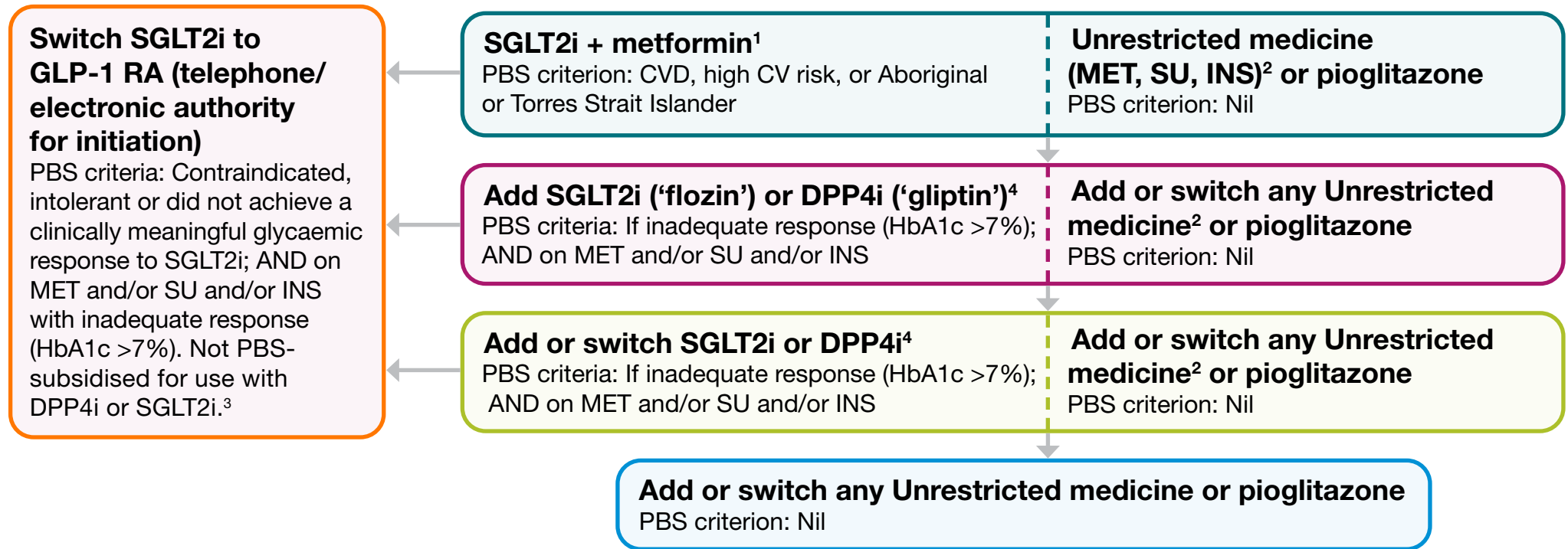




PBS-subsidised pharmacotherapy for T2DM

This algorithm provides an overview of the Pharmaceutical Benefits Scheme (PBS) restrictions for medicines for the treatment of type 2 diabetes mellitus (T2DM) at 1 April 2025 and is not intended to replace clinical guidance. For further details and the latest restriction requirements, please refer to the [PBS restrictions](#) for each medicine.



Abbreviations: CV—cardiovascular; CVD—cardiovascular disease; DPP4i—dipeptidyl peptidase 4 inhibitor; GLP-1 RA—glucagon-like peptide-1 receptor agonist; INS—insulin; MET—metformin; SGLT2i—sodium-glucose cotransporter 2 inhibitor; SU—sulfonylurea
60-day dispensing: All T2DM medicines are available for 60-day prescriptions, except GLP-1 RAs and insulin.
Fixed dose combinations (FDCs): FDCs of MET + DPP4i, MET + SGLT2i, and SGLT2i + DPP4i, are available on the PBS.

1. Unless contraindicated/intolerant to MET
2. Unrestricted medicines: metformin, sulfonylureas, insulin and acarbose.
3. Use of PBS-subsidised GLP-1 RAs in combination with an SGLT2i is permitted when the patient has T2DM, the SGLT2i is prescribed for an indication other than T2DM (e.g. chronic heart failure or chronic kidney disease), and the patient did not achieve a clinically meaningful glycaemic response to the SGLT2i.
4. Saxagliptin with dapagliflozin FDC requires telephone/electronic authority. Dapagliflozin with sitagliptin FDC and empagliflozin with linagliptin FDC have Authority Required (STREAMLINED) restrictions.