BESTMED MEDICINE FORMULARY FOR PRESCRIBED MINIMUM BENEFITS (PMB) CONDITIONS

bestMed
personally yours

- 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.
  - ✓ MediKredit Reference Price (MMAP)
    This is a reference pricing model applicable to all medicines with generic equivalents or biosimilars. MMAP sets the maximum reimbursable price for a list of generically similar or biosimilar products with a cost lower than that of the original medicine. This means that if you opt to use a medicine that is more expensive than the MMAP, you will have to pay the difference between the price of the chosen medicine and that of MMAP.
- This formulary is effective from 1 January 2027.
- This formulary is subject to change without notice.
- Available on all Bestmed options.

## FIBROSING ALVEOLITIS

| ACTIVE INGREDIENT | ALL OPTIONS |
|---|---|
| **A** | |
| AZATHIOPRINE 50MG | YES |
| **B** | |
| BETAMETHASONE 0.6MG/5ML SYRUP | YES |
| **C** | |
| CYCLOPHOSPHAMIDE 50MG | YES |
| **H** | |
| HYDROCORTISONE 10MG | YES |
| **M** | |
| METHYLPREDNISOLONE 4MG | YES |
| METHYLPREDNISOLONE 16MG | YES |
| **P** | |
| PREDNISONE 5MG | YES |



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