

Committee Secretary
Senate Standing Committees on Community Affairs
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Dear Ms Kohen

Re: Health Legislation Amendment (Prescribing of Pharmaceutical Benefits) Bill 2025

The Australian College of Nursing (ACN) appreciates the opportunity to review the **Health Legislation Amendment (Prescribing of Pharmaceutical Benefits) Bill 2025**. As the peak professional body representing nurses across all practice settings, ACN welcomes the amendments to this Bill, which supports registered nurses to increase access to timely and affordable health care.

ACN is a nursing organisation that remains a strong advocate for implementing the recommendations of the *Strengthening Medicare Taskforce Report*¹ and the *Unleashing the Potential of our Health Workforce – Scope of Practice Review*,² ACN supports and commends this Bill Amendment. As the Honourable Mark Butler MP noted in the second reading of the Bill, it is “*a win for nurses and a win for all Australians*”.³

Overall, the Health Legislation Amendment (Prescribing of Pharmaceutical Benefits) Bill 2025 appears comprehensive and fit for purpose in enabling authorised nurse prescribers to prescribe schedule medicines.

Comments

Clause 3:

Clause 3 states a ‘review or investigation can be by the Director of the PSR or by a PSR Committee that includes persons in the same profession as the practitioner under review.’ This appears reasonable and fair.

This determination has also prompted ACN to encourage members to apply for positions on these committees. ACN actively encourages nurses to apply for vacancies on relevant national health technology assessment (HTA) committees and sub-committees. Doing so would not only help ensure that review processes are fair and equitable but would also enable nurses to contribute to the

¹ Department of Health, Disability and Ageing (2022) Strengthening Medicare Taskforce Report (www.health.gov.au/resources/publications/strengthening-medicare-taskforce-report?language=en)

² Department of Health, Disability and Ageing (2024) Unleashing the Potential of our Health Workforce Scope of Practice Review

³ Butler, M. (2025) Health Legislation Amendment (Prescribing of Pharmaceutical Benefits) Bill 2025 Second Reading ([parlinfo.aph.gov.au/parlInfo/search/display/display.w3p;query=Id%3A"chamber%2Fhansard%2F28887%2F024"](http://parlinfo.aph.gov.au/parlInfo/search/display/display.w3p;query=Id%3A))

development of expert advice provided to the Minister for Health and Ageing and the Minister for Disability. In turn, this involvement gives nurses a voice in shaping the medication lists for which authorised nurse prescribers would be responsible.⁴ While nurses and midwives were a late inclusion to the recent recruitment drive to the HTA committees and sub-committees, we do hope to see more inclusion and representation of nurses and nursing in Government processes from the outset. Growth of nurse representation in these committees will be required to reflect the numbers of nurses in prescribing roles.

Item 10 – Subsection 84(1):

ACN welcomes the addition to this subsection, which will enable authorised nurse prescribers to supply medications under prescriber bag arrangements. Similarly, Item 20, Subsection 93AC, allows authorised nurse prescribers to supply pharmaceutical benefits directly to people through these arrangements. Together, these changes will enhance access to essential healthcare, particularly for vulnerable population groups, and better support nurses in delivering timely, person-centred care.

Item 11 – After section 84AAL:

It is worth noting that this provision states that if the Federal Health Minister either refuses to determine or repeals the requirements for a person to qualify as an eligible authorised nurse prescriber, that person (nurses), cannot become a prescriber. Future reviews of this amendment should examine whether a person has been denied eligibility to become a nurse prescriber, the circumstances surrounding such a determination and whether a permanent ban from prescribing is equitable and necessary.

ACN believe the amendments to the Bill are well aligned with other prescribing practitioners under the National Health Act 1953 and mirror the provisions introduced for midwives and nurse practitioners. This timely amendment will allow the first cohort of authorised nurse prescribers to work to their optimal scope of practice.

Importantly, ACN would also like to highlight the missed opportunity to provide authorised nurse prescribers with access to relevant Medical Benefits Schedule (MBS) items for simple basic pathology tests, to ensure high-quality, efficient and effective prescribing. This would be a sensible addition to allow fair, efficient and equitable service particularly for those Australians with limited access to health care and where pathology results are required to inform prescribed treatments e.g. Lithium levels for mental health treatments.

ACN also notes that this amendment to enable authorised nurse prescribers to prescribe certain pharmaceutical benefits under the PBS aligns with Article 12 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) promoting the right of individuals to the enjoyment of the highest attainable standard of physical and mental health (Article 12).⁵ This is particularly pertinent for those living in remote and rural Australia who may have limited access to health care.

⁴ Rice, F, (2025) Last minute opportunity! Post on [LinkedIn](#)

⁵ United Nations Human Rights Office of the High Commissioner (1966) International Covenant on Economic, Social and Cultural Rights, Part III Article 12 (www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights)

Other Comments:

As outlined in the National Health Act, the Federal Health Minister will determine which PBS-listed medicines nurse prescribers can access under this new framework. The Bill refers broadly to medicines “relating to nursing care,” creating a wide scope. This breadth provides valuable flexibility, allowing the list to evolve as nurse prescribing roles expand across specialised areas and diverse practice settings. ACN welcomes this adaptability.

However, it remains essential that thorough consultation and careful consideration inform decisions about which medications nurse prescribers are initially authorised to prescribe in Australia. Such an approach will support optimal health outcomes for Australians while avoiding unnecessary limitations on the scope of nurse prescribers. This will ensure the best possible outcomes for Australians without unnecessarily restricting nurse prescribers’ scope.

Recommendations:

ACN supports this amendment and recommends the legislation is reviewed within three years of authorised nurse prescribers commencing practice to ensure any unintended barriers are addressed. Thereafter, reviews should take place every five years unless circumstances dictate a sound reason for a review to occur before the agreed date.

If you have any enquiries about our response, please contact ACN at advisory@acn.edu.au

Yours sincerely,

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Chief Executive Officer

29 January 2026