

TRANSITIONING OF HERCEPTIN SUBSIDY TO THE PHARMACEUTICAL BENEFITS SCHEME (PBS)

Frequently asked questions (FAQ)

1. What is Herceptin[®] used for?

- Herceptin[®] (trastuzumab) is used for the treatment of HER2 positive breast cancer.
- Herceptin belongs to a class of anti-cancer drugs called anti-Human Epidermal growth factor Receptor 2 (anti-HER2) monoclonal antibodies, also known as anti-HER2 drugs.

2. How is Herceptin supplied?

- Herceptin is currently subsidised for early stage and locally advanced HER2 positive breast cancer through the Pharmaceutical Benefits Scheme (PBS).
- From 1 July 2015, the Herceptin PBS listing will be extended to include treatment for Metastatic (Stage IV – also called secondary or advanced) HER2 positive breast cancer.

3. How was Herceptin supplied prior to the extended listing of Herceptin on the PBS?

- Prior to 1 July 2015, non-PBS-subsidised Herceptin was subsidised by the Australian Government free-of-charge to eligible patients for late stage metastatic breast cancer through the special Herceptin programme that was administered by the Department of Human Services outside the PBS.

4. What impact does transitioning of Herceptin subsidy have on existing patients?

- From 1 July 2015, existing patients will be transitioned to receive treatment with PBS-subsidised Herceptin via a “grandfather” restriction. As a result, the Herceptin Programme is no longer needed and will then be closed.
- From 1 July 2015, existing patients who have received less than 12 months of Herceptin will have the option to also receive PBS-subsidised treatment with pertuzumab (Perjeta) in addition to Herceptin.

5. What impact does transitioning of Herceptin subsidy have on new patients?

- From 1 July 2015, eligible patients with metastatic (stage IV) HER2 positive breast cancer can access PBS-subsidised Herceptin.
- All patients who are newly diagnosed with metastatic HER2 positive breast cancer will be able to access PBS-subsidised Herceptin.

6. Who made the decision to extend the listing of Herceptin on the PBS?

- 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 established Government policy with respect to medicines is to list cost-effective, innovative and clinically effective medicines on the PBS.
- Following a positive PBAC recommendation in November 2014, the Australian Government agreed to extend the listing of Herceptin on the PBS to include treatment for Metastatic (Stage IV) HER2 positive breast cancer.
- Further information is available on www.pbs.gov.au

7. What are the benefits of extending the listing of Herceptin on the PBS?

- The PBS restrictions for Herceptin for the treatment of Metastatic (Stage IV) HER2 positive breast cancer are consistent with the most robust evidence and will facilitate best clinical practice.

8. What patient co-payment arrangements will apply?

- Patients will pay the PBS co-payment (\$6.10 Concessional or \$37.70 General) the first time a prescription is dispensed. Repeat prescriptions will be dispensed free of charge (i.e. a patient will pay either \$6.10 or \$37.70 for the first injection/infusion on each script only). When a new prescription is written, the co-payment will again be payable the first time the script is dispensed.

9. Why do patients need to make a co-payment towards Herceptin when it was provided free-of-charge through the Herceptin programme?

- All PBS subsidised medicines require a patient co-payment.
- For example, from 1 July 2015, two new anti-HER2 drugs, Perjeta® (pertuzumab) and Kadcyła® (trastuzumab emtansine) will be listed on the PBS for metastatic (stage IV) HER2 positive breast cancer. A co-payment will also apply to them.