

### PB 53 of 2013

# National Health (Listing of Pharmaceutical Benefits) Amendment Instrument 2013 (No. 10)

### National Health Act 1953

I, ADRIANA PLATONA, First Assistant Secretary (Acting), Pharmaceutical Benefits Division, Department of Health and Ageing, delegate of the Minister for Health, make this Instrument under sections 84AF, 84AK, 85, 85A, 88, 99AEH and 101 of the *National Health Act 1953*.

Dated

9 August 2013

### ADRIANA PLATONA

First Assistant Secretary (Acting) Pharmaceutical Benefits Division Department of Health and Ageing

### 1 Name of Instrument

- (1) This Instrument is the *National Health (Listing of Pharmaceutical Benefits) Amendment Instrument 2013 (No. 10).*
- (2) This Instrument may also be cited as PB 53 of 2013.

### 2 Commencement

This Instrument commences on 1 September 2013.

## 3 Amendment of *National Health (Listing of Pharmaceutical Benefits) Instrument 2012* (PB 71 of 2012)

Schedule 1 amends the *National Health (Listing of Pharmaceutical Benefits) Instrument 2012* (PB 71 of 2012).

### Schedule 1 Amendments

### [1] Schedule 1, entry for Apixaban

substitute:

| Apixaban | Tablet 2.5 mg | Oral | Eliquis | BQ | MP NP | C3957 C3991<br>C4043 C4044<br>C4046 C4269 | P3957 P4043 | 20 | 0 | 20 |
|----------|---------------|------|---------|----|-------|---|-------------|----|---|----|
|          |               |      |         |    | MP NP | C3957 C3991<br>C4043 C4044<br>C4046 C4269 | P3991 P4044 | 30 | 0 | 30 |
|          |               |      |         |    | MP NP | C3957 C3991<br>C4043 C4044<br>C4046 C4269 | P4046       | 60 | 0 | 60 |
|          |               |      |         |    | MP NP | C3957 C3991<br>C4043 C4044<br>C4046 C4269 | P4269       | 60 | 5 | 60 |
|          | Tablet 5 mg   | Oral | Eliquis | BQ | MP NP | C4269                                     |             | 60 | 5 | 60 |

### [2] Schedule 1, entry for Buprenorphine with naloxone

omit:

| Tablet (sublingual) 2 mg (as hydrochloride)-0.5 mg (as hydrochloride) | Sublingual | Suboxone | RC | MP NP<br>See Note 1 | See Note 3 | See Note 3 | See<br>Note 3 | See<br>Note 3 | 28 | D(100) |
|---|------------|----------|----|---------------------|------------|------------|---------------|---------------|----|--------|
| Tablet (sublingual) 8 mg (as hydrochloride)-2 mg (as hydrochloride)   | Sublingual | Suboxone | RC | MP NP<br>See Note 1 | See Note 3 | See Note 3 | See<br>Note 3 | See<br>Note 3 | 28 | D(100) |

### [3] Schedule 1, entry for Candesartan with Hydrochlorothiazide in the form Tablet containing candesartan cilexetil 16 mg with hydrochlorothiazide 12.5 mg

(a) insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

| Candesartan/<br>HCT Sandoz | SZ | MP NP | C3307 | 30 | 5 | 30 |  |
|----------------------------|----|-------|-------|----|---|----|--|
|                            |    |       |       |    |   |    |  |

**(b)** insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

| insert in the columns in the order indicated, and in diphabetical order for t | ne co | нитт пеци | eu Drana . |    |   |    |  |
|---|-------|-----------|------------|----|---|----|--|
| Pharmacor<br>Candesartan HCT<br>16/12.5                                       | CR    | MP NP     | C3307      | 30 | 5 | 30 |  |
|   |       |           |            |    |   |    |  |

|                   | Schedule 1, entry for Candesartan with Hydrochl hydrochlorothiazide 12.5 mg  | orothiazide in the fo   | orm T                        | ablet cor                       | ntaining candesartan cilex  | etil 32  | mg with    |            |
|-------------------|--|---|------------------------------|---------------------------------|---|----------|------------|------------|
|                   | (a) insert in the columns in the order indicated, and in   | alphabetical order for  | the co                       | olumn head                      | led "Brand":  |          |            |            |
|                   |  | Candesartan/<br>HCT Sandoz  | SZ                           | MP NP                           | C3307   | 30       | 5          | 30         |
|                   | (b) insert in the columns in the order indicated, and in   | alphabetical order for  | the co                       | lumn head                       | led "Brand":  |          |            |            |
|                   |  | Pharmacor<br>Candesartan HCT<br>32/12.5   |                              | MP NP                           | C3307   | 30       | 5          | 30         |
| [5]               | Schedule 1, entry for Candesartan with Hydrochl hydrochlorothiazide 25 mg  | orothiazide in the fo   | orm T                        | ablet cor                       | ntaining candesartan cilex  | etil 32  | mg with    |            |
|                   | (a) insert in the columns in the order indicated, and in   | alphabetical order for  | the co                       | lumn head                       | led "Brand":  |          |            |            |
|                   |  | Candesartan/<br>HCT Sandoz  | SZ                           | MP NP                           | C3307   | 30       | 5          | 30         |
|                   | (b) insert in the columns in the order indicated, and in   | alphabetical order for  | the co                       | lumn head                       | led "Brand":  |          |            |            |
|                   |  | Pharmacor   | CR                           | MP NP                           | C3307   | 30       | 5          | 30         |
|                   |  | Candesartan HCl<br>32/25  | Γ                            |                                 |   |          |            |            |
| [6]               | Schedule 1, entry for Cefepime in each of the for (as hydrochloride)   | 32/25   |                              | 1 g (as h                       | ydrochloride); and Powde  | er for i | njection 2 | ? g        |
| [6]               |  | 32/25<br>ms: Powder for inje  | ction                        |                                 |   | er for i | njection 2 | ? g        |
| [6]               | (as hydrochloride)   | 32/25<br>ms: Powder for inje  | ction                        |                                 |   | er for i | njection 2 | 2 <b>g</b> |
|                   | (as hydrochloride)   | 32/25  ms: Powder for inje  betical order for the co  | ction<br>olumn<br>AE         | headed "B                       | C1427   |          |            |            |
|                   | (as hydrochloride)  insert in the columns in the order indicated, and in alpha  Schedule 1, entry for Cyproterone in the form Tal            | 32/25  ms: Powder for inje  betical order for the co  | ction  olumn  AE  rotero     | headed "B                       | C1427   |          |            |            |
|                   | (as hydrochloride)  insert in the columns in the order indicated, and in alpha  Schedule 1, entry for Cyproterone in the form Tal            | 32/25 ms: Powder for inje betical order for the co Cefepime-AFT blet containing cyp                         | ction  olumn  AE  rotero     | headed "B<br>MP NP<br>one aceta | C1427  te 50 mg  C1014 C1230 P1230                                      | 10       | 0          | 1          |
|                   | (as hydrochloride)  insert in the columns in the order indicated, and in alpha  Schedule 1, entry for Cyproterone in the form Tal  (a) omit: | 32/25 ms: Powder for inje betical order for the co Cefepime-AFT blet containing cyp                         | ction  olumn  AE  rotero     | headed "B<br>MP NP<br>one aceta | C1427  te 50 mg  C1014 C1230 P1230                                      | 10       | 0          | 1          |
| [6]<br>[7]<br>[8] | (as hydrochloride)  insert in the columns in the order indicated, and in alpha  Schedule 1, entry for Cyproterone in the form Tal  (a) omit: | 32/25 ms: Powder for inje betical order for the co Cefepime-AFT blet containing cype Cyprohexal  Cyprohexal | ction  olumn  AE  roterc  SZ | MP NP  One aceta  MP            | C1427  te 50 mg  C1014 C1230 P1230 C1404  C1014 C1230 P1014 P1404 C1404 | 10       | 5          | 20         |

### [9] Schedule 1, entry for Dabigatran etexilate

omit:

|             | Capsule 110 mg (as mesilate) | Oral | Pradaxa | BY | MP NP | C3957 C4047<br>C4048       | P3957 | 20 | 0 | 10 |
|-------------|------------------------------|------|---------|----|-------|----------------------------|-------|----|---|----|
|             |                              |      |         |    | MP NP | C3957 C4047<br>C4048       | P4047 | 20 | 1 | 10 |
|             |                              |      |         |    | MP NP | C3957 C4047<br>C4048       | P4048 | 60 | 0 | 60 |
| substitute: |                              |      |         |    |       |                            |       |    |   |    |
|             | Capsule 110 mg (as mesilate) | Oral | Pradaxa | BY | MP NP | C3957 C4047<br>C4048 C4269 | P3957 | 20 | 0 | 10 |
|             |                              |      |         |    | MP NP | C3957 C4047<br>C4048 C4269 | P4047 | 20 | 1 | 10 |
|             |                              |      |         |    | MP NP | C3957 C4047<br>C4048 C4269 | P4048 | 60 | 0 | 60 |
|             |                              |      |         |    | MP NP | C3957 C4047<br>C4048 C4269 | C4269 | 60 | 5 | 60 |
|             | Capsule 150 mg (as mesilate) | Oral | Pradaxa | BY | MP NP | C4269                      |       | 60 | 5 | 60 |

### [10] Schedule 1, entry for Duloxetine in each of the forms Capsule 30 mg (as hydrochloride); and Capsule 60 mg (as hydrochloride) [Manner of Administration Oral; Brand Duloxetine DR GH]

omit from "Duloxetine DR GH" in the column headed "Brand":

DR

### [11] Schedule 1, entry for Famciclovir in the form Tablet 250 mg [Maximum Quantity 21; Number of Repeats 0]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

| Auro-Famciclovir DO MP NP C3622 C3623 P3622 21 0 21<br>250 |
|--|
|--|

### [12] Schedule 1, entry for Famciclovir in the form Tablet 250 mg [Maximum Quantity 56; Number of Repeats 5]

insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":

| Auro-Famciclovir<br>250 | DO MP NP | C3622 C3623 P3623 | 56 | 5 | 56 |  |
|-------------------------|----------|-------------------|----|---|----|--|
|                         |          |                   |    |   |    |  |

### [13] Schedule 1, after entry for Filgrastim in the form Injection 300 micrograms in 0.5 mL single use pre-filled syringe (TevaGrastim)

insert in the columns in the order indicated:

|  | MP C2912 C2913 20<br>See Note 1 C2914 C2915<br>C2916 C2917<br>C2918 C2919<br>C2920 C2921 | 11 5 D(100) |
|--|--|-------------|
|--|--|-------------|

| C2922 C2923 |  |
|-------------|--|
| C2924 C2925 |  |
| C2926 C2927 |  |
| C2928 C2929 |  |
| C2930 C3087 |  |
| C3187 C3357 |  |
| C3358 C3359 |  |
| C3360 C3361 |  |
| C3362 C3363 |  |
| C3364 C3365 |  |
| C3366 C3367 |  |
| C3368 C3369 |  |
| C3370 C3371 |  |
| C3372 C3373 |  |
| C3374 C3375 |  |
| C3376 C3377 |  |
| C3833 C3834 |  |
|             |  |

### [14] Schedule 1, after entry for Filgrastim in the form Injection 480 micrograms in 0.5 mL single use pre-filled syringe (Nivestim)

insert in the columns in the order indicated:

| Injection 480 micrograms in 0.5 mL single use pre-filled syringe (Zarzio) | Injection | Zarzio | SZ | MP<br>See Note 1 | C2912 C2913 C2914 C2915 C2916 C2917 C2918 C2919 C2920 C2921 C2922 C2923 C2924 C2925 C2926 C2927 C2928 C2929 C2930 C3087 C3187 C3357 C3358 C3359 C3360 C3361 C3362 C3363 C3364 C3365 C3368 C3367 C3368 C3369 C3370 C3371 C3372 C3373 C3374 C3375 | 20 | 11 | 5 | D(100) |
|---|-----------|--------|----|------------------|---|----|----|---|--------|
|   |           |        |    |                  |   |    |    |   |        |

### [15] Schedule 1, after entry for Flutamide in the form Tablet 250 mg

insert:

| Tablet 250 mg, 30 | Oral | Flutamide MYLAN AF MP NP | C3674 | 3 | 5 | 1 |
|-------------------|------|--------------------------|-------|---|---|---|
|                   |      |                          |       |   |   |   |

| [16] | Schedule 1, entry for Gemcitabine in the form Powcomit:   | der for I.V. infusio        | n 200 | ) mg (as h          | ydrochloride)             |                    |                    |     |        |  |
|------|---|-----------------------------|-------|---------------------|---------------------------|--------------------|--------------------|-----|--------|--|
|      |   | Gemzar                      | LY    | MP                  |                           | See<br>Note 3      | See<br>Note 3      | 1   | D(100) |  |
| [17] | Schedule 1, entry for Gemcitabine in the form Powo  | ler for I.V. infusio        | n 1 g | (as hydro           | chloride)                 |                    |                    |     |        |  |
|      |   | Gemzar                      | LY    | MP                  |                           | See<br>Note 3      | See<br>Note 3      | 1   | D(100) |  |
| [18] | Schedule 1, entry for Gemcitabine in the form Power insert in the columns in the order indicated, and in alphabet   |                             |       |                     | •                         |                    |                    |     |        |  |
|      |   | Gemcitabine<br>Actavis 2000 | WQ    | MP                  |                           | See<br>Note 3      | See<br>Note 3      | 1   | D(100) |  |
| [19] | Schedule 1, entry for Granisetron in the form Concentrated injection 3 mg (as hydrochloride) in 3 mL insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand": |                             |       |                     |                           |                    |                    |     |        |  |
|      |   | Granisetron-AFT             | AE    | MP NP<br>See Note 1 | C4077 C4092<br>See Note 2 | 1<br>See<br>Note 2 | 0<br>See<br>Note 2 | 1   |        |  |
| [20] | Schedule 1, entry for Hydroxychloroquine insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand":   |                             |       |                     |                           |                    |                    |     |        |  |
|      |   | Hydroxychloro quine Actavis | GM    | MP NP               |                           | 100                | 1                  | 100 |        |  |
| [21] | Schedule 1, entry for Metformin in the form Tablet comit:   | containing metfor           | min l | nydrochlor          | ride 500 mg               |                    |                    |     |        |  |
|      |   | Formet 500                  | QA    | MP NP               |                           | 100                | 5                  | 100 |        |  |
| [22] | Schedule 1, entry for Metformin in the form Tablet of omit:   | containing metfor           | min l | nydrochloi          | ride 850 mg               |                    |                    |     |        |  |
|      |   | Formet 850                  | QA    | MP NP               |                           | 60                 | 5                  | 60  |        |  |
| [23] | Schedule 1, entry for Misoprostol omit:   |                             |       |                     |                           |                    |                    |     |        |  |
|      |   | Cytotec                     | PF    | MP                  | C2630 C2631<br>C2632      | 120                | 2                  | 120 |        |  |

| [24] | Schedule 1, entry for Montelukast in the form Tablet, chewable, 4 mg (as sodium)  insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand": |                            |       |                     |   |                    |                    |             |        |  |  |  |
|------|--|----------------------------|-------|---------------------|---|--------------------|--------------------|-------------|--------|--|--|--|
|      |  | Pharmacor<br>Montelukast 4 | CR    | MP NP               | C2617                                     | 28                 | 5                  | 28          |        |  |  |  |
| [25] | Schedule 1, entry for Montelukast in the form Tablet, chewable, 5 mg (as sodium)  insert in the columns in the order indicated, and in alphabetical order for the column headed "Brand": |                            |       |                     |   |                    |                    |             |        |  |  |  |
|      |  | Pharmacor<br>Montelukast 5 | CR    | MP NP               | C2618 C3217                               | 28                 | 5                  | 28          |        |  |  |  |
| [26] | Schedule 1, entry for Norfloxacin omit:  |                            |       |                     |   |                    |                    |             |        |  |  |  |
|      |  | Noroxin                    | MK    | MP NP               | C1002 C1070                               | 14                 | 1                  | 14          |        |  |  |  |
| [27] | Schedule 1, entry for Ondansetron in each of the (as hydrochloride dihydrate) in 4 mL omit:  | e forms: I.V. injectior    | 1 4 m | g (as hydr          | ochloride dihydrate) in :                 | 2 mL; ar           | nd I.V. inje       | ction 8 mg  |        |  |  |  |
|      |  | Zofran                     | AS    | MP NP<br>See Note 1 | C3050 C3611 See Note 2<br>See Note 2      | 1<br>See<br>Note 2 | 0<br>See<br>Note 2 | 1           |        |  |  |  |
| [28] | Schedule 1, entry for Paclitaxel in each of the fo   | orms: Solution conce       | ntrat | e for I.V. in       | fusion 30 mg in 5 mL; a                   | ınd Solu           | ition conc         | entrate for |        |  |  |  |
|      | omit:  |                            |       |                     |   |                    |                    |             |        |  |  |  |
|      |  | Paclitaxel Pfizer          | PF    | MP                  | C3186 C3890<br>C3902 C3917<br>C3955 C3956 | See<br>Note 3      | See<br>Note 3      | 1           | D(100) |  |  |  |
| [29] | Schedule 1, entry for Quinapril in the form Table omit:  | et 5 mg (as hydrochlo      | oride | )                   |   |                    |                    |             |        |  |  |  |
|      |  | Acquin 5                   | QA    | MP NP               |   | 30                 | 5                  | 30          |        |  |  |  |
| [30] | Schedule 1, entry for Quinapril in the form Table omit:  | <u> </u>                   |       |                     |   |                    |                    |             |        |  |  |  |
|      |  | Acquin 10                  | QA    | MP NP               |   | 30                 | 5                  | 30          |        |  |  |  |
|      |  |                            |       |                     |   |                    |                    |             |        |  |  |  |

|                   | Schedule omit:                   | 1, entry for Quinapril in the for                             | n Tablet 20  | mg (as hydroch                          | lorid | e)               |                                       |        |                 |           |       |
|-------------------|----------------------------------|---|--------------|---|-------|------------------|---------------------------------------|--------|-----------------|-----------|-------|
|                   |                                  |   |              | Acquin 20                               | QA    | MP NP            |                                       | 30     | 5               | 30        |       |
| 32]               | Schedule (a) omit:               | 1, entry for Rabeprazole in the                               | form Tablet  | containing rabe                         | epraz | ole sodium       | n 20 mg (enteric coated)              |        |                 |           |       |
|                   |                                  |   |              | Rabeprazole<br>Actavis 20               | TA    | MP NP            | C1177 C1337 P1177<br>C1533            | 30     | 2               | 30        |       |
|                   | <b>(b)</b> <i>omit:</i>          |   |              |   |       |                  |                                       |        |                 |           |       |
|                   |                                  |   |              | Rabeprazole<br>Actavis 20               | TA    | MP NP            | C1177 C1337 P1337 P1533<br>C1533      | 30     | 5               | 30        |       |
| 3]                | Schedule                         | 1, entry for Raltegravir                                      |              |   |       |                  |                                       |        |                 |           |       |
|                   | substitute:                      |   |              |   |       |                  |                                       |        |                 |           |       |
| Ralteg            | ıravir                           | Tablet 25 mg (as potassium)                                   | Oral         | Isentress                               | MK    | MP<br>See Note 1 | C4273 C4274<br>C4275 C4276            | 360    | 5               | 60        | D(100 |
|                   |                                  | Tablet 100 mg (as potassium)                                  | Oral         | Isentress                               | MK    | MP<br>See Note 1 | C4273 C4274<br>C4275 C4276            | 360    | 5               | 60        | D(100 |
|                   |                                  | Tablet 400 mg (as potassium)                                  | Oral         | Isentress                               | MK    | MP               | C3586 C3587                           | 120    | 5               | 60        | D(100 |
|                   |                                  |   |              |   |       | See Note 1       | C3588 C3589                           |        |                 |           |       |
| 84]               |                                  | 1, entry for Risedronic Acid and 00 mg (as carbonate)         | d Calcium ii | n the form Pack                         | conta |                  |                                       | 1 35 m | g and 24        |           |       |
| 84]               |                                  |   | d Calcium ii | n the form Pack                         | conta |                  |                                       | 1 35 m | g and 24        |           |       |
| 4]                | calcium 50                       |   | d Calcium ii | Actonel Combi                           |       |                  |                                       | 1 35 m | <b>g and 24</b> |           |       |
|                   | calcium 50                       |   | d Calcium ii |   |       | aining 4 tal     | blets risedronate sodium  C4122 C4123 |        |                 | tablets   |       |
|                   | omit:                            | 00 mg (as carbonate)  | d Calcium in |   |       | aining 4 tal     | blets risedronate sodium  C4122 C4123 |        |                 | tablets   |       |
| 34]<br>35]<br>36] | calcium 50 omit:  Schedule omit: | 1, entry for Salbutamol  Nebuliser solution 5 mg (as sulfate) | Inhalation   | Actonel Combi  Pfizer Australia Pty Ltd | SW    | MP NP            | C4122 C4123<br>C4133                  | 1      | 5               | tablets 1 |       |

### [37] Schedule 1, after entry for Tadalafil

insert:

| Tafluprost Eye drops 15 micrograms per mL, single dose units 0.3 mL, 30 | Application to Saflutan the eye | MK MP AO | 1 | 5 | 1 |  |
|---|---------------------------------|----------|---|---|---|--|
|---|---------------------------------|----------|---|---|---|--|

### [38] Schedule 4, Part 1, entry for Apixaban

insert in numerical order following existing text:

| C4269 | 39 P | 4269 | ,   | Compliance with                 |
|-------|------|------|---|---------------------------------|
|       |      |      | if alichi hiusi have hon-vaivulai alhai honhalion   | Authority Required procedures - |
|       |      |      | Datient must have one or more risk factors for developing streke or evetemic embeliem   | Streamlined Authority           |
|       |      |      | Risk factors for developing stroke or systemic ischaemic embolism are:  | Code 4269                       |
|       |      |      | (i) Prior stroke (ischaemic or unknown type), transient ischaemic attack or non-central nervous system (CNS) systemic embolism; |                                 |
|       |      |      | (ii) age 75 years or older;   |                                 |
|       |      |      | (iii) hypertension;   |                                 |
|       |      |      | (iv) diabetes mellitus;   |                                 |
|       |      |      | (v) heart failure and/or left ventricular ejection fraction 35% or less   |                                 |

### [39] Schedule 4, Part 1, entry for Dabigatran etexilate

insert in numerical order following existing text:

| C4269 | P4269 | Prevention of stroke or systemic embolism  Patient must have non-valvular atrial fibrillation  Patient must have one or more risk factors for developing stroke or systemic embolism  Risk factors for developing stroke or systemic ischaemic embolism are:  (i) Prior stroke (ischaemic or unknown type), transient ischaemic attack or non-central nervous system (CNS) systemic embolism;  (ii) age 75 years or older;  (iii) hypertension;  (iv) diabetes mellitus;  (v) heart failure and/or left ventricular ejection fraction 35% or less | Compliance with<br>Authority Required<br>procedures -<br>Streamlined Authority<br>Code 4269 |
|-------|-------|---|---|
|       |       | (v) neart failure and/or left ventricular ejection fraction 35% or less   |   |

### [40] Schedule 4, Part 1, entry for Misoprostol

omit:

| C2630 | Reduction in the incidence of gastrointestinal complications in patients who have a history of peptic ulcer disease and where non-steroidal anti-inflammatory drug therapy is essential  | Compliance with<br>Authority Required<br>procedures -<br>Streamlined Authority<br>Code 2630 |
|-------|--|---|
| C2631 | Duodenal ulcer (including pyloric and stomal ulcers), proven by current or prior x-ray, endoscopy or surgery, where the date on which, and the method by which, the ulcer was proven are documented in the patient's medical records when treatment is initiated | Compliance with<br>Authority Required<br>procedures -<br>Streamlined Authority<br>Code 2631 |

| C2632 |  | Compliance with<br>Authority Required<br>procedures -<br>Streamlined Authority<br>Code 2632 |
|-------|--|---|
|-------|--|---|

### [41] Schedule 4, Part 1, entry for Raltegravir

insert in numerical order following existing text:

| C4273 | Where the patient is receiving treatment at/from a private hospital HIV infection Continuing treatment The treatment must be in combination with other antiretroviral agents, Patient must be antiretroviral experienced with at least 6 months therapy with 2 alternate classes of anti-retroviral therapy, Patient must have previously received PBS-subsidised therapy for HIV infection, Patient must be aged 2 years or older                                 | Compliance with<br>Written and Telephone<br>Authority Required<br>procedures                          |
|-------|--|---|
| C4274 | Where the patient is receiving treatment at/from a public hospital HIV infection Continuing treatment The treatment must be in combination with other antiretroviral agents, Patient must be antiretroviral experienced with at least 6 months therapy with 2 alternate classes of anti-retroviral therapy, Patient must have previously received PBS-subsidised therapy for HIV infection, Patient must be aged 2 years or older                                  | Compliance with Written and Telephone Authority Required procedures - Streamlined Authority Code 4274 |
| C4275 | Where the patient is receiving treatment at/from a public hospital HIV infection Initial treatment The treatment must be in combination with other antiretroviral agents, Patient must be antiretroviral experienced with at least 6 months therapy with 2 alternate classes of anti-retroviral therapy, Patient must have a CD4 count of less than 500 per cubic millimetre; OR Patient must have symptomatic HIV disease, Patient must be aged 2 years or older  | Compliance with Written and Telephone Authority Required procedures - Streamlined Authority Code 4275 |
| C4276 | Where the patient is receiving treatment at/from a private hospital HIV infection Initial treatment The treatment must be in combination with other antiretroviral agents, Patient must be antiretroviral experienced with at least 6 months therapy with 2 alternate classes of anti-retroviral therapy, Patient must have a CD4 count of less than 500 per cubic millimetre; OR Patient must have symptomatic HIV disease, Patient must be aged 2 years or older | Compliance with<br>Written and Telephone<br>Authority Required<br>procedures                          |