



Australian Government
Department of Health

FREQUENTLY ASKED QUESTIONS NEW ARRANGEMENTS FROM 1 SEP 2015

PHARMACEUTICAL BENEFITS SCHEME (PBS) BOTULINUM TOXIN

The PBS Botulinum Toxin Programme helps eligible patients access PBS subsidised botulinum toxin to assist in the treatment of conditions such as facial spasms, incontinence, migraine, and symptoms associated with cerebral palsy. From 1 September 2015, the way PBS subsidised botulinum toxin is supplied will better align with other PBS arrangements, using PBS prescriptions and hospital pharmacy coordination points. PBS Botulinum toxin products will not be supplied through community pharmacies.

Patient and prescriber eligibility criteria will be unchanged. All botulinum toxin medicines supplied under the PBS will be subject to the new arrangements. A full list of the Programme medicines and PBS eligibility criteria is available at: www.pbs.gov.au

What is changing for patients?

Patients will continue to visit their specialist medical practitioner for assessment and treatment under the new arrangements.

To better align with other PBS supply arrangements, patient co-payments will apply for each supply of a botulinum toxin product. PBS co-payments for 2015 are \$6.10 for concessional patients, and up to \$37.70 for non-concessional patients.

What is changing for prescribers?

From 1 September 2015, prescribers will need to ensure the prescriptions they write comply with PBS requirements for subsidised botulinum toxin. Prescribers will no longer be required to take responsibility for the ordering, storage, auditing and stock management of botulinum toxin. To maintain safe handling of botulinum toxin, prescribers will need to have an arrangement with a hospital pharmacy coordination point.

Restrictions on prescriber eligibility will remain. However, current processes for prescriber registration with the Department of Human Services (Medicare) before prescribing botulinum toxin will cease. Note that separate state or territory requirements may apply.

A range of delivery options will be open to specialists, depending on the practice location. The Department of Health is consulting with medical specialists, industry, and states and territory regulators on implementation arrangements.

Patients must not be placed in a position where they handle botulinum toxin products.

What is changing for pharmacy?

Hospital pharmacies will be remunerated for dispensing botulinum toxin in the same way that pharmacy is remunerated for supplying PBS subsidised Highly Specialised Drugs, and may raise a patient charge for those supplies in accordance with Commonwealth legislation.