

4 August 2015

Proposal in relation to Dietitian Prescribers

PHARMAC is seeking feedback on a proposal to amend the Pharmaceutical Schedule rules to support the new prescribing rights that have been granted to Dietitian Prescribers. These changes would be effective from 1 October 2015.

Feedback sought

PHARMAC welcomes feedback on this proposal. To provide feedback, please submit it in writing by **Friday, 21 August 2015** to:

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All feedback received before the closing date will be considered by PHARMAC's Board (or its delegate) prior to making a decision on this proposal.

Feedback we receive is subject to the Official Information Act 1982 (OIA) and we will consider any request to have information withheld in accordance with our obligations under the OIA. Anyone providing feedback, whether on their own account or on behalf of an organisation, and whether in a personal or professional capacity, should be aware that the content of their feedback and their identity may need to be disclosed in response to an OIA request.

We are not able to treat any part of your feedback as confidential unless you specifically request that we do, and then only to the extent permissible under the OIA and other relevant laws and requirements. If you would like us to withhold any commercially sensitive, confidential proprietary, or personal information included in your submission, please clearly state this in your submission and identify the relevant sections of your submission that you would like it withheld. PHARMAC will give due consideration to any such request

Details of the proposal

PHARMAC is proposing to amend the Pharmaceutical Schedule to give effect to the recent Government decision to create a Dietitian Prescriber category of designated prescribers.

We are proposing to implement this change by deleting rule 3.5 of Section A of the Pharmaceutical Schedule (*Dietitians' Prescriptions*) – a rule that currently limits subsidies being paid on dietitians' prescriptions to a specified list of products. Removing this rule would then enable dietitians to prescribe anything for subsidy that is consistent with their scope of practice.

As part of this change, the explanatory notes regarding dietitian prescribing at the start of Section D of the Schedule would also be removed, and the associated information would be removed from Pharmaceutical Schedule database.

Implementing the change in this way would mean that, should the list of products that dietitians can prescribe change in the future, subsidies would automatically be made available without further need to amend the Schedule.

These changes would come into effect from 1 October 2015.

Background

Dietitians are health practitioners regulated under the Health Practitioners Competency Assurance Act 2003 by the Dietitians Board.

In 2010, PHARMAC provided dietitians with the ability to generate subsidies for special foods and some related non-prescription medicines in the Pharmaceutical Schedule, such as vitamin products. This coincided with the development of a category of Dietitian Prescriber by the Dietitians Board. At that time, Dietitian Prescribers did not have the ability to prescribe any prescription medicines.

As part of that change, PHARMAC specifically highlighted in the Pharmaceutical Schedule the pharmaceuticals that would be valid for subsidy on the prescription of a dietitian. This is the only group of practitioners that the Pharmaceutical Schedule manages in this way.

Dietitian Prescribers have recently been classified as designated prescribers under the Medicines Act 1981. This has expanded Dietitian Prescribers' scope of practice to include the prescription of cholecalciferol (vitamin D), zinc and pancreatic enzymes. As prescribing rights under the Medicines Act and subsidy rights under the Pharmaceutical Schedule are not automatically aligned, it is necessary to change the Pharmaceutical Schedule rules to give full practical effect to the recent Government decision. The proposed changes will mean Dietitian Prescribers are treated consistently with other prescriber groups in the Pharmaceutical Schedule.