**14.3 MINOR LISTINGS AND CHANGES TO LISTINGS PROCESSED BY THE SECRETARIAT**

**GLUCOSE INDICATOR BLOOD**

**Glucose indicator blood strip: diagnostic, 100**

**Dario® Blood Glucose Test Strip, uHealth Australia Pty Ltd**

1. **Purpose of application**
	1. To request listing of a new form of blood glucose test strips.
2. **Requested listing**
	1. The submission did not propose a requested listing for Dario® Blood Glucose Test Strip. Listing of Dario® blood glucose test strips under the same conditions as currently PBS-listed blood glucose test strips is considered appropriate.
	2. The submission requested the same price as other currently PBS-listed equivalent comparators.
3. **PBAC outcome**
	1. The PBAC recommend listing under the same conditions as currently listed PBS‑listed blood glucose test strips.
4. **Recommended listing**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name, Restriction,Manner of administration and form | Max.Qty (Packs) | Max. Qty (Units) | No. ofRpts | Proprietary Name and Manufacturer |
| GLUCOSE INDICATOR BLOOD  |  |  |  |  |  |
| glucose indicator blood strip: diagnostic, 100 diagnostic strips | 1 | 100 | 5 | Dario® Blood Glucose Test Strip | uHealth Australia |
|  |
| **Category /** **Program** | GENERAL – General Schedule (Code GE) |
| **Prescriber type:** | [ ] Dental [x] Medical Practitioners [x] Nurse practitioners [ ] Optometrists[ ] Midwives |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name, Restriction,Manner of administration and form | Max.Qty (Packs) | Max. Qty (Units) | No. ofRpts | Proprietary Name and Manufacturer |
| GLUCOSE INDICATOR BLOOD  |  |  |  |  |  |
| glucose indicator blood strip: diagnostic, 100 diagnostic strips | 1 | 100 | 11 | Dario® Blood Glucose Test Strip | uHealth Australia |
|  |
| **Category /** **Program** | GENERAL – General Schedule (Code GE) |
| **Prescriber type:** | [ ] Dental [x] Medical Practitioners [ ] Nurse practitioners [ ] Optometrists[ ] Midwives |
| **Condition:** | Blood glucose monitoring |
| **PBS Indication:** | Blood glucose monitoring |
| **Restriction Level / Method:** | [x] Restricted benefit[ ] Authority Required - In Writing[ ] Authority Required - Telephone[ ] Authority Required – Emergency[ ] Authority Required - Electronic[ ] Streamlined |
| **Clinical criteria:**  | Patient must be receiving treatment under a GP Management Plan or Team Care Arrangements where Medicare benefits were or are payable for the preparation of the Plan or coordination of the Arrangements. |
| **Administrative Advice** | No increase in the maximum quantity or number of units may be authorised.No increase in the maximum number of repeats may be authorised. |

1. **Context for Decision**

The PBAC helps decide whether and, if so, how medicines should be subsidised in Australia. It considers submissions in this context. A PBAC decision not to recommend listing or not to recommend changing a listing does not represent a final PBAC view about the merits of the medicine. A company can resubmit to the PBAC or seek independent review of the PBAC decision.

1. **Sponsor’s Comment**

The Sponsor had no comment.