



Australian Government

Department of Health and Ageing

SCHEDULE OF PHARMACEUTICAL BENEFITS

SUMMARY OF CHANGES

EFFECTIVE 1 SEPTEMBER 2008

PHARMACEUTICAL BENEFITS

These changes to the Schedule of Pharmaceutical Benefits are effective from 1 September 2008. The Schedule is updated on the first day of each month and is available on the Internet at www.pbs.gov.au.

Fees, Patient Contributions and Safety Net Thresholds

The following fees, patient contributions and safety net thresholds apply as at 1 September 2008 and are included, where applicable, in prices published in the Schedule—

Dispensing Fees:	Ready-prepared	\$5.99
	Dangerous drug fee	\$2.71
	Extemporaneously-prepared	\$8.03
	Allowable additional patient charge*	\$3.63
Additional Fees (for safety net prices):	Ready-prepared	\$1.03
	Extemporaneously-prepared	\$1.39
Patient Co-payments:	General	\$31.30
	Concessional	\$5.00
Safety Net Thresholds:	General	\$1141.80
	Concessional	\$290.00
Safety Net Card Issue Fee:		\$7.86

*The allowable additional patient charge is a discretionary charge to general patients if a pharmaceutical item has a dispensed price for maximum quantity less than the general patient co-payment. The pharmacist may charge general patients the allowable additional fee but the fee cannot take the cost of the prescription above the general patient co-payment for the medicine. This fee does not count towards the Safety Net threshold.

SUMMARY OF CHANGES

ADDITIONS

Additions - Item

(see under 'RESTRICTIONS' below for full details)

- 9192T **Clarithromycin**, Powder for oral liquid 250 mg per 5 mL, 50 mL (*Klacid*)
 9193W **Glucose indicator—blood**, Electrode strips, 25 (*On-Call Plus*)

Additions - Brands

- 8511Y *Alendronate Sandoz, SZ* — **Alendronate sodium**, Tablet equivalent to 70 mg alendronic acid
 8094B *Bicalutamide Ranbaxy, RA* — **Bicalutamide**, Tablet 50 mg
 3058Y *Cephatrust 250, MI* — **Cephalexin**, Capsule 250 mg
 3317N *Cephatrust 250, MI* — **Cephalexin**, Capsule 250 mg (**Dental**)
 3119E *Cephatrust 500, MI* — **Cephalexin**, Capsule 500 mg
 3318P *Cephatrust 500, MI* — **Cephalexin**, Capsule 500 mg (**Dental**)
 2456G *Lisinotrust 5, MI* — **Lisinopril**, Tablet 5 mg
 2457H *Lisinotrust 10, MI* — **Lisinopril**, Tablet 10 mg
 2458J *Lisinotrust 20, MI* — **Lisinopril**, Tablet 20 mg
 2430X *Metformin generichealth, GQ* — **Metformin hydrochloride**, Tablet 500 mg
 1801T *Metformin generichealth, GQ* — **Metformin hydrochloride**, Tablet 850 mg
 8331L *Omeprazole Ranbaxy, RA* — **Omeprazole**, Tablet 20 mg
 8333N *Omeprazole Ranbaxy, RA* — **Omeprazole**, Tablet 20 mg (**Diff. Max. Rpts**)
 1746X *Pharmacy Choice Paracetamol, YM* — **Paracetamol**, Tablet 500 mg
 8784H *Pharmacy Choice Paracetamol, YM* — **Paracetamol**, Tablet 500 mg (**Diff. Max. Qty and Rpts**)
 5196L *Pharmacy Choice Paracetamol, YM* — **Paracetamol**, Tablet 500 mg (**Dental**)
 5224Y *Pharmacy Choice Paracetamol, YM* — **Paracetamol**, Tablet 500 mg (**Dental**) (**Diff. Max. Qty**)
 1968N *Quinapril Sandoz, SZ* — **Quinapril hydrochloride**, Tablet 5 mg (base)
 9120B *Pharmacor Ramipril 1.25, CR* — **Ramipril**, Capsule 1.25 mg
 9121C *Pharmacor Ramipril 2.5, CR* — **Ramipril**, Capsule 2.5 mg
 9122D *Pharmacor Ramipril 5, CR* — **Ramipril**, Capsule 5 mg
 8470T *Pharmacor Ramipril 10, CR* — **Ramipril**, Capsule 10 mg
 1316G *Ramipril Sandoz, SZ* — **Ramipril**, Tablet 10 mg
 2236Q *Sertratrust 50, MI* — **Sertraline hydrochloride**, Tablet 50 mg (base)
 2237R *Sertratrust 100, MI* — **Sertraline hydrochloride**, Tablet 100 mg (base)
 2011W *Simvatrust 10, MI* — **Simvastatin**, Tablet 10 mg
 2012X *Simvatrust 20, MI* — **Simvastatin**, Tablet 20 mg
 8173E *Simvatrust 40, MI* — **Simvastatin**, Tablet 40 mg
 8313M *Simvatrust 80, MI* — **Simvastatin**, Tablet 80 mg
 2791X *APO-Trandopril, TX; Trandopril-DP, GM* — **Trandolapril**, Capsule 500 micrograms
 2792Y *APO-Trandopril, TX; Trandopril-DP, GM* — **Trandolapril**, Capsule 1 mg
 2793B *APO-Trandopril, TX; Trandopril-DP, GM* — **Trandolapril**, Capsule 2 mg
 8758Y *APO-Trandopril, TX; Trandopril-DP, GM* — **Trandolapril**, Capsule 4 mg

Deletions

Deletions - Item

- 1351D **Dipivefrine hydrochloride**, Eye drops 1 mg per mL (0.1%), 10 mL (*Propine*)

Deletions - Brands

3161J	<i>Ranzepam, RA</i> — Diazepam , Tablet 2 mg
5355W	<i>Ranzepam, RA</i> — Diazepam , Tablet 2 mg (Palliative Care)
5357Y	<i>Ranzepam, RA</i> — Diazepam , Tablet 2 mg (Palliative Care) (Diff. Max. Rpts)
5071X	<i>Ranzepam, RA</i> — Diazepam , Tablet 2 mg (Dental)
3196F	<i>Chem mart Oral Rehydration Salts, CH; Terry White Chemists Oral Rehydration Salts, TW</i> — Electrolyte replacement (oral) , Sachets containing powder for oral solution 4.9 g, 10
8582Q	<i>Tramahexal, HX</i> — Tramadol hydrochloride , Injection 100 mg in 2 mL
5231H	<i>Tramahexal, HX</i> — Tramadol hydrochloride , Injection 100 mg in 2 mL (Dental)
3484J	<i>Tramahexal, HX</i> — Tramadol hydrochloride , Injection 100 mg in 2 mL (Doctor's Bag)

Deletions - Bioequivalence indicator

The bioequivalence indicator ^(d) has been removed from the following **brands**:

8582Q	<i>Tramal 100, CS</i> — Tramadol hydrochloride , Injection 100 mg in 2 mL
5231H	<i>Tramal 100, CS</i> — Tramadol hydrochloride , Injection 100 mg in 2 mL (Dental)
3484J	<i>Tramal 100, CS</i> — Tramadol hydrochloride , Injection 100 mg in 2 mL (Doctor's Bag)

ALTERATIONS*Alterations - Restrictions*

(see under 'RESTRICTIONS' below for full details)

9157Y	Cinacalcet hydrochloride , Tablet 30 mg (base) (<i>Sensipar</i>)
9158B	Cinacalcet hydrochloride , Tablet 60 mg (base) (<i>Sensipar</i>)
9159C	Cinacalcet hydrochloride , Tablet 90 mg (base) (<i>Sensipar</i>)
2142R	Sevelamer hydrochloride , Tablet 800 mg (<i>Renagel</i>)

SECTION 100 - HIGHLY SPECIALISED DRUGS PROGRAM**ALTERATIONS***Alterations - Restrictions*

(see under 'RESTRICTIONS' below for full details)

9620H	Sevelamer hydrochloride , Tablet 800 mg (<i>Renagel</i>)
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Alterations - Notes

(see under 'NOTES' below for full details)

6352H	Cyclosporin , Capsule 25 mg
6353J	Cyclosporin , Capsule 50 mg
6354K	Cyclosporin , Capsule 100 mg
6113R	Desferrioxamine mesylate , Powder for injection 500 mg
6270B	Desferrioxamine mesylate , Powder for injection 2 g

SECTION 100 - IVF GIFT PROGRAM

ADDITIONS

Additions - Item

(see under 'RESTRICTIONS' below for full details)

9631X **Choriogonadotropin alfa**, Solution for injection 250 micrograms in 0.5 mL pre-filled syringe (*Ovidrel*)

DELETIONS

Deletions - Item

9606N **Choriogonadotropin alfa**, Powder for injection 250 micrograms with solvent (*Ovidrel*)

RESTRICTIONS

The text of restrictions mentioned above:

9631X **Choriogonadotropin alfa**, Solution for injection 250 micrograms in 0.5 mL pre-filled syringe (*Ovidrel*)

NOTE:

This price is based on special supply arrangements—see Pharmaceutical Benefits Pricing Authority relativity sheet for full details. Relativity sheets are available on the Department of Health and Ageing's internet site (visit www.health.gov.au and search for 'relativity sheets')

Criteria for availability

Patients who are receiving medical treatment as described in items 13200 or 13203 of the Medicare Benefits Schedule

NOTE:

Arrangements to prescribe this item should be made by medical practitioners with Medicare Australia, contact telephone number 1800 700 270

9157Y **Cinacalcet hydrochloride**, Tablet 30 mg (base) (*Sensipar*)

9158B **Cinacalcet hydrochloride**, Tablet 60 mg (base) (*Sensipar*)

9159C **Cinacalcet hydrochloride**, Tablet 90 mg (base) (*Sensipar*)

Authority required

Maintenance therapy, following initiation and stabilisation of treatment with cinacalcet, of a patient with chronic kidney disease on dialysis who has after 6 months treatment a decrease of at least 30% in iPTH concentrations

Authority required

Maintenance therapy, following initiation and stabilisation of treatment with cinacalcet, of a patient with chronic kidney disease on dialysis who has after 6 months treatment

iPTH greater than 15 pmol per L and an (adjusted) serum calcium concentration of less than 2.6 mmol per L

9192T **Clarithromycin**, Powder for oral liquid 250 mg per 5 mL, 50 mL (*Klacid*)

Restricted benefit

Bordetella pertussis

Restricted benefit

Atypical mycobacterial infections

2142R **Sevelamer hydrochloride**, Tablet 800 mg (*Renagel*)

Authority required

Maintenance therapy, following initiation and stabilisation of treatment with sevelamer hydrochloride, of hyperphosphataemia in a patient with chronic kidney disease on dialysis whose serum phosphate is not controlled on other products and where

serum phosphate is greater than 1.6 mmol per L

at the commencement of therapy

Authority required

Maintenance therapy, following initiation and stabilisation of treatment with sevelamer hydrochloride, of hyperphosphataemia in a patient with chronic kidney disease on dialysis whose serum phosphate is not controlled on other products and where

the serum calcium times phosphate product is greater than 4.0
at the commencement of therapy

9620H **Sevelamer hydrochloride**, Tablet 800 mg (*Renagel*)

Private hospital authority required

Management of hyperphosphataemia in a patient with chronic kidney disease on dialysis whose serum phosphate is not controlled on other products and where serum phosphate is greater than 1.6 mmol per L
at the commencement of therapy

Management includes initiation, stabilisation and review of therapy as required

Private hospital authority required

Management of hyperphosphataemia in a patient with chronic kidney disease on dialysis whose serum phosphate is not controlled on other products and where the serum calcium times phosphate product is greater than 4.0
at the commencement of therapy

Management includes initiation, stabilisation and review of therapy as required

NOTES

The text of notes mentioned above:

- 6352H **Cyclosporin**, Capsule 25 mg
A brand premium of \$0.97 applies to Neoral 25 brand. Both brands may not be available in all hospitals.
- 6353J **Cyclosporin**, Capsule 50 mg
A brand premium of \$1.05 applies to Neoral 50 brand. Both brands may not be available in all hospitals.
- 6354K **Cyclosporin**, Capsule 100 mg
A brand premium of \$1.06 applies to Neoral 100 brand. Both brands may not be available in all hospitals.
- 6113R **Desferrioxamine mesylate**, Powder for injection 500 mg
A brand premium of \$8.03 applies to Desferal 500 mg brand. Both brands may not be available in all hospitals.
- 6270B **Desferrioxamine mesylate**, Powder for injection 2 g
A brand premium of \$0.39 applies to Desferal 2 g brand. Both brands may not be available in all hospitals.

REPATRIATION PHARMACEUTICAL BENEFITS

This Schedule is effective from 1 September 2008 and all previous issues are cancelled.

New Schedules take effect on the first day of each month.

SUMMARY OF CHANGES

ADDITIONS

Additions - Bioequivalence Indicator

The bioequivalence indicator ⁽³⁾ has been added to the following **brand**:

4313B *Lorano, HX; Allereze, AF; Claratyne, SH* — **Loratadine**, Tablet 10 mg