

medicare

60-day prescriptions – stage 2 Information kit for prescribers

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Australian Government



The Pharmaceutical Benefits Scheme

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What is changing?

From 1 March 2024, the range of medicines available for a 60-day prescription has expanded. Nearly 200 medicines are now available for a 60-day prescription for many on-going health conditions.

Medical practitioners and nurse practitioners currently permitted to prescribe Pharmaceutical Benefits Scheme (PBS) medicines can make the clinical decision about whether 60-day prescriptions are appropriate for patients with stable ongoing health conditions. A PBS prescriber is defined under Part VII of the *National Health Act 1953*.

Prescribing software will be automatically updated and included medicines will have an additional PBS item code for 60-day (or 56-day) prescriptions, as well as the current code for 30-day (or 28-day) prescriptions.

Where a prescriber considers a 60-day prescription appropriate for a patient, it may reduce both time spent in consultations to renew prescriptions and the patient's annual medication costs.

This change is the second of three planned stages to introduce 60-day prescriptions over 12 months:

- From 1 March 2024, an additional 94 medicines will be included in 60-day prescriptions.
- When fully implemented by 1 September 2024, 60-day prescriptions will be available for around 300 PBS medicines.

Communication resources

The information resources in this kit are designed to be shared with your patients. They cover a range of topics relating to the PBS and provide answers to commonly asked questions.

Further information

- For further information on 60-day prescriptions visit the [Cheaper Medicines website](#).
- For a searchable list of medicines available for 60-day prescriptions visit [PBS medicines and current item codes](#).
- For a full list of medicines recommended by the Pharmaceutical Benefits Advisory Committee as suitable for increased dispensing quantities visit the PBS website: [Increased Dispensing Quantities – List of Medicines](#)
- Resources for patients are available on the [Cheaper Medicines website](#) and [60 Day Scripts – developed by Consumers Health Forum](#)
- [Therapeutic Goods Administration medicine shortage reports database](#).

If you have questions or require further information you can email the Department at: Enquiries@health.gov.au

Medicines eligible for 60-day prescriptions – stage 2

The [second stage of medicines available for 60-day prescriptions](#) supports patients living with a stable ongoing health condition such as:

- androgen deficiency
- arthritis
- breast cancer
- bipolar disorder
- diabetes
- epilepsy
- hypothyroidism
- incontinence
- menopause
- migraine
- prostate cancer
- prostate enlargement

How to check if a medicine is included in stage 2

- For a searchable list medicines available for 60 day-prescriptions, visit [PBS medicines and current item codes](#).
- Browse the list or input the name of a specific medicine into the search box to see if it is on the list.

Frequently asked questions

Will people need a new prescription to obtain a 60-day supply of their current medication?

Yes.

Where considered clinically appropriate by the prescriber and in consultation with an eligible patient, a new prescription may be issued against the item code with the appropriate maximum quantity (up to 60-days supply and 5 repeats, providing 12 months of medication). Pharmacists can then supply the increased quantity as specified on the new prescription. This prescription is still valid for a maximum of 12 months.

Do patients require a Concession Card to be eligible for a 60-day prescription?

Patients do not need a concessional card to access a 60-day prescription. Doctors retain full clinical discretion over what quantity of medicine is prescribed for their patients based on their assessment of their patient's condition at the time.

Can prescribers still write a one month's supply prescription?

Yes, prescribers retain full clinical discretion over what quantity of medicine is prescribed for their patients, based on their assessment of a patient's condition at that time.

For example, a prescriber may choose to write a 30-day rather than a 60-day prescription, or may choose to write a 60-day prescription with an appropriate number of repeats, depending on their clinical assessment of patient needs.

How does this impact on prescribing PBS medication?

As with all PBS listed medicines, the prescriber must be satisfied that the patient meets the eligibility requirements for the subsidy.

The PBS restriction for all items with increased 60-day quantities include an additional clinical criterion: "The condition must be stable for the doctor to consider the listed maximum quantity of this medicine suitable for this patient".

A prescriber can continue to apply for a PBS Authority where a patient needs increased quantity of a medication. They can do so by calling the Services Australia Telephone Authority Applications Freecall service on Ph:1800 888 333, or using the [Services Australia PBS authorities website](#).

How are patients saving with 60-day prescriptions?

The fundamental principle of the change is that patients will only pay one co-payment instead of 2, for double the medication. When a PBS medicine can be prescribed for 60-days patients can save:

- up to \$189.60 a year, per medicine for Medicare card holders (non-concessional)
- up to \$46.20 a year, per medicine for concession card holders.

A patient taking only medicines that have a 60-day prescription can halve their number of trips to the pharmacist to fill a script for that medicine. This will also free up appointments with prescribers to focus on other aspects of patient care.

How does this work with the PBS Safety Net?

The PBS Safety Net will continue to support general patients who spend more than \$1,647.90 on PBS medicines in a year (or \$277.20 for concession card holders).

With a 60-day prescription, patients could save on their medicines so that they won't need the Safety Net. Others will reach the Safety Net later in the year, having spread their medicine costs over a longer period.

The benefit for patients is that their total annual medicines cost will be spread out over a greater period of time, resulting in a lower monthly medicines cost. If patients don't reach or hit the threshold later in the year, it means they have saved money throughout the year.

How were these changes determined?

Clinical experts from the independent Pharmaceutical Benefits Advisory Committee (PBAC) recommended introducing 60-day prescriptions for patients with stable ongoing health conditions.

In making its recommendations, the PBAC applied the following guidance criteria to identify medicines that should not be listed with higher quantities:

- medicines where being able to stockpile large quantities could pose a risk to patient safety (for example: narcotics, paracetamol/codeine, psychostimulants, psycholeptics and psychoanaleptics)
- medicines with a requirement for regular monitoring and frequent dose titration
- medicines where the drug regimen is associated with management of progressively worsening disease or the symptoms are associated with relapse of disease and the patient is not expected to be stable for the next 12 months
- medicines prescribed for short term management of symptoms in chronic diseases
- medicines in the Palliative Care section of the Schedule
- medicines where the PBAC has recommended a listing that enables prescribers to prescribe less than six months therapy per prescription.

In addition, medicines must have been PBS listed for five or more years, or generics of medicines which have been listed for five or more years, as severe but rare adverse effects frequently become evident during the first few years a drug is widely available.

View [the PBAC outcome statement](#) for more information.

Will 60-day prescriptions affect the supply of medicine?

The move to 60-day prescriptions is not expected to increase medicine shortages as people will still purchase the same amount of medicine each year. While eligible people can now obtain double their medicine on a single prescription, this will last them for a longer period of time, meaning overall demand for medicines will stay the same.

Maximum repeats will remain unchanged, meaning up to 12 months supply of medication can be obtained per prescription.

Most of the medicines PBAC recommended for 60-day prescriptions have no shortage of supply in Australia. When supply shortages do occur, there are usually alternative brands and/or strengths of the same medicine available. We are monitoring the list of medicines recommended for inclusion in

60-day prescriptions to reduce the risk that medicines being implemented in each stage are not in shortage or at risk of shortage

Manufacturers will need to hold 4-6 months of stock in Australia for certain PBS listed medicines as part of a [Medicines Supply Security Guarantee](#). If a pharmacy is running low on medication, for most medication, wholesalers are required to deliver to any pharmacy within 24 hours (excluding weekends/public holidays).

As is already the case, a pharmacist can substitute with another brand of the same medication if there is a shortage. Or a pharmacist might only dispense a portion of the medication during anticipated stock shortages and ask the patient to return later. Importantly, this will not cost the patient extra.

Does Regulation 49 apply?

This regulation remains unchanged.

Regulation 49 (previously Regulation 24), permits in certain circumstances, a PBS prescription to be endorsed by the prescriber for “one supply” to allow the quantities for the original prescription and repeats to be supplied at the same time.

The below criteria must be met for a Regulation 49 Provision, and is made at the request of the medical practitioner, midwife or nurse practitioner:

- the maximum PBS quantity is insufficient for the patient's treatment; AND
- the patient has a chronic illness or lives in a remote area where access to PBS supplies is limited; AND
- the patient would suffer great hardship trying to get the pharmaceutical benefit on separate occasions.

The patient will be charged a total equivalent to the PBS co-payment amount that would otherwise apply for the original and each repeat making up the total supply. There may also be brand or therapeutic group premiums charged for each quantity making up the total.

How have primary care and patient peak bodies reacted to this change?

The introduction of 60-day prescriptions has been welcomed by many medical, health and consumer groups including the Royal Australian College of General Practitioners, Rural Doctors Association, the Australian Medical Association, the Heart Foundation, the Lung Foundation, Breast Cancer Network, Consumers Health Forum of Australia and many others. [Read the open letter to all Federal Parliamentarians.](#)

Case studies

Case study 1

Couple who are Medicare card holders (non-concessional)

William has a heart condition that increases his risk of developing a stroke, so he takes apixaban twice daily. William's partner, Sandra, has ulcerative colitis and takes the anti-inflammatory medication mesalazine granules each day.

William and Sandra pay **\$31.60 per prescription in 2024** as non-concessional Medicare card holding patients for these PBS medications.

With each medication having **12 prescriptions per year, their combined cost for PBS medications in a year is currently \$758.40.**

William and Sandra's doctors find them suitable for 60-day prescriptions for the medicines used to manage their stable ongoing health conditions. William and Sandra can now receive twice the amount of their medication on a single prescription. William and Sandra will now have only **six prescriptions per year** for each medication and pay only **\$379.20 in PBS co-payments for their medications, a saving of half (\$379.20) of their annual PBS costs.**

Case study 2

Elderly couple with Pensioner Concession Cards

Frank and Judy are a couple with Pensioner Concession Cards, providing them access to PBS medicines for **\$7.70 per script in 2024.**

As a couple they would receive **40 scripts in a year and reach the PBS Safety Net, paying \$277.20 across 36 prescriptions** to reach the Safety Net and then four free Safety Net prescriptions.

Judy's doctor finds her suitable for a 60-day prescription for the treatment of high cholesterol. Instead of getting one prescription per month to treat the condition (12 per year), Judy will get one prescription every two months (6 per year).

As a couple Frank and Judy will now receive **34 prescriptions, meaning they will no longer reach the \$277.20 PBS Safety Net**, however they will be **paying less for their medications overall.**

Couple with Health Care Cards

Tony and Jack are a couple with Health Care Cards, providing them access to PBS medications for **\$7.70 per prescription in 2024**.

As a couple they fill **50 prescriptions in a year and reach the PBS Safety Net, paying \$277.20 across 36 prescriptions to reach the Safety Net and then receive 14 free safety net prescriptions**.



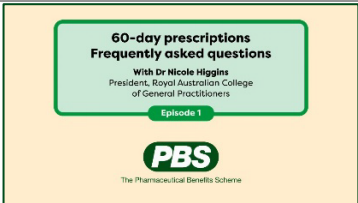
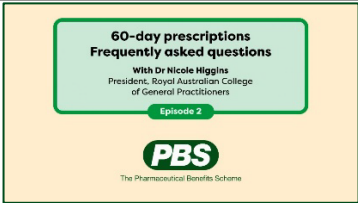
Jack's doctor finds him suitable for 60-day prescriptions for two medicines used to manage his stable ongoing health conditions. Instead of getting one prescription per month to treat each condition (24 per year), Jack will get one prescription every two months (12 per year).

As a couple Tony and Jack now fill **38 prescriptions in total rather than 50**. They pay **\$277.20 in co-payments, then reach the PBS Safety Net**. They now reach the PBS Safety Net later in the year, making the same number of co-payments but spread across a longer period of time, meaning they pay fewer co-payments in the first half of the year. They pay no additional cost for their PBS medications and receive two free Safety Net prescriptions.

Resources

- Resources have been created to comply with AAA criteria for accessibility.
- Preview images used below are for reference only. High-resolution copies of the below resources and written case studies can be downloaded from the Resources page on health.gov.au/cheaper-medicines/resources.
- Translated versions of resources can be downloaded from health.gov.au/cheapermedicines/translated.
- Materials for First Nations audiences and the Closing the Gap Concession card are also available at health.gov.au/cheaper-medicines/first-nations.
- If you have any issues accessing resources please contact campaigns@health.gov.au.

Resource	Preview	Title	Suggested use
FAQ	 <p>The image shows a document titled '60-day prescriptions Frequently asked questions'. It includes sections such as 'What is the Pharmaceutical Benefits Scheme?', 'What are 60-day prescriptions?', and 'When is this happening?'. It also features the Medicare logo and the PBS logo.</p>	60-day prescriptions – Frequently asked questions	For distribution to eligible patients
Clinic poster	 <p>The image shows a poster titled '60-day prescriptions'. It features the Medicare logo and the text: 'On 1 March and 1 September 2024 more medicines will be available for a 60-day prescription.' Below the text is an illustration of two people and a pill bottle. At the bottom, it says 'Ask your doctor or health professional if a 60-day prescription is right for you. health.gov.au/cheapermedicines'. It also includes the Australian Government and PBS logos.</p>	60-day prescriptions poster	For display in reception or waiting areas

Resource	Preview	Title	Suggested use
<u>Animation video 1</u>		What are 60-day prescriptions?	Embed on your website, in patient newsletter, or share on social media
<u>Animation video 2</u>		Are my medicines suitable for 60-day prescriptions?	Embed on your website, in patient newsletter, or share on social media
<u>Patient FAQ with Dr Nicole Higgins – Episode 1</u>		60-day prescriptions patient frequently asked questions – Episode 1	Embed on your website, in patient newsletter, or share on social media
<u>Patient FAQ with Dr Nicole Higgins – Episode 2</u>		60-day prescriptions patient frequently asked questions – Episode 2	Embed on your website, in patient newsletter, or share on social media