

Necessary components: handwritten methadone script

New Opioid Treatment Program (OTP) script requirements for PBS arrangements from 1 July 2023 onward

A **PBS-RPBS authority prescription** is required

The **prescriber's name and practice address details** are required (public prescriber should also include the hospital provider number)

The **PBS prescriber number** is required

In NSW, the **patient's date of birth** is required

Selecting either **PBS or RPBS prescription** is required

The **name of the drug, form and strength** is required

The **total quantity** for up to 28 days is required (for methadone, remember to add 'mL' to the quantity); in NSW, you must write this **in words and figures**

The **number of repeats** is required; in NSW, the **interval of repeats**³ is also required (the interval is the **minimum number of days** between dispensings)

Dr Judy Hamilton
Private Practice
Unit 4 Ottawa Health Centre
45 Slater Ave
OTTAWA NSW 2222
Phone: (02) 1111 1111

20346704
Patient's Medicare no. 2222-33333-40
Patient's Ref. no. 5
Patient's full name Ziggy Stardust
Patient's address 23 Heddon St, the Nazz NSW
DOB: 8/1/77 Postcode 2999
Entitlement no. 1111-222-333B
Concessional or dependant, RPBS beneficiary or Safety Net concession cardholder

Authorisation is requested for the following:
(Tick appropriate boxes)
PBS prescription from state manager, Medicare Australia
RPBS prescription from the authorised delegate of the Repatriation Commission
Brand substitution not permitted

Only one item per form
METHADONE oral liquid 5mg/mL
80 mg (16 mL) oral daily

Dosage directions **4 takeaway doses per week**
(four hundred + forty eight)
Quantity **448 mL**
No. of repeats **2 (every 28 days)**
Date **23/6/23**

Medicare Australia/DVA use Repeats Phone/Integrate approval 9
Patient's or agent's signature _____ Date of supply _____
Agent's address _____

Privacy note: The information on this form, including your Medicare, Centrelink and/or Department of Veterans' Affairs number, will be used to assess your entitlement to benefits under the Pharmaceutical Benefits Scheme (PBS) or the Repatriation Pharmaceutical Benefits Scheme (RPBS) and to determine payments due to approved suppliers. This information will also be used to record details of an under co-payment prescription (where there is no entitlement to a payment of benefit under PBS or RPBS). With your consent, the PBS approved supplier or PBS Prescriber may store your details for use on future prescriptions. The collection of this information is authorised by the National Health Act 1953. This information may be disclosed to PBS Prescribers, the Department of Health and Families, Department of Veterans' Affairs, Centrelink, the Department of Human Services or as authorised or required by law. 4006_05/11

Disease or purpose for which benefit required or clinical justification for use of item

Patient's age if under 18 _____

Has the patient previously received an authority for this medicine? Yes No
Prescriber's phone no. () _____
Phone approvals - retain this copy for 12 months.
Written approvals - forward all 3 copies to Medicare Australia/DVA.
4006_05/11

Adding a **dosing point** is not required, but prescribers may add it

If you would like the dosing to occur in the future, you can add a **dosage window**¹

A **PBS Authority Prescription Number** is required²

The **patient's Medicare, name and residential address** information is required

If the patient has a **concession card**, add it here – this will allow them to receive the reduced PBS rate

The **daily dose and other dosage directions** are required; in NSW, you don't have to write it in words and numbers, but **takeaway** details must be on the script

The prescriber's **signature** is required

The **date** of the prescription is required; it cannot be forward or back dated

If **prescribing up to the maximum quantity**: script must include the relevant **streamlined authority code**⁴. Streamlined authority codes for OTP medicines are available on the PBS website.

If **prescribing for increased quantities**: script will require an **authority approval number**, which may be sought through Services Australia either by calling 1800 888 333 (PBS), 1800 552 580 (RPBS), or applying online.

- Required elements
- Optional elements

¹ In NSW, a prescription is valid for dispensing for 6 months from the day it is written. The inclusion of a dosage window does not affect the validity of the prescription or change the expiry date, or affect the quantity and repeats prescribed. A prescriber can amend the dosage window verbally or in writing to the dosing point (i.e. a new prescription is not required).

² A PBS Authority Prescription Number is pre-prepared on an authority prescription pad or generated through prescribing software for printed prescriptions or electronic prescriptions. Note: The exact location of this number on the prescription may vary.

³ Prescribers should consider having shorter intervals than the maximum 28 days. Shorter intervals does not mean the script has to be dispensed on that day but provides patients with more flexibility as to when they can have their repeat prescription dispensed. For example, a patient can have a script that repeats every 26 days, but only has the next script dispense on day 28 (or later if there is remaining supply on the previous script). This shorter interval allows for unforeseen circumstances or atypical dosing arrangements (e.g. patients receiving a monthly depot buprenorphine injection every 3 weeks).

⁴ PBS streamlined authority codes and authority approval numbers are different from the NSW authority number (provided by the NSW Pharmaceutical Regulatory Unit, PRU). The NSW authority number does not need to be written on the prescription.

Disclaimer: The NSW Ministry of Health drafted these example scripts based on publicly available information on PBS authority prescription requirements, including the factsheet for Opioid Dependence Treatment (ODT) prescribers provided by the Australian Government. The Australian Government has not reviewed these example prescriptions for compliance, but the NSW Pharmaceutical Regulatory Unit reviewed for compliance in NSW.

Necessary components: handwritten sublingual buprenorphine script

New Opioid Treatment Program (OTP) script requirements for PBS arrangements from 1 July 2023 onward

A **PBS-RPBS authority prescription** is required

The **prescriber's name and practice address details** are required (public prescriber should also include the hospital provider number)

The **PBS prescriber number** is required

In NSW, the **patient's date of birth** is required

Selecting either PBS or RPBS prescription is required

The **name of the drug, form and strength** is required

The **total quantity** for up to 28 days is required; in NSW, you must write this in words and figures

The **number of repeats** is required; in NSW, the **interval of repeats**³ is also required (the interval is the **minimum number of days** between dispensings)

- Required elements
- Optional elements

Required elements (red circles):

- RPBS authority prescription (Not valid unless authorised by delegate)
- Dr Judy Hamilton, Private Practice, Unit 4 Ottawa Health Centre, 45 Slater Ave, OTTAWA NSW 2222, Phone: (02) 1111 1111
- Prescriber's Medicare no. 20346704
- Patient's Medicare no. 5555-6666-7
- Patient's full name: Mikalya Dorry
- Patient's address: 8 Scott Street, Ottawa NSW
- Date of birth: 1/1/2000
- Postcode: 2888
- Entitlement no.: 444-555-666X
- RPBS prescription from state manager, Medicare Australia (checked)
- Brand substitution not permitted (unchecked)
- Only one item per form: Buprenorphine 8mg + Naloxone 2mg (Suboxone) Sublingual Film 16mg S/L daily
- Dosage directions: 6 takeaway doses per week
- Quantity: 56 (over 23 days)
- Repeats: 2 (over 23 days)
- Prescriber's signature and date: 27/6/23
- Medicare Australia/DVA use (checked)
- Agent's address (blank)
- Privacy notes (small print)
- Disease or purpose for which benefit required or clinical justification for use of item (blank)
- Patient's age if under 18 (blank)
- Has the patient previously received an authority for this medicine? Yes No
- Prescriber's phone no. () () ()
- Phone approvals - retain this copy for 12 months. Written approvals - forward all 3 copies to Medicare Australia/DVA. 4006_05/11

Optional elements (blue circles):

- Dosed at: 222 Pharmacy
- From: 5/7/23 - 26/9/23 Inclusive
- Patient's Medicare no. 7
- RPBS Authority Prescription Number (blank)
- RPBS prescription from the authorised delegate of the Repatriation Commission (unchecked)
- Safety Net entitlement cardholder (unchecked)
- Concessional or dependent, RPBS beneficiary or Safety Net concession cardholder (checked)
- RPBS Authority Prescription Number (blank)
- Quantity: 56 (over 23 days)
- Repeats: 2 (over 23 days)
- Date of supply: 27/6/23
- Agent's address (blank)
- Streamlined authority code (blank)
- Authority approval number (blank)

Adding a **dosing point** is not required, but prescribers may add it

If you would like the dosing to occur in the future, you can add a **dosage window**¹

A **PBS Authority Prescription Number** is required²

The **patient's Medicare, name and residential address** information is required

If the patient has a **concession card**, add it here – this will allow them to receive the reduced PBS rate

The **daily dose and other dosage directions** are required; in NSW, you don't have to write it in words and numbers, but **takeaway** details must be on the script

The **prescriber's signature** is required

The **date** of the prescription is required; it cannot be forward or back dated

If **prescribing up to the maximum quantity**: script must include the relevant **streamlined authority code**⁴. Streamlined authority codes for OTP medicines are available on the PBS website.

If **prescribing for increased quantities**: script will require an **authority approval number**, which may be sought through Services Australia either by calling 1800 888 333 (PBS), 1800 552 580 (RPBS), or applying online.

¹ In NSW, a prescription is valid for dispensing for 6 months from the day it is written. The inclusion of a dosage window does not affect the validity of the prescription or change the expiry date, or affect the quantity and repeats prescribed. A prescriber can amend the dosage window verbally or in writing to the dosing point (i.e. a new prescription is not required).

² A PBS Authority Prescription Number is pre-prepared on an authority prescription pad or generated through prescribing software for printed prescriptions or electronic prescriptions. Note: The exact location of this number on the prescription may vary.

³ Prescribers should consider having shorter intervals than the maximum 28 days. Shorter intervals does not mean the script has to be dispensed on that day but provides patients with more flexibility as to when they can have their repeat prescription dispensed. For example, a patient can have a script that repeats every 26 days, but only has the next script dispense on day 28 (or later if there is remaining supply on the previous script). This shorter interval allows for unforeseen circumstances or atypical dosing arrangements (e.g. patients receiving a monthly depot buprenorphine injection every 3 weeks).

⁴ PBS streamlined authority codes and authority approval numbers are different from the NSW authority number (provided by the NSW Pharmaceutical Regulatory Unit, PRU). The NSW authority number does not need to be written on the prescription.

Disclaimer: The NSW Ministry of Health drafted these example scripts based on publicly available information on PBS authority prescription requirements, including the factsheet for Opioid Dependence Treatment (ODT) prescribers provided by the Australian Government. The Australian Government has not reviewed these example prescriptions for compliance, but the NSW Pharmaceutical Regulatory Unit reviewed for compliance in NSW.

Necessary components: handwritten depot buprenorphine script

New Opioid Treatment Program (OTP) script requirements for PBS arrangements from 1 July 2023 onward

A **PBS-RPBS authority prescription** is required

The **prescriber's name and practice address details** are required (public prescriber should also include the hospital provider number)

The **PBS prescriber number** is required

In NSW, the **patient's date of birth** is required

Selecting either **PBS or RPBS prescription** is required

The **name of the drug, form and strength** is required

The **total quantity** for up to 28 days is required; in NSW, you must write this **in words and figures**

The number of **repeats** is required; in NSW, the **interval of repeats**² is also required (the interval is the **minimum number of days** between dispensings)

- Required elements
- Optional elements

RPBS authority prescription
Not valid unless authorised by delegate

Dr Judy Hamilton
Private Practice
Unit 4 Ottawa Health Centre
45 Slater Ave
OTTAWA NSW 2222
Phone: (02) 1111 1111

Dose at:
City Pharmacy

20346704
Patient's Medicare no. 4444-8888-1
Patient's full name Avery Smith
Patient's address 2 Hamilton Ave Toronto NSW
DOB: 5/2/1990 Postcode 2222
Patient's Ref no. 2

Entitlement no. [redacted]
Safety Net entitlement cardholder Concessional or dependant, RPBS beneficiary or Safety Net concession cardholder

Authorisation is requested for the following:
(Tick appropriate boxes)
 PBS prescription from state manager, Medicare Australia
 RPBS prescription from the authorised delegate of the Repatriation Commission
 Brand substitution not permitted

Only one item per form
 Buprenorphine Monthly 128 mg injection (Buvidal)

Dosage directions: Subcut every 4 weeks
 Quantity: 1 (one)
 No. of repeats: 2 (every 26 days)
 Date: 26/6/23

Medicare Australia/DVA use Repeats Phone/Distance approval 99 [redacted]

I declare that I have received this medicine and the information relating to any entitlement to a pharmaceutical benefit is correct.

Disease or purpose for which benefit required or clinical justification for use of item

Has the patient previously received an authority for this medicine? Yes No

Privacy note: The information on this form, including your Medicare, Concession and/or Department of Veterans' Affairs number, will be used to assess your entitlement to benefits under the Pharmaceutical Benefits Scheme (PBS) or the Repatriation Pharmaceutical Benefits Scheme (RPBS) and to determine payments due to approved suppliers. This information will also be used to record details of an under-claim prescription where there is no entitlement to a payment of benefit under PBS or RPBS. With your consent, the PBS approved supplier or PBS Prescriber may store your details for use on future prescriptions. The collection of this information is authorised by the National Health Act 1983. This information may be disclosed to PBS Prescribers, the Department of Health and Aging, Department of Veterans' Affairs, Concession, the Department of Human Services or as authorised or required by law. 4006_05/11

Adding a **dosing point** is not required, but prescribers may wish to add it

A **PBS Authority Prescription Number** is required¹

The **patient's Medicare, name and residential address** information is required

The **daily dose and other dosage directions** are required; in NSW, you don't have to write it in words and numbers

The prescriber's **signature** is required

The **date** of the prescription is required; it cannot be forward or back dated

If **prescribing up to the maximum quantity**: script must include the relevant **streamlined authority code**³. Streamlined authority codes for OTP medicines are [available on the PBS website](#).

If **prescribing for increased quantities**: script will require an **authority approval number**, which may be sought through Services Australia either by calling 1800 888 333 (PBS), 1800 552 580 (RPBS), or applying [online](#).

¹ A PBS Authority Prescription Number is pre-prepared on an authority prescription pad or generated through prescribing software for printed prescriptions or electronic prescriptions. Note: The exact location of this number on the prescription may vary.

² Prescribers should consider having shorter intervals than the maximum 28 days. Shorter intervals does not mean the script has to be dispensed on that day but provides patients with more flexibility as to when they can have their repeat prescription dispensed. For example, a patient can have a script that repeats every 26 days, but only has the next script dispense on day 28 (or later if there is remaining supply on the previous script). This shorter interval allows for unforeseen circumstances or atypical dosing arrangements (e.g. patients receiving a monthly depot buprenorphine injection every 3 weeks).

³ PBS streamlined authority codes and authority approval numbers are different from the NSW authority number (provided by the NSW Pharmaceutical Regulatory Unit, PRU). The NSW authority number does not need to be written on the prescription.

Disclaimer: The NSW Ministry of Health drafted these example scripts based on publicly available information on PBS authority prescription requirements, including the factsheet for Opioid Dependence Treatment (ODT) prescribers provided by the Australian Government. The Australian Government has not reviewed these example prescriptions for compliance, but the NSW Pharmaceutical Regulatory Unit reviewed for compliance in NSW.

Necessary components: computer-generated depot buprenorphine script

New Opioid Treatment Program (OTP) script requirements for PBS arrangements from 1 July 2023 onward

The **prescriber's name and practice address details** are required (public prescriber should also include the hospital provider number)

The **PBS prescriber number** is required

The **date of the prescription** is required; it cannot be forward or back dated

Selecting either PBS or RPBS prescription is required

The **name of the drug, form and strength** is required

The **total quantity** for up to 28 days is required; in NSW, you must write this in **words and figures**

The number of **repeats** is required; in NSW, the **interval of repeats**² is also required (the interval is the **minimum number of days** between dispensings)

Adding a **dosing point** is not required, but prescribers may wish to add it

The **patient's Medicare, name and residential address** information is required

In NSW, the **patient's date of birth** is required

A **PBS Authority Prescription Number** is required¹

The **daily dose and other dosage directions** are required; in NSW, you don't have to write it in words and numbers

The prescriber's **signature** is required (must be handwritten, not digital)

If **prescribing up to the maximum quantity**: script must include the relevant **streamlined authority code**³. Streamlined authority codes for OTP medicines are [available on the PBS website](#).

If **prescribing for increased quantities**: script will require an **authority approval number**, which may be sought through Services Australia either by calling 1800 888 333 (PBS), 1800 552 580 (RPBS), or applying [online](#).

In NSW, prescribers are no longer required to rewrite certain components (such as name of drug, quantity, strength, duration or repeats and dosing directions) in their own handwriting on computer-generated scripts provided the prescription is sent directly to the client's dosing supply point and is not provided to the client. See B (4) of the NSW Health [Criteria for Issuing Printed Computer-Generated Prescriptions](#).

- Required elements
- Optional elements

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² Prescribers should consider having shorter intervals than the maximum 28 days. Shorter intervals does not mean the script has to be dispensed on that day but provides patients with more flexibility as to when they can have their repeat prescription dispensed. For example, a patient can have a script that repeats every 26 days, but only has the next script dispense on day 28 (or later if there is remaining supply on the previous script). This shorter interval allows for unforeseen circumstances or atypical dosing arrangements (e.g. patients receiving a monthly depot buprenorphine injection every 3 weeks).

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