

Australia rolls out new policy to make medicines cheaper

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Access to new and expanded medicine listings under PBS



Millions of Australians will pay up to 29 per cent less for their Pharmaceutical Benefits Scheme (PBS) prescriptions, with the maximum PBS co-payment dropping from \$42.50 to \$30. For the first time in the 75-year history of the PBS, the co-payment for general scripts has fallen. For a family relying on two or three medications, this can put as much as \$450 back into their household budget.

Also, Australians with eye disease, a rare blood disorder or asthma will have access to new and expanded medicine listings under the PBS.

Vabysmo (faricimab) will be listed for the first time to treat both diabetic macular oedema (DMO) and neovascular (wet) age-related macular degeneration (nAMD). DMO and nAMD both affect a person's sight.

Last year more than 18,000 people with DMO and 62,000 people with nAMD accessed comparable treatments through the PBS. Without the PBS subsidy, patients might pay more than \$4,000 a year for treatment.

The listing of Darzalex SC (daratumumab) will be expanded to treat amyloid light-chain (AL) amyloidosis in combination with other PBS listed medicines.

AL amyloidosis is a rare condition where deposits of a protein called amyloid caused by an underlying bone marrow disorder, lead to damage to various organs, such as the kidneys or the heart, and stop them from functioning properly.

Without subsidy, treatment could cost patients more than \$243,000 per course of treatment. Around 160 Australians will benefit from this new treatment option each year.

Trimbow (belcometasone with formoterol and glycopyrronium) will also be listed for the maintenance treatment of severe asthma.

Around 1,200 patients used comparable therapy last year and would pay more than \$1,000 per year without subsidy for this additional treatment option.