



Australian Government
Department of Health



Schedule of Pharmaceutical Benefits

Summary of Changes

Effective 1 September 2017



Fees, Patient Contributions and Safety Net Thresholds

The following fees, patient contributions and safety net thresholds apply as at 1 September 2017 and are included, where applicable, in prices published in the Schedule —

Dispensing Fees:	Ready-prepared	\$7.15
	Dangerous drug fee	\$3.01
	Extemporaneously-prepared	\$9.19
	Allowable additional patient charge*	\$4.38
Additional Fees (for safety net prices):	Ready-prepared	\$1.21
	Extemporaneously-prepared	\$1.57
Patient Co-payments:	General	\$38.80
	Concessional	\$6.30
Safety Net Thresholds:	General	\$1494.90
	Concessional	\$378.00
Safety Net Card Issue Fee:		\$9.73

* 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

These changes to the Schedule of Pharmaceutical Benefits are effective from 1 September 2017. The Schedule is updated on the first day of each month and is available on the internet at www.pbs.gov.au.

Prescriber Bag

Deletions

Deletion – Brand

3497C *Ventolin Nebules, GK – SALBUTAMOL*, salbutamol 5 mg/2.5 mL inhalation solution, 30 x 2.5 mL ampoules

Advance Notices

1 October 2017

Deletion – Brand

3496B *Ventolin Nebules, GK – SALBUTAMOL*, salbutamol 2.5 mg/2.5 mL inhalation solution, 30 x 2.5 mL ampoules

General Pharmaceutical Benefits

Additions

Addition – Item

11161K **AMINO ACID FORMULA WITH FAT, CARBOHYDRATE, VITAMINS, MINERALS, TRACE ELEMENTS AND MEDIUM CHAIN TRIGLYCERIDES**, amino acid formula with fat, carbohydrate, vitamins, minerals, trace elements and medium chain triglycerides powder for oral liquid, 400 g (*Neocate Junior*)

11183N **AMINO ACID FORMULA WITH FAT, CARBOHYDRATE, VITAMINS, MINERALS, TRACE ELEMENTS AND MEDIUM CHAIN TRIGLYCERIDES**, amino acid formula with fat, carbohydrate, vitamins, minerals, trace elements and medium chain triglycerides powder for oral liquid, 400 g (*Neocate Junior*)

11169W **CEFTRIAXONE**, ceftriaxone 2 g injection, 5 vials (*Ceftriaxone Alphapharm*)

11170X **IDEALISIB**, idelalisib 100 mg tablet, 60 (*Zydelig*)

11171Y **IDEALISIB**, idelalisib 100 mg tablet, 60 (*Zydelig*)

11162L **IDEALISIB**, idelalisib 150 mg tablet, 60 (*Zydelig*)

11165P **IDEALISIB**, idelalisib 150 mg tablet, 60 (*Zydelig*)

11180K **URSODEOXYCHOLIC ACID**, ursodeoxycholic acid 500 mg tablet, 100 (*Ursofalk*)

11178H **USTEKINUMAB**, ustekinumab 45 mg/0.5 mL injection, 0.5 mL vial (*Stelara*)

Addition – Brand

10791Y *Momasone, QA – MOMETASONE*, mometasone furoate 0.1% ointment, 15 g

10793C *Momasone, QA – MOMETASONE*, mometasone furoate 0.1% ointment, 15 g

10812C *Momasone, QA – MOMETASONE*, mometasone furoate 0.1% ointment, 15 g

10814E *Momasone, QA – MOMETASONE*, mometasone furoate 0.1% ointment, 15 g

10828X *Momasone, QA – MOMETASONE*, mometasone furoate 0.1% ointment, 15 g

1915T *Momasone, QA – MOMETASONE*, mometasone furoate 0.1% ointment, 15 g

Addition – Equivalence Indicator

1581F *Pregnyl, MK – HUMAN CHORIONIC GONADOTROPHIN*, human chorionic gonadotrophin 1500 units injection [3 ampoules] (&) inert substance diluent [3 x 1 mL ampoules], 1 pack

11148R *Pregnyl, MK – HUMAN CHORIONIC GONADOTROPHIN*, human chorionic gonadotrophin 1500 units injection [3 vials] (&) inert substance diluent [3 x 1 mL vials], 1 pack

Deletions

Deletion – Item

8422G **HYDROMORPHONE**, hydromorphone hydrochloride 50 mg/5 mL injection, 5 x 5 mL ampoules (*Dilaudid-HP*)

Deletion – Brand

9012H *Alendronate D3 70 mg/70 microgram, EA – ALENDRONATE + COLECALCIFEROL*, alendronate 70 mg + colecalciferol 70 microgram tablet, 4

9183H *Alendronate D3 70 mg/140 microgram, EA – ALENDRONATE + COLECALCIFEROL*, alendronate 70 mg + colecalciferol 140 microgram tablet, 4

9351E *Alendronate Plus D3 Calcium Actavis, EA – ALENDRONATE + COLECALCIFEROL (&) CALCIUM CARBONATE*, alendronate 70 mg + colecalciferol 140 microgram tablet [4] (&) calcium (as carbonate) 500 mg tablet [48], 1 pack

9351E *Alendronate Plus D3 and Calcium Sandoz, SZ – ALENDRONATE + COLECALCIFEROL (&) CALCIUM CARBONATE*, alendronate 70 mg + colecalciferol 140 microgram tablet [4] (&) calcium (as carbonate) 500 mg tablet [48], 1 pack

1886G *Chem mart Amoxycillin, CH – AMOXYCILLIN*, amoxycillin 125 mg/5 mL powder for oral liquid, 100 mL

1886G *Terry White Chemists Amoxycillin, TW – AMOXYCILLIN*, amoxycillin 125 mg/5 mL powder for oral liquid, 100 mL

3302T *Chem mart Amoxycillin, CH – AMOXYCILLIN*, amoxycillin 125 mg/5 mL powder for oral liquid, 100 mL

3302T *Terry White Chemists Amoxycillin, TW – AMOXYCILLIN*, amoxycillin 125 mg/5 mL powder for oral liquid, 100 mL

1887H *Chem mart Amoxycillin, CH – AMOXYCILLIN*, amoxycillin 250 mg/5 mL powder for oral liquid, 100 mL

1887H *Terry White Chemists Amoxycillin, TW – AMOXYCILLIN*, amoxycillin 250 mg/5 mL powder for oral liquid, 100 mL

3393N *Chem mart Amoxycillin, CH – AMOXYCILLIN*, amoxycillin 250 mg/5 mL powder for oral liquid, 100 mL

3393N *Terry White Chemists Amoxycillin, TW – AMOXYCILLIN*, amoxycillin 250 mg/5 mL powder for oral liquid, 100 mL

8179L *Anastrozole RBX, RA – ANASTROZOLE*, anastrozole 1 mg tablet, 30

1785Y *Ceftriaxone Alphapharm, AF – CEFTRIAXONE*, ceftriaxone 2 g injection, 1 vial

2655R *Chem mart Cephalexin, CH – CEPHALEXIN*, cephalexin 250 mg capsule, 20

2655R *Terry White Chemists Cephalexin, TW – CEPHALEXIN*, cephalexin 250 mg capsule, 20

3058Y *Chem mart Cephalexin, CH – CEPHALEXIN*, cephalexin 250 mg capsule, 20

3058Y *Terry White Chemists Cephalexin, TW – CEPHALEXIN*, cephalexin 250 mg capsule, 20

3317N *Chem mart Cephalexin, CH – CEPHALEXIN*, cephalexin 250 mg capsule, 20

3317N *Terry White Chemists Cephalexin, TW – CEPHALEXIN*, cephalexin 250 mg capsule, 20

10778G *Chem mart Cephalexin, CH – CEPHALEXIN*, cephalexin 500 mg capsule, 20

10778G *Terry White Chemists Cephalexin, TW – CEPHALEXIN*, cephalexin 500 mg capsule, 20

3119E *Chem mart Cephalexin, CH – CEPHALEXIN*, cephalexin 500 mg capsule, 20

3119E *Terry White Chemists Cephalexin, TW – CEPHALEXIN*, cephalexin 500 mg capsule, 20

3318P *Chem mart Cephalexin, CH – CEPHALEXIN*, cephalexin 500 mg capsule, 20

3318P *Terry White Chemists Cephalexin, TW – CEPHALEXIN*, cephalexin 500 mg capsule, 20

8559L *Gabaran, RA – GABAPENTIN*, gabapentin 600 mg tablet, 100

8389M *Gabaran, RA – GABAPENTIN*, gabapentin 800 mg tablet, 100

8654L *Levitaccord, RA – LEVETIRACETAM*, levetiracetam 250 mg tablet, 60

8655M *Levitaccord, RA – LEVETIRACETAM*, levetiracetam 500 mg tablet, 60

1596B *Ondansetron-Claris, AE – ONDANSETRON*, ondansetron 4 mg/2 mL injection, 2 mL ampoule

8226Y *Ondansetron-Claris, AE – ONDANSETRON*, ondansetron 4 mg/2 mL injection, 2 mL ampoule

1597C *Ondansetron-Claris, AE – ONDANSETRON*, ondansetron 8 mg/4 mL injection, 4 mL ampoule

8227B *Ondansetron-Claris, AE – ONDANSETRON*, ondansetron 8 mg/4 mL injection, 4 mL ampoule

8399C *Chem mart Pantoprazole, CH – PANTOPRAZOLE*, pantoprazole 20 mg enteric tablet, 30

8399C	<i>Terry White Chemists Pantoprazole, TW – PANTOPRAZOLE</i> , pantoprazole 20 mg enteric tablet, 30
8007K	<i>Chem mart Pantoprazole, CH – PANTOPRAZOLE</i> , pantoprazole 40 mg enteric tablet, 30
8007K	<i>Terry White Chemists Pantoprazole, TW – PANTOPRAZOLE</i> , pantoprazole 40 mg enteric tablet, 30
8008L	<i>Chem mart Pantoprazole, CH – PANTOPRAZOLE</i> , pantoprazole 40 mg enteric tablet, 30
8008L	<i>Terry White Chemists Pantoprazole, TW – PANTOPRAZOLE</i> , pantoprazole 40 mg enteric tablet, 30
2001H	<i>Ventolin Nebules, GK – SALBUTAMOL</i> , salbutamol 5 mg/2.5 mL inhalation solution, 30 x 2.5 mL ampoules
8622T	<i>Chem mart Telmisartan HCTZ 40/12.5, CH – TELMISARTAN + HYDROCHLOROTHIAZIDE</i> , telmisartan 40 mg + hydrochlorothiazide 12.5 mg tablet, 28
8622T	<i>Terry White Chemists Telmisartan HCTZ 40/12.5, TW – TELMISARTAN + HYDROCHLOROTHIAZIDE</i> , telmisartan 40 mg + hydrochlorothiazide 12.5 mg tablet, 28
8623W	<i>Chem mart Telmisartan HCTZ 80/12.5, CH – TELMISARTAN + HYDROCHLOROTHIAZIDE</i> , telmisartan 80 mg + hydrochlorothiazide 12.5 mg tablet, 28
8623W	<i>Terry White Chemists Telmisartan HCTZ 80/12.5, TW – TELMISARTAN + HYDROCHLOROTHIAZIDE</i> , telmisartan 80 mg + hydrochlorothiazide 12.5 mg tablet, 28
9381R	<i>Chem mart Telmisartan HCTZ 80/25, CH – TELMISARTAN + HYDROCHLOROTHIAZIDE</i> , telmisartan 80 mg + hydrochlorothiazide 25 mg tablet, 28
9381R	<i>Terry White Chemists Telmisartan HCTZ 80/25, TW – TELMISARTAN + HYDROCHLOROTHIAZIDE</i> , telmisartan 80 mg + hydrochlorothiazide 25 mg tablet, 28

Alterations

Alteration – Restriction

The following items have additions, deletions or alterations to restrictions, notes and/or cautions.

1785Y	CEFTRIAXONE , ceftriaxone 2 g injection, 1 vial (<i>Ceftriaxone-AFT</i>)
10909E	CERTOLIZUMAB PEGOL , certolizumab pegol 200 mg/mL injection, 2 x 1 mL syringes (<i>Cimzia</i>)
11076Y	VEMURAFENIB , vemurafenib 240 mg tablet, 56 (<i>Zelboraf</i>)
11081F	VEMURAFENIB , vemurafenib 240 mg tablet, 56 (<i>Zelboraf</i>)

Advance Notices

1 October 2017

Deletion – Brand

1085D	<i>Cefotaxime Sandoz, SZ – CEFOTAXIME</i> , cefotaxime 1 g injection, 1 vial
5048Q	<i>Cefotaxime Sandoz, SZ – CEFOTAXIME</i> , cefotaxime 1 g injection, 1 vial
2593L	<i>Ferrum H, AS – IRON POLYMALTOSE</i> , iron (as polymaltose) 100 mg/2 mL injection, 5 x 2 mL ampoules
2805P	<i>Ferrum H, AS – IRON POLYMALTOSE</i> , iron (as polymaltose) 100 mg/2 mL injection, 5 x 2 mL ampoules
3010K	<i>Norfloxacin Sandoz, SZ – NORFLOXACIN</i> , norfloxacin 400 mg tablet, 14
8664B	<i>Riluzole Winthrop, WA – RILUZOLE</i> , riluzole 50 mg tablet, 56
2000G	<i>Ventolin Nebules, GK – SALBUTAMOL</i> , salbutamol 2.5 mg/2.5 mL inhalation solution, 30 x 2.5 mL ampoules
10062N	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 180 mg capsule, 5
2438H	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 180 mg capsule, 5
8378Y	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 5 mg capsule, 5
8379B	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 20 mg capsule, 5
8380C	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 100 mg capsule, 5
8381D	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 250 mg capsule, 5
8819E	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 5 mg capsule, 5
8820F	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 20 mg capsule, 5
8821G	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 100 mg capsule, 5
9361Q	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 140 mg capsule, 5
9362R	<i>Astromide, FR – TEMOZOLOMIDE</i> , temozolomide 140 mg capsule, 5

1 November 2017

Deletion – Brand

1210Q Ciprofloxacin-BW, GQ – **CIPROFLOXACIN**, ciprofloxacin 750 mg tablet, 14

1 December 2017

Deletion – Brand

8883M Avanza, MK – **MIRTAZAPINE**, mirtazapine 45 mg tablet, 30

Highly Specialised Drugs Program (Private Hospital)

Additions

Addition – Item

11163M **OMALIZUMAB**, omalizumab 150 mg/mL injection, 1 mL syringe (*Xolair*)

11175E **OMALIZUMAB**, omalizumab 150 mg/mL injection, 1 mL syringe (*Xolair*)

11167R **PEGVISOMANT**, pegvisomant 10 mg injection [30 vials] (&) inert substance diluent [30 x 1 mL vials], 1 pack (*Somavert*)

11172B **PEGVISOMANT**, pegvisomant 15 mg injection [30 vials] (&) inert substance diluent [30 x 1 mL vials], 1 pack (*Somavert*)

11166Q **PEGVISOMANT**, pegvisomant 20 mg injection [1 vial] (&) inert substance diluent [1 x 1 mL vial], 1 pack (*Somavert*)

11174D **PEGVISOMANT**, pegvisomant 20 mg injection [30 vials] (&) inert substance diluent [30 x 1 mL vials], 1 pack (*Somavert*)

11164N **USTEKINUMAB**, ustekinumab 130 mg/26 mL injection, 26 mL vial (*Stelara*)

Addition – Brand

6357N Valganciclovir Juno, JU – **VALGANCICLOVIR**, valganciclovir 450 mg tablet, 60

Alterations

Alteration – Restriction

The following items have additions, deletions or alterations to restrictions, notes and/or cautions.

10184B **INFliximAb**, infliximab 100 mg injection, 1 vial (*Inflectra, Remicade, Renflexis*)

6496X **INFliximAb**, infliximab 100 mg injection, 1 vial (*Inflectra, Remicade, Renflexis*)

6332G **LANREOTIDE**, lanreotide 30 mg modified release injection [1 vial] (&) inert substance diluent [2 mL ampoule], 1 pack (*Somatuline LA*)

6423C **LANREOTIDE**, lanreotide 60 mg/0.5 mL injection, 0.5 mL syringe (*Somatuline Autogel*)

6424D **LANREOTIDE**, lanreotide 90 mg/0.5 mL injection, 0.5 mL syringe (*Somatuline Autogel*)

6425E **LANREOTIDE**, lanreotide 120 mg/0.5 mL injection, 0.5 mL syringe (*Somatuline Autogel*)

10549F **OCTREOTIDE**, octreotide 20 mg injection: modified release [1 vial] (&) inert substance diluent [2 mL syringe], 1 pack (*Sandostatin LAR*)

10558Q **OCTREOTIDE**, octreotide 30 mg injection: modified release [1 vial] (&) inert substance diluent [2 mL syringe], 1 pack (*Sandostatin LAR*)

10566D **OCTREOTIDE**, octreotide 10 mg injection: modified release [1 vial] (&) inert substance diluent [2 mL syringe], 1 pack (*Sandostatin LAR*)

6227R **OCTREOTIDE**, octreotide 50 microgram/mL injection, 5 x 1 mL ampoules (*Hospira Pty Limited, Octreotide (SUN), Octreotide MaxRx, Sandostatin 0.05*)

6228T **OCTREOTIDE**, octreotide 100 microgram/mL injection, 5 x 1 mL ampoules (*Hospira Pty Limited, Octreotide (SUN), Octreotide MaxRx, Sandostatin 0.1*)

6229W **OCTREOTIDE**, octreotide 500 microgram/mL injection, 5 x 1 mL ampoules (*Hospira Pty Limited, Octreotide (SUN), Octreotide MaxRx, Sandostatin 0.5*)

10880P **PASIREOTIDE**, pasireotide 20 mg injection: modified release [1 vial] (&) inert substance diluent [2 mL syringe], 1 pack (*Signifor LAR*)

10884W **PASIREOTIDE**, pasireotide 40 mg injection: modified release [1 vial] (&) inert substance diluent [2 mL syringe], 1 pack (*Signifor LAR*)

10887B **PASIREOTIDE**, pasireotide 60 mg injection: modified release [1 vial] (&) inert substance diluent [2 mL syringe], 1 pack (*Signifor LAR*)

Highly Specialised Drugs Program (Community Access)

Additions

Addition – Brand

- 10303G Nevirapine XR APOTEX, TX – **NEVIRAPINE**, nevirapine 400 mg modified release tablet, 30
10306K Valganciclovir Juno, JU – **VALGANCICLOVIR**, valganciclovir 450 mg tablet, 60

Addition – Equivalence Indicator

- 10303G Viramune XR, BY – **NEVIRAPINE**, nevirapine 400 mg modified release tablet, 30

Deletions

Deletion – Brand

- 10348P Lamivudine RBX, RA – **LAMIVUDINE**, lamivudine 150 mg tablet, 60
10311Q Lamivudine RBX, RA – **LAMIVUDINE**, lamivudine 300 mg tablet, 30
10304H Nevirapine RBX, RA – **NEVIRAPINE**, nevirapine 200 mg tablet, 60

IVF Program

Additions

Addition – Equivalence Indicator

- 6178E Pregnyl, MK – **HUMAN CHORIONIC GONADOTROPHIN**, human chorionic gonadotrophin 1500 units injection [3 ampoules] (&) inert substance diluent [3 x 1 mL ampoules], 1 pack
11154C Pregnyl, MK – **HUMAN CHORIONIC GONADOTROPHIN**, human chorionic gonadotrophin 1500 units injection [3 vials] (&) inert substance diluent [3 x 1 mL vials], 1 pack
11156E Pregnyl, MK – **HUMAN CHORIONIC GONADOTROPHIN**, human chorionic gonadotrophin 5000 units injection [1 vial] (&) inert substance diluent [1 mL vial], 1 pack
6181H Pregnyl, MK – **HUMAN CHORIONIC GONADOTROPHIN**, human chorionic gonadotrophin 5000 units injection [1 ampoule] (&) inert substance diluent [1 mL ampoule], 1 pack

Repatriation Pharmaceutical Benefits

Deletions

Deletion – Item

- 4453J ALUMINIUM HYDROXIDE WITH MAGNESIUM HYDROXIDE AND SIMETHICONE, ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE and SIMETHICONE Tablet 400 mg-400 mg-40 mg, 100 (*Mylanta Double Strength*)
4106D CICLOPIROX, ciclopirox olamine 1.5% shampoo, 60 mL (*Stieprox Liquid*)

Alterations

Alteration – Manufacturer Code

		<i>From</i>	<i>To</i>
4463X	Lamisil DermGel – TERBINAFINE , terbinafine 1% gel, 15 g	NC	GK

Advance Notices

1 October 2017

Deletion – Brand

- 4170L Prodeinextra, SW – **PARACETAMOL + CODEINE**, paracetamol 500 mg + codeine phosphate 15 mg tablet, 20

DHS Complex Authority Administration s100 items – current at September 2017

The list includes:

- Section 100 HSD items identified in the s100 HSD legal instrument as 'Complex Authority Required (CAR)'. Authority approval requests for these items are made to the DHS Complex Drugs team, currently located in Tasmania.
- Section 100 Efficient Funding of Chemotherapy (EFC) items where the processing of the application for an authority to prescribe the item has a high degree of complexity. These applications are also made to the DHS Complex Drugs team and are handled in that same way as the s100 HSD CAR items.

HSD Complex Authority Required (CAR) Items

s94 Public Hospital Item Code	Private Hospital and s90 Item Code	Generic Name / Brand Name®
05605B	09621J	ABATACEPT / Orenzia®
09661L	09678J	ADALIMUMAB / Humira®
09662M	09679K	ADALIMUMAB / Humira®
09663N	09680L	ADALIMUMAB / Humira®
05607D	09648T	AMBRISENTAN / Voliris®
05608E	09649W	AMBRISENTAN / Voliris®
09597D	06100C	AZACITIDINE / Vidaza®, Azadine®, Celazadine®, Azacitidine Accord®
09598E	06138C	AZACITIDINE / Vidaza®, Azadine®, Celazadine®, Azacitidine Accord®
05618Q	06429J	BOSENTAN / Tracleer®, Bosentan Mylan®, APO-Bosentan®, Bosentan RBX®, Bosleer®, Bosentan-DRLA®, Bosentan Sandoz®, Bosentan Apotex®
05619R	06430K	BOSENTAN / Tracleer®, Bosentan Mylan®, Bosentan GH®, APO-Bosentan®, Bosentan RBX®, Bosleer®, Bosentan-DRLA®, Bosentan Sandoz®, Bosentan Apotex®
10183Y	10182X	ECULIZUMAB / Soliris®
10190H	10192K	ECULIZUMAB / Soliris®
10191J	10194M	ECULIZUMAB / Soliris®
10525Y	10521R	ECULIZUMAB / Soliris®
05826P	05828R	ELTROMBOPAG / Revolade®
05825N	05827Q	ELTROMBOPAG / Revolade®
11065J	11082G	EPOPROSTENOL / Flolan®
11090Q	11069N	EPOPROSTENOL / Flolan®
10130E	10111E	EPOPROSTENOL / Veletri®
10117L	10129D	EPOPROSTENOL / Veletri®
05733R	09615C	ETANERCEPT / Enbrel®
05734T	06367D	ETANERCEPT / Enbrel®
05735W	09641K	ETANERCEPT / Enbrel®
05751Q	06456T	ILOPROST / Ventavis®
09654D	09674E	INFliximab / Remicade®, Inflectra®, Renflexis®
05753T	06448J	INFliximab / Remicade®, Inflectra®, Renflexis®
05754W	09613Y	INFliximab / Remicade®, Inflectra®, Renflexis®
05755X	09612X	INFliximab / Remicade®, Inflectra®, Renflexis®
05756Y	06496X	INFliximab / Remicade®, Inflectra®, Renflexis®
05757B	06397Q	INFliximab / Remicade®, Inflectra®, Renflexis®
05758C	09617E	INFliximab / Remicade®, Inflectra®, Renflexis®
10196P	10184B	INFliximab / Remicade®, Inflectra®, Renflexis®
10170G	10175M	IVACAFTOR / Kalydeco®
11105L	11097C	IVACAFTOR / Kalydeco®
11098D	11109Q	IVACAFTOR / Kalydeco®
02799H	02798G	LENALIDOMIDE / Revlimid®
02802L	02796E	LENALIDOMIDE / Revlimid®
05783J	09642L	LENALIDOMIDE / Revlimid®
05784K	09643M	LENALIDOMIDE / Revlimid®
05785L	09644N	LENALIDOMIDE / Revlimid®
05786M	09645P	LENALIDOMIDE / Revlimid®
11029L	11036W	LENALIDOMIDE / Revlimid®
11064H	11063G	LENALIDOMIDE / Revlimid®
11062F	11042E	LENALIDOMIDE / Revlimid®
11041D	11055W	LENALIDOMIDE / Revlimid®
10136L	10134J	MACITENTAN / Opsumit®
10980X	11014Q	MEPOLIZUMAB / Nucala®

s94 Public Hospital Item Code	Private Hospital and s90 Item Code	Generic Name / Brand Name®
10996R	11003D	MEPOLIZUMAB / Nucala®
10118M	10110D	OMALIZUMAB / Xolair®
10109C	10122R	OMALIZUMAB / Xolair®
10967F	10956P	OMALIZUMAB / Xolair®
10973M	10968G	OMALIZUMAB / Xolair®
11176F	11175E	OMALIZUMAB / Xolair®
11168T	11163M	OMALIZUMAB / Xolair®
10886Y	10880P	PASIREOTIDE / Signifor LAR®
10883T	10884W	PASIREOTIDE / Signifor LAR®
10882R	10887B	PASIREOTIDE / Signifor LAR®
11179J	11167R	PEGVISOMANT / Somavert®
11173C	11172B	PEGVISOMANT / Somavert®
11177G	11166Q	PEGVISOMANT / Somavert®
11181L	11174D	PEGVISOMANT / Somavert®
10406Q	10417G	POMALIDOMIDE / Pomalyst®
10387Q	10386P	POMALIDOMIDE / Pomalyst®
10976Q	10990K	RIOCIGUAT / Adempas®
10977R	10975P	RIOCIGUAT / Adempas®
10984D	11012N	RIOCIGUAT / Adempas®
10989J	10974N	RIOCIGUAT / Adempas®
10995Q	11008J	RIOCIGUAT / Adempas®
11001B	11009K	RIOCIGUAT / Adempas®
11002C	10985E	RIOCIGUAT / Adempas®
11013P	11017W	RIOCIGUAT / Adempas®
11019Y	11018X	RIOCIGUAT / Adempas®
11020B	11010L	RIOCIGUAT / Adempas®
11040C	11031N	RIOCIGUAT / Adempas®
11059C	11058B	RIOCIGUAT / Adempas®
11053R	11060D	RIOCIGUAT / Adempas®
11054T	11028K	RIOCIGUAT / Adempas®
11047K	11046J	RIOCIGUAT / Adempas®
11048L	11061E	RIOCIGUAT / Adempas®
11038Y	11045H	RIOCIGUAT / Adempas®
11039B	11030M	RIOCIGUAT / Adempas®
11024F	11035T	RIOCIGUAT / Adempas®
11057Y	11052Q	RIOCIGUAT / Adempas®
09544H	09611W	RITUXIMAB / Mabthera®
10591K	10583B	RITUXIMAB / Mabthera®
10593M	10576P	RITUXIMAB / Mabthera®
09696H	09697J	ROMIPLOSTIM / Nplate®
09698K	09699L	ROMIPLOSTIM / Nplate®
09547L	09605M	SILDENAFIL / Revatio®, APO-Sildenafil PHT®, SILDINAFIL-DRX®, Sildenafil AN PHT 20®, Sildenafil Sandoz PHT 20®
01308W	01304P	TADALAFIL / Adcirca®
01476Q	01419Q	TOCILIZUMAB / Actemra®
01481Y	01423X	TOCILIZUMAB / Actemra®
01482B	01464C	TOCILIZUMAB / Actemra®
09657G	09671B	TOCILIZUMAB / Actemra®
09658H	09672C	TOCILIZUMAB / Actemra®
09659J	09673D	TOCILIZUMAB / Actemra®
10056G	10071C	TOCILIZUMAB / Actemra®
10058J	10079L	TOCILIZUMAB / Actemra®
10064Q	10060L	TOCILIZUMAB / Actemra®
10072D	10078K	TOCILIZUMAB / Actemra®
10077J	10068X	TOCILIZUMAB / Actemra®
10081N	10073E	TOCILIZUMAB / Actemra®
11182M	11164N	USTEKINUMAB / Stelara®
10384M	10398G	VEDOLIZUMAB / Entyvio®
10390W	10415E	VEDOLIZUMAB / Entyvio®

Efficient Funding of Chemotherapy (EFC) complex authority items

s94 Public Hospital Item Code	Private Hospital and s90 Item Code	Generic Name / Brand Name®
11117D	11115B	BLINATUMOMAB / Blincyto®
11118E	11116C	BLINATUMOMAB / Blincyto®
11120G	11119F	BLINATUMOMAB / Blincyto®
10166C	10172J	BRENTUXIMAB VEDOTIN / Adcetris®
10171H	10180T	BRENTUXIMAB VEDOTIN / Adcetris®
11073T	11089P	BRENTUXIMAB VEDOTIN / Adcetris®
11079D	11080E	BRENTUXIMAB VEDOTIN / Adcetris®
11087M	11086L	BRENTUXIMAB VEDOTIN / Adcetris®
11096B	11067L	BRENTUXIMAB VEDOTIN / Adcetris®
04706Q	07268M	BORTEZOMIB /Velcade®
04712B	07269N	BORTEZOMIB /Velcade®
04713C	07271Q	BORTEZOMIB /Velcade®
04725Q	07272R	BORTEZOMIB /Velcade®
04403R	07238Y	BORTEZOMIB /Velcade®
04429D	07274W	BORTEZOMIB /Velcade®
04732C	07275X	BORTEZOMIB /Velcade®
10407R	10418H	OBINUTUZUMAB / Gazyva®
10267J	10334X	PERTUZUMAB / Perjeta®
10309N	10268K	PERTUZUMAB / Perjeta®
10333W	10308M	PERTUZUMAB / Perjeta®
10595P	10575N	TRASTUZUMAB / Herceptin®
10581X	10589H	TRASTUZUMAB / Herceptin®
10588G	10597R	TRASTUZUMAB / Herceptin®
10391X	10381J	TRASTUZUMAB / Herceptin®
10401K	10383L	TRASTUZUMAB / Herceptin®
10423N	10402L	TRASTUZUMAB / Herceptin®
04632T	07264H	TRASTUZUMAB / Herceptin®
04639E	07265J	TRASTUZUMAB / Herceptin®
04650R	07266K	TRASTUZUMAB / Herceptin®
04703M	07267L	TRASTUZUMAB / Herceptin®
10282E	10281D	TRASTUZUMAB EMTANSINE / Kadcyla®