Expansion of the Closing the Gap Pharmaceutical Benefits Scheme Co‑payment Program –   
Information for Hospital Pharmacies

# What is the Closing the Gap (CTG) Pharmaceutical Benefits Scheme (PBS) Co-payment Program?

The CTG PBS Co-payment Program improves access to affordable PBS medicines for First Nations people living with, or at risk of, chronic disease, and who in their doctor’s opinion, would experience setbacks in the prevention or ongoing management of chronic disease if they did not take their prescribed medicine and would be unlikely to adhere to their medicines regimen without assistance through the program.

The cost of medicines remains a significant barrier to access for First Nations people. Under the CTG PBS Co-payment Program, eligible First Nations people who are registered on the CTG PBS Co-payment Register and who would normally pay the full general PBS co-payment amount, pay the concessional rate when obtaining PBS medicines from their local community pharmacy, approved medical practitioner, or private hospital. Eligible patients who would normally pay the concessional rate receive their PBS medicines for free, without having to pay a co-payment.

# What is changing?

* Prior to 1 July 2024, the CTG PBS Co-payment Program only applied to section 85 or ‘general schedule’ PBS medicines, when dispensed by a community pharmacy, approved medical practitioner or private hospital.
* From 1 July 2024, the program has been expanded to also apply to section 100 PBS medicines dispensed by community pharmacies, approved medical practitioners and private hospitals.
* This also includes all section 100 PBS medicines supplied under Continued Dispensing arrangements.
* From 1 January 2025, the CTG PBS Co-payment Program will be further expanded to include all PBS medicines (including section 85 and section 100 medicines) dispensed by public hospitals.

# What additional PBS medicines are now covered under the CTG PBS Co-payment Program?

* Additional PBS medicines covered under the expanded CTG PBS Co-payment Program encompass all PBS medicines included under the following five Section 100 Programs:
  + **Highly Specialised Drugs Program** – which includes opioid dependence treatment, hepatitis B, and HIV antiretroviral medicines.
  + **Efficient Funding of Chemotherapy Program**
  + **Botulinum Toxin Program**
  + **PBS Growth Hormone Program**
  + **In Vitro Fertilization (IVF) Program**

Details of each of these programs can be found on the PBS website at: [www.pbs.gov.au](http://www.pbs.gov.au/)

# How will this affect public hospitals in NSW or ACT?

* The changes to the CTG PBS Co-payment Program only relate to the range of available PBS medicines covered by the program. There will be no changes to current PBS medicine supply arrangements for community pharmacies, approved medical practitioners, or private and public hospitals.
* In NSW or the ACT, the changes from 1 January 2025 will only apply for those public hospitals which are currently approved to supply certain PBS medicines.
* Public hospitals in NSW or ACT, which are approved under section 94 of the *National Health Act 1953* to supply section 100 PBS medicines under the Highly Specialised Drugs Program and/or trastuzumab under the Efficient Funding of Chemotherapy Program will be able to provide benefits to CTG patients for those PBS medicines only.

# What is not changing?

* Any PBS prescriber or AHPRA registered Aboriginal and Torres Strait Health Practitioner registered with Medicare as a provider can register eligible First Nations people for the CTG PBS Co-payment Program via Health Professional Online Services (HPOS), if they are not already registered.
* PBS prescribers are no longer required to write or electronically print ‘CTG’ on eligible PBS scripts for registered First Nations patients. However, should a PBS prescriber wish, annotation of a PBS script may help hospital pharmacists to recognise that a patient is registered for the CTG PBS Co-payment Program when dispensing that patient’s PBS medicines.
* Hospital pharmacists will be able to confirm if a First Nations person is registered for the CTG PBS Co-payment Program via HPOS.
* New reason codes are being provided for PBS claiming which will also indicate to a pharmacist whether or not a First Nations person is registered for the CTG PBS Co-payment Program when dispensing a general schedule PBS script or section 100 PBS script.
* PBS scripts issued by public hospital prescribers will continue to be eligible under the program when dispensed by a community pharmacy.

**Please note:**

* Questions regarding changes to the dispensing software used within a hospital pharmacy should be directed to the respective software vendor.