Maintain and Refocus Fees for the Efficient Funding of Chemotherapy Medicines

**What will this measure do?**
This measure continues to provide additional remuneration for chemotherapy compounders to ensure continued access to chemotherapy medicines for Australians.

This measure also revised the payment structure within the funding envelope to implement a two-tiered fee structure to recognise Therapeutic Goods Administration (TGA)-licensed compounders.

Community pharmacies and private hospitals continue to receive the existing fee of $81.30 for each chemotherapy infusion and public hospitals receive $43.22.* In addition to the above, a two-tiered fee structure has been implemented. For each valid Efficient Funding of Chemotherapy (EFC) PBS claim:

- a $40 compound fee will be paid through the PBS; and
- a $20 additional compound fee will be paid direct to TGA licensed compounders through the Chemotherapy Compounding Payment Scheme (CCPS).

From 1 September 2016, there will be two additional fields available in PBS online claims. The compounder ID and infusion ID fields will provide data on chemotherapy compounding in Australia. This data is necessary for making payments to TGA licensed compounders and to better understand the scope of chemotherapy compounding in Australia. The compound fees are provided to secure the provision of chemotherapy medicines so people continue to receive high-quality and appropriate medicine according to their needs. It will further ensure that chemotherapy access will not be reduced and costs will not be increased for patients.

**What is the impact?**
All Australians who require access to chemotherapy medicines will continue to have access to these medicines.

Chemotherapy providers must make a substantial financial investment to meet the technical requirements associated with preparation of chemotherapy. As a result, there are only a small number of providers, with fewer than 70 pharmacies supplying 80 per cent of chemotherapy infusions funded under the PBS.

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*This applies to public hospitals participating in the Pharmaceutical Reforms.

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