

BESTMED MEDICINE FORMULARY FOR CDL-CHRONIC (CHRONIC DISEASE LIST) CONDITIONS

- Benefits are subject to the following:
 - ✓ Pre-authorisation
 - ✓ Bestmed guidelines
 - ✓ Bestmed protocols
 - Below medicines are first line treatment. Second line medicines not listed, would be considered if clinical funding criteria is met as per protocol – without penalties.
 - ✓ Mediscor Reference Price (MRP)
This price represents the reasonable price in the market place for a particular group of generic equivalent medicines which is reviewed and updated regularly. MRP sets a maximum reimbursable price for a list of generically similar medicines with a cost lower than that of the original medicine. There may be instances where a generic alternative costs more than the set MRP. If you opt to use the original medicine and a generic alternative is available, or you use a medicine that costs more than the MRP, you will have to pay the difference between the price of the chosen medicine and that of MRP.
- This formulary is effective from 1 January 2025.
- This formulary is subject to change without notice.
- **ONLY the following medicine classes will be considered for Beat1, Beat2 and Rhythm1:**
 - ✓ Anti-histamines (relative to Parkinson's)
 - ✓ Dopaminergic agents
 - ✓ Monoamine oxidase type B inhibitors

YES = formulary

NO = non-formulary with co-payment (CO-PAY)

NO BENEFIT = excluded*

*Possible funding without penalty, if first and second line treatment failed.

PARKINSON DISEASE

ACTIVE INGREDIENT	BEAT1/BEAT1 Network	BEAT2/BEAT2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
A										
AMANTADINE 100MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
B										
BIPERIDEN 2MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
BROMOCRIPTINE 2.5MG	NO BENEFIT	NO BENEFIT	YES	YES	YES	YES	YES	YES	NO BENEFIT	YES
BROMOCRIPTINE 5MG	NO BENEFIT	NO BENEFIT	YES	YES	YES	YES	YES	YES	NO BENEFIT	YES
C										
CARBIDOPA 25MG/ LEVODOPA 100MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
CARBIDOPA 25MG/ LEVODOPA 250MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
L										
LEVODOPA 100MG/ BENSERAZIDE 25MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
LEVODOPA 200MG/ BENSERAZIDE 50MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
O										
ORPHENADRINE 50MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES

ACTIVE INGREDIENT	BEAT1/BEAT1 Network	BEAT2/BEAT2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
<u>P</u>										
PRAMIPEXOLE 0.125MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE 0.25MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE 1MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE ER 0.375MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE ER 0.75MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE ER 1.5MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE ER 3MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
PRAMIPEXOLE ER 4.5MG	NO 30% CO-PAY	NO 30% CO-PAY	YES	YES	YES	YES	YES	YES	NO 30% CO-PAY	YES
<u>R</u>										
RASAGILINE 1MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
ROPINIROLE 0.25MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
ROPINIROLE 0.5MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
ROPINIROLE 1MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES

ACTIVE INGREDIENT	BEAT1/BEAT1 Network	BEAT2/BEAT2 Network	BEAT3/BEAT3 Network/BEAT3 Plus	BEAT4	PACE1	PACE2	PACE3	PACE4	RHYTHM1	RHYTHM2
ROPINIROLE 2MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
ROPINIROLE 5MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES
S										
SELEGILINE 5MG	YES	YES	YES	YES	YES	YES	YES	YES	YES	YES