

### Pharmaceutical Charges for Hospital Outpatients and Safety Net Thresholds

Summary This Information Bulletin outlines outpatient pharmaceutical charges for the 2024 calendar year and associated safety net arrangements.
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# Pharmaceutical charges for hospital outpatients and safety net thresholds

### PURPOSE

This Information Bulletin outlines pharmaceuticals charges for hospital outpatients and the expenditure thresholds for safety net concessions. The charges outlined in this Information Bulletin are effective on and from 1 January 2024.

This Information Bulletin is to be read in conjunction with the NSW Health Policy Directive Pharmaceutical and Safety Net Arrangements for Outpatients and Patients on Discharge (<u>PD2023\_041</u>).

### **KEY INFORMATION**

### **Exemptions from co-payments**

Medications will be provided free of charge in the following circumstances:

- Patients in prison (refer to NSW Health Policy Directive Medicare Ineligible and Reciprocal Health Care Agreement (PD2021\_021))
- Certain infectious diseases (refer to Pharmaceutical and Safety Net Arrangements for Outpatients and Patients on Discharge (<u>PD2023\_041</u>))
- Medications specifically for tuberculosis (TB) (refer to NSW Health Policy Directive Principles for the Management of Tuberculosis in New South Wales (<u>PD2022\_007</u>)), leprosy patients and patients attending a Sexual Assault Service (refer to <u>PD2021\_021</u>)
- Methadone and buprenorphine dispensed in the public system under the <u>NSW Opioid</u> <u>Treatment Program (OTP)</u> and depot injectable preparations of antipsychotic medications (refer to NSW Health Guideline NSW Clinical Guidelines: Treatment of Opioid Dependence (<u>GL2018\_019</u>))
- Some non-OTP Section 100 Highly Specialised Drugs (s100 HSDs) supplied to <u>eligible patients</u> (refer to the NSW Health Information Bulletin NSW Section 100 Copayment Program (<u>IB2023\_025</u>))
- Patients eligible under the Commonwealth Government Life Saving Drugs Program (refer to NSW Health Information Bulletin Outpatient Pharmaceutical Arrangements and the Life Savings Drugs Program (<u>IB2020\_047</u>))

## Medicines other than section 100 highly specialised drugs (s100 HSDs) and Efficient Funding of Chemotherapy (EFC) medicines

The standard charge for pharmaceuticals supplied to outpatients of public hospitals, other than s100 HSDs and EFC medicines, will be as follows:

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### **INFORMATION BULLETIN**

General patients and overseas visitors covered by a Reciprocal Health Care Agreement	Concessional patients and DVA Health Card holders	Patients ineligible for Medicare
\$31.60 per item per month supply	\$7.70 per item per month supply up to the Safety Net threshold	Actual cost of item or \$31.60, whichever is greater

Eligible outpatients obtaining medication supply from NSW public hospitals for acute conditions (excluding highly specialised drugs) with a course longer than seven days or for chronic conditions will pay the designated co-payment fee for each item dispensed, even if two or more items are different strengths or forms of the same medicine.

### s100 HSD and EFC drugs

Co-payment fees payable by patients for Section 100 Highly Specialised Drugs (s100 HSDs) and s100 injectable and infusible chemotherapy medicines are as follows:

	Patients not exempt from s100 co-payments (see arrangements below)		Patients exempt from s100 co-payments (see arrangements for
	General patients and overseas visitors covered by a Reciprocal Health Care Agreement	Concessional patients and DVA Health Card holders	eligible NSW residents below)
	\$31.60	\$7.70	
s100 HSDs	One co-payment per item for any quantity supplied up to the PBS maximum		Free of charge
Prescriptions under the efficient funding of chemotherapy (EFC) drugs program — injection/infusion	One co-payment for each original prescription dispensed. Repeats dispensed do not require a co-payment.		
Prescriptions under the EFC drugs program — oral	One co-payment for each original prescription dispensed and one co-payment for each repeat dispensed		No exemption – general and concessional co- payments apply

Where increased quantities of a s100 HSD have been authorised by the Commonwealth on an 'Authority Required' prescription, the appropriate co-payment applies to the authorised quantity. For example, where the Commonwealth has authorised a prescription for an increase of the PBS maximum quantity of 100 tablets to 200 tablets, only one co-payment applies for each 200-tablet supply.

Multiple repeats dispensed at the same time under Regulation 49 of the *National Health (Pharmaceutical Benefits) Regulations 2017* (Commonwealth) attract one co-payment per item per repeat. For example, for a s100 HSD with 5 repeats, the supply under Regulation 49 of 6 packs of the medicine would attract 6 amounts of the co-payment. The prescription should be annotated "one supply" or "1 supply".





#### Arrangements for eligible NSW residents only (s100 co-payment exemptions)

NSW residents who are patients of NSW public hospitals or authorised community prescribers in NSW are not required to pay the patient co-payment for non-OTP s100 HSD or s100 injectable and infusible chemotherapy medicines in NSW in accordance with NSW Health Information Bulletin *NSW Section 100 Co-Payment Program* (IB2023\_025). For non-OTP s100 medicines, this co-payment will be paid by NSW Health on behalf of eligible patients up to concessional and general patient thresholds and will count towards the patient's safety net threshold.

Patients must provide consent to having NSW Health pay the co-payment on their behalf (refer to <u>Co-payments for Section 100</u>).

For OTP s100 medicines, co-payment charges will be waived for patients who receive their doses from public services. This is administered separately to the NSW Section 100 Co-payment Program and will not contribute towards patients' safety net threshold (refer to PD2023\_041).

### **Safety Net Thresholds**

Expenditure required to trigger safety net concessional rates from 1 January 2024 is:

Cohort	Benefit
Concessional Patients (Card holders and pensioners)	Free benefits after \$277.20
General Patients	Concessional benefits (\$7.70) after \$1,647.90

Thresholds relate to expenditure outlays within a calendar year.