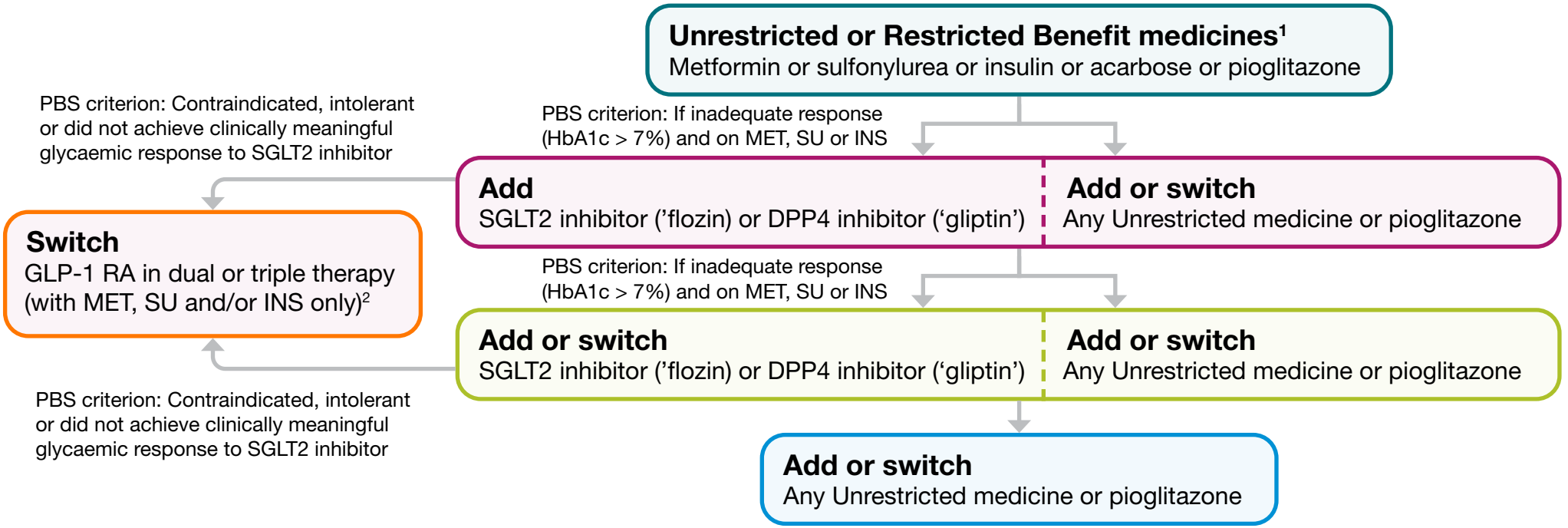
Australian Government
Department of Health and Aged Care

PBS-subsidised pharmacotherapy for T2DM

This algorithm provides an overview of the Pharmaceutical Benefits Scheme (PBS) restrictions for medicines for the treatment of type 2 diabetes mellitus (T2DM) at 1 June 2024 and is not intended to replace clinical guidance. For further details and the latest restriction requirements, please refer to the **PBS restrictions** for each medicine.



Abbreviations: DPP4—dipeptidyl peptidase 4; GLP-1 RA—glucagon-like peptide-1 receptor agonist; INS–insulin; MET–metformin; SGLT2— sodium-glucose cotransporter 2; SU–sulfonylurea

60-day dispensing: All T2DM medicines are available for 60-day prescriptions, except GLP-1 RAs and insulin.

Fixed dose combinations (FDCs): FDCs of metformin + DPP4 inhibitors, metformin + SGLT2 inhibitors, and SGLT2 inhibitors + DPP4 inhibitors, are available on the PBS.

1. Patient must be on metformin, sulfonylurea or insulin therapy to access PBS-subsidised therapy with a DPP4 inhibitor, SGLT2 inhibitor or GLP-1 RA. Metformin, sulfonylureas, insulins (except insulin detemir) and acarbose have unrestricted listings on the PBS. Pioglitazone is a Restricted Benefit medicine for the treatment of T2DM.
2. GLP-1 RAs are not PBS-subsidised for use with DPP4 inhibitors. Use of PBS-subsidised GLP-1 RAs in combination with an SGLT2 inhibitor is permitted when the SGLT2 inhibitor is prescribed for an indication other than T2DM (e.g. chronic kidney disease or chronic heart failure), the patient has T2DM, and the patient did not achieve a clinically meaningful glycaemic response to the SGLT2 inhibitor.