VALINE .....	25
PKU Build 20 Vanilla .....	28, 33	Valine50 .....	25
PKU Explore 5 .....	24	Vital .....	30

