

Outcome 2

ACCESS TO PHARMACEUTICAL SERVICES

Access to cost-effective medicines, including through the Pharmaceutical Benefits Scheme and related subsidies, and assistance for medication management through industry partnerships

Outcome 1 02

Outcome Strategy

The Australian Government, through Outcome 2, aims to provide reliable, timely and affordable access to cost-effective, high quality medicines and pharmaceutical services. The Government does this through subsidising the cost of medicines through the Pharmaceutical Benefits Scheme (PBS) and Life Saving Drugs Programme and by supporting the provision of aids and appliances.

Under the National Medicines Policy, in 2014-15, the Government will introduce a range of measures that ensure timely access to the medicines Australians need; at a cost individuals and the community can afford; that those medicines meet appropriate standards of quality, safety and efficacy; and are underpinned by programmes that support quality use of medicines; and help maintain a responsible and viable medicines industry.

Over the past decade the cost of the PBS has increased 80 per cent. Whilst the 2007 PBS Reforms have been a highly effective mechanism for ensuring the ongoing sustainability of the PBS by returning over \$9 billion to the programme, growth in the PBS is still expected to average between four and five per cent a year over the medium to long term.

The Australian Government has a fiscal responsibility to ensure the ongoing sustainability and strength of the programme and will therefore increase patient contributions in 2014-15, putting the PBS on a more sustainable footing, and ensuring the Government's capacity to list new and innovative medicines now and into the future.

From 1 January 2015, changes to co-payment and safety net arrangements for general and concessional patients will provide for the continued listing of new high cost medicines on the PBS. Medicines like the recently approved everolimus (Afinitor®) for the treatment of breast cancer and teriflunomide (Aubagio®) and dimethyl fumarate (Tecfidera®) for the treatment of multiple sclerosis which would otherwise cost patients up to \$38,000 per year.

In 2014-15, through the Fifth Community Pharmacy Agreement (the Fifth Agreement), the Government will provide funding to over 5,000 pharmacies to dispense PBS medicines, as well as fund a range of programmes to support the quality use of medicines and access to services.

The Government is also committed to working closely with community pharmacies and the pharmaceutical industry to ensure the ongoing viability of these sectors and in 2014-15 will look to build on their valued role in the community. Preparations for the expiry of the Fifth Agreement on 30 June 2015

will be a priority. The Access to Medicines Working Group will also be reinvigorated as a forum for discussion of PBS policies with the pharmaceutical sector, with initial discussions focused on four priority areas: managed entry scheme; interpretation of section 99ACB of the *National Health Act 1953*; transparency for PBS listing processes; and post-market reviews.

Building upon its work to date to list medicines faster on the PBS, the Government intends to improve patient safety and care in 2014-15 by removing unnecessary red tape and administrative burden for health professionals when prescribing, processing and claiming payments for PBS medicines. These changes will enable clinicians to spend more time with their patients and less time completing duplicate paperwork, and simplify the prescription process for a number of complex medicines.

Outcome 2 is the responsibility of Pharmaceutical Benefits Division.

Programmes Contributing to Outcome 2

Programme 2.1: Community Pharmacy and Pharmaceutical Awareness

Programme 2.2: Pharmaceuticals and Pharmaceutical Services

Programme 2.3: Targeted Assistance – Pharmaceuticals

Programme 2.4: Targeted Assistance – Aids and Appliances

Outcome 2 Budgeted Expenses and Resources

Table 2.1 provides an overview of the total expenses for Outcome 2 by Programme.

Table 2.1: Budgeted Expenses and Resources for Outcome 2

	2013-14 Estimated actual \$'000	2014-15 Estimated expenses \$'000
Programme 2.1: Community pharmacy and pharmaceutical awareness		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	367,530	405,929
Departmental expenses		
Departmental appropriation ¹	7,677	7,533
Expenses not requiring appropriation in the budget year ²	553	542
Total for Programme 2.1	375,760	414,004
Programme 2.2: Pharmaceuticals and pharmaceutical services		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	195,105	197,488
Special appropriations		
<i>National Health Act 1953</i> - pharmaceutical benefits	9,259,663	9,247,686
Departmental expenses		
Departmental appropriation ¹	48,498	42,317
Expenses not requiring appropriation in the budget year ²	4,108	4,263
Total for Programme 2.2	9,507,374	9,491,754
Programme 2.3: Targeted assistance -pharmaceuticals		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	141,504	151,424
Departmental expenses		
Departmental appropriation ¹	2,435	2,251
Expenses not requiring appropriation in the budget year ²	166	163
Total for Programme 2.3	144,105	153,838
Programme 2.4: Targeted assistance - aids and appliances		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	1,551	596
Special appropriations		
<i>National Health Act 1953</i> - aids and appliances	302,765	324,988
Departmental expenses		
Departmental appropriation ¹	2,147	1,928
Expenses not requiring appropriation in the budget year ²	156	153
Total for Programme 2.4	306,619	327,665

Table 2.1: Budgeted Expenses and Resources for Outcome 2 (Cont.)

	2013-14 Estimated actual \$'000	2014-15 Estimated expenses \$'000
Outcome 2 totals by appropriation type		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	705,690	755,437
Special appropriations	9,562,428	9,572,674
Departmental expenses		
Departmental appropriation ¹	60,757	54,029
Expenses not requiring appropriation in the budget year ²	4,983	5,121
Total expenses for Outcome 2	10,333,858	10,387,261
	2013-14	2014-15
Average staffing level (number)	274	253

- 1 Departmental appropriation combines "Ordinary annual services (Appropriation Bill No 1)" and "Revenue from independent sources (s31)".
- 2 "Expenses not requiring appropriation in the Budget year" is made up of depreciation expense, amortisation expense, make good expense and audit fees.

Programme 2.1: Community Pharmacy and Pharmaceutical Awareness

Programme Objectives

Support timely access to medicines and pharmacy services through the Fifth Community Pharmacy Agreement

The Fifth Agreement, which ceases on 30 June 2015, remunerates pharmacists for dispensing PBS medicines and to provide a range of professional programmes and services that aim to improve consumer health outcomes. These include services to support medication management, programmes to assist the pharmacy workforce, activities to support improved service quality, and ongoing research and development work to inform future service delivery models.

In 2014-15, \$145.6 million will be provided to fund over 20 programmes to support the delivery of pharmaceutical services and quality use of medicines through community pharmacies and pharmacists. This includes \$23 million to support the sustainability of community pharmacies in rural and remote Australia. These targeted programmes will address challenges specific to rural pharmacists including continuing professional education, locum services and undergraduate support.

In 2014-15, the Government will spend \$42 million to deliver over 353,000 Medication Management Reviews (MMR) and medication management services, to improve the quality use of medicines, reduce medication misadventure among people using multiple medicines, as well as improve consumer education to optimise self-management of medicines.

The effectiveness of all the Fifth Agreement programmes will be reviewed in 2014-15 under the Fifth Agreement Evaluation Framework. Programmes with a medication management focus will be specifically reviewed under the Combined Review of Fifth Agreement Medication Management Programmes.

In 2014-15, the Government will also remove unnecessary red tape for health professionals by working with the Australian Commission on Safety and Quality in Health Care to introduce the supply and claiming of PBS medicines from medication charts in all public and private hospitals, aligning with arrangements being implemented in Residential Aged Care Facilities. This initiative will deliver medication safety benefits to patients, improving the quality use of medicines and health outcomes through reductions in transcription errors. It will both complement and harness the useability of the eHealth record in the primary and acute care setting. This measure is expected to deliver at least \$40 million per year worth of red tape reductions.

Programme 2.1: Expenses

Table 2.2: Programme Expenses

	2013-14 Estimated actual \$'000	2014-15 Budget \$'000	2015-16 Forward Year 1 \$'000	2016-17 Forward Year 2 \$'000	2017-18 Forward Year 3 \$'000
Annual administered expenses					
Ordinary annual services	367,530	405,929	401,722	400,940	400,961
Programme support	8,230	8,075	7,883	7,610	7,804
Total Programme 2.1 expenses	375,760	414,004	409,605	408,550	408,765

Programme 2.1: Deliverables

Qualitative Deliverables for Programme 2.1

Support timely access to medicines and pharmacy services through the Fifth Community Pharmacy Agreement

Qualitative Deliverable	2014-15 Reference Point or Target
Phased roll out of measure: Supply and PBS Claiming from a Medication Chart in Residential Aged Care Facilities and public and private hospitals	Continue measure phase in, as the Government is working to expand the supply and claiming of PBS medicines dispensed from medication charts to include all public and private hospitals

Quantitative Deliverables for Programme 2.1

Support timely access to medicines and pharmacy services through the Fifth Community Pharmacy Agreement

Quantitative Deliverable	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Number of medication management services provided under the Fifth Agreement ¹	307,189	353,492	- ²	-	-

¹ Traditionally, this deliverable is measured against the Home Medicines Review Programme. However, it is worth noting that the Residential Medication Management Review Programme and MedsCheck/Diabetes MedsCheck are also medication management services funded under the Fifth Community Pharmacy Agreement and have been included in this deliverable. The revised targets have increased because they are now based on the number of services that can be funded each year.

² Fifth Community Pharmacy Agreement ceases 30 June 2015.

Programme 2.1: Key Performance Indicators

Qualitative Key Performance Indicators for Programme 2.1

Support timely access to medicines and pharmacy services through the Fifth Community Pharmacy Agreement

Qualitative Indicator	2014-15 Reference Point or Target
Medication Management Review Programmes are achieving individual programme objectives	Finalisation of the <i>Combined Review of Fifth Community Pharmacy Agreement Medication Management Programmes</i>

Quantitative Key Performance Indicators for Programme 2.1

Support timely access to medicines and pharmacy services through the Fifth Community Pharmacy Agreement

Quantitative Indicators	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Percentage of rural community pharmacies accessing targeted rural programmes to support the sustainability of community pharmacy in rural and remote Australia ³	75%	77%	-.4	-	-
Percentage of community pharmacies participating in the Pharmacy Practice Incentives Programme	90%	91%	-.5	-	-

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³ Targets have been revised following an update of the Pharmacy Access/Remoteness Index of Australia classifications, which resulted in a number of pharmacies being reclassified from rural to urban.

⁴ Fifth Community Pharmacy Agreement ceases 30 June 2015.

⁵ Fifth Community Pharmacy Agreement ceases 30 June 2015.

Programme 2.2: Pharmaceuticals and Pharmaceutical Services

Programme Objectives

List cost-effective, innovative, clinically effective medicines on the PBS

The PBS is the primary means through which the Australian Government ensures Australians have timely and affordable access to pharmaceuticals. The PBS is expected to cost \$9.25 billion in 2014-15. Approximately 294 million PBS prescriptions will be dispensed through community pharmacy in 2014-15.⁶

The listing of medicines on the PBS is based on the advice of the Pharmaceutical Benefits Advisory Committee (PBAC), an independent, expert advisory body comprising doctors, other health professionals and a consumer representative. The PBAC assesses the safety, therapeutic benefits and cost-effectiveness of the medicine for the intended use, in comparison with other available treatments.

Since the Mid-Year Economic and Fiscal Outlook in December 2013, the Government has approved 133 new or amended PBS listings, at an overall cost of \$436.2 million over five years, to treat a range of illnesses from rare forms of cancer to skin conditions. This includes \$49.5 million for the Medicare Benefits Schedule for the co-dependant technologies package for botulinum toxin (Botox®).

At its March 2014 meeting, the PBAC recommended a further \$550 million in new listings for Government consideration in 2014-15. The PBAC will meet three times in 2014-15 to provide Government advice on requests for new listings on the PBS and National Immunisation Program.

Increase the sustainability of the PBS

The current fiscal environment, compounded by factors such as an ageing population, the increasing prevalence of chronic disease and the listing of new and expensive medicines in Australia are expected to continue to drive PBS growth of between four and five per cent over the medium to long term. As more high cost medicines are listed and more patients require access to these treatments, the cost to Government will increase.

For example, while patients have been paying \$6.00 or \$36.90 (depending on patient status) per prescription, they can access PBS medicines such as:

- treatments for melanoma (such as ipilimumab or dabrafenib) which cost up to \$110,000 a year;
- treatment for prostate cancer (abiraterone) which costs around \$27,000 a year; or
- treatments for macular degeneration (such as ranibizumab or aflibercept) which cost up to \$17,000 a year.

The Government needs to ensure that the PBS is managed in a fiscally responsible way, so that the Australian community has access to new, innovative and affordable medicines now and into the future. To put the PBS on a more

⁶ This includes subsidised prescriptions and those below the general co-payment.

sustainable footing, Australians will need to make a modest additional contribution to the cost of their medicine under the PBS. From 1 January 2015:

- the concessional co-payment will increase by 80 cents and the general co-payment will increase by \$5.00, in addition to the annual indexation; and
- the safety net threshold for general patients will increase by 10 per cent above annual indexation each year for four years, and the concessional safety net threshold will increase by two prescriptions each year from the current 60 prescriptions to 62 in 2015 and up to 68 in 2018.

Post-market surveillance

In 2014-15, the Government will progress several reviews of medicines in use, focusing on the appropriate and quality use of medicines to help improve health outcomes for patients and ensure continued value for money for taxpayers. The reviews of medicines used to treat asthma in children and medicines and products used to manage diabetes are expected to be completed in 2014-15.

The Government will systematically review all PBS authority required medicines, as announced on 30 November 2013. The review will be undertaken with input from key stakeholders including the Australian Medical Association and the Royal Australian College of General Practitioners and will remove unnecessary red tape and administrative burden for health professionals.

The review will be undertaken in stages to expedite red tape reduction for prescribers and dispensers. There are currently 447 phone or complex authority required medicines on the PBS. This number is expected to be significantly reduced over time, with the first priority area being authorities relating to the use of drugs in cancer. The review's outcomes are expected to provide over \$7 million per year worth of red tape reductions.

Programme 2.2 is linked as follows:

- The Department of Human Services (Services to the Community – Programme 1.2) to administer the PBS, including payment of script benefits, authority approvals, new and other PBS items.

Programme 2.2: Expenses

Table 2.3: Program Expenses

	2013-14 Estimated actual \$'000	2014-15 Budget \$'000	2015-16 Forward Year 1 \$'000	2016-17 Forward Year 2 \$'000	2017-18 Forward Year 3 \$'000
Annual administered expenses					
Ordinary annual services	195,105	197,488	200,404	199,967	202,377
Special appropriations					
<i>National Health Act 1953 -</i>					
pharmaceutical benefits	9,259,663	9,247,686	9,406,281	9,910,361	10,264,643
Programme support	52,606	46,580	44,393	43,833	44,606
Total Programme 2.2 expenses	9,507,374	9,491,754	9,651,078	10,154,161	10,511,626

Programme 2.2: Deliverables

Qualitative Deliverables for Programme 2.2

List cost-effective, innovative, clinically effective medicines on the PBS

Qualitative Deliverables	2014-15 Reference Point or Target
The PBAC provides recommendations to the Minister on new listings for the PBS, and the National Immunisation Program	The PBAC recommendations for listing on the PBS are based on the clinical effectiveness and cost-effectiveness of new medicines, and provided in a timely manner
Price negotiations with sponsors and conditions for listing finalised, and quality and availability checks undertaken for new PBS listings	All negotiations and listing activity completed in a timely manner and consistent with PBAC outcomes

Post-market surveillance

Qualitative Deliverable	2014-15 Reference Point or Target
Undertake reviews of medicines in use, focusing on the appropriate and quality use of medicines	Complete reviews of medicines used to treat asthma in children, medicines and products used to manage diabetes, the Life Saving Drugs Programme and phased outcomes from the PBS Authorities review

Quantitative Deliverables for Programme 2.2

List cost-effective, innovative, clinically effective medicines on the PBS

Quantitative Deliverable	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Percentage of the community's (public) comments included for consideration at each PBAC meeting	100%	100%	100%	100%	100%

Programme 2.2: Key Performance Indicators

Quantitative Key Performance Indicators for Programme 2.2

List cost-effective, innovative, clinically effective medicines on the PBS

Quantitative Indicator	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Revenue received from the cost recovery of the PBS listing process ⁷	\$10.0m	\$10.0m	\$10.0m	\$10.0m	\$10.0m

Increase the sustainability of the PBS

Quantitative Indicator	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Estimated savings to Government from PBS Reforms ^{8, 9}	\$1,477.7m	\$2,074.6m	\$2,423.3m	\$2,595.6m	\$2,767.9m

Outcome 1 02

Programme 2.3: Targeted Assistance – Pharmaceuticals

Programme Objectives

Provide access to new and existing medicines for patients with life threatening conditions

The Australian Government will provide fully subsidised access for eligible patients to expensive and 'lifesaving' drugs for rare and life threatening medical conditions through the Life Saving Drugs Programme (LSDP).

Ten drugs are currently funded through the programme to treat seven serious and very rare medical conditions. These conditions are: Fabry, Gaucher, Mucopolysaccharidosis Types I, II and VI, Infantile Pompe disease and Paroxysmal Nocturnal Haemoglobinuria.

On 9 April 2014, the Government announced a post-market review of this programme to ensure it continues to provide Australians with very rare conditions with access to much needed but very expensive medicines. The review will examine issues such as access and equity, value for money and the future administration of the programme. The review will also examine the existing LSDP criteria and conditions for funding, identify processes to facilitate data collection for rare diseases and look at ways to better engage with consumers. The review is expected to be completed in late 2014-15.

⁷ Targets have been revised to reflect lower than estimated revenue received from cost recovery.

⁸ This quantitative key performance indicator is new and replaces the previous key performance indicator under the same heading.

⁹ Includes all ongoing savings from PBS Reforms.

As part of the Government’s commitment to the reduction of red tape and administrative burden, the new administration arrangements for prescribing medicines on the LSDP announced in conjunction with the review will be fully implemented in 2014-15. These changes are expected to reduce red tape for prescribers by around \$29,700 per annum.

Whilst the review of the LSDP is under way, the Department will continue to facilitate and monitor access for new and continuing patients to these medicines.

Programme 2.3: Expenses

Table 2.4: Program Expenses

	2013-14 Estimated actual \$'000	2014-15 Budget \$'000	2015-16 Forward Year 1 \$'000	2016-17 Forward Year 2 \$'000	2017-18 Forward Year 3 \$'000
Annual administered expenses					
Ordinary annual services	141,504	151,424	158,178	161,679	167,119
Programme support	2,601	2,414	2,358	2,332	2,389
Total Programme 2.3 expenses	144,105	153,838	160,536	164,011	169,508

Programme 2.3: Deliverables

Qualitative Deliverables for Programme 2.3

Provide access to new and existing medicines for patients with life threatening conditions

Qualitative Deliverable	2014-15 Reference Point or Target
Review programme guidelines to ensure they remain current and relevant	Programme guidelines reviewed within agreed timeframes

Quantitative Deliverables for Programme 2.3

Provide access to new and existing medicines for patients with life threatening conditions

Quantitative Deliverable	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Number of patients assisted through the Life Saving Drugs Programme	245	260	275	290	305

Program 2.3: Key Performance Indicators

Qualitative Key Performance Indicators for Programme 2.3

Provide access to new and existing medicines for patients with life threatening conditions

Qualitative Indicator	2014-15 Reference Point or Target
Eligible patients have timely access to the Life Saving Drugs Programme	Patient applications are processed within 30 calendar days of receipt

Quantitative Key Performance Indicators for Programme 2.3

Provide access to new and existing medicines for patients with life threatening conditions

Quantitative Indicator	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Percentage of eligible patients with access to fully subsidised medicines through the Life Saving Drugs Programme	100%	100%	100%	100%	100%

Outcome 1 02

Programme 2.4: Targeted Assistance – Aids and Appliances

Programme Objectives

Provide support for people with diabetes

The Australian Government, through the National Diabetes Services Scheme (NDSS), aims to ensure that people with diabetes have timely, reliable and affordable access to products and services that help them effectively self-manage their condition. The NDSS is administered by Diabetes Australia through a funding agreement. In 2014-15, the Department, in conjunction with Diabetes Australia, will implement the outcomes of an integrated review of the NDSS which is due to be completed in late 2013-14.

The Government also provides support to the families of children with type 1 diabetes through the Type 1 Diabetes Insulin Pump Programme. This programme subsidises the cost of insulin pump therapy for those families with children under the age of 18 who have type 1 diabetes and who meet the income limits. The outcomes of the post-market review of insulin pumps are expected in 2014-15 and the findings from this review will be provided to Government for consideration.

Assist people with a stoma by providing stoma related products

The Australian Government assists over 40,000 people each year by providing them with stoma¹⁰ related appliances (such as pouches, products to assist irrigation, protective films and seals) through the Stoma Appliance Scheme. There are already over 400 products available on the scheme with the Government approving a further three new products and three price increases for implementation on 1 July 2014.

Improve the quality of life for people with Epidermolysis Bullosa

The Australian Government aims to improve the quality of life for people with Epidermolysis Bullosa¹¹ and to reduce unnecessary hospitalisation through the National Epidermolysis Bullosa Dressing Scheme. The scheme provides access to subsidised clinically necessary dressings for eligible people and provides education on best treatment practices. The Department works with clinical experts to ensure dressing treatment methods are consistent with best practice.

In 2014-15, the contract for the supply and administration of these products will be subject to an open approach to the market.

Programme 2.4 is linked as follows:

- The Department of Human Services (Services to the Community – Programme 1.2) to administer payment of claims from Stoma Associations for stoma related appliances.

Programme 2.4: Expenses

	2013-14 Estimated actual \$'000	2014-15 Budget \$'000	2015-16 Forward Year 1 \$'000	2016-17 Forward Year 2 \$'000	2017-18 Forward Year 3 \$'000
Annual administered expenses					
Ordinary annual services	1,551	596	596	596	596
Special appropriations					
National Health Act 1953 - aids and appliances	302,765	324,988	349,091	352,568	356,179
Programme support	2,303	2,081	2,029	2,004	2,057
Total Programme 2.4 expenses	306,619	327,665	351,716	355,168	358,832

¹⁰ An opening in the abdomen for evacuation of products from the bowel or bladder.

¹¹ A genetic disease characterised by extremely fragile and blister prone skin.

Programme 2.4: Deliverables

Qualitative Deliverables for Programme 2.4

Provide support for people with diabetes

Qualitative Deliverable	2014-15 Reference Point or Target
Provide access to insulin pumps and associated consumables for children under 18 years of age with type 1 diabetes	Work with the scheme administrator to ensure insulin pump subsidies are provided efficiently

Quantitative Deliverables for Programme 2.4

Provide support for people with diabetes

Quantitative Deliverables	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Number of people with diabetes receiving benefit from the NDSS	1,280,000	1,400,000	1,526,000	1,656,000	1,797,000
Number of people under 18 years of age with type 1 diabetes receiving a subsidised insulin pump	204 ¹²	68	68	68	68

Assist people with a stoma by providing stoma related products

Quantitative Deliverable	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Number of people receiving stoma related products	41,750	42,500	43,250	44,000	44,750

Improve the quality of life for people with Epidermolysis Bullosa

Quantitative Deliverable	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Number of people with Epidermolysis Bullosa receiving subsidised dressings ¹³	79	115	125	135	145

¹² An additional 136 subsidies were allocated in 2013-14.

¹³ Figures for 2014-15 and subsequent years have been increased to reflect current patient uptake of the National Epidermolysis Bullosa Dressing Scheme.

Programme 2.4: Key Performance Indicators

Qualitative Key Performance Indicators for Programme 2.4

Provide support for people with diabetes

Qualitative Indicator	2014-15 Reference Point or Target
The NDSS meets the needs of stakeholders	Annual survey of registrants conducted by Diabetes Australia demonstrates that the needs of stakeholders are being met

Quantitative Key Performance Indicators for Programme 2.4

Provide support for people with diabetes

Quantitative Indicator	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
Number of diabetes related products provided to eligible people through the NDSS	5,172,666	5,598,785	6,060,008	- ¹⁴	-

Assist people with a stoma by providing stoma related products

Quantitative Indicator	2013-14 Revised Budget	2014-15 Budget Target	2015-16 Forward Year 1	2016-17 Forward Year 2	2017-18 Forward Year 3
The number of stoma products supplied to eligible people on the Stoma Appliance Scheme	34,000,000	35,500,000	37,500,000	39,500,000	41,500,000

¹⁴ The current NDSS Agreement ends on 30 June 2016.