

18 October 2011

November 2011 Pharmaceutical Schedule Dispatch

This document is provided to pharmacists as an early notification of the changes to be announced in the **November 2011** Update to the Pharmaceutical Schedule. Please notify PHARMAC (0800 66 00 50) to change or remove your contact details.

New listings

- Clarithromycin (Apo-Clarithromycin) tab 500 mg – Subsidy by endorsement – Maximum of 14 tab per prescription (p'code 2385511)
- Sodium nitroprusside (Ketostix) test strip, 50 strip OP – Maximum of 50 strip per prescription (p'code 2185121)
- Fluconazole (Ozole) cap 150 mg – Subsidy by endorsement – Maximum of 1 cap per prescription (p'code 2388049)
- Fluconazole (Ozole) cap 200 mg – Retail pharmacy – Specialist (p'code 2388030)
- Paracetamol (Parafast) tab 500 mg – Up to 30 tab available on a PSO (p'code 2390647)
- Megestrol acetate (Megace) tab 160 mg – Retail pharmacy – Specialist (p'code 2282135)
- Timolol maleate (Arrow-Timolol) eye drops 0.5%, 5 ml OP (p'code 2390655)

Changes to restrictions

- Clarithromycin (Apo-Clarithromycin) tab 500 mg – removal of endorsement for dispensing 250 mg tablets – Maximum of 14 tab per prescription
- Sodium nitroprusside (Ketostix) test strip – amended maximum strip per prescription to 50 test strips
- Poloxamer (Coloxyl) oral drops 10% - addition of rule not funded for use in the ear
- Potassium iodate (NeuroKare) tab 256 µg (150 µg elemental iodine) – amended presentation description
- Phytomenadione (Konakion MM) inj 2 mg per 0.2 ml and 10 mg per ml, 1 ml – removal of restriction may be administered orally. Note oral administration remains subsidised under new General Rule changes
- Sodium chloride inf and inj – addition of not funded for use as a nasal drop. Only funded for nebuliser use when in conjunction with an antibiotic intended for nebuliser use
- Pravastatin (Pravachol and Cholvastin) tab 10 mg, 20 mg and 40 mg – removal of Special Authority
- Dexamethasone sodium phosphate (Hospira) inj 4 mg per ml, 1 ml and 2 ml – addition of rule will not be funded for oral use
- Efavirnez (Stocrin) tab 50 mg – addition of Section 29
- Midazolam (Hypnovel and Pfizer) inj 1 mg per ml 5 ml and 5 mg per ml, 3 ml – removal of restriction midazolam will be funded if prescribed for intranasal administration. Note intranasal administration remains subsidised under new General Rule changes
- Eye preparations therapeutic subgroup – addition of eye preparations are only funded for use in the eye. The exception is pilocarpine eye drops 1%, 2% and 4% which is subsidised for oral use pursuant to the Standard Formulae

Decreased subsidy

Chemical	Presentation	Fully subsidised brands	Partially subsidised brands
Bicalutamide	Tab 50 mg	Bicalaccord* Bicalox	
Finasteride	Tab 5 mg	Fintral Rex Medical*	
Pravastatin	Tab 20 mg Tab 40 mg	Cholvastin* Cholvastin*	Pravachol Pravachol
Terbinafine	Tab 250 mg	Dr Reddy's Terbinafine*	Apo-Terbinafine

* Note, there is no subsidy change for these brands.

Reducing administrative burden – changes to General Rules

Some minor amendments are being made to the Pharmaceutical Schedule General Rules to help reduce the administrative burden for both pharmacists and prescribers. The changes will come into effect from 1 November 2011.

Pharmacists will be able to annotate a prescription where they have evidence that a patient is eligible for subsidy via Specialist recommendation, without requiring a counter signature or endorsement from the prescriber. Where the pharmacy has an electronic record of an endorsement from a previous prescription written by the same prescriber, i.e. Specialist recommendation, then the pharmacy may annotate the prescription accordingly. Where an Specialist recommendation has not been completed by the prescriber and the pharmacy has no record of a previous Specialist recommendation, pharmacists may obtain the name of the recommending Specialist verbally and annotate and initial the script with the requirements for subsidy i.e. Specialist name and date of recommendation along with a note that the prescriber has been contacted.

Pharmacists will be able to amend the presentation of the pharmaceutical dispensed, without requiring a signature from the prescriber, even where it is an increased cost to DHBs. This can only occur when it is not practicable to dispense the presentation prescribed. Any annotation would not be able to override any other Schedule restriction. This rule change is intended to allow pharmacists to provide a funded product when an out of stock occurs for a particular presentation of the product without requiring the prescriber's signature or notification from PHARMAC. Pharmacists will be required to annotate the prescription with the reason for the amendment for audit purposes. The intent of this change is to reduce the administrative burden for pharmacists and prescribers and its effects on the market are to be monitored.

Part II 2.2 of the General Rules will be removed. This will result in certain pharmaceuticals having restrictions added on what uses they will not be subsidised for. These new subsidy restrictions follow the intent of the current rules that are applied under Part II of the General Rules. Please refer to pages 23-24 of the November 2011 Pharmaceutical Schedule Update for further information.

NB. For further details and magnitude of the above subsidy changes, please consult the online version of the Update to the Pharmaceutical Schedule at: www.pharmac.govt.nz/healthpros/Schedule.