

**PARLIAMENTARY INQUIRY QUESTION ON NOTICE**

**Department of Health and Aged Care**

**Standing Committee on Community Affairs**

**Inquiry into the Universal access to reproductive healthcare**

**28 February 2023**

**PDR Number: IQ23-000008**

**Last time a new oral contraceptive listed on the PBS**

**Spoken**

**Hansard page number: 53**

**Senator:** Larissa Waters

**Question:**

Senator WATERS: The government oversees the National Medical Workforce Strategy, which is a 10-year plan from 2021 to 2031, to support medical workforce to meet current and emerging healthcare needs. What responsibility does the department have for the current maternity health workforce shortages in rural Australia?

Ms Rishniw: I will give you a broad answer to that question in terms of the Medical Workforce Strategy. That strategy has been developed with the Commonwealth and the states together and is a topic of conversation at health ministers meetings. Predominantly, the maternity workforce in public hospitals is a matter for state and territory governments. As Ms McMillan has described, and I think Professor Stewart also, maternity services versus birthing services and the role of nurses and midwives, in particular, are a shared responsibility. So we are working together around those things. We fund things like Arminda Birthing on Country Centre of Excellence, but specific hospital and public hospital maternity services and staff are the responsibility of states and territories. While we were discussing that, I received an answer from the team that the last contraceptive to be listed on the PBS was Kyleena, in 2020.

Senator WATERS: Thank you. My question was about oral contraceptives, but perhaps you could take that on notice.

Ms Rishniw: We will.

**Answer:**

Currently, there are 23 brands of contraceptives listed on the PBS Schedule with different pharmaceutical forms and strengths. The majority of these brands are oral contraceptives. In 2021–22, the total value of Commonwealth subsidies for oral contraceptives exceeded \$4 million. **Table 1** shows the Australian government expenditure for all PBS contraceptive medicines listed on the PBS Schedule in 2021–22.

The most recent change to the listing of an oral contraceptive occurred on 1 December 2020 as an amendment to an existing PBS listing, with the addition to the PBS Schedule of the *Pirmella 1/35* brand of norethisterone in combination with ethinylestradiol.

The *Pirmella 1/35* brand had been recommended by the PBAC in October 2020 as a temporary listing for substitution with *Brevinor-1 28 Day* and *Norimin-1 28 Day*, both of which were in shortage during December 2020. This item had been temporarily listed for the purposes of addressing a short-term supply shortage and was subsequently deleted from the PBS Schedule on 1 May 2021. The deletion came at the request of the sponsor as it did not have arrangements in place to supply beyond January 2021, as the shortage had been resolved.

For the majority of PBS-listed medicines, patients pay one co-payment amount for one month's supply of the medicine. However, for PBS-listed oral contraceptives, patients pay only one co-payment amount for four months' supply. Also, up to two repeats may be prescribed, providing up to 12 months' supply of medicine without requiring a new prescription from a prescribing health practitioner.

From 1 January 2023, general (non-concessional) patients who have a Medicare card pay up to \$30 (plus any applicable premiums) for their PBS medicines, and concessional patients pay up to \$7.30 (plus any applicable premiums). The Australian Government pays the remaining cost (the Commonwealth subsidy), where applicable.

**Table 1: Australian government expenditure for all types of contraceptives listed on the PBS in 2021–22.**

Drug Name	Form and Strength	Brands	Government expenditure
Etonogestrel	Subcutaneous implant 68 mg	Implanon NXT	<b>\$14,597,529</b>
Levonorgestrel	Intrauterine drug delivery system 19.5 mg	Kyleena	<b>\$1,994,750</b>
	Intrauterine drug delivery system 52 mg	Mirena	<b>\$26,513,797</b>
	Tablets 30 micrograms, 28	Microlut 28	<b>\$467,970*</b>
Levonorgestrel + Ethinylestradiol	Pack containing 21 tablets 100 micrograms-20 micrograms and 7 inert tablets	Femme-Tab ED 20/100	<b>\$337,405*</b>
	Pack containing 21 tablets 125 micrograms-50 micrograms and 7 inert tablets	Microgynon 50 ED	<b>\$210,782*</b>
	Pack containing 21 tablets 150 micrograms-30 micrograms and 7 inert tablets	Femme-Tab ED 30/150 Eleanor 150/30 ED Levlen ED Micronelle 30 ED Lenest 30 ED Nordette 28 <sup>1</sup> Monofeme 28 Evelyn 150/30 ED	<b>\$3,147,624*</b>
	Pack containing 6 tablets 50 micrograms-30 micrograms, 5 tablets 75 micrograms-40 micrograms, 10 tablets 125 micrograms-30 micrograms and 7 inert tablets	Logynon ED Trifeme 28 Triphasil 28 Triquilar ED	<b>\$207,269*</b>

Medroxyprogesterone	Injection containing medroxyprogesterone acetate 150 mg in 1 mL	Depo-Ralovera Depo-Provera	<b>\$2,243,958</b>
Norethisterone	Tablets 350 micrograms, 28	Noriday 28 Day	<b>\$87,922*</b>
Norethisterone + Ethinylestradiol	Pack containing 21 tablets 1 mg-35 micrograms and 7 inert tablets	Norimin-1 28 Day Brevinor-1	<b>\$104,475*</b>
	Pack containing 21 tablets 500 micrograms-35 micrograms and 7 inert tablets	Brevinor <sup>2</sup> Norimin 28 Day	<b>\$89,176*</b>
Norethisterone + Mestranol	Pack containing 21 tablets 1 mg-50 micrograms and 7 inert tablets	Norinyl-1/28 <sup>3</sup>	<b>\$9,009*</b>

\*Pharmaceutical oral forms

<sup>1</sup> Delisted 31 March 2022

<sup>2</sup> Delisted 28 February 2022

<sup>3</sup> Available for Supply Only from 1 September 2022