Pharmaceutical Management Agency
New Zealand
Pharmaceutical Schedule

Section H Update

for Hospital Pharmaceuticals

April 2026

PHARMAC
TE PĀTAKA WHAIORANGA

Contents

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EFFECTIVE 1 APRIL 2026

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- Elexacaftor with tezacaftor, ivacaftor and ivacaftor (Trikafta) oral granules elexacaftor 80 mg with tezacaftor 40 mg, ivacaftor 60 mg (28) and ivacaftor 59.5mg (28), sachets and oral granules elexacaftor 100 mg with tezacaftor 50 mg, ivacaftor 75 mg (28) and ivacaftor 75 mg (28), sachets – new listing
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- Epirubicin hydrochloride (Epirubicin Ebewe) inj 2 mg per ml, 5 ml vial and 100 ml vial – to be delisted 1 May 2026
- Ezetimibe with simvastatin (Zimybe) tab 10 mg with simvastatin 80 mg – new listing
- Fluconazole (Flucazole) cap 150 mg – new listing
- Gadobutrol inj 1 mmol per ml, 15 ml vial – delisted 1 April 2026
- Gadobutrol (Gadovist 1.0) inj 604.72 mg per ml (equivalent to 1 mmol per ml), 5 ml, 7.5 ml and 10 ml prefilled syringe – new listing
- Gadobutrol (Gadovist 1.0) inj 604.72 mg per ml (equivalent to 1 mmol per ml), 15 ml vial – amended presentation description
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Summary of decisions – effective 1 April 2026 (continued)

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- Ivacaftor (Kalydeco) tab 150 mg and oral granules 13.4 mg, 25 mg, 50 mg and 75 mg, sachet – amended restriction criteria
- Ketamine (Ketalar) inj 100 mg per ml, 2 ml vial – new listing
- Lansoprazole (Lanzol Relief) cap 15 mg – new listing
- Lenalidomide (Lenalidomide Viatris) cap 15 mg – Pharmacode 2673541 to be delisted 1 August 2026
- Letrozole (Accord) tab 2.5 mg – to be delisted 1 July 2026
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- Naproxen (Noflam 250) tab 250 mg – new listing
- Oral feed (Ensure (Chocolate) and (Vanilla)) powder 15.9 g protein, 57.4 g carbohydrate and 14 g fat per 100 g, can, 800 g can – new pack size listing
- Parecoxib (Parecoxib Juno) inj 40 mg vial – new listing
- Pegfilgrastim (Ziextenzo) inj 6 mg per 0.6 ml syringe – new Pharmacode listing
- Pegfilgrastim (Ziextenzo) inj 6 mg per 0.6 ml syringe – Pharmacode 2643340 to be delisted 1 October 2026
- Pembrolizumab (Keytruda) inj 25 mg per ml, 4 ml vial – amended restriction criteria
- Prednisolone hexanoate with cinchocaine hydrochloride (Scheriproct) suppos 1.3 mg with cinchocaine hydrochloride 1 mg per g – new listing
- Rosuvastatin (Rosuvastatin - Sandoz) tab 10 mg and 40 mg – new listing
- Thiamine hydrochloride (Thiamine Sterop) inj 50 mg per ml, 2 ml ampoule – new listing and addition of PSS
- Ticagrelor (Ticagrelor Mylan) tab 90 mg – new listing
- Valaciclovir (Valaciclovir Mylan and Valaciclovir Viatris) tab 1,000 mg – new listing
- Vanzacaftor with tezacaftor and deutivacaftor (Alyftrek) tab vanzacaftor 4 mg with tezacaftor 20 mg and deutivacaftor 50 mg and tab vanzacaftor 10 mg with tezacaftor 50 mg and deutivacaftor 125 mg – new listing
- Zidovudine with lamivudine (Lamivudine/Zidovudine Viatris) tab 300 mg with lamivudine 150 mg – new listing

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

Section H changes to Part II

Effective 1 April 2026

ALIMENTARY TRACT AND METABOLISM

7	PREDNISOLONE HEXANOATE WITH CINCHOCAINE HYDROCHLORIDE (new listing)			
	Suppos 1.3 mg with cinchocaine hydrochloride 1 mg per g	8.61	12	Scheriproct
8	LANSOPRAZOLE (new listing)			
	Cap 15 mg	1.21	30	Lanzol Relief
	Note – this is a new Pharmacode listing, 2726017.			
28	THIAMINE HYDROCHLORIDE (new listing and addition of PSS)			
	Inj 50 mg per ml, 2 ml ampoule – **5% DV Sep-26 to 2028**	49.95	10	**Thiamine Sterop**

BLOOD AND BLOOD FORMING ORGANS

38	TICAGRELOR (new listing)			
	➔Tab 90 mg	23.85	56	Ticagrelor Mylan
40	PEGFILGRASTIM (new listing)			
	➔Inj 6 mg per 0.6 ml syringe – **5% DV Feb-26 to 2028**	69.50	1	**Ziextenzo**
	Note – new Pharmacode listing, 2724251. Pharmacode 2643340 to be delisted from 1 October 2026.			

CARDIOVASCULAR SYSTEM

45	CANDESARTAN CILEXETIL (new listing)			
	Tab 4 mg	2.68	90	Candesartan Viatris Sante
	Tab 8 mg	2.67	90	Candesartan Viatris Sante
	Tab 16 mg	4.22	90	Candesartan Viatris Sante
	Tab 32 mg	1.75	30	Candesartan Viatris Sante
53	ROSUVASTATIN (new listing)			
	➔Tab 10 mg	4.21	30	Rosuvastatin - Sandoz
	➔Tab 40 mg	4.55	30	Rosuvastatin - Sandoz
54	EZETIMIBE WITH SIMVASTATIN (new listing)			
	Tab 10 mg with simvastatin 80 mg	14.27	30	Zimybe

INFECTIONS

94	AMOXICILLIN (brand change and addition of PSS)			
	Cap 500 mg – **5% DV Nov-26 to 2028**	1.14	20	**Amoxycillin Sandoz**
	Note – Miro-Amoxicillin cap 500 mg to be delisted from 1 November 2026.			
99	FLUCONAZOLE (new listing)			
	➔Cap 150 mg	0.45	1	Flucazole
106	ZIDOVUDINE WITH LAMIVUDINE (new listing)			
	➔Tab 300 mg with lamivudine 150 mg	92.40	60	Lamivudine/Zidovudine Viatris
	Note – this is a new Pharmacode listing, 2724952.			

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

Changes to Section H Part II – effective 1 April 2026 (continued)

109 VALACICLOVIR (new listing)

Tab 1,000 mg	12.45	21	Valaciclovir Mylan
	12.45	21	Valaciclovir Viatris

MUSCULOSKELETAL SYSTEM

120 NAPROXEN (new listing)

Tab 250 mg	7.06	90	Noflam 250

Note – this is a new Pharmacode listing, 2725495.

120 PARECOXIB (new listing)

Inj 40 mg vial	46.00	10	Parecoxib Juno

NERVOUS SYSTEM

124 KETAMINE (new listing)

Inj 100 mg per ml, 2 ml vial	36.23	5	Ketalar

Note – this is a new Pharmacode listing, 436895.

128 METHADONE HYDROCHLORIDE (↓ price and addition of PSS)

Tab 5 mg – **5% DV Sep-26 to 2028**	1.38	10	**Methadone BNM**

146 DEXAMFETAMINE SULFATE (new listing)

➔ Tab 5 mg	29.80	100	Dexamfetamine Aspen

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

153 DOXORUBICIN HYDROCHLORIDE (delisting)

Inj 2 mg per ml, 50 ml vial	23.00	1	Doxorubicin Ebewe

Note – Doxorubicin Ebewe inj 2 mg per ml, 50 ml vial to be delisted from 1 May 2026.

153 EPIRUBICIN HYDROCHLORIDE (delisting)

Inj 2 mg per ml, 5 ml vial	25.00	1	Epirubicin Ebewe
Inj 2 mg per ml, 100 ml vial	99.99	1	Epirubicin Ebewe

Note – Epirubicin Ebewe inj 2 mg per ml, 5 ml vial and 100 ml vial to be delisted from 1 May 2026.

155 BORTEZOMIB (brand change and addition of PSS)

➔ Inj 3.5 mg vial – **5% DV Sep-26 to 2028**	23.99	1	**Bortezomib Eugia**

Note – DBL Bortezomib inj 3.5 mg vial to be delisted from 1 September 2026

156 LENALIDOMIDE (VIATRIS) (delisting)

➔ Cap 15 mg – **5% DV Feb-25 to 31 Jan 2028**	62.13	21	**Lenalidomide Viatris**

Note – This delist applies to Pharmacode 2673541, to be delisted from 1 August 2026.

176 LETROZOLE (delisting)

Tab 2.5 mg	4.36	28	Accord

Note – Letrozole (Accord) tab 2.5 mg to be delisted from 1 July 2026.

➔ Restriction
(Brand) indicates a brand example only. It is not a contracted product.

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

Changes to Section H Part II – effective 1 April 2026 (continued)

203 BRENTUXIMAB VEDOTIN (amended restriction criteria – affected criteria shown only)

➔Inj 50 mg vial..... 5,275.18 1 Adcetris

Restricted

Initiation – CD30 positive systemic anaplastic large-cell lymphoma

Limited to 12 months treatment

Either:

1 Patient is currently on treatment with brentuximab vedotin and met all the following criteria prior to commencing treatment; or

2 All of the following:

2.1 Patient has CD30 positive systemic anaplastic large-cell lymphoma; and

2.2 Patient must have histological confirmation of CD30 expression; and

2.3 Patient must not have received prior treatment with curative intent chemotherapy for this condition; and

2.4 Treatment must be in combination with cyclophosphamide, anthracycline, and steroids for a maximum of 8 cycles; and

2.5 Brentuximab vedotin is to be administered at doses no greater than 1.8 mg/kg every 3 weeks.

Initiation – **relapsed/refractory** anaplastic large cell lymphoma

Re-assessment required after 9 months

All of the following:

1 Patient has relapsed/refractory CD30-positive systemic anaplastic large cell lymphoma; and

2 Patient has an ECOG performance status of 0-1; and

3 Patient has not previously received brentuximab vedotin; and

4 Response to brentuximab vedotin treatment is to be reviewed after a maximum of 6 treatment cycles; and

5 Brentuximab vedotin to be administered at doses no greater than 1.8 mg/kg every 3 weeks.

Continuation – **relapsed/refractory** anaplastic large cell lymphoma

Re-assessment required after 9 months

All of the following:

1 Patient has experienced a partial or complete response to brentuximab vedotin after 6 treatment cycles; and

2 Treatment remains clinically appropriate and the patient is benefitting from treatment and treatment is tolerable; and

3 Patient is to receive a maximum of 16 total cycles of brentuximab vedotin treatment.

244 ATEZOLIZUMAB (amended restriction criteria – affected criteria shown only)

➔Inj 60 mg per ml, 20 ml vial ..... 9,503.00 1 Tecentriq

Restricted

Initiation – non-small cell lung cancer second line monotherapy

Medical oncologist ~~or any relevant practitioner on the recommendation of a medical oncologist~~

Re-assessment required after 4 months

All of the following:

1 Patient has locally advanced or metastatic non-small cell lung cancer; and

2 Patient has not received prior funded treatment with an immune checkpoint inhibitor for NSCLC; and

3 For patients with non-squamous histology there is documentation confirming that the disease does not express activating mutations of EGFR**, ROS-1** or ALK tyrosine kinase unless not possible to ascertain; and

4 Patient has an ECOG 0-2; and

5 Patient has documented disease progression following treatment with at least two cycles of platinum-based chemotherapy; and

6 Atezolizumab is to be used as monotherapy at a dose of 1200 mg every three weeks (or equivalent) for a maximum of 16 weeks; and

7 Baseline measurement of overall tumour burden is documented clinically and radiologically.

Continuation – non-small cell lung cancer second line monotherapy

Medical oncologist ~~or any relevant practitioner on the recommendation of a medical oncologist~~

Re-assessment required after 4 months

continued...

Changes to Section H Part II – effective 1 April 2026 (continued)

continued...

All of the following:
1 Any of the following:
  1.1 Patient's disease has had a complete response to treatment; or
  1.2 Patient's disease has had a partial response to treatment; or
  1.3 Patient has stable disease; and
2 Response to treatment in target lesions has been determined by comparable radiologic assessment following the most recent treatment period; and
3 No evidence of disease progression; and
4 The treatment remains clinically appropriate and patient is benefitting from treatment; and
5 Atezolizumab to be used at a maximum dose of 1200 mg every three weeks (or equivalent); and
6 Treatment with atezolizumab to cease after a total duration of 24 months from commencement (or equivalent of 35 cycles dosed every 3 weeks).

248 PEMBROLIZUMAB (amended restriction criteria – affected criteria shown only)
➔ Inj 25 mg per ml, 4 ml vial ..... 4,680.00 1 Keytruda

Restricted
Initiation - non-small cell lung cancer first-line monotherapy
Medical oncologist ~~or any relevant practitioner on the recommendation of a medical oncologist~~
Re-assessment required after 4 months
All of the following:
1 Patient has locally advanced or metastatic, unresectable, non-small cell lung cancer; and
2 Patient has not had chemotherapy for their disease in the palliative setting; and
3 Patient has not received prior funded treatment with an immune checkpoint inhibitor for NSCLC; and
4 For patients with non-squamous histology there is documentation confirming that the disease does not express activating mutations of EGFR**, ROS-1** or ALK tyrosine kinase unless not possible to ascertain; and
5 Pembrolizumab to be used as monotherapy; and
6 Either:
  6.1 There is documentation confirming the disease expresses PD-L1 at a level greater than or equal to 50% as determined by a validated test unless not possible to ascertain; or
  6.2 Both:
    6.2.1 There is documentation confirming the disease expresses PD-L1 at a level greater than or equal to 1% as determined by a validated test unless not possible to ascertain; and
    6.2.2 Chemotherapy is determined to be not in the best interest of the patient based on clinician assessment; and
7 Patient has an ECOG 0-2; and
8 Pembrolizumab to be used at a maximum dose of 200 mg every three weeks (or equivalent) for a maximum of 16 weeks; and
9 Baseline measurement of overall tumour burden is documented clinically and radiologically.

Initiation - non-small cell lung cancer first-line combination therapy
Medical oncologist ~~or any relevant practitioner on the recommendation of a medical oncologist~~
Re-assessment required after 4 months
All of the following:
1 Patient has locally advanced or metastatic, unresectable, non-small cell lung cancer; and
2 Patient has not had chemotherapy for their disease in the palliative setting; and
3 Patient has not received prior funded treatment with an immune checkpoint inhibitor for NSCLC; and
4 For patients with non-squamous histology there is documentation confirming that the disease does not express activating mutations of EGFR**, ROS-1** or ALK tyrosine kinase unless not possible to ascertain; and
5 Pembrolizumab to be used in combination with platinum-based chemotherapy; and
6 Patient has an ECOG 0-2; and
7 Pembrolizumab to be used at a maximum dose of 200 mg every three weeks (or equivalent) for a maximum of 16 weeks; and
8 Baseline measurement of overall tumour burden is documented clinically and radiologically.

➔ Restriction
(Brand) indicates a brand example only. It is not a contracted product.

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

Changes to Section H Part II – effective 1 April 2026 (continued)

RESPIRATORY SYSTEM AND ALLERGIES

263 IPRATROPIUM BROMIDE (new listing)

Nebuliser soln 250 mcg per ml, 2 ml ampoule	8.11	10	Ipratropium Viatris

269 ELEXACAFTOR WITH TEZACAFTOR, IVACAFTOR AND IVACAFTOR (new listing)

➔ Oral granules elexacaftor 80 mg with tezacaftor 40 mg, ivacaftor 60 mg (28) and ivacaftor 59.5mg (28), sachets	27,647.39	56	Trikafta
➔ Oral granules elexacaftor 100 mg with tezacaftor 50 mg, ivacaftor 75 mg (28) and ivacaftor 75 mg (28), sachets	27,647.39	56	Trikafta

269 ELEXACAFTOR WITH TEZACAFTOR, IVACAFTOR AND IVACAFTOR (amended restriction criteria)

➔ Tab elexacaftor 50 mg with tezacaftor 25 mg, ivacaftor 37.5 mg (56) and ivacaftor 75 mg (28)	27,647.39	84	Trikafta
➔ Tab elexacaftor 100 mg with tezacaftor 50 mg, ivacaftor 75 mg (56) and ivacaftor 150 mg (28)	27,647.39	84	Trikafta
➔ Oral granules elexacaftor 80 mg with tezacaftor 40 mg, ivacaftor 60 mg (28) and ivacaftor 59.5mg (28), sachets	27,647.39	56	Trikafta
➔ Oral granules elexacaftor 100 mg with tezacaftor 50 mg, ivacaftor 75 mg (28) and ivacaftor 75 mg (28), sachets	27,647.39	56	Trikafta

Restricted
Initiation
All of the following:
1 Patient has been diagnosed with cystic fibrosis; and
~~2 Patient is 6 years of age or older; and~~
~~3~~ **2** Either
- ~~3.1~~ **2.1** Patient has two cystic fibrosis-causing mutations in the cystic fibrosis transmembrane regulator (CFTR) gene (one from each parental allele); or
- ~~3.2~~ **2.2** Patient has a sweat chloride value of at least 60 mmol/L ~~by quantitative pilocarpine iontophoresis or by Macroduct sweat collection system~~; and

~~4~~ **3** Either
- ~~4.1~~ **3.1** Patient has a heterozygous or homozygous F508del mutation; or
- ~~4.2~~ **3.2** Patient has a ~~G551D mutation or other~~ mutation responsive ~~in vitro~~ to elexacaftor/tezacaftor/ivacaftor (see note); and

~~5~~ **4** The treatment must be the sole funded CFTR modulator therapy for this condition; and
~~6~~ **5** Treatment with elexacaftor/tezacaftor/ivacaftor must be given concomitantly with standard therapy for this condition.
Notes:
~~a)~~ Eligible mutations are listed in the Food and Drug Administration (FDA) Trikafta prescribing information ~~https://nctr-crs.fda.gov/fdalabel/services/spl/set-ids/f354423a-85c2-41c3-a9db-0f3ace135d8d/spl-doc~~ **https://www.accessdata.fda.gov/drugsatfda_docs/label/2025/212273s015lbl.pdf**

270 IVACAFTOR (new listing)

➔ Oral granules 13.4 mg, sachet	29,386.00	56	Kalydeco
➔ Oral granules 25 mg, sachet	29,386.00	56	Kalydeco

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

Changes to Section H Part II – effective 1 April 2026 (continued)

270 IVACAFTOR (amended restriction criteria)

➔ Tab 150 mg	29,386.00	56	Kalydeco
➔ Oral granules 13.4 mg, sachet	29,386.00	56	Kalydeco
➔ Oral granules 25 mg, sachet	29,386.00	56	Kalydeco
➔ Oral granules 50 mg, sachet	29,386.00	56	Kalydeco
➔ Oral granules 75 mg, sachet	29,386.00	56	Kalydeco

Restricted
Initiation
~~Respiratory specialist or paediatrician~~
All of the following:
1 Patient has been diagnosed with cystic fibrosis; and
2 Either:
2.1 Patient has two cystic fibrosis-causing mutations in the cystic fibrosis transmembrane regulator (CFTR) gene (one from each parental allele); or
2.2 Patients must have a sweat chloride value of at least 60 mmol/L; and
~~2.1 Patient must have G551D mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene on at least 1 allele; or~~
~~2.2 Patient must have other gating (class III) mutation (G1244E, G1349D, G178R, G551S, S1251N, S1255P, S549N and S549R) in the CFTR gene on at least 1 allele; and~~
3 **Patient must have at least one mutation on the list of CFTR mutations that produce CFTR protein and are known to be responsive to ivacaftor**; and** ~~Patients must have a sweat chloride value of at least 60 mmol/L by quantitative pilocarpine iontophoresis or by Macroduct sweat collection system; and~~
4 Treatment with ivacaftor must be given concomitantly with standard therapy for this condition; and
~~5 Patient must not have an acute upper or lower respiratory infection, pulmonary exacerbation, or changes in therapy (including antibiotics) for pulmonary disease in the last 4 weeks prior to commencin treatment with ivacaftor; and~~
~~6~~ **5** The dose of ivacaftor will not exceed one tablet or one sachet twice daily~~; and~~
~~7 Applicant has experience and expertise in the management of cystic fibrosis.~~
Note: Mutations listed in Table 3 of the Food and Drug Administration (FDA) Ivacaftor prescribing information https://www.accessdata.fda.gov/drugsatfda_docs/label/2023/203188s038lbl.pdf**

270 VANZACAFTOR WITH TEZACAFTOR AND DEUTIVACAFTOR (new listing)

➔ Tab vanzacaftor 4 mg with tezacaftor 20 mg and deutivacaftor 50 mg	29,029.76	84	Alyftrek
➔ Tab vanzacaftor 10 mg with tezacaftor 50 mg and deutivacaftor 125 mg	29,029.76	56	Alyftrek

Restricted
Initiation
All of the following:
1 Patient has been diagnosed with cystic fibrosis; and
2 Either:
2.1 Patient has two cystic fibrosis-causing mutations in the cystic fibrosis transmembrane regulator (CFTR) gene (one from each parental allele); or
2.2 Patient has a sweat chloride value of at least 60 mmol/L; and
3 Either:
3.1 Patient has a heterozygous or homozygous F508del mutation; or
3.2 Patient has a mutation responsive to vanzacaftor/tezacaftor/deutivacaftor (see note); and
4 The treatment must be the sole funded CFTR modulator therapy for this condition; and
5 Treatment with vanzacaftor/tezacaftor/deutivacaftor must be given concomitantly with standard therapy for this condition.
Note: Eligible mutations are listed in the in the Food and Drug Administration (FDA) Alyftrek prescribing information https://www.accessdata.fda.gov/drugsatfda_docs/label/2025/218730s002lbl.pdf

Changes to Section H Part II – effective 1 April 2026 (continued)

VARIOUS

283 GADOBUTROL (delisted)
Inj 1 mmol per ml, 15 ml vial
Note – Gadobutrol inj 1 mmol per ml, 15 ml vial delisted 1 April 2026.

283 GADOBUTROL (new listing)

Inj 604.72 mg per ml (equivalent to 1 mmol per ml), 5 ml prefilled syringe	126.00	5	Gadovist 1.0
Inj 604.72 mg per ml (equivalent to 1 mmol per ml), 7.5 ml prefilled syringe	189.00	5	Gadovist 1.0
Inj 604.72 mg per ml (equivalent to 1 mmol per ml), 10 ml prefilled syringe	245.00	5	Gadovist 1.0

283 GADOBUTROL (amended presentation description)

Inj 604.72 mg per ml (equivalent to 1 mmol per ml), 15 ml **vial** ~~prefilled syringe~~	735.00	10	Gadovist 1.0

283 GADOXETATE DISODIUM (new listing)

Inj 181.43 mg per ml (equivalent to 0.25 mmol per ml), 10 ml prefilled syringe	300.00	1	Primovist

SPECIAL FOODS

306 ORAL FEED (new pack size listing)

➔ Powder 15.9 g protein, 57.4 g carbohydrate and 14 g fat per 100 g, can	40.00	800 g	Ensure (Chocolate) Ensure (Vanilla)

Index
Pharmaceuticals and brands

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