Enquiries to Ministry of Health
0800 855 066

APPLICATION FOR SUBSIDY BY SPECIAL AUTHORITY

Form SA2591
November 2026

APPLICANT (stamp or sticker acceptable)	**PATIENT** NHI:	**REFERRER** Reg No: .....
Reg No:	First Names:	First Names: .....
Name:	Surname:	Surname: .....
Address:	DOB:	Address: .....
.....	Address:	.....
.....	.....	.....
.....	.....	.....

Methylphenidate hydrochloride Extended Release (Concerta; Ritalin LA)

Initial application — ADHD
Applications from any relevant practitioner. Approvals valid without further renewal unless notified.
Prerequisites(tick boxes where appropriate)

- ☐ ADHD (Attention Deficit and Hyperactivity Disorder)
- **and** ☐ Diagnosed according to DSM-IV or ICD 10 criteria
- **and** ☐ Applicant is a health practitioner authorised to prescribe treatment consistent with the approval notice gazetted for methylphenidate (see note)
- **and**
  - ☐ Patient is taking a currently subsidised formulation of methylphenidate hydrochloride (immediate-release or sustained-release) which has not been effective due to significant administration and/or difficulties with adherence
  - **or** ☐ There is significant concern regarding the risk of diversion or abuse of immediate-release methylphenidate hydrochloride

or

- ☐ Patient meets the Special Authority criteria for SA2590 methylphenidate hydrochloride
- **and** ☐ Patient is unable to access other methylphenidate hydrochloride presentations under Special Authority criteria SA2590 due to an out of stock (see note)

Note: Criterion 2 is to permit short-term funding to cover an out-of-stock on tab extended-release Methylphenidate ER – Teva and tab sustained-release 20 mg Rubifen SR subsidised under SA2590 (https://schedule.pharmac.govt.nz/latest/SA2590.pdf).
Prescribing practitioner detail is in the relevant approval notice published in the New Zealand Gazette. Approval notices are located through the 'Medicines (controlled drugs) with restrictions under regulation 22 of the Misuse of Drugs Regulations 1977' section of the Medsafe 'Restrictions on the Supply, Prescribing or Administration of Medicines under the Medicines Act 1981 and Misuse of Drugs Regulations 1977' webpage (https://www.medsafe.govt.nz/ of April 2025).

Initial application — Narcolepsy*
Applications only from a neurologist or respiratory specialist. Approvals valid without further renewal unless notified.
Prerequisites(tick box where appropriate)

☐ The patient suffers from narcolepsy

Note: *narcolepsy is not a registered indication for Concerta or Ritalin LA.

I confirm the above details are correct and that in signing this form I understand I may be audited.

Signed: ..... Date: .....

Post application to Health New Zealand, Private Bag 3015, Wanganui – email: customerservice@health.govt.nz