

14.09. Authorised Nurse Practitioner prescribing for Hepatitis B (Hep B), Hepatitis C (Hep C) and Human Immunodeficiency Virus (HIV) medicines under the Highly Specialised Drugs (HSD) Program

1 Purpose of Item

- 1.1 To seek the Committee's agreement to expand the eligibility criteria for the prescribing for Hep B, C and HIV medicines listed on the HSD program to include authorised nurse practitioners (NP).

2 Background

- 2.1 The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) sought to have nurse practitioners (NP) be eligible to prescribe medicines for the treatment of Hep B, Hep C, and HIV under the section 100 HSD program.
- 2.2 ASHM also proposed that NPs be required to meet the same accreditation criteria as general practice prescribers including education and continuing professional development requirements.
- 2.3 Since 2010, NPs endorsed to prescribe under state or territory legislation have been able to apply for approval as PBS prescriber under the *National Health Act 1953*.
- 2.4 Currently NPs are not eligible to prescribe Hep B, C and HIV medicines listed under the section 100 HSD Program.
- 2.5 The Hep C medicines which NPs are able to prescribe under the general schedule (s85) are the same medicines listed under the section 100 HSD Program.
- 2.6 In 2015 HSD Program prescriber eligibility for Hep B and HIV medicines was changed, removing the need for eligible prescribers to demonstrate an affiliation with a public/private hospital. This change resulted in the establishment of the Community Access (CA) stream within the HSD Program.
- 2.7 The CA stream was introduced as a means to broaden access to Hep B and HIV medicines within community based settings removing the need for patients and prescribers to be affiliated with hospitals.
- 2.8 The additional benefit of the CA stream is that nominated Pharmaceutical Benefits Scheme (PBS) listed medicines can be dispensed across the different pharmacy settings without the need for dual listings, which can and have resulted in different prescribing eligibility, although the clinical indication for the medicines is the same.

- 2.9 Initial legal advice received by the Department has indicated that inclusion of NPs for specific medicines will require minor amendments to the *National Health (Highly specialised drugs program) Special Arrangement 2010*. Prescribing eligibility currently in place for the relevant medicines would be extended to NPs, that is, any accreditation and/or state or territory approval requirements currently in place for medical practitioners would be extended to NPs.
- 2.10 Enabling NPs to be eligible to prescribe Hep B, C and HIV medicines under the HSD Program would improve access for vulnerable populations including patients in remote and regional areas, those experiencing homelessness, and those in custodial settings.
- 2.11 The Department is exploring possible HSD program reforms and this proposal would not have any significant impact on the scope of options likely to be considered.

3 PBAC Outcome

- 3.1 The PBAC endorsed extending prescribing eligibility to authorised nurse practitioners (NP) for Hep B, C and HIV medicines under the HSD program. Prescriber eligibility requirements currently in place for Hep B, C and HIV medicines in the *National Health (Highly specialised drugs program) Special Arrangement 2010* will be amended to include NPs.

4 Context for Decision

The PBAC helps decide whether and, if so, how medicines should be subsidised through the Pharmaceutical Benefits Scheme (PBS) in Australia. It considers applications regarding the listing of medicines on the PBS and provides advice about other matters relating to the operation of the PBS in this context. A PBAC decision in relation to PBS listings does not necessarily represent a final PBAC view about the merits of the medicine or the circumstances in which it should be made available through the PBS. The PBAC welcomes applications containing new information at any time.

5 Sponsor's Comment

The sponsor had no comment.