3 August 2018

Dear Supplier

INVITATION TO TENDER – SUPPLY OF PHARMACEUTICALS TO DHB HOSPITALS AND/OR TO COMMUNITY PHARMACIES

PHARMAC invites tenders for the supply of certain pharmaceuticals to DHB hospitals and/or to community pharmacies in New Zealand.

This invitation to tender incorporates the following schedules:

- (a) Schedule 1 sets out the definitions used in this invitation;
- (b) Schedule 2 specifies the pharmaceuticals for which you may submit a Tender Bid in relation to community supply and/or hospital supply;
- (c) Schedule 3 describes the process PHARMAC intends to follow in relation to this tender, and provides instructions on how to submit a Tender Bid in relation to community supply and/or hospital supply;
- (d) Schedule 4 sets out terms that will apply if your Tender Bid in relation to community and/or hospital supply is awarded Sole Supply Status and/or Hospital Supply Status;
- (e) Schedule 5 sets out the additional terms that will apply if your Tender Bid in relation to community supply is awarded Sole Supply Status;
- (f) Schedule 6 sets out the additional terms that will apply if your Tender Bid in relation to hospital supply is awarded Hospital Supply Status; and
- (g) Schedule 7 sets out the additional special terms that will apply if your Tender Bid in relation to a particular pharmaceutical is awarded Sole Supply Status and/or Hospital Supply Status.

This invitation to tender also incorporates the information on the Electronic Portal referred to in this invitation.

If you wish to submit a Tender Bid in relation to community supply and/or hospital supply, you must submit it via the Electronic Portal to PHARMAC no later than **5pm** (New Zealand time) on **Friday 14 December 2018**.

If you have any inquiries about this invitation you should contact the **Tender Analysts** at tender@pharmac.govt.nz (Heather Milne on (04) 830 2658).

We look forward to receiving your tender.

Yours sincerely,

Lisa Williams Director of Operations

Contents

| Sch | edule 1: Definitions and interpretation4 |
|-----|---|
| 1. | Definitions4 |
| 2. | Interpretation11 |
| Sch | edule 2: Products to be tendered 12 |
| 1. | Information about Tender Items12 |
| 2. | List of Products14 |
| Sch | edule 3: Tender Process |
| 1. | General |
| 2. | Information about submitting a Tender Bid43 |
| 3. | What to include in your Offer Letter and Tender Submission Form44 |
| 4. | How to submit a Tender Bid47 |
| 5. | Evaluation47 |
| 6. | Conformity |
| 7. | Decision |
| 8. | Back-up supply |
| 9. | Dealing with information |
| 10. | Miscellaneous |
| Sch | edule 4: Contract terms for both Sole Supply Status and Hospital Supply Status 53 |
| 1. | General53 |
| 2. | Crown Direction |
| 3. | Audit |
| 4. | Miscellaneous |
| Sch | edule 5: Additional contract terms for Sole Supply Status |
| 1. | Effect of Sole Supply Status |
| 2. | Consents |
| 3. | Price |
| 4. | Shelf-life of Pharmaceutical64 |
| 5. | Out-of-stock arrangements64 |
| 6. | Termination and restrictions |
| 7. | Guarantee |

| Sch | edule 6: Additional contract terms for Hospital Supply Status | 68 |
|-----|---|----|
| 1. | Effect of Hospital Supply Status | 68 |
| 2. | Consents | 75 |
| 3. | Price | 76 |
| 4. | Invoicing and Payment | 77 |
| 5. | Emergency and disaster supply | 79 |
| 6. | Defective and short-dated Pharmaceuticals | 79 |
| 7. | Out-of-stock arrangements | 80 |
| 8. | Termination and restrictions | 83 |
| 9. | Guarantee | 83 |
| 10. | Access by PHARMAC to price and volume data | 83 |
| 11. | PCTs | 84 |
| Sch | edule 7: Additional Special Terms | 86 |
| 1. | Intra-Uterine Copper Device | 86 |

Schedule 1: Definitions and interpretation

1. Definitions

In this Invitation:

Additional Stock Pharmaceutical (or ASP) means a Pharmaceutical, marked with a "@", for which the supplier of the successful Tender Bid would be required:

- (a) to hold additional stock; and
- (b) to report to PHARMAC on the level of that additional stock each Quarter;

Aggregated Tender Bid means a Tender Bid for more than one Tender Item, which PHARMAC is to consider in aggregate, and can include a Tender Bid for more than one Tender Item of the same Chemical Entity but not aggregation within a single Tender Item;

Agreement means:

- (a) Schedule Four; and
- (b) in relation to a Pharmaceutical with Sole Subsidised Supply Status, Schedule Five; or
- (c) in relation to a Pharmaceutical with Hospital Supply Status, Schedule Six,

and includes, to the extent applicable, the other Schedules (including but not limited to Schedule Seven) and the information on the Electronic Portal comprising the Invitation;

Alternative Pharmaceutical means an alternative brand of a Pharmaceutical that PHARMAC, following consultation with PTAC or its sub-committees, considers to be an acceptable substitute for that Pharmaceutical;

Back-up Supply Agreement means an alternative agreement or arrangement negotiated by PHARMAC, at its sole discretion, with a supplier other than the supplier with Sole Supply Status and/or Hospital Supply Status in respect of a particular Tender Item, to cover the contingency that Sole Supply Status and/or Hospital Supply Status is suspended or withdrawn under the terms of this Agreement in respect of that Tender Item, or that the Tender Item is otherwise out of stock or unavailable for supply;

Chemical Entity means any pharmaceutical that contains, and is described generically according to, the relevant active ingredient specified in Schedule Two and the Electronic Portal. For the avoidance of doubt, the term Chemical Entity does not include any Medical Device;

Combined Community/Hospital Tender Bid means a Community Tender Bid and a Hospital Tender Bid that you submit in combination for the same Tender Item;

Community Tender Bid means a Tender Bid in relation to community supply;

Confidential Information means all information exchanged between us under this Invitation or in relation to your Tender Bid, including during all negotiations relating to your Tender Bid;

Consents means all consents, permits, licences and authorisations, whether statutory or otherwise, required for the supply of the Tender Item in New Zealand (including Ministry of Health market approval);

Contract Manufacturer means a manufacturer or a supplier that is a party to a contract with the relevant DHB Hospital to compound Pharmaceuticals, on request from that DHB Hospital;

Cost Brand Source Product means a pharmaceutical where there is no price agreed upon by PHARMAC, but the pharmaceutical is subsidised by the Funder at the price obtained by pharmacies;

Crown Direction means any ministerial direction given to PHARMAC under section 103 of the Crown Entities Act 2004;

CTPP means Containered Trade Product Pack SNOMED CT code, which is the unique identifier that describes the packaged, branded product and the container it is dispensed in, as used within the New Zealand Medicines Terminology;

Deadline means 5 pm, Friday 14 December 2018 (New Zealand time);

Designated Delivery Point means at a DHB Hospital's discretion:

- (a) a delivery point agreed between you and the relevant DHB Hospital, to which delivery point you must supply the Pharmaceutical directly at the Price; and/or
- (b) any delivery point designated by the relevant DHB Hospital or PHARMAC, such delivery point being within 30km of your national distribution centre;

DHB Hospital means a DHB, including its hospital or associated provider unit for which that DHB purchases pharmaceuticals;

District Health Board (or DHB) has the same meaning as in the New Zealand Public Health and Disability Act 2000;

DV Limit means, for a particular Pharmaceutical, the National Discretionary Variance (DV) Limit or the Individual DV Limit;

DV Pharmaceutical means a discretionary variance Pharmaceutical, being an Alternative Pharmaceutical that does not have Hospital Supply Status, and includes a pharmaceutical which (unless PHARMAC specifies otherwise in Schedule Two of this Agreement and the Electronic Portal, or we agree otherwise in writing):

- (a) is listed as a DV Pharmaceutical, in association with the relevant Pharmaceutical having Hospital Supply Status, in the then current Section H of the Pharmaceutical Schedule; or
- (b) in the case of a pharmaceutical that is not a Medical Device, is the same Chemical Entity, at the same strength, and in the same or a similar presentation or form, as the relevant Pharmaceutical with Hospital Supply Status, but which is not yet listed as a DV Pharmaceutical.

For the avoidance of doubt, a pharmaceutical which:

(c) in the case of a pharmaceutical that is not a Medical Device, is a different Chemical Entity from the Pharmaceutical with Hospital Supply Status; and

(d) is not listed as a DV Pharmaceutical in the then current Section H of the Pharmaceutical Schedule,

is not a DV Pharmaceutical;

Electronic Portal means the electronic tender system available via the internet address provided to you by PHARMAC through which you are required to submit your Tender Bid(s);

End Date means the last day of the Hospital Supply Status Period, or Sole Supply Period, as applicable;

Evaluation Committee means a committee established by PHARMAC to evaluate Tender Bids;

Final Transition Period means, in respect of a Pharmaceutical with Sole Supply Status or Hospital Supply Status, as applicable, the period of three calendar months beginning on the day after the relevant End Date;

First Transition Period means, in respect of a Pharmaceutical with Sole Supply Status or Hospital Supply Status, the period beginning on the first day of the month following the Market Notification Date and ending on the last day of the month following the month in which the Start Date occurs (or such different or longer period as PHARMAC determines under clause 1.2 of Schedule Three);

Funder means the body or bodies responsible, pursuant to the New Zealand Public Health and Disability Act 2000, for the funding of pharmaceuticals listed on the Pharmaceutical Schedule (which may be, without limitation, one or more District Health Boards and/or the Ministry of Health) and their successors;

GTIN means the Global Trade Item Number for a Pharmaceutical;

Hospital Supply Status means the status of being the brand of the relevant Pharmaceutical listed in Section H of the Pharmaceutical Schedule as having such status, which Pharmaceutical DHB Hospitals must (or in the case of Medical Devices, may) purchase, subject to any DV Limit for that Pharmaceutical, for the Hospital Supply Status Period;

Hospital Supply Status Period means the period beginning on the day after the end of the First Transition Period and ending on 30 June 2022;

Hospital Tender Bid means a Tender Bid in relation to Hospital Supply;

Individual DV Limit means, for:

- (a) a particular Pharmaceutical; and
- (b) a particular DHB Hospital,

the discretionary variance limit, being a percentage of the Individual Total Market Volume, which equals the percentage of the National DV Limit for that Pharmaceutical, up to which that DHB Hospital may purchase DV Pharmaceuticals of that Pharmaceutical. The Individual DV Limit is set:

(c) for the number of months during which the Hospital Supply Status Period applies during the period ending on 30 June 2020 and

- (d) the number of months during which the Hospital Supply Status Period applies during the twelve month period ending on 30 June 2021 and
- (e) the number of months during which the Hospital Supply Status Period applies during the twelve month period ending on 30 June 2022.

Individual Total Market Volume means for:

- (a) a particular Pharmaceutical; and
- (b) a particular DHB Hospital,

in any given period, in accordance with data available to PHARMAC, the sum of:

- (c) the total number of Units of the relevant Pharmaceutical with Hospital Supply Status purchased by the relevant DHB Hospital; and
- (d) the total number of Units of all the relevant DV Pharmaceuticals, listed in Section H in association with that Pharmaceutical, purchased by that DHB Hospital;

Invitation means this invitation to tender and includes the cover letter, each of the Schedules and the information on the Electronic Portal referred to in this invitation;

Lead Time means the number of months (being whole months only) indicated on your Tender Bid that, if your Tender Bid is accepted, you would require following the Successful Tenderer Notification Date in order to source sufficient stock of your brand of the Tender Item to meet the entire market demand for the Tender Item as at the Start Date. For the avoidance of doubt, the Lead Time does not affect, and should incorporate the extra time needed to allow for, your obligations in clause 3.1 of Schedule 5 and clause 3.1 of Schedule 6;

Market Notification Date means the date on which PHARMAC notifies the market that your Tender Bid, in respect of a particular Tender Item, has been accepted, being greater than one month prior to the Start Date;

Medical Device means a medical device as that term is defined in the Medicines Act 1981;

National DV Limit means, for a particular Pharmaceutical, the discretionary variance limit, being the specified percentage of the National Total Market Volume up to which all DHB Hospitals may collectively purchase DV Pharmaceuticals of that Pharmaceutical. The National DV Limit is set for DHB Hospitals nationally:

- (a) for the number of months during which the Hospital Supply Status Period applies during the period ending on 30 June 2020; and
- (b) the number of months during which the Hospital Supply Status Period applies during the twelve month period ending on 30 June 2021; and
- (c) the number of months during which the Hospital Supply Status Period applies during the twelve month period ending on 30 June 2022.

National Total Market Volume means, for a particular Pharmaceutical in any given period, in accordance with data available to PHARMAC, the sum of:

(a) the total number of Units of the relevant Pharmaceutical with Hospital Supply Status purchased by all DHB Hospitals; and

(b) the total number of Units of all the relevant DV Pharmaceuticals, listed in Section H in association with that Pharmaceutical, purchased by all DHB Hospitals;

Offer Letter means the letter of offer which must be attached to your Tender Submission Form, in the form set out in the Electronic Portal;

OPPs means PHARMAC's then current Operating Policies and Procedures and any relevant supplements, as applicable;

PCT means Pharmaceutical Cancer Treatment. Tender Items that are PCTs are indicated with "PCT" in the list in clause 2 of Schedule Two and the Electronic Portal;

Pharmaceutical means the relevant Tender Item (which may be a Medical Device) for which you have submitted, and PHARMAC has accepted on behalf of the Funder, a Tender Bid;

Pharmacode means the unique six or seven digit identifier assigned to a pharmaceutical and notified to you by the Pharmacy Guild. Suppliers must apply to the Pharmacy Guild of New Zealand to receive a Pharmacode for each presentation of their pharmaceutical before it is listed;

Potential Out-of-Stock Event means:

- (a) in relation to community or hospital supply, your stock of the Pharmaceutical in New Zealand falls below two-thirds of your most recent three months' total Unit sales of the Tender Item, or, where the Pharmaceutical is designated an ASP, your stock of the Pharmaceutical in New Zealand falls below your most recent four months' total Unit sales of the Tender Item; or
- (b) in relation to community or hospital supply, forecast sales demand in respect of the next two-month period is greater than your stock of the Pharmaceutical, or, where the Pharmaceutical is designated an ASP, forecast sales demand in respect of the next four-month period is greater than your stock of the Pharmaceutical; or
- (c) in relation to hospital supply, your stock of the Pharmaceutical in New Zealand falls below the average volume of stock of the Pharmaceutical required to supply the entire New Zealand DHB Hospital market for the Pharmaceutical for any given two-month period, or, where the Pharmaceutical is designated an ASP, your stock of the Pharmaceutical in New Zealand falls below the average volume of stock of the Pharmaceutical required to supply the entire New Zealand DHB Hospital market for the Pharmaceutical for any given four-month period; or
- (d) in relation to community supply, your stock of the Pharmaceutical in New Zealand falls below one-sixth of the Unit Volume, or, where the Pharmaceutical is designated an ASP, your stock of the Pharmaceutical in New Zealand falls below one-third of the Unit Volume;
- (e) in relation to community or hospital supply, your stock of the Pharmaceutical in New Zealand is insufficient to enable you to fully fill all orders as they are received (without restricting quantities that may be ordered); or
- (f) in relation to New Zealand manufactured products if either:
 - (i) forecast sales demand in respect of the next two-month period is greater than your stock of the Pharmaceutical; or

- (ii) you have insufficient stock to enable you to fully fill all orders as they are received; or
- (iii) your stock of the active pharmaceutical ingredient taking into account manufacturing and stock on hand falls below two months stock for the Pharmaceutical in New Zealand;

For the avoidance of doubt, references to 'your stock' in (a) to (f) above refer to stock physically held by you or on your behalf in New Zealand and do not include stock held in New Zealand by wholesalers or other parties;

Price means the price (in New Zealand dollars and exclusive of GST) at which the Pharmaceutical is to be supplied, or made available for sale and supply, by you to:

- (a) in relation to community supply, wholesalers and other such distributors, and at which the Pharmaceutical is to be subsidised by the Funder, being the price specified in your successful Tender Submission Form, unless there has been a subsequent price change in accordance with the terms of the Invitation, in which case the Price will be the price notified to you by PHARMAC upon acceptance of your Tender Bid; or
- (b) in relation to hospital supply, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), being the price specified in your successful Tender Submission Form, unless there has been a subsequent price change in accordance with the terms of the Invitation, in which case the Price will be the price notified to you by PHARMAC upon acceptance of your Tender Bid;

PTAC means the Pharmacology and Therapeutics Advisory Committee;

Quarter means the periods:

- (a) 1 January until 31 March;
- (b) 1 April until 30 June;
- (c) 1 July until 30 September; and
- (d) 1 October until 31 December;

Second Transition Period means, in relation to community supply, the period of three calendar months beginning on the day after the expiry of the First Transition Period (or such different or longer period as PHARMAC determines under clause 1.2 of Schedule Three);

Section B means the relevant section or sections of the Pharmaceutical Schedule relating to community pharmaceuticals;

Section H means the relevant section or sections of the Pharmaceutical Schedule identified as such, which relate to pharmaceuticals for use in hospitals;

Sole Supply Period means the period beginning on the day after the expiry of the Second Transition Period and ending on 30 June 2022;

Sole Supply Status means, in relation to community supply, the status of being the sole subsidised supplier of the particular Tender Item for the Sole Supply Period;

Start Date means:

- (a) in relation to a Tender Item for which your Tender Bid has been accepted unconditionally, the first day of the month following the date that represents:
 - (i) the Successful Tenderer Notification Date; plus
 - (ii) the Lead Time; or
- (b) in relation to a Tender Item for which your Tender Bid has received conditional acceptance, in terms of clause 7.4 of Schedule Three, the first day of the month following the date that represents:
 - (i) the date that such acceptance ceases to be conditional; plus
 - (ii) the Lead Time; or
- (c) such other date that is negotiated between you and PHARMAC under clause 1.6 of Schedule Three;

Successful Tenderer Notification Date means the date on which PHARMAC notifies you, in relation to a Tender Item for which you have submitted a Tender Bid, that your Tender Bid has been accepted;

Tender Bid means the Offer Letter together with the Tender Submission Form submitted through the Electronic Portal for a particular Tender Item, including the Lead Time, and includes a Community Tender Bid, a Hospital Tender Bid and a Combined Community/Hospital Tender Bid;

Tender Item means:

- (a) in the case of a pharmaceutical that is not a Medical Device, the form and strength of a Chemical Entity (or entities, if applicable) for which you may submit a Tender Bid; or
- (b) in respect of a Medical Device, an item conforming to the individual specifications described for such item in the product list in clause 2 of Schedule Two for which you may submit a Tender Bid;

Tender Submission Form means the form on which you must submit your bid for each Tender Item, as set out in the Electronic Portal;

Transition Periods collectively refers to the First, and Second (if applicable), and Final Transition Periods;

Unit means an individual unit of a Tender Item (e.g. tablet, 1 ml of an oral liquid, ampoule, syringe, bag, suture or needle, roll or a dressing);

Unit Price means the relevant Price specified for a pack (or equivalent grouping for any Medical Device) of that Tender Item in Section H of the Pharmaceutical Schedule, divided by the number of Units in the pack specified in the Pharmaceutical Schedule as being the listed pack size for that Tender Item (and where that Tender Item is not listed on the Pharmaceutical Schedule, the price and pack size in the most recent issue of the Pharmaceutical Schedule published prior to that Tender Item being delisted);

Unit Subsidy means the subsidy specified for a pack of that Tender Item in Sections A to G of the Pharmaceutical Schedule, divided by the number of Units in the pack specified in the Pharmaceutical Schedule as being the subsidised pack size for that Tender Item (and where that Tender Item is not listed on the Pharmaceutical Schedule, the subsidy and pack size

specified in the most recent issue of the Pharmaceutical Schedule published prior to that Tender Item being delisted); and

Unit Volume means, in relation to community supply, the approximate number of Units of the Tender Item subsidised by PHARMAC, and claimed for by community pharmacies, in one year, as specified in Schedule Two and the Electronic Portal.

2. Interpretation

In the construction of this Invitation, unless the context otherwise requires:

- (a) a reference to a clause or a Schedule is a reference to a clause of, or a Schedule to, this Invitation;
- (b) a reference to a statute or other law includes regulations and other instruments under it and consolidations, amendments, re-enactments or replacements of any of them (whether before or after the date of this Agreement);
- (c) the singular includes the plural and vice versa;
- (d) the word person includes an individual, a body corporate, an association of persons (whether corporate or not), a trust, a state and an agency of state, in each case, whether or not having a separate legal personality;
- (e) a reference to a person includes a reference to the person's executors, administrators, successors, substitutes, (including, but not limited to, persons taking by novation) and permitted assignees;
- (f) words importing one gender include the other genders;
- (g) headings in this Agreement or in the Electronic Portal are for convenience only and have no legal effect; and
- (h) unless the context requires otherwise, references to the "listing" of a Pharmaceutical:
 - (i) in relation to hospital supply, are to the listing of that Pharmaceutical in Section H of the Pharmaceutical Schedule and are deemed to include any written notification by PHARMAC of that Pharmaceutical being the subject of a national supply contract negotiated by PHARMAC on behalf of DHBs, where such written notification is in advance of the actual listing of that Pharmaceutical in Section H of the Pharmaceutical Schedule (and references to "list", "listed", "delist", "delisted", and "delisting" are to be interpreted accordingly);
 - (ii) in relation to community supply, are to the actual listing of that Pharmaceutical in Sections A to G of the Pharmaceutical Schedule (and references to "list", "listed", "delist", "delisted", and "delisting" are to be interpreted accordingly).

Schedule 2: Products to be tendered

1. Information about Tender Items

1.1 List of Tender Items

This Schedule sets out the Tender Items and information about the Tender Items. While PHARMAC has taken all reasonable care in preparing the information contained in this Schedule, it accepts no liability for any errors or omissions in the information.

1.2 Patents

- (a) Where possible, PHARMAC has identified Tender Items that it understands may be the subject of a patent that it believes is due to expire after the Deadline.
- (b) Where PHARMAC has been advised of the existence of a patent prior to sending out this Invitation, it has shown this in the attached list by the use of a + symbol.
- (c) However, PHARMAC makes no representation as to the patent status of the Tender Items and accepts no liability for any patent infringement that might occur as a result of this tender process or PHARMAC's acceptance of a Tender Bid, including infringement of process patents.

1.3 Unit Volume and market value figures

- (a) Except where indicated otherwise, the Unit Volume figures, in relation to community supply, are based on actual volumes for the year ending 30 June 2018.
- (b) Market value figures, in relation to community supply, are expressed as the Unit Volume in the year ending 30 June 2018, multiplied by the Unit Subsidy as at 1 July 2018.
- (c) The figures referred to in paragraphs (a) and (b):
 - (i) are approximate and indicative only. PHARMAC makes no representation as to the accuracy of these figures or as to the level of sales or likely sales of any Tender Item. In particular, if these figures change at any time during the period from PHARMAC's pre-tender consultation until decisions have been made about the acceptance of Tender Bids for all Tender Items, PHARMAC is not obliged to notify you of any such change; and
 - (ii) unless specified by PHARMAC do not include DHB Hospital volumes. For the avoidance of doubt, PHARMAC makes no representation as to the size of the DHB Hospital market for any Tender Item, in relation to hospital supply.
- (d) You acknowledge and agree that in submitting your Tender Bid you will rely on your own knowledge, skill and independent advice or assessment of the market size for any Tender Item and PHARMAC is to have no liability in that regard.

1.4 **Special terms**

Where there are any special terms relating to a particular Tender Item, those terms are indicated in the column entitled "Comments" in the list and/or Schedule Seven. Special Authority restrictions have been noted for Tender Items where applicable in the list. Further restrictions

on the supply of Tender Items within the Pharmaceutical Schedule may apply. You acknowledge and agree that in submitting your Tender Bid you will rely on your own knowledge and assessment of any restrictions applicable to a Tender Item within the Pharmaceutical Schedule.

1.5 Subsidies

- (a) The level at which each Tender Item, in relation to community supply, is specified in the attached list as being subsidised per Unit as at 1 July 2018.
- (b) Subsidies of Tender Items, in relation to community supply, may change before a Tender Bid is accepted.
- (c) Where a "*" symbol is indicated next to the Unit Subsidy in the attached list, there is no fully funded product available, in relation to community supply, for that Tender Item as at 1 July 2018.

1.6 **DV Limits**

Where there is a DV Limit relating to a particular Tender Item, in relation to hospital supply, that limit is indicated as a percentage amount in the column entitled "DV Limit" in the attached list and is also shown in the Electronic Portal.

1.7 Tender Items subject to sole supply arrangements

Where a Tender Item is underlined in the list of products below, that item is subject to a sole supply contract as at the date of this Invitation. Accordingly, the subsidy for those items is fixed until 30 June 2019 (unless otherwise indicated) and, for items that are the subject of a sole supply contract, the listing of a new brand, in relation to community supply, could only occur after that date. This information is not available in the Electronic Portal.

1.8 Hospital only products

Where an "H" is indicated, you may submit a Tender Bid for Hospital Supply Status for that Tender Item.

1.9 **Community only Products**

Where a "C" is indicated, you may submit a Tender Bid for Sole Supply Status for that Tender Item.

1.10 **Community and Hospital Products**

Where a "C" and an "H" are indicated, you may submit a Tender Bid for Sole Supply Status and/or a Tender Bid for Hospital Supply Status for that Tender Item. You may also submit a Combined Community/Hospital Tender Bid in accordance with clause 2.5 of Schedule Three.

1.11 PCTs

Where a "PCT" is indicated, you may submit a Tender Bid for Hospital Supply Status for that Tender Item on the basis that, if PHARMAC accepts your Tender Bid, the Tender Item would be listed in Section B and/or Part II of Section H of the Pharmaceutical Schedule subject to clause 11 of Schedule Six. This information is also shown in the Electronic Portal.

Where a Tender Item is indicated as being a "PCT" product, it is the preference of PHARMAC that products have post-compounding stability data greater than 48 hours.

1.12 Capsule and tablet form

Unless otherwise stated, where a Tender Item specifies either:

- (a) a capsule; or
- (b) a tablet,

form of the Chemical Entity, your brand of the relevant Chemical Entity for which you submit a bid may be in either tablet or capsule form, provided that:

- (c) your brand of the relevant Chemical Entity is the same strength as the Tender Item; and
- (d) where the Tender Item specifies both the tablet and capsule form of that Chemical Entity as separate line items, you must submit a bid for the same form and strength for each line item.

1.13 **Pack size preference**

Where a Tender Item is specified as being available for a Tender Bid for Sole Supply Status, it is the preference of PHARMAC that the pack size for such a Tender Item is a 30 or 90 day pack where the Tender Item is in a tablet or capsule form.

Notwithstanding the preference of PHARMAC for Tender Items to be in pack sizes as specified above, pack sizes may be specified in the comments column in the attached list or you may submit, and PHARMAC will consider and may accept, a Tender Bid for any pack size, including larger pack sizes, following its evaluation of Tender Bids under clause 5 of Schedule Three.

1.14 **Pack size for use in DHB Hospitals**

Where a Tender Item is specified as being available for a Tender Bid for Hospital Supply Status, it is the preference of DHB Hospitals that the pack size for such a Tender Item is:

- (a) 500 ml or less, where the Tender Item is in liquid form;
- (b) 200 tablets or capsules, where the Tender Item is in tablet or capsule form; and
- (c) 10 injections, where the Tender Item is in injection form.

Notwithstanding the preference of DHB Hospitals for Tender Items to be in pack sizes as specified in paragraphs (a) to (c) above, pack sizes may be specified in the comments column in the attached list or you may submit, and PHARMAC will consider and may accept, a Tender Bid for any pack size, including larger pack sizes, following its evaluation of Tender Bids under clause 5 of Schedule Three. For the avoidance of doubt, DHB Hospitals do not have a pack (or other equivalent grouping) size preference for Medical Devices and you may submit, and PHARMAC will consider and may accept, a Tender Bid for any pack size (or other equivalent grouping) following its evaluation of Tender Bids under clause 5 of Schedule Three.

1.15 **Pack size for oral contraceptives**

Where an oral contraceptive is included in Schedule Two and on the Electronic Portal, 21 and 28 calendar packs would be considered as different Tender Items (where applicable).

| S | CHEDULE | TWO: PRO | DUCTS T | O BE | TEND | ERE | D |
|--|-------------|--------------|-----------------|------|------|------------|--|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | | | DV Limi | t Comments |
| Abiraterone acetate | | | | | | | |
| Tab 250 mg | 606,074 | \$21,597,399 | \$35.6349# | + | СН | 1% | Special Authority restrictions may apply. |
| Acetylcholine chloride Inj 20 mg vial with diluent | | | | | Н | 1% | |
| Aciclovir | | | | | | | |
| Eye oint 3% | 22,725 | \$75,346 | \$3.3156 | | СН | 1% | |
| Tab dispersible 200 mg | 792,396 | \$50,713 | \$0.0640 | | СН | 1% | |
| Tab dispersible 400 mg | 5,413,657 | \$520,090 | \$0.0961 | | СН | 1% | |
| <u>Tab dispersible 800 mg</u> | 781,363 | \$133,504 | \$0.1709 | | СН | 1% | |
| dapalene | | | | | | | |
| Crm 0.1% | 253,140 | \$193,146 | \$0.7630# | | СН | 1% | Preference for a maximum pack size of 3 g |
| Gel 0.1% | 439,650 | \$335,453 | \$0.7630# | | СН | 1% | Preference for a maximum pack size of 3 g |
| Adenosine | | | | | | | |
| Inj 3 mg per ml, 10 ml | | | | | н | 1% | |
| Inj 3 mg per ml, 2 ml | | | | | Н | 1% | |
| Ajmaline | | | | | | | |
| Inj 50 mg per 10 ml | | | | | н | 1% | |
| Albendazole | | | | | _ | | |
| Tab | 1,606 | \$12,559 | \$7.8200 | | СН | 1% | Special Authority restrictions may apply. Note units and unit subsidy corresponds to the currently listed tab 400 mg presentation. All strengths received as tender bids will be reviewed. |
| Aluminium hydroxide | | | | | | | |
| Tab 600 mg | 2,300,847 | \$288,986 | \$0.1256 | | СН | 1% | |
| Numinium hydroxide with magnesium hy | droxide and | simeticone | | | | | |
| Oral liq 200 mg with magnesium hydroxide 200 mg and simeticone 20 mg | | | | | Н | 1% | |
| Oral liq 400 mg with magnesium hydroxide 400 mg and simeticone 30 mg | | | | | Н | 1% | |
| Amiloride with Hydrochlorothiazide Tab 5 mg with hydrochlorothiazide 50 mg | 801,062 | \$80,106 | \$0.1000 | | СН | 1% | |
| Amiodarone hydrochloride | | | | | | | |
| Inj 50 mg per ml, 3 ml | 8,740 | \$17,445 | \$1.9960 | | СН | 1% | |
| <u>Tab 100 mg</u> | 528,757 | \$82,132 | \$0.1553 | | СН | 1% | |
| <u>Tab 200 mg</u> | 755,054 | \$192,033 | \$0.2543 | | СН | 1% | |
| misulpride | | | | | | | |
| <u>Oral liq 100 mg per ml</u> | 16,346 | \$17,852 | \$1.0922 | | СН | 1% | |
| <u>Tab 100 mg</u> | 321,530 | \$48,873 | \$0.1520 | | СН | 1% | |
| <u>Tab 200 mg</u> | 333,279 | \$81,930 | \$0.2458 | | СН | 1% | |
| <u>Tab 400 mg</u> | 118,929 | \$54,906 | \$0.4617 | | СН | 1% | |
| Amoxicillin | | | | | | | |
| <u>Cap 250 mg</u> | 911,690 | \$27,296 | \$0.0299 | | СН | 1% | |
| <u>Cap 500 mg</u> | 16,473,632 | \$551,867 | \$0.0335 | | СН | 1% | |
| Amoxicillin clavulanate | | | | | | | |
| Grans for oral liq amoxicillin 125 mg with potassium clavulanate 31.25 mg per 5 ml | 3,878,853 | \$148,560 | \$0.0383 | @ | СН | 1% | PHARMAC reserves the right to award one or more strengths of amoxicillin with clavulanic acid oral liquids. Additional Stock Pharmaceutical. There may be a preference for a 100 ml packsize |
| Grans for oral liq amoxicillin 250 mg with potassium clavulanate 62.5 mg per 5 ml | 9,946,000 | \$218,812 | \$0.0220 | @ | СН | 1% | PHARMAC reserves the right to award one or more strengths of amoxicillin with clavulanic acid oral liquids. Additional Stock Pharmaceutical. There may be a preference for a 100 ml packsize |
| Inj 500 mg with clavulanic acid 100 mg | | | | | н | 1% | |
| sole supply | | | | | | #. | =rebate *=part charge @=ASP +=pater |

| SC | HEDULE | TWO: PRO | DUCTS | TO E | | DERE | D |
|---|----------------------|-----------------------|----------------------|------|----------|----------|---|
| Chemical Name | | | Unit | | | DV | |
| Line Item | Units | Cost | Subsidy | | | Limi | t Comments |
| Amoxicillin clavulanate | | | | | | | |
| Inj 1000 mg with clavulanic acid 200 mg | | | | | Н | 1% | |
| Amphotericin B | | | | | | | |
| Liposomal inj 50 mg | | | | | н | 1% | Bids for liposomal formulations will be evaluated only. |
| Anagrelide hydrochloride | | | | | | | |
| Cap 0.5 mg | 94,118 | | | | РСТ С Н | 1% | This is currently a cost-brand source product. |
| Articaine hydrochloride | | | | | | | |
| Inj 1% | | | | | Н | 1% | |
| Articaine hydrochloride with adrenaline | | | | | | | |
| Inj 4% with adrenaline 1:100,000, 1.7 ml dental cartridge | | | | | н | 1% | |
| Inj 4% with adrenaline 1:200,000, 1.7 ml dental cartridge | | | | | н | 1% | |
| Inj 4% with adrenaline 1:200,000, 2.2 ml dental cartridge | | | | | н | 1% | |
| Inj 4% with adrenaline 1:100,000, 2.2 ml dental cartridge | | | | | н | 1% | |
| Ascorbic acid | | | | | | | |
| Tab (chewable) 250 mg | | | | | СН | 1% | Not currently listed in Section B of the Pharmaceutical Schedule. |
| <u>Tab 100 mg</u> | 3,865,804 | \$62,626 | \$0.0162 | | СН | 1% | |
| Aspirin | | | | | | | |
| <u>Tab 75 mg - 100 mg</u> | 92,893,156 | \$1,173,241 | \$0.0126 | | СН | 10% | Units and unit subsidy shown are per 100 mg tablet |
| Tab dispersible or soluble 300 mg | 1,108,683 | \$43,239 | \$0.0390 | | СН | 1% | |
| Azathioprine | | | | | | | |
| <u>lnj 50 mg</u> | | | | | Н | 1% | |
| <u>Tab 50 mg</u> <u>Tab 25 mg</u> | 3,811,006 142,502 | \$403,204 \$13,766 | \$0.1058 \$0.0966 | | СН СН | 1% 1% | |
| Beclomethasone Dipropionate | | | | | | | |
| Metered aqueous nasal spray, 50 mcg per dose | 3,571,000 | \$41,959 | \$0.0118 | * | СН | 1% | |
| Metered aqueous nasal spray, 100 mcg per dose | 10,408,800 | \$128,028 | \$0.0123 | * | СН | 1% | |
| Bee venom allergy treatment | | | | | | | |
| Maintenance kit - 6 vials 120 mcg freeze dried venom with diluent | 14 | \$3,990 | \$285.0000 | | СН | 1% | |
| Treatment kit - 1 vial 550 mcg freeze dried venom, 1 diluent 9 ml, 3 diluent 1.8 ml | 556 | \$169,580 | \$305.0000 | | СН | 1% | |
| Bendamustine | | | | | | | |
| Inj 100 mg vial | | | | | PCT H | 1% | |
| Inj 25 mg vial | | | | | РСТ Н | 1% | |
| Benzatropine Mesylate | | | | | | | |
| lnj 1 mg per ml, 2 ml | 1,809 | \$34,371 | \$19.0000 | | СН | 1% | |
| Tab 2 mg | 777,238 | \$103,505 | \$0.1332 | | СН | 1% | |
| Benzocaine Gel 20% | | | | | Н | 1% | |
| Benzydamine Hydrochloride | | | | | | | |
| Soln 0.15% | 2,122,936 | \$38,213 | \$0.0180 | * | СН | 1% | Funding restrictions may apply. |
| Spray 0.15% | | | | | СН | 1% | Not currently listed in Section B of the Pharmaceutical Schedule. Funding restrictions may apply. |
| Spray 0.3% | | | | | СН | 1% | |

| SC | HEDULE 1 | WO: PRO | DUCTS TO | BE TEN | DERE | ED |
|---|----------------|-----------|-----------------|--------|------------|--|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | | DV Limi | t Comments |
| Benzydamine hydrochloride with cetylpyrid | linium chlorid | e | | | | |
| Lozenge 3 mg with cetylpyridinium chloride | | | | F | I 1% | |
| Betamethasone | | | | | | |
| lnj 4 mg per ml, 1 ml Tab 400 mg | | | | F F | | |
| Betamethasone Dipropionate | | | | | | |
| Crm 0.05% (pack size 30 g and over) | 183,900 | | | CH | ł | |
| Crm 0.05% (pack size 30 g and under) | | | | F | l 1% | |
| Oint 0.05% (pack size 30 g and over) | 224,155 | | | CH | ł | |
| Oint 0.05% (pack size 30 g and under) | | | | F | I 1% | |
| Betamethasone Sodium Phosphate with Be | etamethasone | Acetate | | | | |
| Inj 3.9 mg with betamethasone acetate 3 mg per ml, 1ml | 883 | \$3,391 | \$3.8400 | CH | I 1% | |
| Betaxolol hydrochloride | | | | | | |
| Eye drops 0.25% | 17,185 | \$40,557 | \$2.3600 | CH | I 1% | For products containing BAK, PHARMAC reserves the right to list a BAK or preservative free product for a restricted market. |
| Eye drops 0.5% | 7,210 | \$10,815 | \$1.5000 | CH | I 1% | |
| Bortezomib | | | | | | |
| Inj 3.5 mg | | | | +PCT H | 1 1% | |
| Brimonidine Tartrate with Timolol Maleate | | | | | | |
| Eye drops 0.2% with timolol maleate 0.5% | 215,725 | \$798,183 | \$3.7000# | CH | I 1% | For products containing BAK, PHARMAC reserves its right to list a BAK or preservative free product for a restricted market. Unit subsidy expressed as "per ml" |
| Brinzolamide | | | | | | |
| Eye drops 1% | 333,270 | \$651,210 | \$1.9540 | CH | l 1% | For products containing BAK, PHARMAC reserves its right to list a BAK or preservative free product for a restricted market. Units and unit subsidy shown are per ml. |
| Bupivacaine hydrochloride | | | | | | |
| Inj 2.5 mg per ml, 20 ml ampoule | | | | F | 1% | |
| Inj 5 mg per ml, 20 ml ampoule | | | | F | l 1% | |
| Inj 1.25 mg per ml, 100 ml bag | | | | F | l 1% | |
| Inj 1.25 mg per ml, 200 ml bag | | | | F | 1% | |
| lnj 1.25 mg per ml, 500ml bag | | | | F | l 1% | |
| lnj 2.5 mg per ml, 200 ml bag | | | | F | l 1% | |
| Bupivacaine hydrochloride with adrenaline | | | | | | |
| Inj 0.25% with 1:400,000 of adrenaline, 20 ml non-sterile pack | | | | F | l 1% | |
| Inj 0.5% with 1:200,000 of adrenaline, 20 ml non-sterile pack | | | | F | 1% | |
| Bupivacaine hydrochloride with fentanyl | | | | | | |
| Inj 0.625 mg with fentanyl 2 mcg per ml, 200 ml bag | | | | F | 1% | |
| Inj 0.625 mg with fentanyl 2 mcg per ml, 100 ml bag | | | | F | 1% | |
| Inj 1.25 mg with fentanyl 2 mcg per ml, 100 ml syringe | | | | F | 1% | |
| Inj 1.25 mg with fentanyl 2 mcg per ml, 50 ml syringe | | | | F | 1% | |
| Inj 1.25mg with 2 mcg fentanyl per ml, 15 ml syringe | | | | F | 1% | Sterile pack preferred |
| Inj 1.25mg with 2 mcg fentanyl per ml, 20 ml syringe | | | | F | 1% | |
| sole supply | | | | | # | =rebate *=part charge @=ASP +=paten |

| SCI | HEDULE | TWO: PRC | DUCTS TO | BE TEND | DERE | D |
|--|----------------------|-----------------------|-----------------------|----------------|------------|---|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | | DV Limi | t Comments |
| Bupivacaine hydrochloride with fentanyl | | | | | | |
| Inj 1.25mg with 2 mcg fentanyl per ml, 100 | | | | Н | 1% | |
| ml bag Inj 1.25mg with 2 mcg fentanyl per ml, 200 ml bag | | | | Н | 1% | |
| Bupivacaine hydrochloride with glucose Inj 0.5% with glucose 8%, 4 ml ampoule | | | | Н | 1% | Sterile pack preferred |
| Busulfan | | | | | | |
| lnj 6 mg per ml, 10 ml Tab 2 mg | | | | PCT H PCT H | 1% 1% | |
| Caffeine citrate | | | | | | |
| Inj 20 mg per ml (caffeine 10 mg per ml), 2.5 ml | | | | Н | 1% | |
| Oral liq 20 mg per ml (10 mg base per ml) | 11,150 | \$6,623 | \$0.5940 | СН | 1% | |
| Calcitonin Inj 100 iu per ml, 1 ml | 567 | \$13,721 | \$24.2000 | СН | 1% | |
| Calcitriol | | | | | | |
| lnj 1 mcg per ml, 1 ml | | • | • | Н | 1% | |
| <u>Cap 0.25 mcg</u> Cap 0.5 mcg | 1,269,375 492,847 | \$126,303 \$90,635 | \$0.0995 \$0.1839 | СН СН | 1% 1% | |
| Oral liq 1 mcg per ml | 492,047 | \$90,035 | ФО. 10 59 | СН | 1% | |
| Calcium folinate | | | | РСТ Н | 1% | |
| Inj 3 mg Inj 300 mg - 350 mg | | | | PCT H PCT H | 1% | Units and subsidy shown are per 300 mg injection |
| Inj 50 mg | | | | РСТ Н | 1% | |
| Inj 100 mg | | | | PCT H | 1% | |
| Inj 1 g Tab 15 mg | | | | PCT H PCT H | 1% 1% | |
| Calcium Gluconate | | | | | | |
| Gel 2.5% | | | | Н | 1% | Preference for a pack size of 40 g - 100 g |
| Candesartan cilexetil with hydrochlorothiaz Tab 16 mg with hydrochlorothiazide 12.5 | ide | | | СН | 1% | |
| mg Tab 32 mg with hydrochlorothiazide 12.5 mg | | | | СН | 1% | Schedule. Not currently listed in the Pharmaceutica Schedule. |
| Tab 32 mg with hydrochlorothiazide 25 mg | | | | СН | 1% | |
| Capecitabine | | | | | | |
| <u>Tab 150 mg</u> | 151,277 | \$28,112 | \$0.1858 | СН | 1% | |
| <u>Tab 500 mg</u> | 749,153 | \$388,810 | \$0.5190 | СН | 1% | |
| | 4 4 4 9 9 7 7 7 | AO IT O T T | \$ 2.224 | | 4.01 | |
| | 1,118,655 | \$247,335 \$84,013 | \$0.2211# \$0.2778 | СН | 1% 1% | Subsidy shown is for the 45 g pack size. |
| Crm 0.075% | 305,685 | \$84,913 | \$0.2778 | СН | 1% | |
| Captopril Oral liq 5 mg per ml | 144,685 | \$144,669 | \$0.9999 | СН | 1% | |
| Carbomer Ophthalmic gel 0.3% | 118,695 | \$32,641 | \$0.2750 | СН | 1% | Special Authority restrictions may apply |
| Carboprost Inj 250 mcg per ml, 1ml | | | | н | 1% | |
| Carboxymethylcellulose Oral spray | | | | н | 1% | |
| Caspofungin | | | | | | |
| Inj 50 mg Inj 70 mg | | | | н н | 1% 1% | |
| | | | | | | |

| | SCHEDULE | TWO: PRO | DUCTS TO | D BE TENDERE | ED |
|---|--------------|-------------|----------|--------------|--|
| Chemical Name | | | Unit | DV | |
| Line Item | Units | Cost | Subsidy | Limi | t Comments |
| Cefaclor monohydrate | | | | | |
| <u>Cap 250 mg</u> | 2,905,825 | \$717,739 | \$0.2470 | CH 1% | |
| <u>Grans for oral liq 125 mg per 5 ml</u> | 5,035,144 | \$177,741 | \$0.0353 | CH 1% | |
| Cefalexin monohydrate | | | | | |
| Cap 250 mg | 190,888 | \$33,405 | \$0.1750 | CH 1% | ······································ |
| | | | | | Schedule |
| <u>Cap 500 mg</u> | 2,219,661 | \$438,383 | \$0.1975 | CH 1% | |
| Cefotaxime | | | | | |
| Inj 500 mg | | | | H 1% | |
| Cefoxitin Sodium | | | | | |
| lnj 1 g | | | | H 1% | |
| Ceftriaxone sodium | | | | | |
| <u>Inj 500 mg</u> | 5,646 | \$6,775 | \$1.2000 | CH 1% | |
| <u>lnj 1 g</u> | 5,501 | \$4,621 | \$0.8400 | CH 1% | |
| Inj 2 g | | | | H 1% | |
| Cefuroxime Axetil | | | | | |
| Tab 250 mg | 10,176 | \$5,983 | \$0.5880 | CH 1% | |
| Cetirizine hydrochloride | | | | | |
| <u>Tab 10 mg</u> | 35,022,044 | \$353,723 | \$0.0101 | CH 1% | |
| Cetomacrogol with glycerol | | | | | |
| Crm 90% with glycerol 10%, 1,000 ml | 67,048,890 | \$259,479 | \$0.0039 | CH 1% | There may be a preference for a sodium lauryl sulphate (SLS)-free presentation. There may be a preference for a pump bottle |
| Crm 90% with glycerol 10%, 100 g | | | | H 1% | There may be a preference for a sodium lauryl sulphate (SLS)-free presentation. There may be a preference for a tube |
| Crm 90% with glycerol 10%, 500 ml | 109,395,558 | \$616,991 | \$0.0056 | CH 1% | |
| Chloramphenicol | | | | | |
| Eye drops 0.5% | 1,511,880 | \$148,164 | \$0.0980 | CH 1% | Single dose presentation would not be a DV Pharmaceutical. Unit subsidy expressed as "per ml" |
| Eye oint 1% | 558,820 | \$346,468 | \$0.6200 | CH 1% | |
| Chlorpheniramine Maleate | | | | | |
| lnj 10 mg per ml | | | | H 1% | |
| Oral liq 2 mg per 5 ml | 2,727,884 | \$43,973 | \$0.0161 | CH 1% | |
| Chlorpromazine Hydrochloride | | | | | |
| Inj 25 mg per ml, 2 ml | 1,905 | \$4,888 | \$2.5660 | CH 1% | |
| Oral liq 100 mg per 5 ml | | | | H 1% | |
| Tab 10 mg | 103,539 | \$12,797 | \$0.1236 | CH 1% | |
| Tab 100 mg | 187,065 | \$57,261 | \$0.3061 | CH 1% | |
| Tab 25 mg | 498,585 | \$64,916 | \$0.1302 | CH 1% | |
| Chlortalidone [Chlorthalidone] | | | | | |
| Tab 25 mg | 2,714,678 | \$434,348 | \$0.1600 | CH 1% | |
| Cilazapril | | | | | |
| Tab 0.5 mg | 21,243,017 | \$472,020 | \$0.0222 | CH 1% | Note market data for this product is subject to change. |
| Tab 2.5 mg | 22,754,620 | \$819,166 | \$0.0360 | CH 1% | Note market data for this product is subject to change. |
| <u>Tab 5 mg</u> | 26,022,040 | \$1,561,322 | \$0.0600 | CH 1% | Note market data for this product is subject to change. |
| Cilazapril with hydrochlorothiazide | | | | | |
| Tab 5 mg with hydrochlorothiazide 12.5 | mg19,327,789 | \$1,967,569 | \$0.1018 | CH 1% | |

| | SCHEDULE | TWO: PRO | DUCTS TO | BE TEN | DERE | ED |
|---|--------------|------------------------|-----------------------------|----------|------------|--|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | | DV Limi | t Comments |
| Clarithromycin | •••••• | | cusciuj | | | |
| Grans for oral liq 250 mg per 5 ml | 4,009 | \$1,854 | \$0.4624 | СН | 1% | |
| Clindamycin | ., | ÷., | | | . , . | |
| Cap hydrochloride 150 mg | 686,316 | \$175,869 | \$0.2563 | СН | 1% | |
| <u>Inj 150 mg per ml, 4 ml</u> | 193 | \$1,255 | \$6.5000 | СН | | |
| | | ¢.,200 | \$0.0000 | | . , 0 | |
| Clobetasol propionate Crm 0.05% (pack size 30 g or less) | 3,722,250 | \$272,953 | \$0.0733 | СН | 1% | |
| Oint 0.05% (pack size 30 g or less) | 3,484,800 | \$255,540 | \$0.0733 | СН | | |
| Scalp app 0.05% | 690,240 | \$160,136 | \$0.2320 | СН | | |
| Clobetasone butyrate | , - | ,, | | | | |
| Crm 0.05% (pack size 30 g or less) | 423,870 | \$76,013 | \$0.1793 | СН | 1% | |
| Clopidogrel | 0,010 | <i></i> | 4 011100 | • • • | . , 0 | |
| Tab 75 mg | 10,428,416 | \$675,344 | \$0.0648 | СН | 1% | |
| | 10, 120, 110 | <i>\\</i> 010,011 | \$0.00 TO | 011 | 170 | |
| Clotrimazole Vaginal crm 1% with applicators | 1.772.015 | \$80,999 | \$0.0457 | СН | 1% | |
| Vaginal crm 2% with applicators | 1,566,960 | \$60,999 \$164,531 | \$0.0457 \$0.1050 | СН | | |
| | 1,000,000 | ψ104,001 | φ0.1000 | 011 | 170 | |
| Coal tar Soln BP | 181,902 | \$29,968 | \$0.1648 | СН | 1% | There may be a preference for a pack size |
| | 101,302 | ψ20,000 | ψ0.1040 | 011 | 170 | of 100 ml or less |
| Codeine phosphate | | | | | | |
| Tab 15 mg | 9,496,525 | \$546,050 | \$0.0575 | СН | 1% | |
| Tab 30 mg | 23,879,804 | \$1,623,827 | \$0.0680 | СН | 1% | |
| <u>Tab 60 mg</u> | 1,868,972 | \$252,311 | \$0.1350 | СН | 1% | |
| Compound electrolytes | | | | | | |
| Powder for soln for oral use | 1,331,745 | \$306,301 | \$0.2300 | СН | 1% | Units and unit subsidy expressed as 'per sachet'. There may be a preference for products to include a measuring device or to come in unit dose sachets. Preference for pack sizes of 10 - 20 sachet packs. |
| Compound Hydroxybenzoate | | | | | | |
| Soln | 44,308 | \$14,219 | \$0.3209 | СН | 1% | Units expressed as per 'ml'. More than one brand is currently listed in the Pharmaceutical Schedule. Unit subsidy shown as the average unit subsidy of the products listed in the 2018 FYR. |
| Cyclizine lactate | | | | | | |
| lnj 50 mg per ml, 1 ml | 60,265 | \$180,191 | \$2.9900 | СН | 1% | |
| Dacarbazine | | | | | | |
| Inj 200 mg | | | | РСТ Н | 1% | |
| Dapsone | | | | | | |
| Tab 100 mg | 35,877 | \$118,213 | \$3.2950 | CH | | |
| Tab 25 mg | 83,714 | \$224,772 | \$2.6850 | СН | 1% | |
| Desmopressin | | | | | | |
| lnj 15 mcg per ml, 1 ml | | | | Н | | |
| lnj 4 mcg per ml, 1 ml | 4,925 | \$33,086 | \$6.7180 | СН | | |
| Nasal drops 100 mcg per ml | 5,443 | \$84,968 | \$15.6120 | СН | | |
| <u>Tab 100 mcg</u> | 75,658 | \$63,048 | \$0.8333 | СН | | Special Authority restrictions may apply |
| <u>Tab 200 mcg</u> | 34,137 | \$61,959 | \$1.8150 | СН | 1% | Special Authority restrictions may apply |
| Dexamethasone | | • • • • • • • • | AO O O O O O O O O O | | | |
| Eye drops 0.1% | 175,945 | \$158,351 | \$0.9000# | СН | | |
| Eye oint 0.1% | 23,601 | \$39,514 | \$1.6743# | СН | 1% | |
| Dexamethasone phosphate | F 1 000 | A70 7 | ¢4,4400 | <u> </u> | 404 | |
| lnj 4 mg per ml, 1 ml | 54,092 | \$76,757 \$220,250 | \$1.4190 \$2.5180 | СН | | |
| lnj 4 mg per ml, 2 ml | 87,513 | \$220,359 | \$2.5180 | СН | 1% | |

| SC | | TWO: PRC | DUCTS | го в | | ERE | D |
|---|------------|-------------------|--------------------------|------|----------|------|---|
| Chemical Name Line Item | Unito | Cost | Unit | | | DV | t Commonto |
| | Units | Cost | Subsidy | | | Limi | t Comments |
| Dextrochlorpheniramine Maleate | 40.005 | ¢400 | ¢0.0477 | * | 0.11 | | Funding anothinting many angle |
| Oral liq 2 mg per 5 ml | 10,625 | \$188 \$17.075 | \$0.0177 | * | СН СН | | Funding restrictions may apply. |
| Tab 2 mg | 146,045 | \$7,375 | \$0.0505 | | Сп | | Funding restrictions may apply. |
| Diazoxide | | | | | | | |
| lnj 15 mg per ml, 20 ml | | | | | Н | 1% | |
| Dichlorobenzyl alcohol with amylmetacress Lozenge 1.2 mg with amylmetacresol 0.6 mg | sol | | | | Н | 1% | |
| Diclofenac sodium | | | | | | | |
| Tab 50 mg dispersible | 868,806 | \$65,160 | \$0.0750 | | СН | 1% | |
| Diflucortolone Valerate | | | | | | | |
| Crm 0.1% | 107,600 | \$19,303 | \$0.1794 | * | СН | 1% | |
| Fatty oint 0.1% | 149,400 | \$26,802 | \$0.1794 | * | СН | 1% | |
| Digoxin | | | | | | | |
| lnj 250 mcg per ml, 2 ml | | | | | Н | 1% | |
| Oral liq 50 mcg per ml | 12,626 | \$3,493 | \$0.2767 | | СН | 1% | |
| Tab 250 mcg | 928,869 | \$56,197 | \$0.0605 | | СН | 1% | |
| <u>Tab 62.5 mcg</u> | 7,665,371 | \$213,021 | \$0.0278 | | СН | 1% | |
| Dihydrocodeine tartrate | | | | | | | |
| Tab long-acting 60 mg | 4,763,652 | \$758,230 | \$0.1592 | | СН | 1% | |
| Dimethicone | | | | | | | |
| Lotn 4% - head lice suffocant | 3,584,800 | \$89,262 | \$0.0249 | | СН | 1% | |
| Crm 5% (pack size greater than 100 g) | 1,856,500 | \$17,043 | \$0.0092 | | С | 1% | There may be a preference for a pump |
| | | | | | | | bottle |
| Diphenoxylate hydrochloride with atropine Tab 2.5 mg with atropine sulphate 25 mcg | e sulphate | | | | Н | 1% | |
| Dipyridamole | | | | | | | |
| Oral long-acting 150 mg | 2,691,607 | \$516,789 | \$0.1920 | | СН | 1% | |
| Disodium edetate | | | | | | | |
| lnj 150 mg per ml, 100 ml | | | | | Н | 1% | |
| lnj 150 mg per ml, 20 ml | | | | | н | 1% | |
| Disulfiram | | | | | | | |
| Tab 200 mg | 364,705 | \$161,564 | \$0.4430 | | СН | 1% | |
| Docusate sodium | | | | | | | |
| Ear drops 0.5% | | | | | СН | 1% | Not currently listed in Section B of the Pharmaceutical Schedule |
| Dosulepin [Dothiepin] Hydrochloride | | | | | | | |
| Cap 25 mg | 2,500,145 | \$161,259 | \$0.0645 | | СН | | |
| Tab 75 mg | 904,757 | \$101,242 | \$0.1119 | | СН | | |
| Doxepin hydrochloride | | | | | | | |
| Cap 10 mg | 1,160,356 | \$73,102 | \$0.0630 | | СН | 1% | |
| Cap 25 mg | 1,364,066 | \$93,575 | \$0.0686 | | СН | 1% | |
| Cap 50 mg | 661,055 | \$56,520 | \$0.0855 | | СН | 1% | |
| Doxorubicin | | | | | | | |
| Inj 10 mg | | | | | PCT H | 1% | |
| Inj 50 mg | | | | | PCT H | 1% | |
| Inj 100 mg | | | | | PCT H | 1% | |
| Doxycycline | | | | | | | |
| Inj 100 mg per 20 ml | 0 555 517 | MOET 000 | # 0.00 − 0 | | Н | 1% | |
| Tab 100 mg | 9,555,517 | \$257,999 | \$0.0270 | * | СН | 1% | |
| Tab 50 mg | 637,398 | \$61,617 | \$0.0967 | * | СН | 1% | |
| Droperidol | | | | | | | |
| lnj 2.5 mg per ml, 1 ml | | | | | Н | 1% | |

| sc | | TWO: PRC | DUCTS 1 | IO E | BE T | ENC | DERE | Ð |
|---|----------------|-----------------|-----------------|------|------|----------------|------|---|
| Chemical Name | 110:40 | Cost | Unit | | | | DV | t Commente |
| Line Item | Units | Cost | Subsidy | | | | Limi | t Comments |
| Edrophonium chloride | | | | | | | 4.07 | |
| lnj 10 mg per ml, 1 ml | | | | | | H H | 1% | |
| lnj 10 mg per ml, 15 ml | | | | | | п | 1% | |
| Enalapril | 0.440.050 | A 00 454 | A 0.0000 | | | <u></u> | 4.07 | |
| Tab 5 mg | 2,442,856 | \$23,451 | \$0.0096 | | | СН | 1% | Preference for a scored tablet. |
| Tab 10 mg | 2,601,687 | \$32,261 | \$0.0124 | | | СН | 1% | |
| Tab 20 mg | 3,243,209 | \$57,729 | \$0.0178 | | | СН | 1% | |
| Ertapenem | | | | | | | 4.07 | |
| lnj 1 g vial | | | | | | Н | 1% | |
| Erythromycin Ethyl Succinate | | | | | | | | |
| Grans for oral liq 200 mg per 5 ml | 3,243,230 | \$162,162 | \$0.0500 | | | СН | 1% | |
| Grans for oral liq 400 mg per 5 ml | 3,692,468 | \$249,980 | \$0.0677 | | | СН | 1% | |
| Tab 400 mg | 3,351,051 | \$568,003 | \$0.1695 | | | СН | 1% | |
| Erythromycin Lactobionate | | * * : | 0 40 00 | | | 0 · · · | | |
| Inj 1 g | 419 | \$6,704 | \$16.0000 | | | СН | 1% | |
| Erythromycin Stearate | | | | | | | | |
| Tab 250 mg | 105,303 | \$15,743 | \$0.1495 | * | | СН | 1% | |
| Tab 500 mg | 48,180 | \$14,406 | \$0.2990 | * | | СН | 1% | |
| Ethambutol hydrochloride | | | | | | | | |
| Tab 100 mg | 30,123 | \$25,825 | \$0.8573 | | | СН | 1% | |
| Tab 400 mg | 80,351 | \$70,809 | \$0.8813 | | | СН | 1% | |
| Ethinyloestradiol with Desogestrel | | | | | | | | |
| Tab 20 mcg with desogestrel 150 mcg | 295,708 | \$23,305 | \$0.0788 | * | | СН | 1% | |
| Tab 30 mcg with desogestrel 150 mcg | 294,252 | \$23,190 | \$0.0788 | * | | СН | 1% | |
| Ethinyloestradiol with Norethisterone | | | | | | | | |
| Tab 35 mcg with norethisterone 1 mg | 100,296 | \$10,539 | \$0.1051 | | | СН | 1% | |
| Tab 35 mcg with norethisterone 500 mcg | 100,149 | \$10,524 | \$0.1051 | | | СН | 1% | |
| Etoposide | | | | | | | | |
| Inj 20 mg per ml, 5 ml | | | | | PCT | Н | 1% | |
| Cap 50 mg | | | | | PCT | Н | 1% | |
| Cap 100 mg | | | | | PCT | Н | 1% | |
| Fentanyl | | | | | | | | |
| inj 10 mcg per ml, 10 ml syringe | | | | | | H | 1% | |
| inj 10 mcg per ml, 100 ml premixed bag | | | | | | H | 1% | |
| inj 10 mcg per ml, 50 ml prefilled syringe | | | | | | H | 1% | |
| inj 10 mcg per ml, 50 ml premixed bag | | | | | | Н | 1% | |
| inj 20 mcg per ml, 100 ml bag | | | | | | Н | 1% | |
| Ferrous Sulphate | 0.040.477 | ¢400.400 | #0.0010 | | | o | 4.07 | |
| <u>Oral liq 30 mg (6 mg elemental) per ml</u> | 6,316,477 | \$136,436 | \$0.0216 | | | СН | 1% | There may be a preference for a child- resistant cap |
| Fluconazole | | | | | | | | · |
| lnj 2 mg per ml, 50 ml | | | | | | н | 1% | |
| <u>Inj 2 mg per ml, 100 ml</u> | | | | | | н | 1% | |
| Fludarabine phosphate | | | | | | | | |
| Inj 50 mg | | | | | РСТ | н | 1% | |
| Fluocortolone Caproate with Fluocortolon | e Pivalate and | Cinchocaine | | | | | | |
| Oint 950 mcg, with fluocortolone pivalate 920 mcg, and cinchocaine hydrochloride 5 mg per g | 2,413,740 | \$510,916 | \$0.2117 | | | СН | 1% | |
| Suppos 630 mcg, with fluocortolone pivalate 610 mcg, and cinchocaine hydrochloride 1 mg | 614,045 | \$136,115 | \$0.2217 | | | СН | 1% | |
| Fluorescein | | | | | | | | |
| Inj 10%, 5 ml vial | | | | | | Н | 1% | Preference for vial. |

| Fluorouracil sodium Inj 50 mg per ml, 50 ml PCT H 1% Fluoxetine hydrochloride [split market] Cap 20 mg 21,929,804 \$484,868 \$0.0221 C H 1% PHARM tender for ror two s dispersions Tab disperible 20 mg, scored 1,276,860 \$105,124 \$0.0823 C H 1% PHARM tender for market | Comments basidy expressed as "per ml" AAC reserves the right to award a for capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for is and dispersible tablets |
|---|--|
| Fluorometholone Fluorometholone C H 1% Unit suff Eye drops 0.1% 139,830 \$86,415 \$0.6180 C H 1% Unit suff Fluorouracil sodium PCT H 1% 1% Unit suff Inj 50 mg per ml, 50 ml PCT H 1% PHARM Fluoxetine hydrochloride [split market] 21,929,804 \$484,868 \$0.0221 C H 1% PHARM Tab disperible 20 mg, scored 1,276,860 \$105,124 \$0.0823 C H 1% PHARM tender f or two s dispersite Furosemide 1 100 mg per ml, 25 ml 502 \$4,833 \$9.6283 C H 1% PHARM tender f market capsule Furosemide 10,188 \$2,445 \$0.0823 C H 1% 1 Furosemide [Frusemide] 00,188 \$2,445 \$0.2400 C H 1% 1 Ganciclovir 78,900 \$28,036 \$0.3553 C H 1% 1 | AC reserves the right to award a for capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a or dispersible tablets for the whole or two separate tenders for |
| Eye drops 0.1% 139,830 \$86,415 \$0.6180 C H 1% Unit substrate Fluorouracil sodium PCT H 1% Init substrate Inj 50 mg per ml, 50 ml PCT H 1% Init substrate Fluoxetine hydrochloride [split market] PCT H 1% PHARM Cap 20 mg 21,929,804 \$484,868 \$0.0221 C H 1% PHARM tender for or two so dispersion Tab disperible 20 mg, scored 1,276,860 \$105,124 \$0.0823 C H 1% PHARM tender for market capsule Furosemide Inj 10 mg per ml, 25 ml 502 \$4,833 \$9.6283 C H 1% Intervet capsule Furosemide [Frusemide] 10,188 \$2,445 \$0.2400 C H 1% Intervet capsule Ganciclovir 78,900 \$28,036 \$0.3553 C H 1% Intervet capsule | MAC reserves the right to award a for capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for |
| Fluorouracil sodium PT H 1% Inj 50 mg per ml, 50 ml PT H 1% Fluoxetine hydrochloride [split market] Furoxetine hydrochloride [split market] PHARM Cap 20 mg 21,929,804 \$484,868 \$0.0221 C H 1% PHARM Tab disperible 20 mg, scored 1,276,860 \$105,124 \$0.0823 C H 1% PHARM Furosemide 1,276,860 \$105,124 \$0.0823 C H 1% PHARM Inj 10 mg per ml, 25 ml 502 \$4,833 \$9.6283 C H 1% PHARM Inj 10 mg per ml, 2 ml 10,188 \$2,445 \$0.2400 C H 1% PHARM Gral liq 10 mg per ml 78,900 \$28,036 \$0.3553 C H 1% F | MAC reserves the right to award a for capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for |
| Inj 50 mg per ml, 50 ml PCT H 1% Fluoxetine hydrochloride [split market] State of the stat | For capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for |
| Fluoxetine hydrochloride [split market] Cap 20 mg 21,929,804 \$484,868 \$0.0221 C H 1% PHARM tender for or two s dispersion or two s dispersion or two s dispersion or two s dispersion or two s dispersion. Tab disperible 20 mg, scored 1,276,860 \$105,124 \$0.0823 C H 1% PHARM tender for or two s dispersion. Tab disperible 20 mg, scored 1,276,860 \$105,124 \$0.0823 C H 1% PHARM tender for market. Inj 10 mg per ml, 25 ml 502 \$4,833 \$9.6283 C H 1% Imarket. Inj 10 mg per ml, 25 ml 502 \$4,833 \$9.6283 C H 1% Imarket. Inj 10 mg per ml, 2 ml 10,188 \$2,445 \$0.2400 C H 1% Imarket. Ganciclovir 78,900 \$28,036 \$0.3553 C H 1% Imarket. | For capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for |
| Cap 20 mg 21,929,804 \$484,868 \$0.0221 C H 1% PHARM tender for two s dispersion of two dispersion of two s | For capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for |
| Tab disperible 20 mg, scored1,276,860\$105,124\$0.0823C H1%PHARM tender f market capsuleFurosemide </td <td>For capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for</td> | For capsules for the whole market separate tenders for capsules and ible tablets MAC reserves the right to award a for dispersible tablets for the whole or two separate tenders for |
| Furosemide state | or dispersible tablets for the whole or two separate tenders for |
| Inj 10 mg per ml, 25 ml 502 \$4,833 \$9.6283 C H 1% Inj 10 mg per ml, 2 ml 10,188 \$2,445 \$0.2400 C H 1% Furosemide [Frusemide] 0ral liq 10 mg per ml 78,900 \$28,036 \$0.3553 C H 1% Ganciclovir 500 <td></td> | |
| Inj 10 mg per ml, 2 ml 10,188 \$2,445 \$0.2400 C H 1% Furosemide [Frusemide] 0ral liq 10 mg per ml 78,900 \$28,036 \$0.3553 C H 1% Ganciclovir V | |
| Furosemide [Frusemide] Oral liq 10 mg per ml 78,900 \$28,036 \$0.3553 C H 1% Ganciclovir | |
| Oral liq 10 mg per ml 78,900 \$28,036 \$0.3553 C H 1% Ganciclovir | |
| | |
| Inj 500 mg H 1% | |
| | |
| Gemcitabine hydrochloride | |
| Inj 200 mg PCT H 1% | |
| Inj 1 g PCT H 1% | |
| Gemfibrozil 371.717 \$121.180 \$0.3260 C H 1% | |
| | |
| Gentamicin Sulphate Eye drops 0.3% 1,220 \$2,782 \$2.2800 C H 1% Single c | dose presentation would not be a |
| | irmaceutical |
| Glycerin with sodium saccharin | |
| Suspension 84,948 \$5,837 \$0.0687 C H 1% | |
| Glycerin with sucrose | |
| Suspension 469,226 \$32,241 \$0.0687 C H 1% | |
| Glyceryl trinitrate | |
| Spray 400 mcg per dose 5,259,900 \$93,626 \$0.0178 C H 1% Tab 000 mcg 2,700 \$0000 \$0.0178 C H 1% | |
| Tab 600 mcg 3,700 \$296 \$0.0800 C H 1% Patch 25 mg, 5 mg per day 63,942 \$33,527 \$0.5243 C H 1% | |
| Patch 50 mg, 10 mg per day 29,253 \$18,156 \$0.6207 C H 1% | |
| Haloperidol | |
| <u>Inj 5 mg per ml, 1 ml</u> 85,655 \$184,587 \$2.1550 C H 1% | |
| <u>Oral liq 2 mg per ml</u> 63,832 \$15,218 \$0.2384 C H 1% | |
| Tab 500 mcg 1,170,972 \$72,952 \$0.0623 C H 1% | |
| Tab 1.5 mg 195,233 \$18,410 \$0.0943 C H 1% | |
| Tab 5 mg 202,784 \$60,267 \$0.2972 C H 1% | |
| Haloperidol decanoate | |
| Inj 100 mg per ml, 1 ml ampoule 5,400 \$60,372 \$11.1800 C H 1% | |
| Inj 50 mg per ml, 1 ml ampoule 3,069 \$17,426 \$5.6780 C H 1% | |
| Hexamine hippurate Tab 1 g 451,231 \$83,027 \$0.1840 * C H 1% | |
| | |
| Hyaluronidase Inj 1,500 iu per ml H 1% | |
| Hydrocortisone | |
| Crm 1% (pack size greater than 15 g and less than or equal to 100 g) 17,104,366 \$632,862 \$0.0370 C H 1% There may always | nay be a preference for a sodium ulphate (SLS)-free presentation. es shown are for 30 g presentation. |
| <u>Crm 1% (pack size greater than 100 g)</u> 17,104,366 \$555,892 \$0.0325 C H 1% There n | nay be a preference for a sodium ulphate (SLS)-free presentation |

| SCHEDULE TWO: PRODUCTS TO BE TENDERED | | | | | | | | | | |
|--|-------------|-------------|------------|---|-------|--|--|--|--|--|
| Chemical Name | | | Unit | DV | | | | | | |
| Line Item | Units | Cost | Subsidy | Limit Comments | | | | | | |
| Hydrocortisone | | | | | | | | | | |
| <u>lnj 50 mg per ml, 2 ml</u> | 5,558 | \$29,457 | \$5.3000 | C H 1% | | | | | | |
| Hydrocortisone with Cinchocaine | | | | | | | | | | |
| Oint 0.05% with cinchocaine hydrochlori 0.05% per g | de 895,530 | \$447,765 | \$0.5000# | CH 1% | | | | | | |
| Suppos 5 mg with cinchocaine hydrochloride 5 mg per g | 249,226 | \$205,611 | \$0.8250# | CH 1% | | | | | | |
| Hyoscine (Scopolamine) | | | | | | | | | | |
| Patches, 1.5 mg | 28,861 | \$172,444 | \$5.9750 | C H 1% Special Authority restrictions may ap | ply. | | | | | |
| Hyoscine hydrobromide Inj 400 mcg per ml, 1 ml | 11,940 | \$111,042 | \$9.3000 | СН 1% | | | | | | |
| lloprost | | | | | | | | | | |
| lnj 100 mcg per ml, 0.5 ml | | | | H 1% | | | | | | |
| Nebuliser soln 10 mcg per ml, 2 ml | 14,308 | \$565,166 | \$39.5000# | C H 1% Special Authority restrictions may ap | ply. | | | | | |
| Imipramine Hydrochloride | | | | | | | | | | |
| Tab 10 mg | 1,106,025 | \$121,331 | \$0.1097 | C H 1% | | | | | | |
| Tab 25 mg | 314,677 | \$55,383 | \$0.1760 | C H 1% | | | | | | |
| Indapamide | | | | | | | | | | |
| <u>Tab 2.5 mg</u> | 1,408,970 | \$40,705 | \$0.0289 | CH 1% | | | | | | |
| Intra-Uterine Copper Device | | | | | | | | | | |
| IUD long | 4,577 | \$144,633 | \$31.6000 | C H 1% PHARMAC reserves the right to awa one, some or all presentations of intr uterine copper device. Refer to Sche 7 for additional Special Terms. | ra- | | | | | |
| IUD medium | 6,363 | \$201,071 | \$31.6000 | C H 1% PHARMAC reserves the right to awa one, some or all presentations of intr uterine copper device. Refer to Sche 7 for additional Special Terms. | ra- | | | | | |
| IUD short | 3,038 | \$96,001 | \$31.6000 | C H 1% PHARMAC reserves the right to awa one, some or all presentations of intr uterine copper device. Refer to Sche 7 for additional Special Terms. | ra- | | | | | |
| Ipratropium bromide | | | | | | | | | | |
| Nebuliser soln, 250 mcg per ml, 1 ml | 41,210 | \$6,903 | \$0.1675 | СН 1% | | | | | | |
| Nebuliser soln, 250 mcg per ml, 2 ml | 125,978 | \$22,172 | \$0.1760 | C H 1% | | | | | | |
| Iron sucrose | | | | | | | | | | |
| Inj 20 mg per ml, 5 ml ampoule | | | | H 1% | | | | | | |
| Itraconazole | | | | | | | | | | |
| <u>Cap 100 mg</u> | 306,370 | \$56,985 | \$0.1860 | C H 1% | | | | | | |
| Ketamine | | | | | | | | | | |
| Inj 1 mg per ml, 100 ml bag | | | | H 1% | | | | | | |
| Inj 10 mg per ml, 10 ml syringe | | | | H 1% | | | | | | |
| Inj 4 mg per ml, 50 ml syringe | | | | H 1% | | | | | | |
| Ketoconazole Tab 200 mg | 1,938 | | | C H 1% This is a cost-brand source product. | | | | | | |
| 3 | 1,900 | | | | | | | | | |
| Ketoprofen Cap long-acting 200 mg | 98,669 | \$42,533 | \$0.4311 | СН 1% | | | | | | |
| Lacosamide | 00,000 | Ψ-2,000 | ψυτυτι | | | | | | | |
| Inj 10 mg per ml, 20 ml | | | | H 1% Special Authority restrictions may ap | oply. | | | | | |
| Lactulose | | | | . , | | | | | | |
| <u>Oral liq 10 g per 15 ml</u> | 195,647,863 | \$1,244,320 | \$0.0064 | C H 1% Preference for a pack size of 500 ml similar | or | | | | | |
| Levetiracetam | | | | | | | | | | |
| <u>Inj 100 mg per ml, 5 ml</u> | | | •- | H 1% | | | | | | |
| Tab 1 g | 154,936 | \$152,663 | \$0.9853# | C H 1% | | | | | | |

| S | CHEDULE | TWO: PRO | DUCTS TO I | BE TENDER | ED |
|--|---------------|-------------|-----------------|------------|--|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | DV Limi | it Comments |
| Levetiracetam | | | , | | |
| Tab 250 mg | 1,560,271 | \$624,889 | \$0.4005# | CH 1% | Longer transition periods may apply to this product |
| Tab 500 mg | 4,722,766 | \$2,259,843 | \$0.4785# | CH 1% | Longer transition periods may apply to this product |
| Tab 750 mg | 574,978 | \$433,436 | \$0.7538# | CH 1% | Longer transition periods may apply to this product |
| Levomepromazine | | | | | |
| Inj 25 mg per ml, 1 ml | 66,327 | \$317,640 | \$4.7890 | CH 1% | |
| Tab 100 mg | 84,057 | \$36,951 | \$0.4396 | CH 1% | Preference for a scored tablet. |
| Tab 25 mg | 482,616 | \$81,707 | \$0.1693 | CH 1% | Preference for a scored tablet. |
| Levonorgestrel | | | | | |
| <u>1.5 mg</u> | 70,593 | \$349,435 | \$4.9500 | CH 1% | |
| Tab 30 mcg | 196,644 | \$15,498 | \$0.0788# * | СН | |
| Levosimendan | | | | | |
| lnj 2.5 mg per ml, 10 ml | | | | H 1% | |
| lnj 2.5 mg per ml, 5 ml | | | | H 1% | |
| Lidocaine [Lignocaine] | | | | | |
| Gel 2 %, 10 ml urethral syringe | 58,265 | \$423,878 | \$7.2750 | CH 1% | More than one brand is currently listed in the Pharmaceutical Schedule. Unit subsidy shown as the average unit subsidy of the products listed in the 2018 FYR. |
| Lidocaine [Lignocaine] hydrochloride | | | | | |
| Inj 1%, 20 ml, sterile pack | | | | H 1% | |
| lnj 2%, 20 ml, sterile pack | | | | H 1% | |
| Inj 2%, 5 ml, sterile pack | | | | H 1% | Not currently listed in the Pharmaceutical Schedule |
| lnj, 1%, 5 ml, sterile pack | | | | H 1% | Not currently listed in the Pharmaceutical Schedule |
| Spray - 10 mg dose per spray | | | | H 1% | |
| lnj 1%, 5 ml | 109,777 | \$38,422 | \$0.3500 | CH 1% | There may be a preference for plastic ampoules. |
| lnj 1%, 20 ml | 2,212 | \$5,309 | \$2.4000 | CH 1% | There may be a preference for plastic ampoules. |
| lnj 2%, 5 ml | 23,062 | \$6,365 | \$0.2760 | CH 1% | There may be a preference for plastic ampoules. |
| lnj 2%, 20 ml | 285 | \$684 | \$2.4000 | CH 1% | There may be a preference for plastic ampoules. |
| Lidocaine [lignocaine] hydrochloride with | n adrenaline | | | | |
| Inj 1% with adrenaline 1:100,000, 5 ml | | | | H 1% | |
| Inj 1% with adrenaline 1:200,000, 20 ml | | | | H 1% | Sterile pack preferred |
| Inj 2% with adrenaline 1:200,000, 20 ml | | | | H 1% | Sterile pack preferred |
| Lidocaine [Ligocaine] hydrochloride with | chlorhexidine |) | | | |
| Gel 2% with 0.05% chlorhexidine, 10 ml urethral syringe | | | | H 1% | |
| Lincomycin | | | | | |
| lnj 300 mg per ml, 2 ml | | | | H 1% | |
| Lithium carbonate (immediate-release) | | | | | |
| Cap 250 mg | 1,763,507 | \$166,122 | \$0.0942 | CH 1% | |
| Tab 250 mg | 1,484,999 | \$101,871 | \$0.0686 | CH 1% | |
| Tab 400 mg | 321,391 | \$41,234 | \$0.1283 | CH 1% | |
| Loperamide hydrochloride [split market] | | | | | |
| <u>Cap 2 mg</u> | 9,701,128 | \$170,934 | \$0.0176 | CH 1% | PHARMAC reserves the right to award a tender for capsules for the whole market or two separate tenders for capsules and tablets |

| S | CHEDULE | TWO: PRO | DUCTS TO | BE TEN | DERE | Ð |
|--|----------------|---------------|-----------------|-------------|------|--|
| Chemical Name | | | Unit | | DV | |
| Line Item | Units | Cost | Subsidy | | Limi | t Comments |
| Loperamide hydrochloride [split market] | | | | | | |
| <u>Tab 2 mg</u> | 1,861,659 | \$50,041 | \$0.0269 | СН | 1% | PHARMAC reserves the right to award a tender for tablets for the whole market or two separate tenders for capsules and tablets |
| Loratadine | | | | | | |
| <u>Oral liq 1 mg per ml</u> | 21,471,186 | \$384,764 | \$0.0179 | СН | 1% | |
| <u>Tab 10 mg</u> | 29,461,627 | \$377,109 | \$0.0128 | СН | 1% | |
| Lorazepam | | | | | | |
| lnj 2 mg per ml, 1 ml | | | | Н | 1% | |
| lnj 4 mg per ml, 1 ml | | | | н | 1% | |
| Lormetazepam | | | | | | |
| Tab 1 mg | 31,050 | \$3,219 | \$0.1037 * | СН | 1% | |
| Macrogol 3350 | | | | | | |
| Powder for oral soln | | | | СН | 1% | Not currently listed on the Pharmaceutical Schedule, Special Authority restrictions may apply. Note this is an electrolyte free presentation. |
| Macrogol 3350 with ascorbic acid, potass | ium chloride a | and sodium ch | loride | | | |
| Powder for oral soln 755.68 mg with ascorbic acid 85.16 mg, potassium chloride 10.55 mg, sodium chloride 37.33 mg and sodium sulphate 80.62 mg per g, 210 g sachet | | | | н | 1% | |
| Powder for oral soln 755.68 mg with ascorbic acid 85.16 mg, potassium chloride 10.55 mg, sodium chloride 37.33 mg and sodium sulphate 80.62 mg per g, 70 g sachet | | | | н | 1% | |
| Macrogol 3350 with potassium chloride, s Powder for oral soln 6.563 g with potassium chloride 23.3 mg, sodium bicarbonate 89.3 mg and sodium chloride 175.4 mg | odium bicarb | onate and sod | ium chloride | н | 1% | |
| Macrogol 3350 with potassium chloride, s | odium bicarb | onate, sodium | chloride and so | odium sulph | ate | |
| Powder for oral soln 59 g with potassium chloride 0.7425 g, sodium bicarbonate 1.685 g, sodium chloride 1.465 g and sodium sulphate 5.685 g per sachet | | | | Н | | |
| Macrogol 400 and propylene glycol | | | | | | |
| Eye drops 0.4% and propylene glycol 0.3%, 0.4 ml | 336,164 | \$60,231 | \$0.1792 | СН | 1% | Special Authority restrictions may apply. |
| Magnesium Hydroxide | | | | | 40/ | |
| Tab 311 mg | | | | Н | 1% | |
| Magnesium Oxide Cap 663 mg (400 mg elemental) | | | | Н | 1% | |
| | | | | | 1 70 | |
| Magnesium sulphate Inj 0.4 mmol per ml, 250 ml bag | | | | Н | 1% | |
| Maprotiline Hydrochloride | | | | | | |
| Tab 25 mg | 55,224 | \$13,839 | \$0.2506 | СН | 1% | |
| Tab 75 mg | 2,627 | \$1,840 | \$0.7003 | СН | 1% | |
| Medroxyprogesterone acetate | | | | | | |
| Inj long-acting 150 mg per ml, 1 ml syringe | | \$1,056,891 | \$7.2500 | СН | 1% | |
| <u>Tab 2.5 mg</u> | 565,728 | \$70,716 | \$0.1250 | СН | 1% | |
| <u>Tab 5 mg</u> | 697,383 | \$97,634 | \$0.1400 | СН | 1% | |
| Tab 10 mg | 1,469,736 | \$350,282 | \$0.2383 | СН | 1% | |
| <u>Tab 100 mg</u> | 30,276 | \$30,579 | \$1.0100 | СН | 1% | |

| S | CHEDULE | TWO: PRO | DUCTS TO | BE TENI | DERE | D |
|--|-----------------------------|-----------|-----------------|----------------------------------|----------------------|---|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | | DV Limi | t Comments |
| | Units | CUSI | Subsidy | | LIIII | Comments |
| Meloxicam [current access] Tab 7.5 mg | 19,406 | \$7,439 | \$0.3833 | СН | 1% | PHARMAC would only award a tender for either current access or widened access. PHARMAC reserves the right to amend access. Note 'current access' refers to access available as of 1 July 2018 |
| Meloxicam [widened access] | | | | | | |
| Tab 7.5 mg | | | | СН | 1% | PHARMAC would only award a tender for either current access or widened access. PHARMAC reserves the right to amend access. Widened access would result in open access (e.g. no restrictions). |
| Mercaptopurine Tab 50 mg | | | | РСТ Н | 1% | |
| - | | | | | . /0 | |
| Mesna Inj 100 mg per ml, 4 ml Inj 100 mg per ml, 10 ml Tab 400 mg Tab 600 mg | | | | PCT H PCT H PCT H PCT H | 1% 1% 1% 1% | |
| - | | | | FULI | 1 70 | |
| Methotrexate Inj 25 mg per ml, 2 ml Inj 25 mg per ml, 20 ml | | | | PCT H PCT H | 1% 1% | |
| Methyl Hydroxybenzoate | | | | | | |
| Powder | 2,143 | \$770 | \$0.3592 | СН | 1% | |
| Methylcellulose | | | | | | |
| Powder | 2,628 | \$971 | \$0.3695 | СН | 1% | |
| Suspension | 617,816 | \$42,450 | \$0.0687 | СН | 1% | |
| Methylcellulose with glycerin and sodium Suspension | saccharin 865,831 | \$59,491 | \$0.0687 | СН | 1% | |
| Methylcellulose with glycerin and sucrose Suspension | e 1,260,226 | \$86,590 | \$0.0687 | СН | 1% | |
| Methylprednisolone aceponate | | | | | | |
| Crm 0.1% | 592,350 | \$195,476 | \$0.3300 | СН | 1% | |
| Oint 0.1% | 359,175 | \$118,528 | \$0.3300 | СН | 1% | |
| Methylprednisolone Acetate with Lignoca | line | | | | | |
| Inj 40 mg per ml with lignocaine 1 ml | 1,877 | \$17,362 | \$9.2500 | СН | 1% | |
| Inj 40 mg per ml with lignocaine 2 ml | | | | СН | 1% | Not currently listed on the Pharmaceutical Schedule. |
| Metoclopramide hydrochloride | | | | | | |
| Inj 5 mg per ml, 2 ml ampoule Oral liq 5 mg per 5 ml | 216,568 | \$97,456 | \$0.4500 | С Н С Н | 1% 1% | Not currently listed in Section B of the Pharmaceutical Schedule |
| Metronidazole | | | | | | |
| Inj 5 mg per ml, 100 ml bag | | | | Н | 1% | |
| Inj 5 mg per ml, 100 ml bottle | | | | Н | 1% | |
| Mexiletine | | | • | | | |
| Cap 150 mg | 41,739 | \$67,617 | \$1.6200 | СН | 1% | |
| Cap 250 mg | 10,529 | \$21,269 | \$2.0200 | СН | 1% | |
| Mianserin hydrochloride Tab 30 mg | | | | Н | 1% | |
| Mifepristone | | | | | | |
| Tab 200 mg | | | | Н | 1% | |
| Minocycline hydrochloride | | | | | | |
| Cap 100 mg | 134,993 | | * | СН | 1% | PHARMAC may choose to accept one or both presentations of minocycline capsules or tablets. |

| | SCHEDULE 1 | rwo: Pro | DDUCTS TO | BE TENI | DERE | Ð |
|---|------------|---------------------------|------------------|---------|----------|--|
| Chemical Name | | | Unit | | DV | |
| Line Item | Units | Cost | Subsidy | | Limi | t Comments |
| Minocycline hydrochloride | | | | | | |
| Tab 50 mg | 510,539 | | * | СН | 1% | PHARMAC may choose to accept one or both presentations of minocycline capsules or tablets. Special Authority restrictions may apply. |
| Misoprostol | | A / A A A A | AA A I AA | 0.11 | 4.94 | |
| Tab 200 mcg | 44,191 | \$15,283 | \$0.3458 | СН | 1% | |
| Mitomycin C Inj 5 mg | | | | РСТ Н | 1% | |
| Montelukast | | | | | | |
| <u>Tab 10 mg</u> | 584,127 | \$117,871 | \$0.2018 | СН | 1% | |
| <u>Tab 4 mg</u> | 173,180 | \$32,471 | \$0.1875 | СН | 1% | |
| <u>Tab 5 mg</u> | 173,675 | \$34,115 | \$0.1964 | СН | 1% | |
| Morphine sulphate | | | | | | |
| Cap long-acting 10 mg | 3,285,522 | \$558,539 | \$0.1700 | СН | 1% | |
| Cap long-acting 30 mg | 1,002,918 | \$250,730 | \$0.2500 | СН | 1% | |
| Cap long-acting 60 mg | 319,923 | \$172,758 | \$0.5400 | СН | 1% | |
| Cap long-acting 100 mg | 174,770 | \$111,503 | \$0.6380 | СН | 1% | |
| Tab long-acting 10 mg | 708,610 | \$136,762 | \$0.1930 | СН | 1% | |
| Tab long-acting 30 mg | 222,199 | \$63,327 | \$0.2850 | СН | 1% | |
| Tab long-acting 60 mg | 103,803 | \$58,130 | \$0.5600 | СН | 1% | |
| Tab long-acting 100 mg | 155,220 | \$94,684 | \$0.6100 | СН | 1% | |
| Morphine tartrate | | | | | | |
| <u>Inj 80 mg per ml, 1.5 ml</u> | 16,670 | \$142,428 | \$8.5440 | СН | 1% | |
| Moxifloxacin | | | | | | |
| lnj 1.6 mg per ml, 250 ml | | | | Н | 1% | |
| Tab 400 mg | 11,564 | \$120,266 | \$10.4000 | СН | 1% | May be subject to Special Authority restrictions. |
| Multivitamins | | | | | | |
| Tab (BPC cap strength) | 15,597,496 | \$163,774 | \$0.0105 | СН | 1% | |
| Mupirocin (pack size 5 g or less) | | | | | | |
| Oint 2% | 626,565 | \$275,689 | \$0.4400 * | СН | 1% | Any agreement may be subject to Special Authority restriction. Intended for intra- nasal administration only. All other pack sizes of mupirocin would be delisted should a tender award be made. |
| Nicorandil | | | | | | |
| Tab 10 mg | 508,113 | \$236,694 | \$0.4658# | СН | 1% | |
| Tab 20 mg | 103,701 | \$57,520 | \$0.5547# | СН | 1% | |
| Nicotine | | | | | | |
| Oral spray 1 mg per dose | | | | Н | 1% | Access restrictions apply. |
| Soln for inhalation 15 mg cartridge | | | | Н | 1% | Access restrictions apply. |
| Nimodipine | | | | | | |
| Inj 0.2 mg per ml, 50 ml Tab 30 mg | | | | н | 1% 1% | |
| - | | | | | 1 70 | |
| Nitazoxanide Tab 500 mg | | | | Н | 1% | |
| , i i i i i i i i i i i i i i i i i i i | | | | | 170 | |
| Nitrazepam Tab 5 mg | 388,701 | \$20,290 | \$0.0522 | СН | 1% | |
| - | 000,101 | <i>\\</i> 20,200 | \$0.0022 | 011 | 170 | |
| Nitrofurantoin Modified-release 100 mg | | | | СН | 1% | Not currently listed on the Pharmaceutical Schedule. |
| Noradrenaline | | | | | | |
| Inj 0.06 mg per ml, 100 ml bag | | | | Н | 1% | |
| lnj 0.06 mg per ml, 50 ml syringe | | | | н | 1% | |
| | | | | | | |

| | SCHEDULE | TWO: PRC | DUCTS TO |) BE | TEND | ERE | D |
|------------------------------------|------------|----------------|-------------|------|------|-------|---|
| Chemical Name | | | Unit | | | DV | |
| Line Item | Units | Cost | Subsidy | | | Limit | t Comments |
| Noradrenaline | | | | | | | |
| lnj 0.1 mg per ml, 100 ml bag | | | | | Н | 1% | |
| lnj 0.12 mg per ml, 100 ml bag | | | | | Н | 1% | |
| Inj 0.12 mg per ml, 50 ml syringe | | | | | Н | 1% | |
| Inj 0.16 mg per ml, 50 ml syringe | | | | | Н | 1% | |
| Inj 1 mg per ml, 100 ml bag | | | | | Н | 1% | |
| Inj 1 mg per ml, 4 ml ampoule | | | | | Н | 1% | |
| Norfloxacin | | | | | | | |
| Tab 400 mg | 129,898 | \$175,362 | \$1.3500 | | СН | 1% | |
| Nortriptyline hydrochloride | | | | | | | |
| Tab 10 mg | 11,295,161 | \$363,704 | \$0.0322 | | СН | 1% | |
| <u>Tab 25 mg</u> | 8,541,407 | \$335,934 | \$0.0393 | | СН | 1% | |
| Nystatin | | | | | | | |
| Cap 500,000 u | 100,731 | \$25,807 | \$0.2562 * | | СН | 1% | |
| Crm 100,000 u per g | 15,990 | \$1,066 | \$0.0667 * | | СН | 1% | |
| Tab 500,000 u | 39,572 | \$11,207 | \$0.2832 * | | СН | 1% | |
| Octreotide (somatostatin analogue) | | | | | | | |
| LAR 10 mg pre-filled syringe | 312 | \$553,020 \$ | 1,772.5000# | + | СН | 1% | Special Authority restrictions may apply. |
| LAR 20 mg pre-filled syringe | 2,032 | \$4,792,980 \$ | 2,358.7500# | + | СН | 1% | Special Authority restrictions may apply. |
| LAR 30 mg pre-filled syringe | 1,871 | \$5,521,789 \$ | 2,951.2500# | + | СН | 1% | Special Authority restrictions may apply. |
| Oestradiol | | | | | | | |
| Tab 1 mg | 376,432 | \$55,388 | \$0.1471 * | | СН | 1% | |
| Tab 2 mg | 240,492 | \$35,386 | \$0.1471 * | | СН | 1% | |
| TDDS 25 mcg per day | 184,669 | \$141,272 | \$0.7650 | | СН | 1% | |
| TDDS 50 mcg per day | 236,200 | \$207,856 | \$0.8800 | | СН | 1% | |
| TDDS 75 mcg per day | 29,116 | \$28,788 | \$0.9888 | | СН | 1% | |
| <u>TDDS 100 mcg per day</u> | 82,208 | \$81,283 | \$0.9888 | | СН | 1% | |
| Oily Phenol | | | | | | | |
| lnj 5%, 5 ml | | | | | н | 1% | |
| Olopatadine | | | | | | | |
| Eye drops 5% | 664,890 | \$1,329,780 | \$2.0000# | | СН | 1% | |
| Omeprazole | | | | | | | |
| Inj 40 mg | | | | | Н | 1% | |
| Inj 40 mg with diluent | 3,137 | \$21,319 | \$6.7960 | | СН | 1% | |
| Tab dispersible 20 mg | | | | | Н | 1% | |
| Powder | 8,065 | \$68,549 | \$8.5000 | | СН | 1% | |
| Ondansetron | | | | | | | |
| <u>Tab 4 mg</u> | 1,963,626 | \$131,956 | \$0.0672 | | СН | 1% | |
| <u>Tab 8 mg</u> | 591,448 | \$56,424 | \$0.0954 | | СН | 1% | |
| Ondansetron hydrochloride | | | | | | | |
| lnj 2 mg per ml, 2 ml | | | | | Н | 1% | |
| lnj 2 mg per ml, 4 ml | | | | | Н | 1% | |
| Ornidazole | | | | | | | |
| <u>Tab 500 mg</u> | 134,247 | \$308,768 | \$2.3000 | | СН | 1% | |
| Oxybutynin | | | | | | | |
| <u>Oral liq 1 mg per ml</u> | 392,786 | \$50,159 | \$0.1277 | | СН | 1% | |
| <u>Tab 5 mg</u> | 6,053,064 | \$107,139 | \$0.0177 | | СН | 1% | |
| Oxycodone hydrochloride | | | | | | | |
| lnj 1 mg per ml, 100 ml bag | | | | | Н | 1% | |
| Oxymetazoline hydrochloride | | | | | | | |
| Aqueous nasal spray 0.25 mg per ml | | | | | H | 1% | |
| Aqueous nasal spray 0.5 mg per ml | | | | | Н | 1% | |

| S | CHEDULE | TWO: PR | ODUCTS TO | D BE TEN | DERE | D |
|---|-------------------------|------------------------|----------------------|------------|-------|---|
| Chemical Name | | | Unit | | DV | |
| Line Item | Units | Cost | Subsidy | | Limi | t Comments |
| Paliperidone | | | | | | |
| Inj 100 mg syringe | 10,206 | \$4,440,835 | \$435.1200# | + CH | H 1% | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| Inj 150 mg syringe | 11,408 | \$4,963,849 | \$435.1200# | + CH | H 1% | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| Inj 25 mg syringe | 675 | \$131,119 | \$194.2500# | + CH | H 1% | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| Inj 50 mg syringe | 2,068 | \$562,393 | \$271.9500# | + CH | H 1% | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| Inj 75 mg syringe | 4,437 | \$1,585,873 | \$357.4200# | + CH | H 1% | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| Pancreatic enzyme | | | | | | |
| Cap pancreatin (175 mg (25,000 lipase, 22,500 U amylase, 1,250 U protease)) | 66,001 | \$62,305 | \$0.9440 | CH | H 1% | |
| Powder pancreatin 60.12 mg (3,600 Ph. Eur. u/amylase, 5,000 Ph. Eur. u/lipase and 200 Ph. Eur/protease) | | | | ŀ | H 1% | |
| Pantoprazole | | | | | | |
| Inj 40 mg | | | | H | | |
| <u>Tab EC 20 mg</u> <u>Tab EC 40 mg</u> | 8,808,229 10,070,485 | \$212,278 \$337,361 | \$0.0241 \$0.0335 | C H C H | | |
| Paper wasp venom | | | | | | |
| Inj 550 mcg vial with diluent | 99 | \$30,195 | \$305.0000 | CH | H 1% | Special Authority restrictions may apply. |
| Treatment kit - 6 vials 120 mcg freeze dried venom, with diluent | | | \$305.0000 | CH | H 1% | Special Authority restrictions may apply. |
| Paracetamol | | | | | | |
| Suppos 25 mg Suppos 50 mg | | | | ł | | |
| Paraffin | | | | | | |
| Enema 133 ml | | | | ŀ | H 1% | |
| Oral liquid 1 mg per ml | | | | ŀ | H 1% | |
| White soft - 2,500 g | 2,253,779 | \$18,211 | \$0.0081 | С | | PHARMAC reserves the right to amend access. |
| White soft - 500 g | 2,253,779 | \$16,137 | \$0.0072 * | CH | H 1% | PHARMAC reserves the right to amend access. |
| Paromomycin | | | | | | |
| Cap 250 mg | 951 | \$7,489 | \$7.8750 | CH | H 1% | Special Authority restrictions may apply. |
| Paroxetine | | | | | | |
| <u>Tab 20 mg</u> | 10,400,813 | \$464,604 | \$0.0447 | CH | 1 1% | Tablet must be scored |
| Pegfilgrastim | | | * | 0.1 | 1 101 | |
| Inj 6 mg per 0.6 ml prefilled syringe Pemetrexed | 6,943 | \$7,498,440 | \$1,080.0000# | CH | H 1% | Special Authority restrictions may apply. |
| Powder for infusion, 100 mg | | | | PCT H | H 1% | Special Authority restrictions may apply. |
| Powder for infusion, 500 mg | | | | PCT H | H 1% | Special Authority restrictions may apply. |
| Pentamidine isethionate Inj 300 mg | | | | ŀ | H 1% | |
| Perhexiline maleate | | | | | | |
| <u>Tab 100 mg</u> | 267,095 | \$168,002 | \$0.6290 | CH | H 1% | |
| Pericyazine | | | | | | |
| Tab 10 mg | 150,273 | \$66,796 | \$0.4445 | CH | H 1% | |
| Tab 2.5 mg | 242,636 | \$30,305 | \$0.1249 | CH | H 1% | |
| Phenothrin | | | | | | |
| Shampoo 0.5% sole supply | 5,682,900 | \$322,789 | \$0.0568# | CH | | =rebate *=part charge @=ASP +=patent |

| SCI | HEDULE " | TWO: PRC | DUCTS TO | BE TE | END | ERE | D |
|--|-----------|-----------|------------|-------|-----|-------|---|
| Chemical Name | | | Unit | | | DV | |
| Line Item | Units | Cost | Subsidy | | I | Limit | Comments |
| Phenoxymethylpenicillin (Penicillin V) | | | | | | | |
| <u>Cap 250 mg</u> | 301,981 | \$15,643 | \$0.0518 | (| СН | 1% | |
| <u>Cap 500 mg</u> | 1,939,886 | \$165,278 | \$0.0852 | (| СН | 1% | |
| Grans for oral liq 125 mg per 5 ml | 522,052 | \$7,726 | \$0.0148 | (| СН | 1% | |
| <u>Grans for oral liq 250 mg per 5 ml</u> | 3,680,663 | \$58,154 | \$0.0158 | (| СН | 1% | |
| Phentolamine Mesylate | | | | | | | |
| lnj 10 mg per ml, 1 ml | | | | | Н | 1% | |
| lnj 5 mg per ml, 1 ml | | | | | Н | 1% | |
| Pholcodine | | | | | | | |
| Oral liq 1 mg per ml | | | | | н | 1% | |
| Pimozide | | | | | | | |
| Tab 2 mg or less | | | | (| СН | 1% | Not currently listed in the Pharmaceutical Schedule |
| Tab 4 mg or more | | | | (| СН | 1% | Not currently listed in the Pharmaceutical Schedule |
| Piperacillin with tazobactam | | | | | | | |
| Inj 4 g with tazobactam 500 mg | | | | | Н | 1% | |
| Pivmecillinam | | | | | | | |
| Tab 200 mg | | | | (| СН | 1% | Not currently listed in Section B of the Pharmaceutical Schedule. Any listing may be subject to Special Authority restrictions. |
| Podophyllotoxin | | | | | | | |
| Soln 0.5% | 10,420 | \$100,027 | \$9.6000 | (| СН | 1% | |
| Polyvinyl alcohol | | | | | | | |
| Eye drops 1.4% | 357,675 | \$62,475 | \$0.1747 | (| СН | 1% | For products containing BAK, PHARMAC reserves its right to list a BAK or preservative free product for a restricted market. Units and unit subsidy shown are per ml |
| <u>Eye drops 3%</u> | 213,645 | \$52,414 | \$0.2453 | (| СН | 1% | For products containing BAK, PHARMAC reserves its right to list a BAK or preservative free product for a restricted market. Units and unit subsidy shown are per ml |
| Posaconazole | | | | | | | |
| Oral liq 40 mg per ml | 10,290 | \$74,591 | \$7.2489# | (| СН | 1% | Special Authority restrictions may apply. |
| Tab modified-release 100 mg | 25,941 | \$940,210 | \$36.2442# | (| СН | 1% | Special Authority restrictions may apply. |
| Povidone Iodine | | | | | | | |
| Skin preparation, povidone iodine 10% with 30% alcohol (pack size 100 ml or less) | 74,325 | \$1,211 | \$0.0163 * | (| СН | 1% | |
| Skin preparation, povidone iodine 10% with 30% alcohol (pack size greater than 100 ml) | 74,325 | \$1,487 | \$0.0200 | (| СН | 1% | |
| Pramipexole hydrochloride | | | | | | | |
| <u>Tab 0.25 mg</u> | 849,384 | \$61,156 | \$0.0720 | (| СН | 1% | |
| <u>Tab 1 mg</u> | 113,828 | \$27,763 | \$0.2439 | (| СН | 1% | |
| Primidone | | | | | | | |
| Tab 25 mg | | | | (| СН | 1% | Not currently listed in Section B of the Pharmaceutical Schedule. |
| Tab 50 mg | | | | (| СН | 1% | Not currently listed in Section B of the Pharmaceutical Schedule. |
| Prochlorperazine | | | | | | | |
| Tab 3 mg buccal | 334,845 | \$39,980 | \$0.1194 | (| СН | 1% | |
| Progesterone | | | | | | | |
| <u>Cap 100 mg</u> | 36,283 | \$19,956 | \$0.5500 | (| СН | 1% | PHARMAC reserves the right to amend access. Must be compatible for intra- vaginal use. Special Authority restrictions may apply. |

| SC | HEDULE | TWO: PRO | ODUCTS T | O BE TENDERED |) |
|--|-----------|------------------|-------------------|---------------|---|
| Chemical Name | | | Unit | DV | |
| Line Item | Units | Cost | Subsidy | Limit | Comments |
| Promethazine hydrochloride | | | | | |
| <u>lnj 25 mg per ml, 2 ml</u> | 9,033 | \$28,075 | \$3.1080 | CH 1% | |
| Propofol | | | | | |
| <u>Inj 10 mg per ml, 100 ml vial</u> | | | | I | Note there may be a preference for an EDTA containing product. |
| Inj 10 mg per ml, 20 ml vial | | | | | Note there may be a preference for an EDTA containing product. |
| <u>Inj 10 mg per ml, 50 ml vial</u> | | | | | Note there may be a preference for an EDTA containing product. |
| Propranolol | | | | | |
| Cap long-acting 160 mg | 539,825 | \$98,086 | \$0.1817 | CH 1% | |
| Oral liq 4 mg per ml | 207,345 | | | | This is currently a Cost Brand Source product. Units are expressed as 'per ml' |
| lnj 1 mg per ml, 1 ml | | | | H 1% | |
| Protionamide | | | | | |
| Tab 250 mg | 6,380 | \$19,459 | \$3.0500 | CH 1% | |
| Pseudoephedrine Hydrochloride Tab 60 mg | | | | H 1% | |
| Pyridostigmine bromide | | | | | |
| Tab 60 mg | 492,013 | \$210,532 | \$0.4279 | CH 1% | |
| Pyridoxine hydrochloride | | | | | |
| lnj 100 mg per ml, 1 ml | | | | H 1% | |
| lnj 100 mg per ml, 30 ml | | | | H 1% | |
| Rasburicase | | | | | |
| lnj 1.5 mg | | | | H 1% | |
| Retinol | | | | | |
| Cap 25,000 iu | | | | H 1% | |
| Oral liq 150,000 iu per ml | | | | H 1% | |
| Tab 10,000 iu | | | | H 1% | |
| Retinol palmitate | | | | | |
| Eye oint 138 mcg per g | 33,975 | \$25,821 | \$0.7600 | CH 1% | |
| Rifabutin | | | | 0.11 | |
| <u>Cap 150 mg</u> | 3,545 | \$32,496 | \$9.1667 | CH 1% | |
| Risedronate sodium | | Aaaaaaa | Aa a a a a | 0.11 | |
| <u>Tab 35 mg</u> | 302,048 | \$286,946 | \$0.9500 | CH 1% | |
| Risperidone | 4 004 | \$000 400 | \$405 0000 | | |
| lnj 25 mg per 2 ml | 4,901 | \$666,438 | \$135.9800 | I | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| lnj 37.5 mg per 2 ml | 5,830 | \$1,041,879 | \$178.7100 | CH 1% | Depot injection. Special Authority restrictions may apply. Training |
| loi 50 mg por 2 ml | 8 105 | ¢1 762 204 | \$217.5600 | I | requirements may apply. |
| Inj 50 mg per 2 ml | 8,105 | \$1,763,324 | φ217.5000 | I | Depot injection. Special Authority restrictions may apply. Training requirements may apply. |
| Rocuronium bromide | | | | | |
| <u>lnj 10 mg per ml, 5 ml</u> | | | | H 1% | |
| Ropinirole hydrochloride | | | | | |
| Tab 1 mg | 889,322 | \$44,466 | \$0.0500 | CH 1% | |
| <u>Tab 2 mg</u> | 404,379 | \$31,218 | \$0.0772 | CH 1% | |
| <u>Tab 250 mcg</u> | 1,224,424 | \$34,039 | \$0.0278 | CH 1% | |
| <u>Tab 5 mg</u> | 46,451 | \$7,669 | \$0.1651 | CH 1% | |
| Ropivacaine hydrochloride with fentanyl | | | | | |
| Inj 2 mg with fentanyl 2 mcg per ml, 100 ml bag | | | | H 1% | |

| SC | HEDULE | TWO: PRC | DUCTS | ГО ВЕ | TEND | ERE | D |
|---|------------|-----------|-----------|-------|---------|----------|---|
| Chemical Name | | | Unit | | | DV | |
| Line Item | Units | Cost | Subsidy | | | Limi | t Comments |
| Ropivacaine hydrochloride with fentanyl | | | | | | | |
| Inj 2 mg with fentanyl 2 mcg per ml, 200 ml bag | | | | | Н | 1% | |
| Roxithromycin | | | | | | | |
| Dispersible tab - 50 mg | 14,826 | \$10,660 | \$0.7190 | | СН | 1% | |
| Tab 150 mg | 2,101,510 | \$314,386 | \$0.1496 | @ | СН | 1% | Additional Stock Pharmaceutical |
| Tab 300 mg | 908,287 | \$261,587 | \$0.2880 | @ | СН | 1% | Additional Stock Pharmaceutical |
| Salicylic Acid | | | | | | | |
| Powder | 239,985 | \$18,124 | \$0.0755 | | СН | 1% | |
| Sertraline | | | | | | | |
| Tab 50 mg | 8,750,213 | \$296,545 | \$0.0339 | | СН | 1% | |
| <u>Tab 100 mg</u> | 3,671,334 | \$214,149 | \$0.0583 | | СН | 1% | |
| Sildenafil | | | | | | | |
| lnj 0.8 mg per ml, 12.5 ml vial | | | | | Н | 1% | |
| Simeticone | | | | | | | |
| Oral drops 100 mcg per ml | | | | | Н | 1% | |
| Sodium Acid Phosphate | | | | | _ | | |
| Enema 16% with sodium phosphate 8% | 49,715 | \$124,288 | \$2.5000 | | СН | 1% | |
| Sodium alginate | | | | | | | |
| Oral liq 500 mg with sodium bicarbonate 267 mg and calcium carbonate 160 mg per 10 ml | 13,557,170 | \$40,672 | \$0.0030 | * | СН | 1% | |
| Tab 500 mg with sodium bicarbonate 267 mg and calcium carbonate 160 mg | 448,827 | \$13,465 | \$0.0300 | * | СН | 1% | |
| Sodium alginate with magnesium alginate |) | | | | | | |
| Powder for oral soln 225 mg with magnesium alginate 87.5 mg, sachet | 1,052,885 | \$186,361 | \$0.1770 | * | СН | 1% | Note this product is currently described as 'Alginic acid - sodium alginate 225 mg and magnesium alginate 87.5 mg per sachet' in Section B of the Pharmacetucial Schedule |
| Sodium Bicarbonate | | | | | | | |
| Powder BP | 339,633 | \$6,079 | \$0.0179 | * | СН | 1% | |
| Sodium chloride | | | | | | | |
| Aqueous nasal spray isotonic | | | | | Н | 1% | |
| Nebuliser soln, 7% | 903,240 | \$235,845 | \$0.2611 | | СН | 1% | |
| lnj 0.9%, 5 ml | 103,697 | \$14,518 | \$0.1400 | | СН | 1% | There may be a preference for plastic ampoules |
| <u>lnj 0.9%, 10 ml</u> | 505,106 | \$66,977 | \$0.1326 | | СН | 1% | There may be a preference for plastic ampoules |
| lnj 0.9%, 20 ml | 132,810 | \$33,203 | \$0.2500 | | СН | 1% | There may be a preference for plastic ampoules |
| Sodium citrate | | | | | | | |
| Oral liq 8.8% (300 mmol/l) | | | | | Н | 1% | |
| Powder | | | | | Н | 1% | |
| Sodium citrate with sodium lauryl sulpho | acetate | | | | | | |
| Enema 90 mg with sodium lauryl sulphoacetate 9 mg per ml, 5 ml | 431,118 | \$230,389 | \$0.5344 | | СН | 1% | There would be a preference for a pack size of 50 enemas or fewer |
| Sodium Cromoglycate | | | | | | | |
| Cap 100 mg | 206,229 | \$191,607 | \$0.9291 | | СН | 1% | |
| Eye drops 2% Nasal spray, 4% | 255,300 | \$43,401 | \$0.1700 | | СН Н | 1% 1% | |
| Sodium fusidate [fusidic acid] Eye drops 1% | 309,575 | \$278,618 | \$0.9000 | | СН | 1% | |
| Sodium hyaluronate [hyaluronic acid] | | | | | | | |
| Eye drops 1 mg per ml | 288,360 | \$634,392 | \$2.2000# | | СН | 1% | Special Authority restrictions may apply. |
| Inj 10 mg per ml, 0.85 ml syringe | , | , - | | | Н | 1% | Please note in tender bid if product is dispersive or cohesive viscoelastic |
| sole supply | | | | | | #: | =rebate *=part charge @=ASP +=patent |

SCHEDULE TWO: PRODUCTS TO BE TENDERED **Chemical Name** DV Unit Line Item Units Limit Comments Cost Subsidy Sodium hyaluronate [hyaluronic acid] Inj 14 mg per ml, 0.55 ml syringe н 1% Please note in tender bid if product is dispersive or cohesive viscoelastic Inj 14 mg per ml, 0.85 ml syringe Please note in tender bid if product is н 1% dispersive or cohesive viscoelastic н Please note in tender bid if product is Inj 23 mg per ml, 0.6 ml syringe 1% dispersive or cohesive viscoelastic Sodium hyaluronate [hyaluronic acid] with chondroitin sulphate Inj 30 mg per ml with chondroitin sulphate Please note in tender bid if product is н 1% 40 mg per ml, 0.35 ml syringe and inj 10 dispersive or cohesive viscoelastic mg sodium hyaluronate [hyaluronic acid] per ml, 0.4 ml syringe Please note in tender bid if product is Inj 30 mg per ml with chondroitin sulphate н 1% 40 mg per ml, 0.5 ml syringe and inj 10 dispersive or cohesive viscoelastic mg sodium hyaluronate [hyaluronic acid] per ml, 0.55 ml syringe Inj 30 mg with chondroitin sulphate 40 mg Please note in tender bid if product is н 1% per ml, 0.75 ml syringe dispersive or cohesive viscoelastic Sodium nitroprusside Inj 50 mg н 1% Sodium Phosphate with Phosphoric Acid Enema 10% with phosphoric acid 6.58% 49,715 \$124,288 \$2.5000 СН Note this product is currently listed as 1% Sodium Acid Phosphate - Enema 16% with sodium phosphate 8%" in Section B of the Pharmaceutical Schedule Oral liq 16.4% with phosphoric acid н 1% 25.14% Sotalol Tab 80 mg 3,430,152 \$271,188 \$0.0791 СН 1% Tab 160 mg 165,915 \$20,706 \$0.1248 СН 1% Spiramycin Tab 500 mg н 1% Spironolactone Oral liq 5 mg per ml 31,550 \$37,860 \$1.2000 СН 1% Tab 25 mg 6,628,265 \$290,318 \$0.0438 СН 1% Tender is for tablets only, bids for capsules will not be accepted <u>Tab 100 mg</u> 1,338,591 \$157,954 \$0,1180 СН 1% Tender is for tablets only, bids for capsules will not be accepted Sucralfate \$34,517 \$0.2958 СН 1% Tab 1 g 116,677 Sucrose Oral lig 25% н 1% Sulfasalazine 254.065 \$0.1400 СН 1% Tab 500 mg \$35,569 Tab EC 500 mg 6,212,978 \$838,752 \$0.1350 СН 1% Sulphur Precipitated 4.646 \$295 \$0.0635 СН 1%

\$883,482

\$134,309

\$217,275

\$24,423

41.410

290,523

889,014

740,100

\$21.3350

\$0.4623

\$0.2444

\$0.0330

СН

СН

СН

СН

1%

1%

1%

1% Subsidy by endorsement only. Please note there are two formulations currently listed in the Pharmaceutical Schedule, tender award would result in one formulation being delisted. Unit and subsidy data reflect sunscreen lotion market.

Price should include autoinjector

Sumatriptan

Tab 100 mg

Tab 50 mg

Inj 12 mg per ml, 0.5 ml

Sunscreens, proprietary

SPF 50+ or greater

| S | CHEDULE | TWO: PRO | DUCTS T | O BE TENDERED | |
|--|-----------|----------------------|-------------------------|---|---------|
| Chemical Name | | | Unit | DV | |
| Line Item | Units | Cost | Subsidy | Limit Comments | |
| Syrup (pharmaceutical grade) | | | | | |
| Liq | 149,675 | \$1,628 | \$0.0109 | C H 1% | |
| Talc | | | | | |
| Powder | | | | H 1% | |
| Soln (slurry) 100 mg per ml, 50 ml | | | | H 1% | |
| Tamsulosin [Current Access] | | | | | |
| <u>Tab 400 mcg</u> | 2,230,859 | \$250,972 | \$0.1125 | C H 1% Special Authority restrictions may a PHARMAC would only award a ten either current or widened access. | |
| Tamsulosin [Widened Access] | | | | | |
| Tab 400 mcg | | | | PHARMAC would only award a ten either current or widened access. Widened access would result in ren of Special Authority criteria. | |
| Temozolomide | | | | | |
| Cap 100 mg | 19,579 | \$157,415 | \$8.0400 | C H 1% | |
| Cap 140 mg | 348 | \$3,898 | \$11.2000 | C H 1% | |
| Cap 20 mg | 16,392 | \$59,995 | \$3.6600 | C H 1% | |
| Cap 250 mg | 835 | \$16,166 | \$19.3600 | C H 1% | |
| Cap 5 mg | 6,798 | \$13,868 | \$2.0400 | CH 1% | |
| Tenoxicam | | | | | |
| Inj 20 mg | | | \$9.9500 | СН 1% | |
| <u>Tab 20 mg</u> | 694,866 | \$76,088 | \$0.1095 | CH 1% | |
| Terazosin hydrochloride | | | | | |
| <u>Tab 1 mg</u> | 794,319 | \$16,736 | \$0.0211 | C H 1% | |
| Tab 2 mg | 4,127,672 | \$61,915 | \$0.0150 | C H 1% | |
| <u>Tab 5 mg</u> | 2,999,771 | \$65,395 | \$0.0218 | CH 1% | |
| Teriparatide | | | | | |
| lnj 250 mcg per ml, 2.4 ml | 2,252 | \$1,103,480 | \$490.0000# | C H 1% Special Authority restrictions may a | apply. |
| Tetrabenazine | | | | | |
| <u>Tab 25 mg</u> | 116,005 | \$94,357 | \$0.8134 | CH 1% | |
| Tetracaine [amethocaine] hydrochloride | | | | | |
| Eye drops 0.5%, single dose | | | | H 1% | |
| Eye drops 1%, single dose | | | | H 1% | d |
| Gel 4% | | | | H 1% Not currently listed in Section B of Pharmaceutical Schedule. Special Authority restrictions may apply. | tne |
| Tetracosactide [Tetracosactrin] | 000 | 005 050 | Ф7 Г 0000 | 011 494 | |
| Inj 250 mcg per ml, 1 ml | 338 | \$25,350 \$11,720 | \$75.0000 \$600.0000 | CH 1% | |
| Inj 1 mg per ml, 1 ml | 17 | \$11,730 | \$690.0000 | СН 1% | |
| Tetracycline | 04 474 | ¢00.407 | ¢4 5000 | | annlı i |
| Cap 500 mg | 21,174 | \$32,467 | \$1.5333 | C H 1% Special Authority restrictions may a | арріу. |
| Tab 250 mg | | | | Н 1% | |
| Theophylline | 00.005 | MO 440 | ¢0.0010 | | |
| Oral liq 80 mg per 15 ml | 69,095 | \$2,142 \$120,577 | \$0.0310 \$0.2151 | CH 1% | |
| Tab long-acting 250 mg | 607,053 | \$130,577 | \$0.2151 | CH 1% | |
| Thymol glycerin | 240 205 | ¢A ECA | ¢0.0492 | | |
| Compound, BPC | 249,385 | \$4,564 | \$0.0183 | СН 1% | |
| Ticagrelor Tab 90 mg | 2 720 000 | CA 205 005 | ¢1 6074 | CH 10/ Spacial Authority rootrigians many | apply |
| Tab 90 mg | 2,729,000 | \$4,385,885 | \$1.6071 | + C H 1% Special Authority restrictions may a | ւրին։ |
| Tigecycline | | | | 11 494 | |
| lnj 50 mg | | | | H 1% | |
| Tobramycin | 0.000 | AE 5.15 | AC 0255 | | |
| Eye drops 0.3% | 2,285 | \$5,246 | \$2.2960 | CH 1% | |

| S | CHEDULE T | WO: PRO | DDUCTS TO | BE TEN | DERE | Ð |
|---|-----------------|-----------|-----------------|----------------|------------|---|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | | DV Limi | t Comments |
| Tolcapone | | | | | | |
| <u>Tab 100 mg</u> | 149,498 | \$198,085 | \$1.3250 | СН | 1% | |
| Tolteridone tartrate | | | | | | |
| Tab 1 mg | 150,661 | \$39,172 | \$0.2600 | СН | 1% | Special Authority restrictions may apply. |
| Tab 2 mg | 167,115 | \$43,450 | \$0.2600 | СН | 1% | Special Authority restrictions may apply. |
| Tranexamic acid Tab 500 mg | 2,590,657 | \$535,489 | \$0.2067 | СН | 1% | |
| Triazolam | | | | | | |
| Tab 125 mcg | 1,743,623 | \$88,925 | \$0.0510 * | СН | 1% | |
| Tab 250 mcg | 1,480,208 | \$60,689 | \$0.0410 * | СН | 1% | |
| Triclosan | | | | | | |
| Soln 1% | 1,991,000 | \$23,494 | \$0.0118 | С | | Preference for pack size of 500 ml or less. Subsidy by endorsement only. |
| Trimethoprim with sulphamethoxazole [0 | Co-trimoxazole] | | | | | |
| Tab trimethoprim 80 mg and sulphamethoxazole 400 mg | 3,577,008 | \$163,827 | \$0.0458 | СН | 1% | |
| Tropicamide | | | | | | |
| Eye drops 0.5% | 1,665 | \$794 | \$0.4767 | СН | 1% | Single unit dose presentation (indiviual vial) would not count towards DV limit. |
| Eye drops 1% | 7,185 | \$4,148 | \$0.5773 | СН | 1% | Single unit dose presentation (individual vial) would not count towards DV limit. |
| Urea | | | | | | |
| <u>Crm 10%</u> | 19,018,800 | \$260,558 | \$0.0137 | СН | 1% | Preference for 10 g pack size. There may be a preference for a tube. |
| Vecuronium Inj 10 mg | | | | Н | 1% | |
| Vincristine sulphate | | | | | | |
| lnj 1 mg per ml, 1 ml Inj 1 mg per ml, 2 ml | | | | PCT H PCT H | 1% 1% | |
| Vitamin B complex (strong) | | | | | | |
| Tab | 3,362,645 | \$48,086 | \$0.0143 | СН | 1% | |
| Voriconazole Inj 200 mg | | | | Н | 1% | |
| Xylometazoline hydrochloride | | | | | | |
| Aqueous nasal spray 0.05% | | | | н | 1% | |
| Aqueous nasal spray 0.1% | | | | Н | 1% | |
| Nasal drops 0.05% | | | | Н | 1% | |
| Nasal drops 0.1% | | | | Н | 1% | |
| Yellow jacket wasp venom Inj 550 mcg vial with diluent | | | \$305.0000 | СН | 1% | Special Authority restrictions may apply. |
| Treatment kit - 6 vials 120 mcg freeze dried venom with diluent | | | \$305.0000 | СН | 1% | Special Authority restrictions may apply. |
| Zidovudine [AZT] | | | | | | |
| <u>Cap 100 mg</u> | 3,200 | \$4,872 | \$1.5225 | СН | 1% | Special Authority restrictions may apply. |
| <u>Oral liq 10 mg per ml</u> | 1,200 | \$183 | \$0.1523 | СН | 1% | Special Authority restrictions may apply. |
| lnj 10 mg per ml, 20 ml vial | | | | н | 1% | |
| Zinc | | | | | | |
| Oral liq 5 mg per 5 drops | | | | н | 1% | |
| Zinc chloride Inj 5.3 mg per ml (5.1 mg per ml elemental), 2 ml | | | | Н | 1% | |
| | | | | | | |
| Zinc oxide Powder | | | | Н | 1% | |

| SCHEDULE TWO: PRODUCTS TO BE TENDERED | | | | | |
|---------------------------------------|-----------|-------------|-----------------|-----------|---|
| Chemical Name Line Item | Units | Cost | Unit Subsidy | DV Lim | it Comments |
| Zinc sulphate | | | | | |
| Cap 50 mg elemental | 1,115,400 | \$122,694 | \$0.1100 | CH 1% | This product has specific Medsafe requirements that must be met before a tender decision could be made. |
| Zoledronic Acid | | | | | |
| lnj 0.05 mg per ml, 100 ml | 1,132,700 | \$6,796,200 | \$6.0000# | CH 1% | Special Authority restrictions may apply. |
| Zopiclone | | | | | |
| Tab 7.5 mg | | | | H 1% | Tablets should be scored. Preference for pack size of 100 tablets or less. |
| Zuclopenthixol Acetate | | | | | |
| lnj 50mg per ml, 2 ml | | | | H 1% | |
| Zuclopenthixol Decanoate | | | | | |
| Inj 200 mg per ml | 25,488 | \$100,932 | \$3.9600 | CH 1% | |
| Inj 500 mg per ml | | | | CH 1% | Not currently listed in Section B of the Pharmaceutical Schedule. |
| Zuclopenthixol hydrochloride | | | | | |
| Tab 10 mg | 164,343 | \$51,686 | \$0.3145 | CH 1% | |

1. General

1.1 Sole Supply Period and Hospital Supply Status Period

- (a) Hospital Tender Bids are to be submitted on the basis that if your Hospital Tender Bid is accepted, you will have Hospital Supply Status for the particular Tender Item for the Hospital Supply Status Period.
- (b) Community Tender Bids are to be submitted on the basis that if your Community Tender Bid is accepted, you will have Sole Supply Status for the particular Tender Item for the Sole Supply Period.
- (c) Combined Community/Hospital Tender Bids are to be submitted on the basis that if your Combined Community/Hospital Tender Bid is accepted, you will have Hospital Supply Status for the particular Tender Item for the Hospital Supply Status Period and Sole Supply Status for the particular Tender Item for the Sole Supply Period.

1.2 **Transition Periods**

- (a) In relation to hospital supply:
 - (i) there will be two Transition Periods (the First Transition Period and the Final Transition Period) during which the successful tenderer's brand is to be available for supply and purchase by DHB Hospitals. Additionally, where the successful tenderer's brand of the Pharmaceutical is not listed immediately prior to the First Transition Period, the successful tenderer's brand must be available for supply and purchase by DHB Hospitals from the applicable dates specified in clause 3 of Schedule 6;
 - (ii) the First Transition Period is intended to allow for an orderly transition to the arrangements that will apply during the Hospital Supply Status Period;
 - (iii) the Final Transition Period is intended to allow for an orderly transition to any new arrangements following the end of the Hospital Supply Status Period;
 - (iv) DHB Hospitals may purchase DV Pharmaceuticals at any time within the First Transition Period and Final Transition Period without any requirement to comply with the DV Limit.
- (b) Subject to paragraph (d) below, in relation to community supply:
 - (i) there will be three Transition Periods (the First Transition Period, the Second Transition Period and the Final Transition Period) during which the successful tenderer's brand is to be available for supply and subsidised, but may not be the sole subsidised brand of that Tender Item. Additionally, where the successful tenderer's brand of the Pharmaceutical is not listed immediately prior to the First Transition Period, the successful tenderer's brand must be available for supply from the applicable dates specified in clause 3 of Schedule 5;
 - the First Transition Period and Second Transition Period are intended to allow for an orderly transition to the arrangements that will apply during the Sole Supply Period;

- (iii) the Final Transition Period is intended to allow for an orderly transition to any new arrangements following the end of the Sole Supply Period.
- (c) In relation to community and/or hospital supply, PHARMAC may, in its sole discretion:
 - determine a different commencement date for the First Transition Period and/or Second Transition Period, as applicable, including where it considers that a different commencement date is necessary to ensure appropriate stock management or appropriate supply of the Tender Item; and/or
 - (ii) extend the period of the First Transition Period and/or Second Transition Period, as applicable, by determining a different end date, and may do so before or after the commencement date of the relevant First Transition Period or Second Transition Period. For the avoidance of doubt, in the event that PHARMAC extends the Second Transition Period under this clause 1.2(c)(ii):
 - (A) the delisting of all other brands of that form and strength of the Chemical Entity is to be deferred until the actual commencement date of the Sole Supply Period, notwithstanding any date previously notified to suppliers by PHARMAC as being the intended date of delisting;
 - (B) all other brands of that form and strength of the Chemical Entity are to remain listed in accordance with the terms of any existing contract between PHARMAC and the particular pharmaceutical supplier in respect of the relevant brand(s) until such time as that supplier's brand of that form and strength of the Chemical Entity is actually delisted.
- (d) In relation to community supply, if the successful tenderer's brand is the only brand of the Tender Item listed on the Pharmaceutical Schedule as at the Market Notification Date, then the First Transition Period and clause 1.1(a) of Schedule Five will not apply and, subject to paragraph (c) above, the Second Transition Period is to begin on the first day of the second month following the date of such notification.
- (e) For the avoidance of doubt, any notification by PHARMAC of the delisting of all other brands of that form and strength of the Chemical Entity on the first day of the Sole Supply Period operates solely as advance notice of the intended delisting of those pharmaceuticals and does not constitute a notice of termination of any existing contract for the supply of those other brands.

1.3 Contract

If PHARMAC accepts your:

- (a) Community Tender Bid, then a contract on the terms and conditions set out in:
 - (i) your Tender Bid (incorporating any variations as a result of negotiations or discussions under clause 1.6 of this Schedule); and
 - (ii) Schedule Four; and
 - (iii) Schedule Five; and
 - (iv) Schedule Seven (as applicable),

will be deemed to have been entered into between you and PHARMAC for Sole Supply Status for the relevant Pharmaceutical and, where applicable, its listing on the Pharmaceutical Schedule;

- (b) Hospital Tender Bid, then a contract on the terms and conditions set out in:
 - (i) your Tender Bid (incorporating any variations as a result of negotiations or discussions under clause 1.6 of this Schedule); and
 - (ii) Schedule Four; and
 - (iii) Schedule Six; and
 - (iv) Schedule Seven (as applicable),

will be deemed to have been entered into between you and PHARMAC for Hospital Supply Status for the relevant Pharmaceutical and, where applicable, its listing on the Pharmaceutical Schedule;

- (c) Combined Community/Hospital Tender Bid, then:
 - (i) a contract on the terms and conditions set out in:
 - (A) your Tender Bid, to the extent applicable (incorporating any variations as a result of negotiations or discussions under clause 1.6 of this Schedule); and
 - (B) Schedule Four; and
 - (C) for the Community Tender Bid element of that Combined Community/Hospital Tender Bid, Schedule Five; and
 - (D) Schedule Seven (as applicable),

will be deemed to have been entered into between you and PHARMAC for Sole Supply Status for the relevant Pharmaceutical and, where applicable, its listing on the Pharmaceutical Schedule; and

- (ii) a separate contract on the terms and conditions set out in:
 - (A) your Tender Bid, to the extent applicable (incorporating any variations as a result of negotiations or discussions under clause 1.6 of this Schedule); and
 - (B) Schedule Four; and
 - (C) for the Hospital Tender Bid element of that Combined Community/Hospital Tender Bid, Schedule Six; and
 - (D) Schedule Seven (as applicable),

will be deemed to have been entered into between you and PHARMAC for Hospital Supply Status for the relevant Pharmaceutical and, where applicable, its listing on the Pharmaceutical Schedule.

For the avoidance of doubt, the terms and conditions specified in Schedule Four, Schedule Five, Schedule Six and Schedule Seven, as applicable, apply from the date when PHARMAC notifies you in accordance with clause 7.2 of this Schedule of its acceptance of your Tender Bid, and do not apply solely for the Sole Supply Period or Hospital Supply Status Period, as applicable.

1.4 Extension of Hospital Supply Status to include Sole Supply Status

- (a) You acknowledge and agree that if your Hospital Tender Bid is for a Tender Item that is specified in the product list in clause 2 of Schedule Two and the Electronic Portal as being a Tender Item for which you may submit a Tender Bid for Sole Supply Status, you may agree (such consent not to be unreasonably withheld), if so requested by PHARMAC:
 - (i) if PHARMAC has not yet accepted a Hospital Tender Bid for the particular Tender Item, to extend your Tender Bid to cover community supply; or
 - (ii) if PHARMAC has accepted your Hospital Tender Bid for the particular Tender Item, to supply the Tender Item for use in the community under Sole Supply Status as soon as practicable after such requirement is notified to you, and in any case no later than three months after that notification, under a separate contract for Sole Supply Status.
- (b) The Community Tender Bid referred to in paragraph (a)(i) above and the contract for Sole Supply Status referred to in paragraph (a)(ii) above will be:
 - (i) at a price that is equal to the Price specified for that Pharmaceutical in your Hospital Tender Bid; and
 - (ii) on the other terms and conditions set out in your Hospital Tender Bid (incorporating any variations as a result of negotiations or discussions under clause 1.6 of this Schedule), as applicable; and
 - (iii) for supply in accordance with Schedules Four, Five and Seven; and
 - (iv) for such quantities of the Pharmaceutical as are required for use in the community.
- (c) This clause confers a benefit on, and is enforceable by, the Funder in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

1.5 **Extension of Sole Supply Status to include Hospital Supply Status**

- (a) You acknowledge and agree that if your Community Tender Bid is for a Tender Item that is specified in the product list in clause 2 of Schedule Two as being a Tender Item for which you may submit a Tender Bid for Hospital Supply Status, you may agree (such consent not to be unreasonably withheld), if so required by PHARMAC:
 - (i) if PHARMAC has not yet accepted a Community Tender Bid for the particular Tender Item, to extend your Tender Bid to cover hospital supply; or
 - (ii) if PHARMAC has accepted your Community Tender Bid for the particular Tender Item, to supply the Tender Item for use in DHB Hospitals under Hospital Supply Status as soon as practicable after such requirement is notified to you, and in any case no later than three months after that notification, under a separate contract for Hospital Supply Status.

- (b) The Hospital Tender Bid referred to in paragraph (a)(i) above and the contract for Hospital Supply Status referred to in paragraph (a)(ii) above will be:
 - (i) at a price that is equal to the Price specified for that Pharmaceutical in your Community Tender Bid; and
 - (ii) on the other terms and conditions set out in your Community Tender Bid (incorporating any variations as a result of negotiations or discussions under clause 1.6 of this Schedule), as applicable; and
 - (iii) for supply in accordance with Schedules Four, Six and Seven; and
 - (iv) for such quantities of the Pharmaceutical as are required for use in DHB Hospitals.
- (c) This clause confers a benefit on, and is enforceable by, DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

1.6 **PHARMAC may initiate limited negotiations**

- (a) Notwithstanding clause 2.7 of this Schedule, PHARMAC may, in its sole discretion, initiate negotiations or discussions with you in relation to your Tender Bid about:
 - (i) any of the terms and conditions to apply if your Tender Bid is accepted;
 - (ii) the proposed packaging or pack size of the Tender Item;
 - (iii) your ability to ensure continued availability of the Tender Item throughout the Hospital Supply Status Period and/or Sole Supply Period, as applicable;
 - (iv) the price of the Tender Item, but only where PHARMAC determines, in its sole discretion, that an increased price for the Tender Item may be necessary for practicality of supply of the Tender Item (for example, because of particular packaging requirements);
 - (v) DV Limits and/or DV Pharmaceuticals, in relation to hospital supply;
 - (vi) the Lead Time and/or the Start Date; or
 - (vii) any other matter that PHARMAC considers necessary or appropriate.
- (b) If PHARMAC initiates negotiations or discussions with you under paragraph (a), and as a result there is a change to any of the terms and conditions relating to the supply of a Tender Item, PHARMAC is not obliged to inform the other tenderers of that change, nor give those tenderers an opportunity to amend their bid for that Tender Item, unless the change is one which would result in the terms and conditions being materially different in scope from those set out in this Invitation.
- (c) The initiation and pursuit of any negotiations or discussions under this clause shall not constitute a counter-offer and your original Tender Bid will remain open for acceptance in accordance with clause 4.2(b) of this Schedule in the absence of agreement on any variation to that Tender Bid.

1.7 Termination and amendment of Invitation

PHARMAC may:

- (a) amend this Invitation at any time up to five business days before the Deadline; and/or
- (b) terminate this Invitation at any time before the acceptance of any Tender Bid by giving five business days' written notice.

2. Information about submitting a Tender Bid

2.1 **Choice of forms and strengths**

Where a Tender Item includes different forms and strengths of a Chemical Entity or entities, your Tender Bid may, but does not need to, include all of the forms and strengths of the Chemical Entity or entities contained in that Tender Item.

2.2 Consents not yet held

You may submit a Tender Bid for a Tender Item where your brand of the Tender Item is yet to obtain all necessary Consents. In those circumstances, you may be required to demonstrate your ability to obtain those consents within a time frame acceptable to PHARMAC. For example, you may be required to demonstrate that you have the dossier for that brand of the Tender Item ready to submit to Medsafe within one month of such a request being made by PHARMAC. For the avoidance of doubt where your brand of the Tender Item is yet to obtain all necessary Consents, any time period to obtain those Consents shall be exclusive of the Lead Time indicated on your Tender Bid.

2.3 Individual Tender Bids

You may submit more than one bid for a Tender Item (for example, you may submit separate bids for different pack sizes (or other equivalent grouping for a Medical Device) of a Tender Item).

2.4 Aggregated Tender Bids

- (a) You may, in addition to submitting a separate Tender Bid for each Tender Item, submit an Aggregated Tender Bid, provided that:
 - (i) in the case of a pharmaceutical that is not a Medical Device, each brand contained in an Aggregated Tender Bid is only a different form and strength of the same Chemical Entity;
 - (ii) you may not aggregate across different chemical entities when submitting a Tender Bid;
 - (iii) you may not aggregate within a single Tender Item (for example, two different brands or pack sizes);
 - (iv) you must also submit a separate Community Tender Bid and/or Hospital Tender Bid, as applicable, for each particular Tender Item.
- (b) Where a Tender Item includes different forms and strengths of a Chemical Entity or different entities (for example, a two-part injection), and you bid for the whole Tender Item, that is not an Aggregated Tender Bid.

2.5 Combined Community/Hospital Tender Bids

You may submit a Combined Community/Hospital Tender Bid, provided that you must also submit a separate Community Tender Bid and a separate Hospital Tender Bid for each Tender Item in respect of which you submit a Combined Community/Hospital Tender Bid.

2.6 Aggregated Combined Community/Hospital Tender Bids

You may submit a Tender Bid that is both an Aggregated Tender Bid and a Combined Community/Hospital Tender Bid, provided that you comply with clauses 2.4 and 2.5 above.

2.7 No conditions

You cannot make a conditional Tender Bid nor qualify a Tender Bid in any way.

2.8 Separate offers

PHARMAC will treat each Tender Bid as a separate offer.

2.9 Tender Bid prices

You must submit, for each Tender Bid, a single price in New Zealand dollars (exclusive of GST), which will be the Price at which you will supply the Tender Item.

3. What to include in your Offer Letter and Tender Submission Form

3.1 **Compulsory use of Offer Letter and Tender Submission Form**

- (a) You must submit your Tender Bid using the Electronic Portal and attach the Offer Letter and a completed Tender Submission Form for each Tender Item for which you wish to submit a bid.
- (b) An electronic version of the Offer Letter is available on the Electronic Portal.

3.2 Information that must be supplied about you

In the Offer Letter, you must supply the following information about you:

- (a) your company structure;
- (b) your management and technical skills;
- (c) your financial resources;
- (d) your (or your supplier's) existing supply commitments;
- (e) your (or your supplier's) previous supply performance; and
- (f) your quality assurance processes, where applicable.

3.3 Information that must be supplied about the Tender Item

In your Tender Submission Form, you must supply the following information about the Tender Item:

- (a) in the case of a pharmaceutical that is not a Medical Device, the chemical, form, strength, brand name, pack size and type of packaging;
- (b) for any Pharmaceutical that does not require Consent from Medsafe;
 - (i) evidence and justification as to why Consent from Medsafe is not required for the Tender Item(s);
 - (ii) confirmation that the Tender Item(s) that you are submitting a Tender Bid in respect of meet the relevant standards and/or regulatory requirements for its intended use and what those standards and/or regulatory requirements are; and
 - (iii) details of the Tender Item(s), including excipients and shelf life;
- (c) for any Medical Device:
 - (i) the brand name, pack size (or other equivalent grouping) and type of packaging;
 - (ii) details of the Tender Item(s) and any associated services available in relation to the Tender item(s), including training, education and product support;
 - (iii) confirmation that the Tender Item(s) that you are submitting a Tender Bid in respect of meet the relevant standards and regulatory requirements for its intended use;
 - (iv) information on current usage of and expenditure on the Tender Item(s) by DHBs;
 - (v) confirmation that you have a business continuity plan with a brief summary of the plan;
 - (vi) demonstration of experience and knowledge within the healthcare sector, and specifically DHB Hospitals;
 - (vii) the WAND registration number of the Tender Item(s); and
 - (viii) the name of the sponsor of the Tender Item for the purpose of the Medicines (Database of Medical Devices) Regulations 2003;
- (d) a single price in New Zealand dollars (exclusive of GST) at which you will supply the Tender Item:
 - (i) to wholesalers and other distributors during the Sole Supply Period in respect of a Community Tender Bid; or
 - to, at a DHB Hospital's discretion, Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), in respect of a Hospital Tender Bid;
- (e) whether it has all necessary Consents (and if not, what the status of registration is);

- (f) the Lead Time for supply of the Tender Item;
- (g) the name and location of:
 - (i) the manufacturer(s) of the finished product (and name and location of the packaging site, if different); and
 - (ii) the manufacturer(s) of the active ingredients (not required in respect of Medical Devices); and
 - (iii) alternative manufacturers of the finished product and active ingredients (if any) (not required in respect of Medical Devices);
- (h) your proposed distribution and supply arrangements for the Tender Item.

3.4 Information that may be supplied about the Tender Item

In your Tender Submission Form, you may supply the following information about the Tender Item:

- (a) For any Pharmaceutical or Medical Device:
 - (i) other markets you currently provide the Pharmaceutical or Medical Device in.

3.5 **PHARMAC may request further information**

- (a) PHARMAC may request such further information as it considers necessary from or about you for the purposes of clarifying or evaluating your Tender Bid, including (but not limited to):
 - (i) information about your credit status;
 - (ii) information on the price of a Tender Item, but only where PHARMAC requires clarification to confirm the exact price being offered, or where PHARMAC initiates negotiations with you under clause 1.6 of this Schedule;
 - (iii) where a Tender Item is a controlled drug, information about the form in which the Tender Item will be supplied, in which case you must supply that information within 10 business days of PHARMAC requesting the information; and
 - (iv) a sample pack or container of the Tender Item (and if you intend supplying it in a different form from that sample pack or container, information about the form in which it will be supplied), in which case you must supply that sample pack or container or information within 10 business days of PHARMAC requesting it.
- (b) If PHARMAC requests further information from or about you it is not obliged to request the same or any other information from or about any other party.

4. How to submit a Tender Bid

4.1 Submission of Tender Bids

All Tender Bids must be submitted via the Electronic Portal. Tender Bids or any copies of Tender Bids should not be delivered in person, by courier, by post, by facsimile or by email to PHARMAC.

4.2 Key dates

Your Tender Bid must:

- (a) be submitted via the Electronic Portal by no later than the Deadline; and
- (b) be irrevocable and remain open for acceptance by PHARMAC until, as applicable:
 - (i) Monday, 31 July 2019;
 - (ii) the date specified for a Tender Item in Schedule Two or on the Electronic Portal (if any); or
 - (iii) if PHARMAC so requests at any time, such later date as you agree in writing.

5. Evaluation

5.1 **Process of evaluation**

The Evaluation Committee, taking such regulatory, legal, medical and other advice as it considers appropriate, will evaluate all conforming Tender Bids that have been checked for conformity under clause 6(a) of this Schedule, and any non-conforming Tender Bids that are admitted for consideration under clause 6(b) of this Schedule.

5.2 Matters for evaluation

The Evaluation Committee will evaluate Tender Bids in light of PHARMAC's statutory objective which is "to secure for eligible people in need of pharmaceuticals, the best health outcomes that are reasonably achievable from pharmaceutical treatment and from within the amount of funding provided". In doing so the Evaluation Committee will be guided by the Factors for Consideration (Factors) that form part of PHARMAC's then current Operating Policies and Procedures (OPPs), as published on PHARMAC's website (www.pharmac.govt.nz), to the extent applicable. More information on the Factors can be found at www.pharmac.health.nz/factors-for-consideration

The requirement for PHARMAC to pursue its statutory objective means that particular emphasis will be given to those aspects of proposals which demonstrate "health outcomes", and those aspects of proposals which demonstrate the impact on the "funding provided" for pharmaceuticals. Those Factors which relate directly to these aspects will be given the greatest weight by the Evaluation Committee but all Factors are important.

The information to be taken into account in applying the Factors by the Evaluation Committee will include, in particular:

- (a) your ability to ensure continued availability of the Tender Item throughout the Sole Supply Period and/or Hospital Supply Status Period and each of the Transition Periods, as applicable, taking into account each of the following separate points:
 - (i) your financial resources;
 - (ii) your management and technical skills;
 - (iii) your, or your supplier's, existing supply commitments;
 - (iv) your, or your supplier's, previous supply performance;
 - (v) your quality assurance processes, where applicable;
 - (vi) the site of manufacture and packaging of the Pharmaceutical, and site of manufacture of the active ingredient;
 - (vii) alternative manufacturers of the finished product and active ingredients (if any);
 - (viii) other markets in which you currently supply the Pharmaceutical;
 - (ix) your proposed distribution and supply arrangements for the Tender Item; and
 - (x) the Lead Time for supply of the Tender Item;
- (b) the pack size (or other relevant grouping for a Medical Device) of the Tender Item and the type of packaging;
- (c) the price of the Tender Item;
- (d) the amount and timing of savings, including non-pharmaceutical savings accruing to the Funder or PHARMAC during the Hospital Supply Status Period and/or the Second Transition Period and the Sole Supply Period, as applicable;
- (e) either:
 - (i) evidence that you have obtained, and still have, market approval for your brand of the Tender Item, and all necessary Consents; or
 - (ii) evidence that will enable the Evaluation Committee to form a view on the likelihood and timing of your brand of the Tender Item gaining all necessary Consents;
- (f) the name and location of the manufacturer of the finished product and active ingredients of the Tender Item; and
- (g) any other benefits to the Funder of selecting you as the supplier of the Tender Item.

6. **Conformity**

(a) PHARMAC may, in its sole discretion, check your Tender Bid for conformity with this Invitation. If PHARMAC does elect to check your Tender Bid, it is not obliged to check all or any other Tender Bids for conformity, provided that in PHARMAC's judgment this would not be unfair to you in comparison to any other party. A Tender Bid will conform if it:

- (i) is submitted via the Electronic Portal by the Deadline;
- (ii) is submitted on the Tender Submission Form and an Offer Letter is attached;
- (iii) has no conditions or qualifications attached;
- (iv) includes all information required under clauses 3.2 and 3.3 of this Schedule; and
- (v) otherwise complies, both as to form and substance, with the requirements of this Invitation.
- (b) PHARMAC may, in its sole discretion, provided that in PHARMAC's judgment this would not be unfair to you in comparison to any other party:
 - (i) exclude any non-conforming Tender Bid from consideration; or
 - (ii) consider, and accept, any non-conforming Tender Bid.

7. Decision

7.1 Decision on acceptance of Tender Bid

- (a) The Evaluation Committee will make a recommendation as to which Tender Bid should be accepted to PHARMAC's Board of Directors (or its delegate under Delegated Authority pursuant to Section 73 of the Crown Entities Act 2004, where applicable).
- (b) PHARMAC's Board of Directors (or its delegate, where applicable) will have the sole discretion to decide whether or not to accept a Tender Bid for any Tender Item.
- (c) PHARMAC's Board of Directors (or its delegate, where applicable):
 - (i) will use the Factors in PHARMAC's then current OPPs as applicable, in deciding whether or not to accept a Tender Bid for any Tender Item; and
 - (ii) is not obliged to act in accordance with any recommendation of the Evaluation Committee.

7.2 Notification of acceptance

- (a) Once PHARMAC's Board of Directors (or its delegate, where applicable) has decided under clause 7.1 above which Tender Bid (if any) to accept for a Tender Item, PHARMAC will, within a reasonable period of time, notify the successful tenderer in writing that it has been successful and in addition:
 - (i) subject to paragraph (b) below, if the successful Tender Bid is unconditionally accepted, PHARMAC will, within a reasonable period of time, notify each unsuccessful tenderer in writing of the identity of the successful tenderer; or
 - (ii) subject to paragraph (b) below, if the successful Tender Bid is conditionally accepted, PHARMAC will, within a reasonable period of time of that tender becoming unconditionally accepted, notify each unsuccessful tenderer in writing of the identity of the successful tenderer.

(b) If for any reason you do not receive written notification from PHARMAC in accordance with paragraph (a) above, you will be deemed to have received the required notification on the date that each Tender Item you bid for is notified in the Pharmaceutical Schedule.

7.3 **PHARMAC's rights reserved**

- (a) PHARMAC reserves the right to accept or reject any Tender Bid.
- (b) While it is PHARMAC's current intention, unless specified otherwise in Schedule Two or the Electronic Portal, to enter into an agreement to award Hospital Supply Status and/or Sole Supply Status for each Tender Item, PHARMAC will not in any circumstances be bound to accept any or all Tender Bids and, in particular, PHARMAC will not be bound to accept the lowest or any other Tender Bid for a Tender Item.
- (c) Acceptance only occurs if, and when, PHARMAC's Board of Directors (or its delegate, where applicable) resolves to accept a Tender Bid and this acceptance is notified to the successful tenderer.
- (d) PHARMAC may take any action, including making any adjustments to the tender process that it considers appropriate, acting reasonably (provided that it notifies tenderers materially affected by such adjustments).
- (e) PHARMAC may, at any time, suspend or cancel in whole or in part, this tender process in order to fulfil its public law obligations through consultation, or otherwise. In this situation PHARMAC may (without limitation) ask you to adapt and resubmit your Tender Bid in light of consultation, or alternatively we may request that new Tender Bids be submitted (or in the case of a suspension PHARMAC may also resume the tender process without further change following the end of the period of suspension).

7.4 Conditional acceptance

- (a) Where the successful tenderer's brand of a Tender Item is yet to receive all necessary Consents:
 - (i) the contract referred to in clause 1.3 of this Schedule will be conditional upon such Consents being received within a time period specified by PHARMAC; and
 - (ii) PHARMAC may terminate the contract if such Consents have not been obtained, or in PHARMAC's view are unlikely to be obtained, within the period specified by PHARMAC.
- (b) Acceptance of a Tender Bid by PHARMAC's Board of Directors (or its delegate, where applicable), and the contract referred to in clause 1.3 of this Schedule may be conditional upon you satisfying PHARMAC that you will have sufficient stock of the Tender Item available to commence supply as at a date reasonably determined by PHARMAC.

8. Back-up supply

Back-up Supply Agreements

- (a) PHARMAC may at any time negotiate a Back-up Supply Agreement with another supplier for any Tender Item.
- (b) PHARMAC may, at its sole discretion, seek proposals for Back-up Supply Agreements under a separate process to this Invitation to Tender. PHARMAC does not seek

submissions for Back-up Supply Agreements in response to this Invitation to Tender and is not obliged to consider proposals or bids for back-up supply submitted as part of the tender process.

9. Dealing with information

9.1 **Confidentiality**

Subject to clause 9.2 below, all Confidential Information is confidential to us and our employees, legal advisers, electronic procurement providers and other consultants (including PTAC and its sub-committees), the Ministry of Health, DHBs and the Funder. You acknowledge that it may be necessary or appropriate for PHARMAC to disclose Confidential Information:

- (a) pursuant to the Official Information Act 1982; or
- (b) in publicly notifying any acceptance of your Tender Bid; or
- (c) otherwise pursuant to PHARMAC's public law or any other legal obligations.

PHARMAC may consult with you before deciding whether to disclose Confidential Information for the purposes described in paragraphs (a) and (c) above, in order to ascertain any objections you may have to the disclosure of any of the Confidential Information. You acknowledge, however, that it is for PHARMAC to decide, in its absolute discretion, whether it is necessary or appropriate to disclose information for any of the above purposes, provided that PHARMAC shall act in good faith in disclosing any Confidential Information. Outside the circumstances described in paragraphs (a) and (c) above, Confidential Information must not be disclosed by either of us (or by our employees, legal advisers and other consultants) unless:

- (d) the information is publicly available without any cause attributable to the disclosing party; or
- (e) the other party has been reasonably informed prior to disclosure, and the disclosure is:
 - (i) for the purposes of this Agreement; or
 - (ii) required by law; or
 - (iii) in a form, and of content, agreed to by us.

For the avoidance of doubt, information released by PHARMAC in accordance with paragraphs (a) to (c) above ceases to be Confidential Information and you agree that PHARMAC may release that information again at any time in future without consulting with you or obtaining your prior agreement.

9.2 **Use of information**

Generalised aggregated information regarding your Tender Bid that does not identify you or that cannot reasonably be expected to identify you or lead to the connection of you with your Tender Bid is not Confidential Information and PHARMAC may use and publish such information as it sees fit.

10. Miscellaneous

10.1 **Process contract**

In submitting a Tender Bid, you agree that you and PHARMAC are contractually bound to follow the process and comply with the obligations expressly contained in this Invitation.

10.2 Costs

PHARMAC is not liable in any way whatsoever for any direct or indirect costs incurred, or loss (including loss of profit) or damage sustained, by you in respect, or arising out, of this tendering process or the obtaining or granting of Hospital Supply Status and/or Sole Supply Status, as applicable, for your supply of the Tender Item including, without limitation, costs of obtaining all necessary Consents for any Tender Item.

10.3 No reliance

Your Tender Bid is submitted in reliance on your own knowledge, skill and independent advice, and not in reliance on any representations made by PHARMAC (including for these purposes the sales and market information (if any) provided in Schedule Two or on the Electronic Portal).

10.4 No further liability

PHARMAC is not, in any event, liable in contract, tort or any other way whatsoever for any direct or indirect loss (including loss of profit), damage or cost of any kind incurred by you or any other person in relation to this tendering process.

10.5 No lobbying

- (a) You are not to initiate any communication with PHARMAC or its advisors, the Minister of Health (or any Associate Ministers), the Ministry of Health (including its operating unit Medsafe), or a District Health Board or any of their officers or directors, at any time with a view to influencing the outcome of the tendering process.
- (b) Failure to comply with this clause will entitle PHARMAC, in its sole discretion, to disqualify you from this tendering process.

10.6 Enquiries

If you have any enquiries about this Invitation you should contact Tim Nuthall or Laura Baker at PHARMAC. Any additional information that PHARMAC gives to you as a result of your enquiry will also be given by PHARMAC to other potential tenderers, if PHARMAC determines that such information is material.

10.7 Jurisdiction and governing law

We each submit to the exclusive jurisdiction of the New Zealand courts and agree that this Invitation is governed by New Zealand law.

Schedule 4: Contract terms for both Sole Supply Status and Hospital Supply Status

1. General

1.1 **Operating Policies and Procedures**

- (a) You acknowledge that:
 - PHARMAC is required to pursue the objectives, carry out the functions, and otherwise comply with the statutory obligations, prescribed for PHARMAC in the New Zealand Public Health and Disability Act 2000;
 - (ii) PHARMAC is subject to other statutory and public law obligations, which govern PHARMAC's decision-making processes;
 - (iii) PHARMAC has OPPs which provide guidance on the way in which PHARMAC carries out its statutory responsibilities in relation to the management of the Pharmaceutical Schedule;
 - (iv) PHARMAC's OPPs may be amended or updated from time to time, following consultation with relevant groups;
 - (v) the actions which PHARMAC may take under its OPPs include (without limitation):
 - (A) listing new pharmaceuticals;
 - (B) changing guidelines or restrictions on the purchasing, prescribing and dispensing of listed pharmaceuticals;
 - (C) changing the subsidy levels and/or market dynamics for pharmaceuticals as a result of PHARMAC adopting one of the strategies set out in the OPPs or by any other means;
 - (D) amending the basis on which pharmaceuticals are classified into therapeutic groups and sub-groups;
 - (E) delisting pharmaceuticals, or delisting all or part of a therapeutic group or sub-group;
 - (vi) any action taken by PHARMAC pursuant to its OPPs may impact on the listing of the Pharmaceutical.
- (b) PHARMAC agrees not to apply, amend or update its OPPs in order to avoid any of PHARMAC's obligations under this Agreement.

1.2 Amendments to Pharmaceutical Schedule

PHARMAC will consult with you before amending the Pharmaceutical Schedule if a proposed amendment would have a material adverse effect on the listing of the Pharmaceutical.

1.3 **Product identification codes**

You agree to obtain and notify PHARMAC by submitting a notification of product changes form of the Pharmacode, the GTIN and the CTPP for the Pharmaceutical as soon as these are notified to you, and in any event no later than the earlier of:

- (a) 10 business days following the Market Notification Date; or
- (b) the 5th day of the month immediately prior to the Start Date.

For the avoidance of doubt, this requirement does not apply in relation to any Pharmaceutical that is a Medical Device.

1.4 **Stock Reporting**

You shall provide PHARMAC with reports on stock levels for the Pharmaceuticals upon PHARMAC's request during the Sole Supply Period and/or Hospital Supply Status Period.

2. Crown Direction

- (a) You acknowledge that PHARMAC must comply with any Crown Direction.
- (b) PHARMAC may terminate or amend the Agreement, or impose restrictions on the prescribing or dispensing of a Pharmaceutical, at any time during the Sole Supply Period or the Hospital Supply Status Period (as applicable) or the Transition Periods, if the termination, amendment or imposition of restrictions is required to give effect to a Crown Direction.
- (c) In the event that a Crown Direction is issued to PHARMAC that requires an amendment to be made to this Agreement to give effect to that direction:
 - PHARMAC will give you as much notice as practicable of the Crown Direction and of any amendments to this Agreement that are required to give effect to that direction;
 - (ii) the Agreement will be deemed to be amended so as to give effect to the Crown Direction from the date when such direction is due to take effect; and
 - (iii) you may terminate this Agreement on not less than six months' written notice to PHARMAC where the effect of the amendment required under sub-paragraph (ii) above is such that it is no longer viable, financially or otherwise, for you to continue supplying the Pharmaceutical or to perform your obligations under this Agreement.

3. Audit

- (a) PHARMAC may, from time to time, review your records and any other information you hold that relates to this Agreement with regard to stock levels, registration information and supply issues, for the purposes of auditing your compliance with this Agreement. In these circumstances, PHARMAC, in consultation with you, will determine the terms and manner of any such audit, which as a minimum, must include the following:
 - (i) the audit will be conducted by an auditor authorised by PHARMAC;

- (ii) you agree to co-operate fully with PHARMAC and provide PHARMAC and the auditor with all reasonable assistance to ensure that any audit conducted under this clause is fully and properly completed to PHARMAC's satisfaction, including:
 - (A) allowing the auditor access to your premises, records and other information you hold that relates to this Agreement with regard to stock levels, registration information and supply issues, for the purposes of, and during the course of, conducting the audit;
 - (B) answering promptly any questions from PHARMAC or the auditor concerning any aspect of your compliance with this Agreement.
- (iii) PHARMAC will give you 10 business days' notice of its intention to conduct an audit under this clause and will ensure that the conduct of any such audit, and access in terms of sub-paragraph (A) above, does not unreasonably disrupt your business operations.
- (b) PHARMAC will notify you in writing if an audit under this clause reveals any noncompliance with this Agreement. You agree to remedy any non-compliance within 10 business days of receiving such notice from PHARMAC or such other period as agreed with PHARMAC.
- (c) In relation to Hospital Supply Status, PHARMAC will use its best endeavours to audit compliance by DHB Hospitals with the DV Limits and related requirements set out under this Agreement.

4. Miscellaneous

4.1 **Litigation support**

If this Agreement or its terms (including the basis on which the Pharmaceutical is listed):

- (a) give rise to proceedings being issued against PHARMAC; or
- (b) result in PHARMAC being made a party to any proceedings issued by a third party,

you will give PHARMAC all assistance it reasonably requires to gather evidence (including expert medical and clinical evidence) for the purpose of those proceedings.

4.2 **Dispute resolution**

If there is a dispute between us arising out of, or in connection with, this Agreement, neither of us is to commence any proceedings relating to that dispute until the following procedure has been complied with:

- (a) the party claiming a dispute has arisen must give written notice to the other party specifying the nature of the dispute;
- (b) we will endeavour, in good faith, to resolve the dispute referred to in the notice by using informal dispute resolution techniques;
- (c) if we do not agree on a dispute resolution technique within 14 days after the date notice of a dispute was given, the dispute is to be mediated according to the standard mediation agreement of LEADR & IAMA (a body corporate incorporated in Australia, registered as an overseas company in New Zealand in accordance with Part 18 of the Companies Act

1993, trading as the Resolution Institute), and the Chair of LEADR & IAMA (or the Chair's nominee) will select the mediator and determine the mediator's remuneration;

- (d) a party seeking urgent interlocutory relief may, by notice to the other party, elect not to comply with the provisions of this clause, but only to the extent of the relief sought, and only for the period required to dispose of the application for interlocutory relief; and
- (e) pending resolution of the dispute, this Agreement will remain in full effect without prejudicing our respective rights and remedies.

For the avoidance of doubt you acknowledge and agree that where a dispute arises in respect of hospital supply, PHARMAC may elect to involve any relevant DHB in any part, or all, of the above procedure.

4.3 Advertising

You must ensure that any Advertisement aimed at consumers of pharmaceuticals which you procure to be published, or in any way participate or assist in publishing, does not breach any applicable:

- (a) statute or regulation, including the Fair Trading Act 1986, Medicines Act 1981 and Medicines Regulations 1984; or
- (b) industry standard, including the Advertising Standards Authority Codes of Practice and Medicines New Zealand Code of Practice.

For the purposes of this clause:

- (c) "Advertisement" means any words, whether written, printed or spoken, any pictorial representation or design, any sounds or visual images, or combination of sounds and visual images, or any other form of communication used or appearing to be used to promote:
 - (i) the sale of a Pharmaceutical; or
 - (ii) the use of a method of treatment involving a Pharmaceutical; and
- (d) references to a statute, regulation or industry standard include that statute, regulation or industry standard as amended or replaced from time to time.

4.4 No derogation

For the avoidance of doubt, the express provision of a remedy for, or consequence of, breach of any term of this Agreement does not derogate from any other legal right or remedy available to PHARMAC under this Agreement or otherwise in respect of such breach.

4.5 No waiver

A failure or delay by either of us to exercise any right arising under this Agreement is not a waiver of that right, and a waiver of a breach of this Agreement is not a waiver of any other breach.

4.5 Agreement prevails

Where any of your terms of supply, whether recorded on your invoices or in credit arrangements entered into or elsewhere, conflict with or detract from any of the terms of this Agreement, the terms of this Agreement will prevail and will apply to the exclusion of any of your terms or documentation.

4.6 Entire agreement

This Agreement:

- (a) is the entire agreement between us regarding the terms on which the Pharmaceutical is, as applicable:
 - (i) listed in Section B of the Pharmaceutical Schedule and subsidised by the Funder; and/or
 - (ii) listed in Section H of the Pharmaceutical Schedule and purchased by DHB Hospitals; and
- (b) supersedes and extinguishes, from the Start Date, all prior agreements and understandings between us, and between you and any District Health Board regarding supply of the Pharmaceutical to DHB Hospitals.

4.7 **Amendments**

Amendments to this Agreement are only effective if in writing and signed by both of us.

4.8 Assignment

You will not permit any part of this Agreement to be transferred, assigned or sub-contracted (either directly or due to a change of ownership or control) without PHARMAC's prior written consent (such consent not to be unreasonably withheld). Any such consent may be given subject to such reasonable conditions as PHARMAC sees fit but no such consent will relieve you from any liability or obligation under the terms of the Agreement, and you will continue to be responsible for the acts, defaults and neglects of your transferee, assignee or sub-contractor.

4.9 **Further assurances**

We both agree to execute any further documents and do any further acts within our power as may be reasonably necessary from time to time to give effect to the terms and intentions of this Agreement.

4.10 Contracts Privity

- (a) For the purposes of the Contract and Commercial Law Act 2017, Part 2, Subpart 1, we both acknowledge that your obligations in this Agreement constitute promises which confer or are intended to confer a benefit on the Funder and related persons and/or DHB Hospitals and related persons (as applicable), and are enforceable at the suit of the Funder, any such DHB Hospitals or any related persons.
- (b) Except as expressly provided in paragraph (a) above, the parties do not intend to create rights in, or grant remedies to, any third party as a beneficiary of this Agreement, and all the provisions of this Agreement shall be for the sole and exclusive benefit of the parties.

(c) For the avoidance of doubt, you acknowledge that PHARMAC may pursue damages or any other claim (including injunctive or other such relief) under this Agreement on its own account and/or on behalf of the Funder and/or DHB Hospitals (as applicable), in respect of any form of loss or damage incurred by PHARMAC and/or the Funder and/or DHB Hospitals.

4.11 Jurisdiction and governing law

We each submit to the exclusive jurisdiction of the New Zealand courts and agree that this Agreement is governed by New Zealand law.

Schedule 5: Additional contract terms for Sole Supply Status

1. Effect of Sole Supply Status

1.1 **Subsidy arrangements**

- (a) Subject to clause 3.1 of this Schedule, the Pharmaceutical will be subsidised, and you must supply it, during the First Transition Period at the Price. If any other brands of the Chemical Entity are listed on the Pharmaceutical Schedule, those brands will continue to be subsidised for the First Transition Period at the subsidy applicable to those brands immediately before the commencement of the First Transition Period.
- (b) The subsidy payable for all other brands of that form and strength of the Chemical Entity that are listed will be changed to the Price on the first day of the Second Transition Period, unless the Price exceeds the subsidy applicable to those brands immediately prior to the First Transition Period, in which case the subsidy will remain unchanged.
- (c) All other brands of that form and strength of the Chemical Entity will be delisted on the first day of the Sole Supply Period, with the result that you will have Sole Supply Status for that form and strength of the Chemical Entity during the Sole Supply Period.
- (d) The Pharmaceutical will continue to be fully subsidised, and you must continue to supply it, at the Price throughout the Second Transition Period and, subject to PHARMAC's other rights under this Agreement in relation to the Pharmaceutical, throughout the Sole Supply Period.
- (e) Subject to PHARMAC's other rights under this Agreement in relation to the Pharmaceutical, the Pharmaceutical will not be delisted during the Final Transition Period.

1.2 Exclusivity for the Sole Supply Period

- (a) Subject to PHARMAC's other rights under this Agreement in relation to the Pharmaceutical, PHARMAC will not subsidise another supplier's brand of the Pharmaceutical on the Pharmaceutical Schedule at any time during the Sole Supply Period.
- (b) This clause does not prohibit PHARMAC from entering into negotiations or arrangements with, or inviting tenders from, other suppliers to be the sole subsidised supplier of any forms and strengths of the Chemical Entity, if such supply commences after the end of the Sole Supply Period.
- (c) For the avoidance of doubt, PHARMAC may lower the subsidy applicable to a Pharmaceutical during the Final Transition Period as it sees fit, including lowering the subsidy of a Pharmaceutical as a result of the implementation of new tender arrangements.

1.3 Withdrawal of Sole Supply Status

- (a) PHARMAC may withdraw Sole Supply Status in relation to your supply of the Pharmaceutical (in which case clauses 1.1 and 1.2 of this Schedule will no longer apply), by written notice to you at any time during the Sole Supply Period or (in anticipation) during the First Transition Period or the Second Transition Period if:
 - (i) you have failed to notify PHARMAC as required under clause 5.1 of this Schedule;

- (ii) you are unable to supply the Pharmaceutical in accordance with this Agreement for a period of 30 days;
- (iii) any Consent for the Pharmaceutical is withdrawn; or
- (iv) you otherwise fail to supply the Pharmaceutical in accordance with this Agreement.
- (b) In the event that PHARMAC exercises its rights under clause 1.3(a) above in relation to a Pharmaceutical, it may also withdraw Sole Supply Status in relation to your supply of all forms and strengths of that Pharmaceutical (in which case clauses 1.1 and 1.2 of this Schedule will no longer apply), following a recommendation from its clinical advisors, either by the written notice provided under clause 1.3(a) above or by further written notice to you at any time during the Sole Supply Period or (in anticipation) during the First Transition Period or the Second Transition Period.
- (c) Any withdrawal of Sole Supply Status is without prejudice to PHARMAC's rights under clauses 5.2 and 5.3 of this Schedule.

1.4 Suspension of Sole Supply Status

- (a) If, at any time during the Sole Supply Period or (in anticipation) during the First Transition Period or the Second Transition Period, you are unable to meet demand for the Pharmaceutical, or you notify PHARMAC under clause 5.1 of this Schedule of a Potential Out-of-Stock Event, or you otherwise fail to supply the Pharmaceutical in accordance with this Agreement, PHARMAC may suspend Sole Supply Status in relation to your supply of the Pharmaceutical for the period of such inability.
- (b) In the event that PHARMAC exercises its rights under clause 1.4(a) above in relation to a Pharmaceutical, it may also suspend Sole Supply Status in relation to your supply of all forms and strengths of that Pharmaceutical, following a recommendation from its clinical advisors, either by the written notice provided under clause 1.4(a) above or by further written notice to you at any time during the Sole Supply Period or (in anticipation) during the First Transition Period or the Second Transition Period.
- (c) Any suspension of Sole Supply Status is without prejudice to PHARMAC's rights under clauses 5.2 and 5.3 of this Schedule.
- (d) PHARMAC may, at any time, in its sole discretion, notify you of the date on which the suspension of Sole Supply Status under this clause 1.4 ceases and on which date:
 - (i) Sole Supply Status is to be re-implemented in respect of the Pharmaceutical; or
 - (ii) Sole Supply Status is to be withdrawn in accordance with clause 1.3 of this Schedule.

1.5 **Subsidy arrangements after the End Date**

- (a) Subject to paragraphs (b) and (c) below, the Pharmaceutical is to continue to be the subject of a listing agreement between you and PHARMAC with effect from the End Date, and accordingly:
 - (i) you will cease to have Sole Supply Status for that form and strength of the Chemical Entity; and
 - (ii) the Pharmaceutical will remain listed in Section B of the Pharmaceutical Schedule subject to PHARMAC's standard terms of supply for pharmaceuticals used in the

community (as recorded in the then current general listing terms Annex of PHARMAC's standard community contract template).

- (iii) you may increase the price ex-manufacturer (exclusive of GST) at which you supply the Pharmaceutical to wholesalers and other such distributors on giving PHARMAC six months' written notice of that price increase. You may provide PHARMAC with this written notice at any time after, but not before, the End Date;
- (iv) if PHARMAC does not increase the subsidy for the Pharmaceutical to the new price notified under paragraph (a)(iii) above, you may withdraw the Pharmaceutical from supply on not less than six months' prior written notice;
- (v) if PHARMAC does increase the subsidy for the Pharmaceutical to the new price notified under paragraph (a)(iii) above, you may withdraw the Pharmaceutical from supply on not less than two years' prior written notice (except where the withdrawal is for reasons that PHARMAC considers to be wholly outside of your control, in which case you must first provide to PHARMAC such information as it may require from you in order to satisfy it, in its sole discretion, that you are required to withdraw supply); and
- (vi) if at the time of providing notice under paragraph (a)(v) above, you advise PHARMAC that you are required to purchase a significant quantity of extra stock of the Pharmaceutical to enable you to continue to supply for the two-year period, and you advise PHARMAC of the total cost of that stock, PHARMAC will either:
 - (A) use reasonable endeavours to enter into an agreement to reimburse you for stock that remains unsold at the end of that two-year period; or
 - (B) release you from your obligations to supply under this paragraph (a).
- (b) PHARMAC may at its sole discretion, with effect from the End Date:
 - (i) require that the Pharmaceutical does not continue to be the subject of a listing agreement, in which case PHARMAC will give you written notice not less than three months prior to the End Date; and/or
 - (ii) apply any of the strategies under PHARMAC's then current OPPs to the Pharmaceutical (including delisting the Pharmaceutical after the Final Transition Period).
- (c) In the event PHARMAC applies any of the strategies described in paragraph (b)(ii) above, you may withdraw the Pharmaceutical from supply on not less than six months' prior written notice. You may provide PHARMAC with this written notice at any time after, but not before, the date that the particular strategy takes effect in the Pharmaceutical Schedule.
- (d) Where a Pharmaceutical is designated an ASP, PHARMAC will provide at least four months written notice of another supplier's brand of the Pharmaceutical being listed on the Pharmaceutical Schedule.

2. Consents

2.1 Warranty and indemnity that Consents are held

You warrant that you have, and will maintain, all necessary Consents. If a Consent is not held by you or is withdrawn or the Pharmaceutical is no longer approved for the treatment of any indication for which it is subsidised, then:

- (a) PHARMAC is entitled to terminate this Agreement by 14 days' written notice to you; and
- (b) whether or not PHARMAC terminates this Agreement under paragraph (a) above, you are to indemnify the Funder for any additional costs incurred by it (or by PHARMAC on its behalf) as a result of that failure to hold all necessary Consents. This clause confers a benefit on (and is enforceable by) the Funder in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

2.2 Changed medicine notification

If the Ministry of Health issues a changed medicine notification in relation to a Pharmaceutical, and as a result a variant of the Pharmaceutical (the "**CMN Pharmaceutical**") is approved:

- (a) you must immediately notify PHARMAC; and
- (b) PHARMAC may take such action as it considers appropriate in relation to that Pharmaceutical or the CMN Pharmaceutical including (but not limited to):
 - (i) withdrawing Sole Supply Status for the Pharmaceutical;
 - (ii) reviewing the terms of listing of that Pharmaceutical; and
 - (iii) determining whether, and the extent to which, the Funder may subsidise the CMN Pharmaceutical.

3. Price

3.1 **Price change**

- (a) Subject to clause 3.1 (b) (ii), clause 3.1 (b) (iii) and clause 3.1 (b) (iv) of this Schedule your brand of the Pharmaceutical must be available for supply and you must supply the Pharmaceutical, at the Price from the 12th day of the month prior to the Start Date, and the Pharmaceutical will be subsidised at the Price from the Start Date.
- (b) In the event your brand of the Pharmaceutical is currently listed on the Pharmaceutical Schedule at the beginning of the First Transition Period:
 - (i) you must ensure that wholesalers and other such distributors change the price at which they supply the Pharmaceutical to the Price on the 12th day of the month prior to the Start Date, and you shall provide price support to wholesalers and other such distributors for a maximum 4 weeks stock on hand (or such other level of stock as agreed between you and PHARMAC) of the Pharmaceutical held at wholesalers and other such distributors, provided that such wholesalers and other such distributors can provide you with stock on hand reports upon request; or

- (ii) your brand of the Pharmaceutical must be available for supply and you must supply the Pharmaceutical, at the Price from the 1st day of the month prior to the Start Date, and the Pharmaceutical will be subsidised at the Price from the Start Date which is conditional upon you having at least 2 months Lead Time for the Pharmaceutical; and
- (iii) notwithstanding clauses 3.1 (b) (i) or (b) (ii) above, if the Price would result in a price increase for your brand of the Pharmaceutical you must supply the Pharmaceutical at the Price from the 22nd day of the month prior to the Start Date, and the Pharmaceutical will be subsidised at the Price from the Start Date; and
- (iv) notwithstanding clauses 3.1 (b) (i), (b) (ii) or (b) (iii) above, PHARMAC may agree a process with you, that results in your brand of the Pharmaceutical, which includes a rebate, being available for supply and you must supply the Pharmaceutical, at the Price from the 22nd day of the month prior to the Start Date, and you shall provide price support to wholesalers and other such distributors for a maximum 4 weeks stock on hand (or such other level of stock as agreed between you and PHARMAC) of the Pharmaceutical held at wholesalers and other such distributors, provided that such wholesalers and other such distributors can provide you with stock on hand reports upon request.

For the avoidance of doubt if you do not notify PHARMAC in your Tender Bid in the electronic portal which of the options stated in clauses 3.1 (b) (i) or (b) (ii) above apply to the Pharmaceutical, clause (b) (i) above shall apply.

(c) You shall upon request by PHARMAC, provide information on how you intend to manage the price changes stated in clauses 3.1 (b) (i) to b (iv) above. PHARMAC may, at its sole discretion, publish this information at the time the Tender Item is notified in the Pharmaceutical Schedule in accordance with clause 7.2 of Schedule 3.

3.2 Supply Price

During each of the Second Transition Period, the Sole Supply Period and the Final Transition Period, the price at which the Pharmaceutical is supplied by you must not exceed the Price.

3.3 Warranty that Pharmaceutical is supplied at not less than cost price

You warrant that the price at which you are required to supply the Pharmaceutical under this Agreement is greater than the cost price of the Pharmaceutical (including, without limitation, the costs of manufacturing the Pharmaceutical and of supplying it to you for supply in New Zealand).

3.4 No reference pricing during Sole Supply Period

The subsidy payable for the Pharmaceutical will not be reduced as a result of a reduction in the reference price for the therapeutic sub-group of which it is a member during the Sole Supply Period. For the avoidance of doubt, PHARMAC will not be prevented from applying its reference pricing mechanisms to the Pharmaceutical to reduce the subsidy payable for it from the End Date.

3.5 Unsold stock following delisting

You acknowledge and agree that the price at which you are required to supply any Pharmaceutical under this Agreement incorporates, if applicable, any costs incurred by you associated with unsold stock of the Pharmaceutical held by you or any wholesaler or other distributor, after the Pharmaceutical has been delisted or after notification that it will be delisted.

4. Shelf-life of Pharmaceutical

- (a) You will not supply the Pharmaceutical to wholesalers, or other such distributors, or pharmacies if:
 - (i) the remaining shelf-life of the Pharmaceutical is less than six months; or
 - (ii) where the total shelf-life of the Pharmaceutical is less than six months, the remaining shelf-life is less than 75% of the Pharmaceutical's total shelf-life,

without prior written agreement from PHARMAC.

(b) If you have an agreement with PHARMAC to supply the Pharmaceutical, where the total shelf-life of the Pharmaceutical is less than six months and the remaining shelf-life is less than 75% of the Pharmaceutical's total shelf-life, and a particular wholesaler, or other such distributor, or pharmacy does not distribute or dispense that Pharmaceutical before its expiry or use-by date, you agree to allow that wholesaler, or other such distributor, or pharmaceutical to you and to provide that wholesaler, or other such distributor, or pharmacy with a credit for the Pharmaceutical.

5. **Out-of-stock arrangements**

5.1 Notification of Potential Out-of-Stock Event and supply of Alternative Pharmaceutical

- (a) You must notify PHARMAC in writing as soon as you have reasonable cause to believe at any time that you will fail to supply the Pharmaceutical in accordance with this Agreement and, in any event, you must notify PHARMAC if at any time a Potential Outof-Stock Event occurs, including during the Sole Supply Period or the First Transition Period or the Second Transition Period, in which case PHARMAC may suspend Sole Supply Status in relation to your supply of the Pharmaceutical.
- (b) If a Potential Out-of-Stock Event occurs, or your failure to supply the Pharmaceutical in accordance with this Agreement will result in insufficient stock of the Pharmaceutical being available, then at PHARMAC's option:
 - (i) PHARMAC may implement an arrangement with another supplier to supply an Alternative Pharmaceutical (including an arrangement for back-up supply); or
 - (ii) you must use your best endeavours to procure wholesalers and other such distributors to supply, as soon as practicable, an Alternative Pharmaceutical to pharmacies at the Price, and PHARMAC will subsidise the Alternative Pharmaceutical at the Price.

5.2 General indemnity

You agree to indemnify the Funder if you fail to supply the Pharmaceutical in accordance with this Agreement (other than for reasons that PHARMAC reasonably considers, following discussion with you, to be wholly outside your control) whether as a result of:

- (a) your inability to meet demand for supply of the Pharmaceutical;
- (b) your withdrawal of the Pharmaceutical from supply;
- (c) any failure to have and maintain a Consent as specified in clause 2 of this Schedule;

- (d) any failure to notify PHARMAC in accordance with clause 5.1 above; or
- (e) for any other reason.

This indemnity:

- (f) covers all additional costs, including without limitation all costs (if any) incurred in securing and subsidising an Alternative Pharmaceutical, incurred by the Funder (or by PHARMAC on its behalf) as a result of your failure that are additional to any costs specified in clause 5.3; and
- (g) confers a benefit on (and is enforceable by) the Funder in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

5.3 Liquidated damages

- (a) If you fail to supply the Pharmaceutical in accordance with this Agreement (other than for reasons that PHARMAC reasonably considers, following discussion with you, to be wholly outside your control) and:
 - (i) you have not notified PHARMAC under clause 5.1 of this Schedule, then without prejudice to PHARMAC's rights under clause 5.2:
 - (A) subject to paragraph (e) below, you must pay to PHARMAC (for the benefit of PHARMAC and the Funder) liquidated damages for the administrative and/or operational costs incurred by PHARMAC as a result of your failure to supply in the amount of \$50,000 per Pharmaceutical in respect of which you failed to notify PHARMAC; and
 - (B) PHARMAC may withdraw Sole Supply Status in relation to your supply of the Pharmaceutical under clause 1.3 of this Schedule; or
 - (ii) you have notified PHARMAC under clause 5.1 of this Schedule, then without prejudice to PHARMAC's rights under clause 5.2:
 - (A) you are not liable to pay any liquidated damages under this clause 5.3; and
 - (B) if you fail to supply the Pharmaceutical in accordance with this Agreement for more than 30 days, PHARMAC may withdraw Sole Supply Status in relation to your supply of the Pharmaceutical under clause 1.3 of this Schedule.
- (b) If, having notified PHARMAC under clause 5.1 of this Schedule, you remain able to, and you continue to, supply the Pharmaceutical, or an Alternative Pharmaceutical in accordance with clause 5.1(b)(ii) of this Schedule, such that there is no interruption to supply of the Pharmaceutical or of the Alternative Pharmaceutical in accordance with this Agreement, you will not be liable for any costs unless PHARMAC, in its sole discretion, has considered it necessary to enter into an arrangement with an alternative supplier under which PHARMAC has agreed to make a payment to that supplier to ensure continuity of supply, in which case you must indemnify the Funder or PHARMAC for that payment. Such indemnity will be limited to an amount of \$10,000.
- (c) You acknowledge and agree that:
 - (i) the amounts of liquidated damages in this clause represent a reasonable estimate of the administrative and operational costs incurred by PHARMAC (including the

use of staff and loss of opportunity as a result of use of staff time, and communication costs), the estimate being based on PHARMAC's previous experience; and

(ii) the amounts referred to as liquidated damages are not intended to include any penalty element nor any amount for costs relating to the securing of an Alternative Pharmaceutical, or the subsidisation of an Alternative Pharmaceutical,

provided that PHARMAC may, in its sole discretion, require you to pay less than the amount specified as liquidated damages if it is satisfied that the actual costs in the particular circumstances are less than the relevant amount so specified.

- (d) Where a Pharmaceutical in respect of which you are liable to pay liquidated damages pursuant to clause 5.3(a)(i)(A) above also has Hospital Supply Status and where you would otherwise be liable to pay the same amount of liquidated damages in respect of any corresponding failure under the terms of such Hospital Supply Status, you will only be required to pay liquidated damages of \$50,000 in total in respect of both supply failures.
- (e) All amounts referred to in this clause are plus GST.

5.4 **Failure to supply**

References in this clause 5 and elsewhere in this Schedule to your failure or inability to supply the Pharmaceutical in accordance with this Agreement, or your inability to meet demand for the Pharmaceutical, or insufficient stock of the Pharmaceutical being available, include, but are not limited to, circumstances where:

- (a) no stock of the Pharmaceutical is physically held by you or on your behalf in New Zealand;
- (b) the only stock of the Pharmaceutical physically held by you or on your behalf in New Zealand is stock to which clause 4(a)(i) or (ii) of this Schedule applies and no agreement has been reached with PHARMAC in terms of clause 4(a) of this Schedule;
- (c) you fail, directly or indirectly, to ensure that all orders for the Pharmaceutical are filled (without restricting quantities that may be ordered), including in particular where, for reasons attributable (wholly or partly) to you, not all patients for whom the Pharmaceutical is prescribed receive the full amount of the Pharmaceutical they require, or to which they are entitled, under their prescriptions, within the required time frames for dispensing under the then current contract, or notice under section 88 of the New Zealand Public Health and Disability Act 2000, in respect of pharmacy services;
- (d) you fail to supply the Pharmaceutical on and from the Start Date.

5.5 **Default interest and recovery costs**

If payment of any amount required to be paid by you under this clause 5 is not made by you, in full, by the due date for payment of that amount as notified to you in writing by PHARMAC, then:

(a) interest will accrue in such sum as remains unpaid at a rate per annum equal to the relevant SME overdraft rate (weighted average rate) of the Reserve Bank of New Zealand plus five percentage points, calculated and compounded on a daily basis, from the due date until such time as the sum due (including interest) is paid in full. This obligation to pay default interest is to arise without the need for a notice or demand from PHARMAC for such default interest; and

(b) PHARMAC may take any action, including legal action, without first needing to implement the dispute resolution procedure contained in clause 4.2 of Schedule Four, to recover that amount and you agree to pay to PHARMAC actual enforcement costs incurred in relation to that action.

6. Termination and restrictions

6.1 **Termination and restrictions for clinical reasons**

PHARMAC reserves the right, but only after consultation with you and a relevant medical adviser (being either the Ministry of Health, PTAC or its sub-committees), to:

- (a) terminate this Agreement at any time during the Sole Supply Period or the First Transition Period or the Second Transition Period if the medical adviser determines for clinical reasons that it is no longer appropriate to have either:
 - (i) a sole subsidised supplier of that form and strength of the Chemical Entity; or
 - (ii) the Pharmaceutical as the sole subsidised brand; and/or
- (b) impose at any time during the Sole Supply Period or the Transition Periods restrictions on the prescribing or dispensing of a Pharmaceutical if those restrictions are necessary for clinical reasons.

6.2 **Termination following an audit**

PHARMAC may terminate the Agreement, or withdraw Sole Supply Status in relation to a Pharmaceutical, at any time during the Sole Supply Period or the Transition Periods, if you fail to remedy any area of non-compliance in accordance with clause 3(b) of Schedule Four.

7. Guarantee

- (a) PHARMAC may require an entity acceptable to it to provide a guarantee (in a form satisfactory to PHARMAC) of your performance obligations under clauses 5.2 and 5.3 of this Schedule including, without limitation, the payment of any sum payable under the indemnity or as liquidated damages pursuant to those clauses for any failure to supply the Pharmaceutical in accordance with this Agreement during the Sole Supply Period.
- (b) The guarantor's liability under such a guarantee will be limited to a total of \$100,000 per Chemical Entity for all claims made by PHARMAC under the guarantee.

Schedule 6: Additional contract terms for Hospital Supply Status

1. Effect of Hospital Supply Status

1.1 **Pricing arrangements**

- (a) Subject to PHARMAC's other rights under this Agreement and clause 3.1 of this Schedule, on and from the Start Date, during the remainder of the First Transition Period and during the Hospital Supply Status Period, the Pharmaceutical is to be:
 - (i) listed at the Price set out in Section H of the Pharmaceutical Schedule;
 - sold by you to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), at the Price.
- (b) Where the Pharmaceutical is included in an order by a DHB Hospital for pharmaceuticals where the total value (excluding GST) of the order is less than \$1,000, you may invoice the DHB Hospital, in accordance with clause 4.1 below, for the cost of freight for that particular order. For the avoidance of doubt, this clause 1.1(b) does not entitle you to invoice a DHB Hospital for any other costs in relation to the particular order.
- (c) Subject to PHARMAC's other rights under this Agreement in relation to the Pharmaceutical (including under clause 1.6 of this Schedule), and provided that there are no Alternative Pharmaceuticals listed in Section H of the Pharmaceutical Schedule at the start of the Final Transition Period, the Pharmaceutical:
 - (i) is to continue to be listed, sold and purchased at the Price referred to in clauses 1.1(a)(i) and (ii) above during the Final Transition Period and beyond; and
 - (ii) is not to be delisted during the Final Transition Period.

1.2 **Supplier for Hospital Supply Status Period**

- (a) Subject to:
 - (i) PHARMAC's other rights under this Agreement in relation to the Pharmaceutical; and
 - (ii) clauses 1.4 and 1.5 of this Schedule relating to the DV Limit for the Pharmaceutical,

your brand of the Pharmaceutical will be the brand listed in Section H of the Pharmaceutical Schedule, and purchased by DHB Hospitals at any time during the Hospital Supply Status Period, as the brand having Hospital Supply Status.

(b) This clause does not prohibit PHARMAC (on behalf of DHB Hospitals) from entering into negotiations or arrangements with, or inviting tenders from, other suppliers to be the supplier of any forms and strengths of the particular Pharmaceutical with Hospital Supply Status, or a relevant Alternative Pharmaceutical having a status equivalent to Hospital Supply Status, if notification of such an arrangement (once finalised) occurs, and such supply commences, after the end of the Hospital Supply Status Period.

1.3 **DV Pharmaceuticals**

- (a) PHARMAC may amend the relevant list of DV Pharmaceuticals specified in Section H of the Pharmaceutical Schedule, from time to time, in accordance with this clause 1.3, whereby:
 - (i) PHARMAC is only to remove a pharmaceutical listed as a DV Pharmaceutical if PHARMAC:
 - (A) has first obtained your agreement; or
 - (B) has a direction from Medsafe or its successor, or a recommendation from PTAC or its sub-committees, based on a significant clinical issue;
 - (ii) PHARMAC may add a pharmaceutical to the relevant list of DV Pharmaceuticals specified in Section H of the Pharmaceutical Schedule if such pharmaceutical is identified as a DV Pharmaceutical during the Hospital Supply Status Period or the First Transition Period by PHARMAC following a recommendation from PTAC or its sub-committees.
- (b) PHARMAC must consult with you prior to the removal of any pharmaceutical from the relevant list of DV Pharmaceuticals specified in Section H of the Pharmaceutical Schedule.

1.4 **DV Limit**

- (a) PHARMAC may, from time to time during the Hospital Supply Status Period or the First Transition Period, amend the DV Limit of the Pharmaceutical following what PHARMAC considers to be appropriate consultation with PTAC or its sub-committees, provided that PHARMAC may only increase the DV Limit without your prior agreement if it has a direction from Medsafe or its successor, or a recommendation from PTAC or its subcommittees, based on a significant clinical issue.
- (b) Subject to clause 1.5 of this Schedule you acknowledge and agree that while you have Hospital Supply Status:
 - DHB Hospitals may purchase DV Pharmaceuticals at any time within the First Transition Period and Final Transition Period without any requirement to comply with the DV Limit;
 - (ii) provided that DHB Hospitals collectively do not exceed the National DV Limit for the relevant Pharmaceutical, a DHB Hospital may purchase DV Pharmaceuticals at any time within the Hospital Supply Status Period;
 - (iii) without derogating from any other rights available to PHARMAC or DHB Hospitals under this Agreement or otherwise, if you fail to supply the Pharmaceutical in accordance with this Agreement (other than for a reason that PHARMAC reasonably considers, following discussion with you, to be wholly outside your control) within the Hospital Supply Status Period, then the relevant DHB Hospital is not required to comply with the DV Limit for the Pharmaceutical during that period of non-supply and the calendar month during which that nonsupply occurred will be excluded in any review of the DV Limit in accordance with clause 1.5 below;
 - (iv) if a DHB Hospital's usage of any DV Pharmaceuticals, in percentage terms, reaches or exceeds the percentage at which the Individual DV Limit is set for the relevant Pharmaceutical, that DHB Hospital may negotiate with you to agree to

vary the application of the Individual DV Limit to the DHB Hospital in respect of particular patients with exceptional needs.

1.5 **DV Limit Compliance**

(a) For the purposes of this clause 1.5:

(i) "Relevant Period" means:

- (A) the initial period starting on the day that the Hospital Supply Status Period begins up to and including 30 June 2020; or
- (B) for a Pharmaceutical listed on or prior to 30 June 2020, the period commencing on 1 July 2020 and ending on 30 June 2021 or, for a Pharmaceutical listed after 30 June 2021, the initial period starting on the date that the Hospital Supply Status Period begins up to and including 30 June 2021; or
- (C) for a Pharmaceutical listed on or prior to 30 June 2021, the period commencing on 1 July 2021 and ending on 30 June 2022, or, for a Pharmaceutical listed after 30 June 2021, the initial period starting on the date that the Hospital Supply Status Period begins up to and including 30 June 2022,

provided that for the purposes of carrying out the calculations in this clause 1.5 any calendar months that fall within those periods when there is any failure to supply the Pharmaceutical in accordance with this Agreement will be excluded.

(ii) **"Actual National DV Limit Indicator"** means, for a particular Pharmaceutical in any Relevant Period, such sum, expressed as a percentage, as is equal to:

(Total DV Pharmaceuticals Volume ÷ (Total DV Pharmaceuticals Volume + Total Pharmaceutical Volume)) x 100;

- (iii) "Total DV Pharmaceuticals Volume" means, for a particular Pharmaceutical in any Relevant Period, the total number of Units of all DV Pharmaceuticals of the relevant Pharmaceutical with Hospital Supply Status purchased by DHB Hospitals, as calculated by PHARMAC, following your request in accordance with clause 1.5(b) below, on the basis of the data extracted by PHARMAC from the electronic records used by it; and
- (iv) "Total Pharmaceutical Volume" means, for a particular Pharmaceutical with Hospital Supply Status in any Relevant Period, the total number of Units of that Pharmaceutical purchased by DHB Hospitals, as calculated by PHARMAC following your request in accordance with clause 1.5(b) below, on the basis of the data extracted by PHARMAC from the electronic records used by it.
- (b) If you reasonably believe that DHB Hospitals' percentage usage of DV Pharmaceuticals collectively exceeds the National DV Limit for a particular Pharmaceutical, you may at any time, but not more often than three-monthly, request that PHARMAC carry out calculations in accordance with the procedure set out in this clause 1.5 for the proportion of the Relevant Period that has passed to the date of your request, and PHARMAC may, in its discretion, agree to carry out the calculations for the Total DV Pharmaceuticals Volume, the Total Pharmaceutical Volume and the Actual National DV Limit Indicator, provided that if PHARMAC refuses to carry out such calculations, it will provide you with the reasons for refusing to do so.

- (c) It is acknowledged, for the avoidance of doubt, that if the Actual National DV Limit Indicator is less than the National DV Limit specified for the relevant Chemical Entity in Schedule Two and the Electronic Portal then, regardless of whether an individual DHB Hospital's percentage usage of DV Pharmaceuticals has exceeded the Individual DV Limit percentage for that Pharmaceutical, PHARMAC may decide, in its sole discretion, not to take any further action.
- (d) If the Actual National DV Limit Indicator is greater than the National DV Limit, PHARMAC will use its best endeavours to identify which individual DHB Hospitals' percentage usage of DV Pharmaceuticals have exceeded the Individual DV Limit percentage for that Pharmaceutical. You acknowledge that if PHARMAC cannot do this on the basis of information held by it, it may be necessary to obtain any further information you can provide. If neither of us can establish or quantify non-compliance by an individual DHB Hospital with the Individual DV Limit, then you acknowledge that PHARMAC may not be able to calculate for you, and you may not be able to obtain, financial compensation under clause 1.5(f)(ii) below. In that event you acknowledge, for the avoidance of doubt, that PHARMAC is not liable to pay any financial compensation on behalf of the relevant DHB.
- (e) If an individual DHB Hospital's percentage usage of DV Pharmaceuticals has exceeded the Individual DV Limit percentage for that Pharmaceutical as a result of DV Pharmaceutical usage that has been agreed to by you in accordance with clause 1.4(b)(iv) above then PHARMAC will not take any further action.
- (f) Subject to paragraph (e) above, PHARMAC will address the issue of non-compliance with any individual DHB Hospital or DHB Hospitals identified in accordance with paragraph (d) above by:
 - (i) using its best endeavours to ensure that the relevant DHB Hospital complies with the DV Limit for that Pharmaceutical in the remainder of that Relevant Period (if applicable) and in any subsequent Relevant Period or Relevant Periods; and/or
 - (ii) following the end of a Relevant Period, and only once in respect of any Relevant Period, determining what financial compensation is payable by that DHB for its contribution towards exceeding the National DV Limit (where PHARMAC is able to quantify this based on the information available to it), being the greater amount of \$1,000 or such sum as is equal to:

DHB Deviation x Adjusted Price

where:

- (A) **"Adjusted Price"** means the Unit Price, for a particular Pharmaceutical in any Relevant Period, divided by two;
- (B) **"DHB Deviation"** is equal to:

(Total Contribution for $DHB_x \div Total$ Contribution for Exceeding DHBs) x Total DV Pharmaceuticals Volume in Excess of DV Limit

where:

"Total Contribution for DHB_x" means, for:

(a) a particular Pharmaceutical; and

(b) a particular DHB Hospital,

in any Relevant Period, the total number of Units of all DV Pharmaceuticals of the relevant Pharmaceutical with Hospital Supply Status purchased by that DHB Hospital minus the number of Units of DV Pharmaceuticals that corresponds to the percentage of the Individual Total Market Volume represented by the Individual DV Limit percentage for that Pharmaceutical, as calculated by PHARMAC for such Relevant Period on the basis of the data extracted by PHARMAC from the electronic records used by it;

"Total Contribution for Exceeding DHBs" means, for a particular Pharmaceutical in any Relevant Period, the sum of the Total Contribution for DHB_x for each DHB Hospital identified by PHARMAC in accordance with paragraph (d) above as exceeding the Individual DV Limit for that Relevant Period, as calculated by PHARMAC for such Relevant Period on the basis of the data extracted by PHARMAC from the electronic records used by it;

"Total DV Pharmaceuticals Volume in Excess of DV Limit" means, for a particular Pharmaceutical in any Relevant Period, the total number of Units of all DV Pharmaceuticals of the relevant Pharmaceutical with Hospital Supply Status purchased by DHB Hospitals in excess of the National DV Limit for that Relevant Period, as calculated by PHARMAC on the basis of the data extracted by PHARMAC from the electronic records used by it;

- (iii) PHARMAC will notify you and the relevant DHB in writing of any DV Limit compensation payable in accordance with clause 1.5(f)(ii) above. You may then invoice the relevant DHB for the amount of DV Limit compensation payable, as calculated and notified to you by PHARMAC. You must provide to PHARMAC a copy of any such invoice, and evidence of any payment received from the DHB in respect of that invoice, within 10 business days of sending such invoice or receiving such payment, respectively.
- (iv) If you have not received the amount of any DV Limit compensation payable in accordance with clause 1.5(f)(ii) above from the DHB within 60 business days of invoicing the DHB for the amount owing, then you may take such further actions (other than ceasing to supply) directly with the DHB as you consider appropriate to recover the amount owing to you. In that event you acknowledge, for the avoidance of doubt, that PHARMAC is not liable to pay any financial compensation on behalf of the relevant DHB.
- (v) For the avoidance of doubt, for the purposes of calculating the Total DV Pharmaceuticals Volume, the Total Contribution for DHB_x and the Total DV Pharmaceuticals Volume in Excess of DV Limit in this clause 1.5, if a pharmaceutical is added to, or removed from, the list of DV Pharmaceuticals during the Relevant Period in accordance with clause 1.3 of this Schedule, then only the number of Units of that pharmaceutical purchased by DHB Hospitals during the portion of the Relevant Period in which that pharmaceutical was a DV Pharmaceutical are to be included in those calculations.

1.6 **Supply arrangements after the End Date**

(a) Subject to paragraphs (b) and (c) below, the Pharmaceutical is to continue to be the subject of a listing agreement between you and PHARMAC with effect from the End Date, and accordingly:

- you will cease to have Hospital Supply Status for that form and strength of the Pharmaceutical (in the case of any Pharmaceutical that is not a Medical Device); or
- (ii) you will cease to have Hospital Supply Status in respect of an item conforming to the individual specifications described for the item in the product list in clause 2 of Schedule Two which the Pharmaceutical was listed as conforming with (in the case of any Pharmaceutical that is a Medical Device); and
- (iii) the Pharmaceutical will remain listed in Section H of the Pharmaceutical Schedule subject to PHARMAC's standard terms of supply for pharmaceuticals used in DHB Hospitals (as recorded in the then current general listing terms Annex of PHARMAC's standard hospital contract template);
- (iv) you may increase the price (exclusive of GST) at which you supply the Pharmaceutical to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), on giving PHARMAC six months' written notice of that price increase. You may provide PHARMAC with this written notice at any time after, but not before, the End Date;
- (v) you may withdraw the Pharmaceutical from supply on not less than two years' prior written notice (except where the withdrawal is for reasons that PHARMAC considers to be wholly outside of your control, in which case you must first provide to PHARMAC such information as it may require from you in order to satisfy it, in its sole discretion, that you are required to withdraw supply); and
- (vi) if at the time of providing notice under paragraph (a)(iv) above, you advise PHARMAC that you are required to purchase a significant quantity of extra stock of the Pharmaceutical to enable you to continue to supply for the two-year period, and you advise PHARMAC of the total cost of that stock, PHARMAC will either:
 - (A) use reasonable endeavours to enter into an agreement to reimburse you for stock that remains unsold at the end of that two-year period; or
 - (B) release you from your obligations to supply under this paragraph (a).
- (b) PHARMAC may, at its sole discretion, with effect from the End Date:
 - (i) require that the Pharmaceutical does not continue to be the subject of a listing agreement, in which case PHARMAC will give you written notice not less than three months prior to the End Date; and/or
 - (ii) apply any of the strategies under PHARMAC's then current OPPs to the Pharmaceutical (including delisting the Pharmaceutical after the Final Transition Period).
- (c) In the event PHARMAC applies any of the strategies described in paragraph (b)(ii) above, you may withdraw the Pharmaceutical from supply on not less than six months' prior written notice. You may provide PHARMAC with this written notice at any time after, but not before, the date that the particular strategy takes effect in the Pharmaceutical Schedule.

1.7 Withdrawal of Hospital Supply Status

- (a) PHARMAC may withdraw Hospital Supply Status in relation to your supply of the Pharmaceutical (in which case clauses 1.1, 1.2 and 1.3 of this Schedule will no longer apply), by written notice to you at any time during the Hospital Supply Status Period or (in anticipation) during the First Transition Period if:
 - (i) you have failed to notify PHARMAC as required under clause 7.1 of this Schedule;
 - (ii) you fail, for a period of 30 days, to supply the Pharmaceutical in accordance with this Agreement to any of the DHB Hospitals including to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding);
 - (iii) any Consent for the Pharmaceutical required under clause 2 of this Schedule is withdrawn;
 - (iv) you have failed to comply with clause 6 of this Schedule on more than one occasion; or
 - (v) you otherwise fail to supply the Pharmaceutical in accordance with this Agreement.
- (b) In the event that PHARMAC exercises its rights under clause 1.7(a) above in relation to a Pharmaceutical, it may also withdraw Hospital Supply Status in relation to your supply of all forms and strengths of that Pharmaceutical (or your supply of all other Medical Devices under this Agreement, where PHARMAC has exercised its rights under clause 1.7(a) above in respect of a Medical Device) (in which case clauses 1.1, 1.2 and 1.3 of this Schedule will no longer apply), following a recommendation from its clinical advisors, either by the written notice provided under clause 1.7(a) above or by further written notice to you at any time during the Hospital Supply Period or (in anticipation) during the First Transition Period.
- (c) Any withdrawal of Hospital Supply Status is without prejudice to PHARMAC's rights under clauses 7.2 and 7.3 of this Schedule.

1.8 Suspension of Hospital Supply Status

- (a) If, at any time during the Hospital Supply Status Period or (in anticipation) during the First Transition Period, you are unable to meet demand for the Pharmaceutical, or you notify PHARMAC under clause 7.1 of this Schedule of a Potential Out-of-Stock Event, or you otherwise fail to supply the Pharmaceutical in accordance with this Agreement, then:
 - (i) PHARMAC may suspend Hospital Supply Status in relation to your supply of the Pharmaceutical for the period of such inability; and
 - (ii) DHB Hospitals may purchase DV Pharmaceuticals during the period when Hospital Supply Status is suspended without the requirement to comply with the DV Limit for the relevant Pharmaceutical.
- (b) In the event that PHARMAC exercises its rights under clause 1.8(a) above in relation to a Pharmaceutical, it may also suspend Hospital Supply Status in relation to your supply of all forms and strengths of that Pharmaceutical (or your supply of all other

Schedule 6

Medical Devices under this Agreement, where PHARMAC has exercised its rights under clause 1.8(a) above in respect of a Medical Device), following a recommendation from its clinical advisors, either by the written notice provided under clause 1.8(a) above or by further written notice to you at any time during the Hospital Supply Period or (in anticipation) during the First Transition Period.

- (c) Any suspension of Hospital Supply Status is without prejudice to PHARMAC's rights under clauses 7.2 and 7.3 of this Schedule.
- (d) PHARMAC may, at any time, in its sole discretion, notify you of the date on which the suspension of Hospital Supply Status under this clause 1.8 ceases and on which date:
 - (i) Hospital Supply Status is to be re-implemented in respect of the Pharmaceutical; or
 - (ii) Hospital Supply Status is to be withdrawn in accordance with clause 1.7 of this Schedule.

2. **Consents**

2.1 Warranty and indemnity that Consents are held

You warrant that you have, and will maintain, all necessary Consents. If a Consent is not held by you or is withdrawn or the Pharmaceutical is no longer approved for the treatment of any indication for which it is listed in Section H of the Pharmaceutical Schedule, then:

- (a) PHARMAC is entitled to terminate this Agreement by 14 days' written notice to you; and
- (b) whether or not PHARMAC terminates this Agreement under paragraph (a) above, you are to indemnify the Funder for any additional costs incurred by it (or by PHARMAC on its behalf) as a result of that failure to hold all necessary Consents. This clause confers a benefit on (and is enforceable by) the Funder in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

2.2 Changed medicine notification

If the Ministry of Health issues a changed medicine notification in relation to a Pharmaceutical, and as a result a variant of the Pharmaceutical (the "**CMN Pharmaceutical**") is approved:

- (a) you must immediately notify PHARMAC; and
- (b) PHARMAC may take such action as it considers appropriate in relation to that Pharmaceutical or the CMN Pharmaceutical including (but not limited to):
 - (i) withdrawing Hospital Supply Status for the Pharmaceutical;
 - (ii) reviewing the terms of listing of that Pharmaceutical; and
 - (iii) determining whether, and the extent to which, DHB Hospitals may purchase the CMN Pharmaceutical.

3. Price

3.1 **Price change**

- (a) Subject to clause 3.1(b)(ii), clause 3.1(b)(iii) and clause 3.1(b)(iv) of this Schedule, you must change the price at which you supply the Pharmaceutical to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), to the Price with effect from the 12th day of the month prior to the Start Date. If your brand of the Pharmaceutical is not listed on the Pharmaceutical Schedule at the beginning of the First Transition Period, it must be available for supply or sale, and you must supply or sell it, at the Price on and from the 12th day of the month prior to the Start Date.
- (b) In the event your brand of the Pharmaceutical is currently listed on the Pharmaceutical Schedule at the beginning of the First Transition Period:
 - (i) you must ensure that wholesalers and other such distributors change the price at which they supply the Pharmaceutical to the Price on the 12th day of the month prior to the Start Date, and you shall provide price support to wholesalers and other such distributors for a maximum 4 weeks stock on hand (or such other level of stock as agreed between you and PHARMAC) of the Pharmaceutical held at wholesalers and other such distributors, provided that such wholesalers and other such distributors can provide you with stock on hand reports upon request; or
 - (ii) your brand of the Pharmaceutical must be available for supply and you must supply the Pharmaceutical, at the Price from the 1st day of the month prior to the Start Date, and the Pharmaceutical will be subsidised at the Price from the Start Date which is conditional upon you having at least 2 months Lead Time for the Pharmaceutical; and
 - (iii) notwithstanding clauses 3.1 (b) (i) or (b) (ii) above, if the Price would result in a price increase for your brand of the Pharmaceutical you must supply the Pharmaceutical at the Price from the 22nd day of the month prior to the Start Date, and the Pharmaceutical will be subsidised at the Price from the Start Date; and
 - (iv) notwithstanding clauses 3.1(b)(i), (b) (ii) or (b)(iii) above, PHARMAC may agree a process with you, that results in your brand of the Pharmaceutical, which includes a rebate, being available for supply and you must supply the Pharmaceutical, at the Price from the 22nd day of the month prior to the Start Date, and you shall provide price support to wholesalers and other such distributors for a maximum 4 weeks stock on hand (or such other level of stock as agreed between you and PHARMAC) of the Pharmaceutical held at wholesalers and other such distributors, provided that such wholesalers and other such distributors can provide you with stock on hand reports upon request.

For the avoidance of doubt if you do not notify PHARMAC in your Tender Bid in the electronic portal which of the options stated in clauses 3.1(b)(i) or (b)(ii) above apply to the Pharmaceutical, clause (b)(i) above shall apply.

(c) You shall upon request by PHARMAC, provide information on how you intend to manage the price changes stated in clauses 3.1(b)(i) to b(iv) above. PHARMAC may, at its sole discretion, publish this information at the time the Tender Item is notified in the Pharmaceutical Schedule in accordance with clause 7.2 of Schedule 3.

3.2 Supply price

Subject to clause 3.1 of this Schedule, during each of the First Transition Period, the Hospital Supply Status Period and the Final Transition Period, if applicable in accordance with clause 1.1(b) of this Schedule, the price at which the Pharmaceutical is supplied by you to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), must not exceed the Price.

3.3 Supply at lower price

Notwithstanding clauses 3.1 and 3.2 above but subject to clause 3.4 below, you may supply the Pharmaceutical to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding) at a price lower than the Price, provided that where you decide to supply the Pharmaceutical in respect of any one or more DHB Hospital(s) at a price lower than the Price, you must supply the Pharmaceutical at the same lower price to all DHB Hospitals in respect of which you supply the Pharmaceutical, in which case that lower price will be deemed to be the Price of that Pharmaceutical for the purposes of this Agreement.

3.4 Warranty that Pharmaceutical is supplied at not less than cost price

You warrant that the Price at which you are required to supply the Pharmaceutical under this Agreement is greater than the cost price of the Pharmaceutical (including, without limitation, the costs of manufacturing the Pharmaceutical and of supplying it to you for supply in New Zealand).

3.5 **Unsold stock following delisting**

You acknowledge and agree that the price at which you are required to supply any Pharmaceutical under this Agreement incorporates, if applicable, any costs incurred by you associated with unsold stock of the Pharmaceutical held by you or any wholesaler or other distributor, after the Pharmaceutical has been delisted or after notification that it will be delisted.

4. Invoicing and Payment

4.1 Invoice

You are to invoice DHB Hospitals at the end of each month, but no later than the tenth day following the month to which the invoice in respect of the Pharmaceutical relates, specifying for the Pharmaceutical supplied during that month:

- (a) your delivery note reference number;
- (b) the particular DHB's purchase order reference number (if applicable);
- (c) the net amount payable in respect of the Pharmaceutical supplied to that DHB in accordance with this Agreement;
- (d) full details in respect of the Pharmaceutical supplied to that DHB in accordance with this Agreement, including the:
 - (i) DHB's item codes;

- (ii) quantity of the Pharmaceutical supplied;
- (iii) price of the Pharmaceutical;
- (iv) cost of freight for orders that included the Pharmaceutical (only where applicable under clause 1.1(b) above);
- (v) total cost for the total amount of the Pharmaceutical supplied; and
- (e) any other information that DHB Hospital requires you to supply.
- (f) The provisions of Clause 4.1 do not apply to the extent that both parties have agreed to alternative or varied invoicing arrangements in respect of a particular Pharmaceutical.

4.2 **Payment**

- (a) Provided that the Pharmaceutical has been supplied in accordance with this Agreement, and the particular DHB receives an invoice in accordance with clause 4.1 above, payment by the DHB Hospital to you of the amount required to be paid by it is expected to occur:
 - (i) by electronic funds transfer or such other method of payment as is designated by that DHB Hospital;
 - (ii) on the 20th day of the month following the month to which the invoice for the Pharmaceutical relates, or, if the 20th day of the month is not a business day, then on the next business day following the 20th of the month.
- (b) Where you invoice a DHB Hospital later than the tenth day following the month to which the invoice in respect of the Pharmaceutical relates then, provided that the Pharmaceutical has been supplied in accordance with this Agreement, and the invoice otherwise accords with clause 4.1 above, payment by the DHB Hospital to you of the amount required to be paid by it is expected to occur:
 - (iii) by electronic funds transfer or such other method of payment as is designated by that DHB Hospital;
 - (iv) on the 20th day of the month following the month in which you invoice the DHB for the Pharmaceutical, or, if the 20th day of the month is not a business day, then on the next business day following the 20th of the month.

4.3 **Future payment**

- (a) A particular DHB Hospital's failure to dispute any invoice prior to payment does not prejudice that DHB Hospital's right subsequently to dispute the correctness of such an invoice, nor its ability to recover any amount of overpayment from you.
- (b) A DHB Hospital may withhold, deduct or set off the amount of any overpayment or any amount recoverable by that DHB Hospital from you under this Agreement from any future amount owing to you.

4.4 **Contracts Privity**

This clause 4 confers a benefit on (and is enforceable by) DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

5. Emergency and disaster supply

In the event of an emergency or disaster affecting any DHB Hospital, or an emergency or disaster on a national level, you will use your best endeavours to provide such quantities of the Pharmaceutical as are required by the relevant DHB Hospital(s). Your obligations under this clause include, but are not limited to, using your best endeavours to:

- (a) source the Pharmaceutical from other suppliers and distributors within New Zealand; and
- (b) source the Pharmaceutical or a pharmaceutical that is the same brand as the Pharmaceutical from any overseas manufacturer, supplier or distributor, and airfreighting that stock to New Zealand (for which the relevant DHB Hospital will meet all reasonable costs) for supply, either under Medsafe's explicit consent to import, sell or distribute the Pharmaceutical or under section 29 of the Medicines Act 1981, to DHB Hospitals.

6. Defective and short-dated Pharmaceuticals

6.1 **Pharmaceutical recall**

- (a) In the event that you are required by the Ministry of Health or any other authorities to recall the Pharmaceutical or a particular batch of the Pharmaceutical, you will notify PHARMAC and the relevant DHB Hospitals immediately you become aware of the need to recall the Pharmaceutical or that batch of the Pharmaceutical.
- (b) You will use your best endeavours to provide replacement Pharmaceuticals to DHB Hospitals as soon as possible.
- (c) If you fail to provide replacement Pharmaceuticals or an Alternative Pharmaceutical within what DHBs consider to be a reasonable time frame, then DHB Hospital(s) may purchase an Alternative Pharmaceutical elsewhere. Any reasonable additional costs incurred by DHB Hospital(s) in purchasing such an Alternative Pharmaceutical will be met by you on demand by PHARMAC or the DHB Hospital(s) and will be recoverable from you as a debt due to PHARMAC and to the DHB Hospital(s), as applicable.
- (d) In the event that the Pharmaceutical or a particular batch of the Pharmaceutical is recalled as contemplated by paragraph (a) above, you shall immediately refund to the relevant DHB Hospitals all money paid by them to you for or on account of the Pharmaceutical or that batch of the Pharmaceutical and such money will be recoverable from you as a debt due to the relevant DHB Hospitals, unless you have provided a replacement Pharmaceutical to the relevant DHB Hospitals' satisfaction.
- (e) This clause confers a benefit on (and is enforceable by) DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

6.2 **Shelf-life of Pharmaceutical**

(a) You will not supply the Pharmaceutical if:

- (i) the remaining shelf-life of the Pharmaceutical is less than six months; or
- (ii) where the total shelf-life of the Pharmaceutical is less than six months, the remaining shelf-life is less than 75% of the Pharmaceutical's total shelf-life,

without prior agreement from the relevant DHB Hospital.

- (b) If you have an agreement with the relevant DHB Hospital to supply the Pharmaceutical, where the total shelf-life of the Pharmaceutical is less than six months and the remaining shelf-life is less than 75% of the Pharmaceutical's total shelf-life, and that DHB Hospital does not use the Pharmaceutical before its expiry or use-by date, you agree to allow that DHB Hospital to return the Pharmaceutical to you and to provide that DHB Hospital with a credit for the Pharmaceutical.
- (c) This clause confers a benefit on (and is enforceable by) DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

7. Out-of-stock arrangements

7.1 Notification of Potential Out-of-Stock Event and supply of Alternative Pharmaceutical

- (a) You must notify PHARMAC in writing as soon as you have reasonable cause to believe at any time that you will fail to supply the Pharmaceutical in accordance with this Agreement and, in any event, you must notify PHARMAC and the relevant DHB Hospitals if at any time a Potential Out-of-Stock Event occurs, including during the Hospital Supply Period or the First Transition Period.
- (b) If a Potential Out-of-Stock Event occurs, or your failure to supply the Pharmaceutical in accordance with this Agreement will result in insufficient stock of the Pharmaceutical being available, then at PHARMAC's option:
 - (i) PHARMAC may implement an arrangement with another supplier to supply an Alternative Pharmaceutical (including an arrangement for back-up supply); and/or
 - (ii) you must use your best endeavours to procure, as soon as practicable, an Alternative Pharmaceutical for supply to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding), at the Price, and if you are unable to do so you will pay to DHB Hospitals any additional costs incurred by DHB Hospitals as a result of the purchase price for the Alternative Pharmaceutical being higher than the Price.

7.2 General indemnity

You agree to indemnify DHB Hospitals and PHARMAC if you fail to supply the Pharmaceutical in accordance with this Agreement (other than for reasons that PHARMAC reasonably considers, following discussion with you, to be wholly outside your control) whether as a result of:

- (a) your inability to meet demand for supply of the Pharmaceutical;
- (b) your withdrawal of the Pharmaceutical from supply;

- (c) any failure to have and maintain a Consent as specified in clause 2 of this Schedule;
- (d) any failure to notify PHARMAC in accordance with clause 7.1 above; or
- (e) for any other reason.

This indemnity:

- (f) covers all additional costs, including without limitation all costs (if any) incurred in securing and purchasing an Alternative Pharmaceutical, incurred by DHB Hospitals (or by PHARMAC on their behalf) as a result of your failure that are additional to any costs specified in clause 7.3; and
- (g) confers a benefit on (and is enforceable by) DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

7.3 Liquidated damages

- (a) If you fail to supply the Pharmaceutical in accordance with this Agreement (other than for reasons that PHARMAC reasonably considers, following discussion with you, to be wholly outside your control) and:
 - (i) you have not notified PHARMAC and the relevant DHB Hospitals under clause 7.1 of this Schedule, then without prejudice to PHARMAC's and the relevant DHB Hospitals' rights under clause 7.2 above, but subject to paragraph (e) below, you must pay to PHARMAC (for the benefit of PHARMAC and DHB Hospitals) liquidated damages for the administrative and/or operational costs incurred by PHARMAC and DHB Hospitals as a result of your failure to supply in the amount of \$50,000 per Pharmaceutical in respect of which you failed to notify PHARMAC; or
 - (ii) you have notified PHARMAC and the relevant DHB Hospitals under clause 7.1 of this Schedule, then without prejudice to PHARMAC's and the relevant DHB Hospitals' rights under clause 7.2 above you are not liable to pay any liquidated damages under this clause 7.3.
- (b) If, having notified PHARMAC and the relevant DHB Hospitals under clause 7.1 of this Schedule, you remain able to, and you continue to, supply the Pharmaceutical, or an Alternative Pharmaceutical in accordance with clause 7.1(b)(ii) of this Schedule, such that there is no interruption to supply of the Pharmaceutical or of the Alternative Pharmaceutical in accordance with this Agreement, you will not be liable for any costs unless PHARMAC, in its sole discretion, has considered it necessary to enter into an arrangement with an alternative supplier under which PHARMAC or the relevant DHB Hospitals have agreed to make a payment to that supplier to ensure continuity of supply, in which case you must indemnify the relevant DHB Hospitals and PHARMAC for that payment. Such indemnity will be limited to an amount of \$10,000 per Pharmaceutical.
- (c) You acknowledge and agree that:
 - the amounts of liquidated damages in this clause represent a reasonable estimate of the administrative and operational costs incurred by PHARMAC and DHB Hospitals (including the use of staff and loss of opportunity as a result of use of staff time, and communication costs), the estimate being based on PHARMAC's and DHB Hospitals' previous experience; and

(ii) the amounts referred to as liquidated damages are not intended to include any penalty element nor any amount for costs relating to the securing of an Alternative Pharmaceutical, or the purchasing of an Alternative Pharmaceutical,

provided that PHARMAC may, in its sole discretion, require you to pay less than the amount specified as liquidated damages if it is satisfied that the actual costs in the particular circumstances are less than the relevant amount so specified.

- (d) Where a Pharmaceutical in respect of which you are liable to pay liquidated damages pursuant to clause 7.3(a)(i) above also has Sole Supply Status and where you would otherwise be liable to pay the same amount of liquidated damages in respect of any corresponding failure under the terms of such Sole Supply Status, you will only be required to pay liquidated damages of \$50,000 in total in respect of both supply failures.
- (e) All amounts referred to in this clause are plus GST.

7.4 Failure to supply

References in this clause 7 and elsewhere in this Schedule to your failure or inability to supply the Pharmaceutical in accordance with this Agreement, or your inability to meet demand for supply of the Pharmaceutical, or insufficient stock of the Pharmaceutical being available, include, but are not limited to, circumstances where:

- (a) no stock of the Pharmaceutical is physically held by you or on your behalf in New Zealand;
- (b) the only stock of the Pharmaceutical physically held by you or on your behalf in New Zealand is stock to which clause 6.2(a)(i) or (ii) of this Schedule applies and no agreement has been reached with the relevant DHB Hospital in terms of clause 6.2(a) of this Schedule;
- (c) you fail, directly or indirectly, to ensure that all orders for the Pharmaceutical are filled (without restricting quantities that may be ordered), including in particular where not all patients for whom the Pharmaceutical is prescribed receive the full amount of the Pharmaceutical they require, or to which they are entitled, under their prescriptions, without delay;
- (d) you fail to supply the Pharmaceutical on and from the Start Date.

7.5 **Default interest and recovery costs**

If payment of any amount required to be paid by you under this clause 7 is not made by you, in full, by the due date for payment of that amount as notified to you in writing by PHARMAC, then:

- (a) interest will accrue in such sum as remains unpaid at a rate per annum equal to the relevant SME overdraft rate (weighted average rate) of the Reserve Bank of New Zealand plus five percentage points, calculated and compounded on a daily basis, from the due date until such time as the sum due (including interest) is paid in full. This obligation to pay default interest is to arise without the need for a notice or demand from PHARMAC for such default interest; and
- (b) PHARMAC may take any action, including legal action, without first needing to implement the dispute resolution procedure contained in clause 4.2 of Schedule Four, to recover that amount and you agree to pay to PHARMAC actual enforcement costs incurred in relation to that action.

8. Termination and restrictions

8.1 **Termination and restrictions for clinical reasons**

PHARMAC reserves the right, but only after consultation with you and a relevant medical adviser (being either the Ministry of Health, PTAC or a sub-committee of PTAC), to:

- (a) terminate this Agreement at any time during the Hospital Supply Status Period or the First Transition Period if the medical adviser determines for clinical reasons that it is no longer appropriate to have:
 - (i) in the case of any Pharmaceutical that is not a Medical Device, any Pharmaceutical, including the Pharmaceutical or any relevant Alternative Pharmaceutical, having Hospital Supply Status of that form and strength of the Pharmaceutical with Hospital Supply Status;
 - (ii) in the case of any Pharmaceutical that is a Medical Device, any Pharmaceutical, including the Pharmaceutical or any relevant Alternative Pharmaceutical, having Hospital Supply Status; or
 - (iii) the Pharmaceutical as the brand having Hospital Supply Status; and/or
- (b) impose at any time during the Hospital Supply Status Period or the Transition Periods restrictions on the prescribing or dispensing of a Pharmaceutical if those restrictions are necessary for clinical reasons.

8.2 **Termination following an audit**

PHARMAC may terminate the Agreement, or withdraw Hospital Supply Status in relation to, or revise DV Limits for, a Pharmaceutical, at any time during the Hospital Supply Status Period or the Transition Periods, if you fail to remedy any area of non-compliance in accordance with clause 3(b) of Schedule Four.

9. Guarantee

- (a) PHARMAC may require an entity acceptable to it to provide a guarantee (in a form satisfactory to PHARMAC) of your performance obligations under clauses 7.2 and 7.3 of this Schedule including, without limitation, the payment of any sum payable under the indemnity or as liquidated damages pursuant to those clauses for any failure to supply the Pharmaceutical in accordance with this Agreement during the Hospital Supply Status Period.
- (b) The guarantor's liability under such a guarantee will be limited to a total of \$100,000 per Pharmaceutical for all claims made by PHARMAC under the guarantee.

10. Access by PHARMAC to price and volume data

- (a) You acknowledge that PHARMAC and its agents will require access to price and volume data held by you and DHB Hospitals in respect of the Pharmaceutical covered by this Agreement to assist PHARMAC to carry out its statutory function in relation to managing the purchasing of hospital pharmaceuticals on behalf of DHBs.
- (b) Notwithstanding any other provisions in this Agreement, including clauses 9.1 and 9.2 of Schedule Three regarding confidential information, you agree that where the

Schedule 6

circumstances in this clause apply, a DHB Hospital may provide PHARMAC and its agents with any price and volume data held by that DHB Hospital in respect of a Pharmaceutical covered by this Agreement and PHARMAC and its agents may provide such data on DHBs.

(c) You agree that within 10 business days following any request from PHARMAC, you will provide PHARMAC with volume data in respect of the Pharmaceutical covered by this Agreement for each month of the period specified in that request.

11. **PCTs**

11.1 Listing in Section B of the Pharmaceutical Schedule

- (a) Where the Pharmaceutical is a PCT, you acknowledge and agree that PHARMAC may list the Pharmaceutical in Section B of the Pharmaceutical Schedule:
 - (i) at a price that is equal to (or subject to your agreement, less than) the Price;
 - (ii) subject to the rules and restrictions applying to PCTs in Sections A to G of the Pharmaceutical Schedule.
- (b) If PHARMAC lists the Pharmaceutical in Section B of the Pharmaceutical Schedule pursuant to paragraph (a) above, you acknowledge and agree that:
 - such listing will be for reasons relating to claiming and will not, unless otherwise advised in writing by PHARMAC, enable you to supply the Pharmaceutical for use in the community;
 - (ii) listing of the Pharmaceutical in Section B will, at PHARMAC's option, be additional to or instead of listing in Part II of Section H;
 - (iii) references to the "listing" of the Pharmaceutical will, where applicable, be to the listing of the Pharmaceutical in Section B of the Pharmaceutical Schedule (and references to "list", "listed", "delist", "delisted", and "delisting" are to be interpreted accordingly); and
 - (iv) the standard terms of listing of the Pharmaceutical in Section B of the Pharmaceutical Schedule will, except to the extent otherwise advised in writing by PHARMAC, be the terms set out in Schedule Four and this Schedule, and for that purpose all references in Schedule Four and this Schedule to "Section H" will be deemed to be references to "Section B".
- (c) This clause confers a benefit on (and is enforceable by) DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.
- (d) Where the Pharmaceutical is a PCT, clause 7.1 of this Schedule will be deleted and replaced by the following:

7.1 Notification of Potential Out-of-Stock Event and supply of Alternative Pharmaceutical.

(a) You must notify PHARMAC in writing as soon as you have reasonable cause to believe that you will fail to supply a Pharmaceutical in accordance with this Agreement and, in any event, you must notify PHARMAC and the relevant DHB Hospitals if at any time a Potential

Schedule 6

Out-of-Stock Event occurs, including during the Hospital Supply Status Period or the First Transition Period.

- (b) If you fail to supply a Pharmaceutical in accordance with this Agreement for more than 1 business day to any DHB Hospital, then:
 - you must use your best endeavours to procure, within what the relevant DHB Hospitals consider to be a reasonable period of time, an Alternative Pharmaceutical for supply to, at a DHB Hospital's discretion, any Designated Delivery Points, and/or Contract Manufacturers (expressly for the purpose of compounding) at the Price; and
 - (ii) if you fail to procure an Alternative Pharmaceutical at the Price in accordance with sub-clause (i) above (other than for reasons that PHARMAC reasonably considers, following discussion with you, to be wholly outside your control) then, at PHARMAC's option:
 - (A) you must pay to PHARMAC (for the benefit of PHARMAC and DHB Hospitals) any additional costs that PHARMAC incurs or that the relevant DHB Hospitals incur as a result of the purchase of the Alternative Pharmaceutical; or
 - (B) PHARMAC may implement an arrangement with another supplier to supply an Alternative Pharmaceutical (including an arrangement for backup supply), and you must pay to PHARMAC (for the benefit of PHARMAC and DHB Hospitals) any additional costs that PHARMAC incurs or that the relevant DHB Hospitals incur as a result of the purchase of the Alternative Pharmaceutical.
 - This clause confers a benefit on (and is enforceable by) DHB Hospitals in accordance with the Contract and Commercial Law Act 2017, Part 2, Subpart 1.

(C)

Schedule 7: Additional Special Terms

1. Intra-Uterine Copper Device

You shall provide the following information when submitting a Tender Bid for the Pharmaceutical intra-uterine copper device ("IUCD Tender Item"):

- the size of the IUCD Tender Item, including length and width measurements as well as the diameter of the inserter;
- a description of the material the inserter is made of;
- the duration of the therapeutic effect of the IUCD Tender Item; and
- the metals which are contained in the IUCD Tender Item.

You shall provide the following Resources at no cost for the IUCD Tender Item:

• the provision of education, training and support to healthcare professionals in respect of the use of the IUCD Tender Item.

For the purposes of this clause "Resources" shall include but not be limited to the:

- provision of training materials (DVDs, pamphlets, leaflets, brochures) to healthcare professionals;
- provision of an information sheet explaining the differences between the current brand of intra-uterine device and your IUCD Tender Item; and
- provision of presentations and/or demonstrations on the use of your IUCD Tender Item to patients and/or healthcare professionals.