Pharmaceutical Management Agency
New Zealand
Pharmaceutical Schedule

Section H Update

for Hospital Pharmaceuticals

May 2026

PHARMAC
TE PĀTAKA WHAIORANGA

Contents

Summary of decisions
EFFECTIVE 1 MAY 2026

- Adrenaline (DBL Adrenaline) inj 1 in 10,000, 10 ml ampoule – amended brand name
- Biotin inj 5 mg per ml, 1 ml ampoule – new listing
- Candesartan cilexetil (Candesartan Viatris) tab 4 mg, 8 mg, 16 mg and 32 mg – new listing
- Candesartan cilexetil (Candesartan Viatris Sante) tab 8 mg, 16 mg and 32 mg – delisted 1 May 2026
- Cefalexin (Cefalexin Sandoz) grans for oral liq 25 mg per ml – new listing and addition of PSS
- Cefalexin (Cefalexin Sandoz) grans for oral liq 50 mg per ml – price decrease and addition of PSS
- Cefalexin (Flynn) grans for oral liq 25 mg per ml and 50 mg per ml – to be delisted 1 December 2026
- Daptomycin (Daptomycin-AFT) inj 500 mg vial – new listing and addition of PSS
- Daptomycin (Daptomycin Dr Reddy's) inj 500 mg vial – to be delisted 1 October 2026
- Doxorubicin hydrochloride (Doxorubicin Ebewe) inj 2 mg per ml, 25 ml vial and inj 2 mg per ml, 100 ml vial – price increase
- Epirubicin hydrochloride (Epirubicin Ebewe) inj 2 mg per ml, 25 ml vial and inj 2 mg per ml, 100 ml vial – price increase
- Epirubicin hydrochloride (Epirubicin Ebewe) inj 2 mg per ml, 100 ml vial – delisting revoked
- Ezetimibe with simvastatin (Vytorin) tab 10 mg with simvastatin 40 mg – new listing
- Fludarabine phosphate (Fludarabine Ebewe) inj 50 mg vial – price increase
- Hydralazine hydrochloride (Hydrapres) inj 20 mg ampoule – new listing
- Ibrutinib (Imbruvica) tab 140 mg and 420 mg – amended restriction criteria
- Icatibant (Icatibant Lupin) inj 10 mg per ml, 3 ml prefilled syringe – new listing and addition of PSS
- Icatibant (Firazyr) inj 10 mg per ml, 3 ml prefilled syringe – to be delisted 1 October 2026
- Imiquimod (Aldara) crm 5%, 250 mg sachet – new listing
- Ipilimumab (Yervoy) inj 5 mg per ml, 10 ml vial and 40 ml vial – amended restriction criteria
- Iohexol (Omnipaque) inj 300 mg per ml (iodine equivalent), 20 ml bottle – to be delisted 1 October 2026
- Letermovir (Prevymis) tab 240 mg – new listing

Summary of decisions – effective 1 May 2026 (continued)

- Magnesium oxide with magnesium aspartate, magnesium amino acid chelate and magnesium citrate cap 500 mg with magnesium aspartate 100 mg, magnesium amino acid chelate 100 mg and magnesium citrate 100 mg (345 mg elemental magnesium) – new listing
- Magnesium oxide with magnesium aspartate, magnesium amino acid chelate and magnesium citrate cap 500 mg with magnesium aspartate 100 mg, magnesium amino acid chelate 100 mg and magnesium citrate 100 mg (360 mg elemental magnesium) – to be delisted 1 November 2026
- Mitozantrone (Mitozantrone Ebewe) inj 2 mg per ml, 10 ml vial – price increase
- Montelukast (Relonchem) tab 5 mg – new listing
- Nitrofurantoin (Nitrofurantoin Clinect) tab 50 mg – new listing
- Nitrofurantoin (Nifuran) tab 50 mg and 100 mg – to be delisted 1 November 2026
- Nivolumab (Opdivo) inj 10 mg per ml, 4 ml vial and inj 10 mg per ml, 10 ml vial – amended restriction criteria
- Obinutuzumab (Gazyva) inj 25 mg per ml, 40 ml vial – amended restriction criteria
- Olanzapine (Olanzapine ODT Viatris) tab orodispersible 5 mg and 10 mg – new listing
- Palivizumab (Synagis) inj 100 mg per ml, 1 ml vial – amended restriction criteria
- Pazopanib (Pazopanib ADVZ) tab 200 mg – new listing
- Pirfenidone (Pirfenidone Sandoz) tab 267 mg and tab 801 mg – new listing and addition of PSS
- Pirfenidone (Esbriet) tab 267 mg and tab 801 mg – to be delisted 1 October 2026
- Plerixafor (Plerixafor-AFT) inj 20 mg per ml, 1.2 ml vial – new listing and addition of PSS
- Plerixafor (Mozobil) inj 20 mg per ml, 1.2 ml vial – to be delisted 1 October 2026
- Polyethylene glycol 400 and propylene glycol (Systane Unit Dose) eye drops 0.4% with propylene glycol 0.3% preservative free, single dose, 28 pack – new pack size listing
- Polyethylene glycol 400 and propylene glycol (Systane Unit Dose) eye drops 0.4% with propylene glycol 0.3% preservative free, single dose, 30 pack – to be delisted 1 November 2026
- Ramipril tab 1.25 mg (Ramipril Viatris), tab 5 mg and 10 mg (Ramipril Mylan Generics) – new listing
- Rituximab (Riximyo) inj 10 mg per ml, 10 ml vial and 50 ml vial – amended restriction criteria
- Salbutamol with ipratropium bromide (Combiprasal) nebuliser soln 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule – new listing
- Venetoclax (Venclexta) tab 50 mg – new Pharmacode listing

Summary of decisions – effective 1 May 2026 (continued)

- Venetoclax (Venclexta) tab 14 × 10 mg, 7 × 50 mg, 21 × 100 mg, tab 10 mg, tab 50 mg and tab 100 mg – amended restriction criteria
- Zoledronic acid (Zoledronic Acid Injection Mylan) inj 4 mg per 5 ml, vial – to be delisted 1 November 2026

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

Section H changes to Part II

Effective 1 May 2026

ALIMENTARY TRACT AND METABOLISM

18 BIOTIN (new listing)
➔ Inj 5 mg per ml, 1 ml ampoule

BLOOD AND BLOOD FORMING ORGANS

24 MAGNESIUM OXIDE WITH MAGNESIUM ASPARTATE, MAGNESIUM AMINO ACID CHELATE AND MAGNESIUM CITRATE (new listing)
Cap 500 mg with magnesium aspartate 100 mg, magnesium amino acid chelate 100 mg and magnesium citrate 100 mg (345 mg elemental magnesium)

24 MAGNESIUM OXIDE WITH MAGNESIUM ASPARTATE, MAGNESIUM AMINO ACID CHELATE AND MAGNESIUM CITRATE (delisting)
Cap 500 mg with magnesium aspartate 100 mg, magnesium amino acid chelate 100 mg and magnesium citrate 100 mg (360 mg elemental magnesium)
Note – Magnesium oxide with magnesium aspartate, magnesium amino acid chelate and magnesium citrate cap 500 mg with magnesium aspartate 100 mg, magnesium amino acid chelate 100 mg and magnesium citrate 100 mg (360 mg elemental magnesium) to be delisted from 1 November 2026.

39 PLERIXAFOR (brand change and addition of PSS)

Inj 20 mg per ml, 1.2 ml vial – **5% DV Oct-26 to 2028**	869.00	1	**Plerixafor-AFT**

Note – Mozobil inj 20 mg per ml, 1.2 ml vial to be delisted from 1 October 2026

45 RAMIPRIL (new listing)

Tab 1.25 mg	5.75	30	Ramipril Viatris
Tab 5 mg	5.25	28	Ramipril Mylan Generics
Tab 10 mg	5.48	28	Ramipril Mylan Generics

46 CANDESARTAN CILEXETIL (new listing)

Tab 4 mg	2.68	90	Candesartan Viatris
Tab 8 mg	2.67	90	Candesartan Viatris
Tab 16 mg	4.22	90	Candesartan Viatris
Tab 32 mg	5.24	90	Candesartan Viatris

46 CANDESARTAN CILEXETIL (delisted)

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

Note – Candesartan Viatris Sante tab 8 mg, 16 mg and 32 mg delisted 1 May 2026

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

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

CARDIOVASCULAR SYSTEM

54	EZETIMIBE WITH SIMVASTATIN (new listing)			
	Tab 10 mg with simvastatin 40 mg	11.55	30	Vytorin
55	ADRENALINE (amended brand name)			
	Inj 1 in 10,000, 10 ml ampoule	36.18	5	~~Hospira~~ **DBL Adrenaline**
56	HYDRALAZINE HYDROCHLORIDE (new listing)			
	Inj 20 mg ampoule	25.90	5	Hydrapres

DERMATOLOGICALS

74	IMIQUIMOD (new listing)			
	Crm 5%, 250 mg sachet	34.50	12	Aldara

HORMONE PREPARATIONS

80	ZOLEDRONIC ACID (delisting)			
	Inj 4 mg per 5 ml, vial	15.65	1	Zoledronic Acid Injection Mylan
	Note – Zoledronic Acid Injection Mylan inj 4 mg per 5 ml, vial to be delisted from 1 November 2026.			

INFECTIONS

91	CEFALEXIN (brand change and addition of PSS)			
	Grans for oral liq 25 mg per ml – **5% DV Dec-26 to 2028**	5.41	100 ml	**Cefalexin Sandoz**
	Note – Flynn grans for oral liq 25 mg per ml to be delisted from 1 December 2026.			
91	CEFALEXIN (↓ price, addition of PSS and delisting)			
	Cefalexin grans for oral liq 50 mg per ml – **5% DV Dec-26 to 2028**	7.54	100 ml	**Cefalexin Sandoz**
	Note – Flynn grans for oral liq 50 mg per ml to be delisted from 1 December 2026.			
97	NITROFURANTOIN (new listing)			
	Tab 50 mg	22.20	100	Nitrofurantoin Clinect
97	NITROFURANTOIN (delisting)			
	Tab 50 mg – **5% DV Dec-24 to 2027**	22.20	100	**Nifuran**
	Tab 100 mg	37.50	100	Nifuran
	Note – Nifuran tab 50 mg and 100 mg to be delisted from 1 November 2026.			
97	DAPTOMYCIN (brand change and addition of PSS)			
	➔ Inj 500 mg vial – **5% DV Oct-26 to 2028**	44.90	1	**Daptomycin-AFT**
	Note – Daptomycin Dr Reddy's inj 500 mg vial to be delisted from 1 October 2026.			

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

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

109 LETERMOVIR (new listing)

➔ Tab 240 mg	6,664.00	28	Prevymis

Restricted
Initiation - CMV prophylaxis post HSCT
Limited to 4 months treatment
All of the following:
1 Patient has undergone an allogeneic haematopoietic stem cell transplant; and
2 The patient has confirmed presence of cytomegalovirus-specific antibodies; and
3 Treatment to commence within 28 days of an allogeneic haematopoietic stem cell transplant; and
4 Maximum treatment duration of 100 days post-transplant.

Continuation - CMV prophylaxis second or subsequent HSCT
Re-assessment required after 4 months
All of the following:
1 Patient has undergone an allogeneic haematopoietic stem cell transplant; and
2 The patient has confirmed presence of cytomegalovirus-specific antibodies; and
3 Treatment to commence within 28 days of an allogeneic haematopoietic stem cell transplant; and
4 Maximum treatment duration of 100 days post-transplant.

Initiation - CMV prophylaxis in severe immunosuppression*
Clinical microbiologist or infectious disease specialist
Re-assessment required after 6 months
Both:
1 Patient has severe immunosuppression requiring prophylaxis of CMV; and
2 Either:
  2.1 Patient is contraindicated to all other funded CMV active oral antiviral agents; or
  2.2 Patients CMV is resistant to all other funded CMV active oral antiviral agents.

Continuation - CMV prophylaxis in severe immunosuppression*
Clinical microbiologist or infectious disease specialist
Re-assessment required after 6 months
Both:
1 Patient has severe immunosuppression requiring prophylaxis of CMV; and
2 Either:
  2.1 Patient is contraindicated to all other funded CMV active oral antiviral agents; or
  2.2 Patients CMV is resistant to all other funded CMV active oral antiviral agents.

Note: Indications marked with * are unapproved indication

NERVOUS SYSTEM

136 OLANZAPINE (new listing)

Tab orodispersible 5 mg	8.64	100	Olanzapine ODT Viatris
Tab orodispersible 10 mg	10.32	100	Olanzapine ODT Viatris

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

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

152 DOXORUBICIN HYDROCHLORIDE (↑ price)
- Inj 2 mg per ml, 25 ml vial ..... 75.55 | 1 | Doxorubicin Ebewe
- Inj 2 mg per ml, 100 ml vial ..... 164.50 | 1 | Doxorubicin Ebewe

152 EPIRUBICIN HYDROCHLORIDE (↑ price)
- Inj 2 mg per ml, 25 ml vial ..... 284.36 | 1 | Epirubicin Ebewe
- Inj 2 mg per ml, 100 ml vial ..... 284.36 | 1 | Epirubicin Ebewe

152 EPIRUBICIN HYDROCHLORIDE (delisting revoked)
- Inj 2 mg per ml, 100 ml vial ..... 284.36 | 1 | Epirubicin Ebewe

Note – Epirubicin Ebewe inj 2 mg per ml, 100 ml vial delisting revoked.

152 MITOZANTRONE (↑ price)
- Inj 2 mg per ml, 10 ml vial ..... 170.63 | 1 | Mitozantrone Ebewe

153 FLUDARABINE PHOSPHATE (↑ price)
- Inj 50 mg vial ..... 744.95 | 5 | Fludarabine Ebewe

154 IBRUTINIB (amended restriction criteria – affected criteria shown only)
- ➔Tab 140 mg ..... 3,217.00 | 30 | Imbruvica
- ➔Tab 420 mg ..... 9,652.00 | 30 | Imbruvica

Restricted

Initiation - previously untreated chronic lymphocytic leukaemia in combination with venetoclax

Either:

1 Individual is currently on treatment with ibrutinib and/or venetoclax and met all of the following criteria prior to commencing treatment; or

2 Both:

2.1 Individual has previously untreated CLL; and

2.2 Ibrutinib is to be administered at a maximum dose of 420 mg daily for 3 (28 day) cycles as monotherapy, followed by a maximum of 12 (28 day) cycles in combination with venetoclax.

Initiation - chronic lymphocytic leukaemia (CLL)

Re-assessment required after 6 months

All of the following:

1 Individual has chronic lymphocytic leukaemia (CLL) requiring therapy; and

~~2 Individual has not previously received funded ibrutinib; and~~

2 ~~3~~ Ibrutinib is to be used as monotherapy; and

3 ~~4 Any of the following~~ **Individual has experienced intolerable side effects, or their disease has relapsed or is refractory following at least one prior line of therapy; and**

~~4.1 Both:~~

~~4.1.1 There is documentation confirming that the individual has 17p deletion or TP53 mutation; and~~

~~4.1.2 Individual has experienced intolerable side effects with venetoclax monotherapy; or~~

~~4.2 All of the following:~~

~~4.2.1 Individual has received at least one prior immunochemotherapy for CLL; and~~

~~4.2.2 Individual's CLL has relapsed; and~~

~~4.2.3 Individual has experienced intolerable side effects with venetoclax in combination with rituximab regimen; or~~

~~4.3 Individual's CLL is refractory to or has relapsed following a venetoclax regimen.~~

4 Individual has not received ibrutinib monotherapy previously.

continued...

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

continued...

Continuation - chronic lymphocytic leukaemia (CLL)
Re-assessment required after 12 months
No evidence of disease progression.
Note: 'Chronic lymphocytic leukaemia (CLL)' includes small lymphocytic lymphoma (SLL) and B-cell prolymphocytic leukaemia (B-PLL)*. Indications marked with * are Unapproved indications.

159 VENETOCLAX (new listing)

➔ Tab 50 mg	239.44	7	Venclexta

Note – this is a new Pharmacode listing, 2696754.

159 VENETOCLAX (amended restriction criteria – affected criteria shown only)

➔ Tab 14 × 10 mg, 7 × 50 mg, 21 × 100 mg	1,771.86	42	Venclexta
➔ Tab 10 mg	13.68	2	Venclexta
➔ Tab 50 mg	239.44	7	Venclexta
➔ Tab 100 mg	8,209.41	120	Venclexta

Restricted

Initiation - previously untreated chronic lymphocytic leukaemia in combination with obinutuzumab
Either:

1 Individual is currently on treatment with venetoclax and obinutuzumab and met all of the following criteria prior to commencing treatment; or
2 All of the following:
2.1 Individual has previously untreated chronic lymphocytic leukaemia; and
2.2 Venetoclax is to be administered with obinutuzumab; and
2.3 Venetoclax is to be used to a maximum dose of 400 mg and for a total of 12 (28 day) cycles*.

Note: *maximum number of cycles refers to 12 cycles of full dose venetoclax, in addition to the initial 5-week dose ramp-up period.

Initiation - previously untreated chronic lymphocytic leukaemia in combination with ibrutinib
Either:

1 Individual is currently on treatment with venetoclax and/or ibrutinib and met all of the following criteria prior to commencing treatment; or
2 All of the following:
2.1 Individual has previously untreated chronic lymphocytic leukaemia; and
2.2 Venetoclax is to be administered in combination with ibrutinib; and
2.3 Venetoclax is to be used to a maximum dose of 400 mg and for a total of 12 (28 day) cycles*.

Note: *maximum number of cycles refers to 12 cycles of full dose venetoclax, in addition to the initial 5-week dose ramp-up period.

Initiation - relapsed/refractory chronic lymphocytic leukaemia
*Re-assessment required after ~~7~~ **8** months*
All of the following:
1 Individual has chronic lymphocytic leukaemia requiring treatment; and
2 Individual has received at least one prior therapy for chronic lymphocytic leukaemia; and
~~3 Individual has not previously received funded venetoclax; and~~
3 ~~4~~ The individual's disease has relapsed; and
4 ~~5~~ Venetoclax to be used in combination with six 28-day cycles of rituximab commencing after the 5-week dose titration schedule with venetoclax; and
5 ~~6~~ Individual has an ECOG performance status of 0-2.

Continuation - relapsed/refractory chronic lymphocytic leukaemia
Re-assessment required after 6 months
Both:
1 Treatment remains clinically appropriate, and the individual is benefitting from and tolerating treatment; and

continued...

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

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

continued...

2 Venetoclax is to be discontinued after a maximum of 24 months of treatment following the titration schedule unless earlier discontinuation is required due to disease progression or unacceptable toxicity.

Note: 'Chronic lymphocytic leukaemia (CLL)' includes small lymphocytic lymphoma (SLL) and B-cell prolymphocytic leukaemia (B-PLL)*. Indications marked with * are Unapproved indications.

169 PAZOPANIB (new listing)

➔ Tab 200 mg ..... 172.88 30 Pazopanib ADVZ

215 OBINUTUZUMAB (amended restriction criteria – new criteria shown only)

➔ Inj 25 mg per ml, 40 ml vial ..... 5,910.00 1 Gazyva

Restricted
Initiation - previously untreated chronic lymphocytic leukaemia in combination with venetoclax
Either:
1 Individual is currently on treatment with obinutuzumab and venetoclax and met all of the following criteria prior to commencing treatment; or
2 Both:
2.1 Individual has previously untreated chronic lymphocytic leukaemia; and
2.2 Obinutuzumab is to be administered at a maximum cumulative dose of 8,000 mg and in combination with venetoclax for a maximum of 6 (28-day) cycles of treatment.

217 PALIVIZUMAB (amended restriction criteria – affected criteria shown only)

➔ Inj 100 mg per ml, 1 ml vial ..... 1,700.00 1 Synagis

Restricted
Initiation
Re-assessment required after 12 months
Both:
1 Palivizumab to be administered during the annual RSV season; and
2 Either:
2.1 **All of the following** ~~Both~~:
2.1.1 Infant was born in the last 12 months; and
2.1.2 Infant was born at less than 32 weeks zero days' gestation; ~~or~~ **and**
2.1.3 Infant is to be administered palivizumab within a single calendar year; or
2.2 Both:
2.2.1 Child was born in the last 24 months; and
2.2.2 Any of the following:
2.2.2.1 Child has severe lung, airway, neurological or neuromuscular disease that requires ongoing ventilatory/respiratory support (see Note A) in the community; or
2.2.2.2 Both:
2.2.2.2.1 Child has haemodynamically significant heart disease; and
2.2.2.2.2 Any of the following:
2.2.2.2.2.1 Child has unoperated simple congenital heart disease with significant left to right shunt (see Note B); or
2.2.2.2.2.2 Child has unoperated or surgically palliated complex congenital heart disease; or
2.2.2.2.2.3 Child has severe pulmonary hypertension (see Note C); or
2.2.2.2.2.4 Child has moderate or severe left ventricular (LV) failure (see Note D); or
2.2.2.3 Child has severe combined immune deficiency, confirmed by an immunologist, but has not received a stem cell transplant; or
2.2.2.4 Child has inborn errors of immunity (see Note E) that increase susceptibility to life-threatening viral respiratory infections, confirmed by an immunologist.

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

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

222 RITUXIMAB (RIXIMYO) (amended restriction criteria – affected criteria shown only)

➔ Inj 10 mg per ml, 10 ml vial	275.33	2	Riximyo
➔ Inj 10 mg per ml, 50 ml vial	688.20	1	Riximyo

Restricted
Initiation — Chronic lymphocytic leukaemia
Re-assessment required after 12 months
All of the following:
1 The patient has progressive Binet stage A, B or C chronic lymphocytic leukaemia (CLL) requiring treatment; and
2 Any of the following:
  2.1 The patient is rituximab treatment naive; or
  2.2 Either:
    2.2.1 The patient is chemotherapy treatment naive; or
    2.2.2 Both:
      2.2.2.1 The patient's disease has relapsed following no more than three prior lines of chemotherapy treatment; and
      2.2.2.2 The patient has had a treatment-free interval of 12 months or more if previously treated with fludarabine and cyclophosphamide chemotherapy; or
  2.3 The patient's disease has relapsed and rituximab treatment is to be used in combination with funded venetoclax; and
3 The patient has good performance status; and
~~4 Either:~~
  ~~4.1 The patient does not have chromosome 17p deletion CLL; or~~
  ~~4.2 Rituximab treatment is to be used in combination with funded venetoclax for relapsed/refractory chronic lymphocytic leukaemia; and~~
~~5~~ **4** Rituximab to be administered in combination with fludarabine and cyclophosphamide, bendamustine or venetoclax for a maximum of 6 treatment cycles; and
~~6~~ **5** It is planned that the patient receives full dose fludarabine and cyclophosphamide (orally or dose equivalent intravenous administration), bendamustine or venetoclax.

Note: 'Chronic lymphocytic leukaemia (CLL)' includes small lymphocytic lymphoma. A line of chemotherapy treatment is considered to comprise a known standard therapeutic chemotherapy regimen and supportive treatments. 'Good performance status' means ECOG score of 0-1, however, in patients temporarily debilitated by their CLL disease symptoms a higher ECOG (2 or 3) is acceptable where treatment with rituximab is expected to improve symptoms and improve ECOG score to < 2.

Continuation — Chronic lymphocytic leukaemia
Reassessment required after 12 months
Both:
1 Either:
  1.1 The patient's disease has relapsed and rituximab treatment is to be used in combination with funded venetoclax; or
  1.2 All of the following:
    1.2.1 The patient's disease has relapsed following no more than one prior line of treatment with rituximab for CLL; and
    1.2.2 The patient has had an interval of 36 months or more since commencement of initial rituximab treatment; and
    ~~1.2.3 The patient does not have chromosome 17p deletion CLL; and~~
    ~~1.2.4~~ **1.2.3** It is planned that the patient receives full dose fludarabine and cyclophosphamide (orally or dose equivalent intravenous administration) or bendamustine; and
2 Rituximab to be administered in combination with fludarabine and cyclophosphamide, bendamustine or venetoclax for a maximum of 6 treatment cycles.

Note: 'Chronic lymphocytic leukaemia (CLL)' includes small lymphocytic lymphoma. A line of chemotherapy treatment is considered to comprise a known standard therapeutic chemotherapy regimen and supportive treatments.

➔ 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 May 2026 (continued)

245 IPILIMUMAB (amended restriction criteria – new criteria shown only)

➔Inj 5 mg per ml, 10 ml vial	5,000.00	1	Yervoy
➔Inj 5 mg per ml, 40 ml vial	20,000.00	1	Yervoy

Restricted

Initiation – stage III or IV resectable melanoma

Either:

1 The individual is currently on treatment with ipilimumab for neoadjuvant treatment of resectable stage IIIB, IIIC, IIID or IV melanoma and met all remaining criteria prior to commencing treatment; or

2 All of the following:

2.1 The individual has resectable stage IIIB, IIIC, IIID or IV melanoma (excluding uveal) (see note); and

2.2 The individual has not received prior funded systemic treatment in the perioperative setting for their stage IIIB, IIIC, IIID or IV melanoma; and

2.3 The individual has ECOG performance score 0-2; and

2.4 Treatment must be prior to complete surgical resection; and

2.5 Neoadjuvant ipilimumab must be administered in combination with nivolumab; and

2.6 Ipilimumab to be administered for maximum of two cycles prior to surgical resection.

Note:

a) Stage IIIB, IIIC, IIID or IV melanoma defined as per American Joint Committee on Cancer (AJCC) 8th Edition.

b) Disease must be completely resectable and amenable to curative intent surgery, including stage IV disease.

246 NIVOLUMAB (amended restriction criteria – new criteria shown only)

➔Inj 10 mg per ml, 4 ml vial	1,051.98	1	Opdivo
➔Inj 10 mg per ml, 10 ml vial	2,629.96	1	Opdivo

Restricted

Initiation – stage III or IV resectable melanoma

Re-assessment required after 4 months

Either:

1 The individual is currently on treatment with nivolumab for neoadjuvant treatment of resectable stage IIIB, IIIC, IIID or IV melanoma and met all remaining criteria prior to commencing treatment; or

2 All of the following:

2.1 The individual has resectable stage IIIB, IIIC, IIID or IV melanoma (excluding uveal) (see note); and

2.2 The individual has not received prior funded systemic treatment in the perioperative setting for their stage IIIB, IIIC, IIID or IV melanoma; and

2.3 The individual has ECOG performance score 0-2; and

2.4 Treatment must be initiated prior to complete surgical resection; and

2.5 Neoadjuvant nivolumab must be administered in combination with ipilimumab; and

2.6 Nivolumab to be administered for maximum of two cycles prior to surgical resection.

Continuation – stage III or IV resectable melanoma

Re-assessment required after 4 months

Any of the following:

1 All of the following:

1.1 The individual has received funded neoadjuvant treatment with nivolumab in combination with ipilimumab; and

1.2 Adjuvant treatment with nivolumab is required; and

1.3 Treatment must be initiated within 13 weeks of complete surgical resection, unless delay is necessary due to post-surgery recovery; and

1.4 Nivolumab must be administered as monotherapy; and

1.5 Nivolumab to be discontinued at signs of disease recurrence or at completion of 12 months total treatment duration including any systemic neoadjuvant treatment (equivalent to 11 adjuvant cycles at 480 mg every 4 weeks plus initial 2 neoadjuvant treatment cycles); or

2 All of the following:

continued...

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

continued...

2.1 The individual has received neoadjuvant treatment with nivolumab and ipilimumab; and
2.2 The individual has unresectable or metastatic melanoma (excluding uveal) stage III or IV; and
2.3 The individual meets initial application criteria for nivolumab for unresectable or metastatic melanoma; or
3 All of the following:
3.1 The individual has received neoadjuvant treatment with nivolumab and ipilimumab; and
3.2 The individual has received treatment with nivolumab for unresectable or metastatic melanoma; and
3.3 The individual meets the renewal criteria for nivolumab for unresectable or metastatic melanoma.
Note:
a) Stage IIIB, IIIC, IIID or IV melanoma defined as per American Joint Committee on Cancer (AJCC) 8th Edition.
b) Disease must be completely resectable and amenable to curative intent surgery, including stage IV disease.

RESPIRATORY SYSTEM AND ALLERGIES

261	ICATIBANT (brand change and addition of PSS)			
	➔Inj 10 mg per ml, 3 ml prefilled syringe			
	– **5% DV Oct-26 to 2028**	479.00	1	**Icatibant Lupin**
	Note – Firazyr inj 10 mg per ml, 3 ml prefilled syringe to be delisted from 1 October 2026.			
263	SALBUTAMOL WITH IPRATROPIUM BROMIDE (new listing)			
	Nebuliser soln 2.5 mg with ipratropium bromide			
	0.5 mg per 2.5 ml ampoule	96.50	60	Combiprasal
265	PIRFENIDONE (brand change and addition of PSS)			
	➔Tab 267 mg – **5% DV Oct-26 to 2028**	145.80	90	**Pirfenidone Sandoz**
	➔Tab 801 mg – **5% DV Oct-26 to 2028**	437.40	90	**Pirfenidone Sandoz**
	Note – Esbriet tab 267 mg and 801 mg to be delisted from 1 October 2026.			
267	MONTELUKAST (new listing)			
	Tab 5 mg	3.10	28	Relonchem

SENSORY ORGANS

278	POLYETHYLENE GLYCOL 400 AND PROPYLENE GLYCOL (new listing)			
	Eye drops 0.4% with propylene glycol 0.3%			
	preservative free, single dose	10.06	28	Systane Unit Dose
278	POLYETHYLENE GLYCOL 400 AND PROPYLENE GLYCOL (delisting)			
	Eye drops 0.4% with propylene glycol 0.3%			
	preservative free, single dose	10.78	30	Systane Unit Dose
	Note – Systane Unit Dose eye drops 0.4% with propylene glycol 0.3% preservative free, single dose, 30 pack to be delisted from 1 November 2026.			

VARIOUS

282	IOHEXOL (delisting)			
	Inj 300 mg per ml (iodine equivalent), 20 ml bottle	110.00	10	Omnipaque
	Note – Omnipaque inj 300 mg per ml (iodine equivalent), 20 ml bottle to be delisted from 1 October 2026.			

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

Changes to Section H Part II – effective 1 April 2026

INFECTIONS

103 IVERMECTIN (new listing)
➔ Tab 3 mg ..... 17.20 4 Stromectol
Note – this is a new Pharmacode listing, 2726424

SPECIAL FOODS

290 MEDIUM-CHAIN TRIGLYCERIDE SUPPLEMENT (new listing)
➔ Liquid 95 g fat per 100 ml, bottle ..... 37.50 500 ml MCT Oil
Note – this is a new Pharmacode listing, 2711508

Index
Pharmaceuticals and brands

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ISSN 1179-3708 (Online)

Te Kāwanatanga o Aotearoa New Zealand Government