

BESTMED MEDICINE FORMULARY FOR PRESCRIBED
MINIMUM BENEFITS (PMB) 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 2024.
- This formulary is subject to change without notice.
- Available on all Bestmed options.

POLYCYSTIC OVARIAN SYNDROME

ACTIVE INGREDIENT	ALL OPTIONS
<u>D</u>	
DESOGESTREL 0.15MG/ ETHINYLESTRADIOL 0.02MG	YES
DESOGESTREL 0.15MG/ ETHINYLESTRADIOL 0.03MG	YES
DROSPIRENONE 3MG/ ETHINYLESTRADIOL 0.03MG	YES
<u>G</u>	
GESTODENE 0.06MG/ ETHINYLESTRADIOL 0.015MG	YES
GESTODENE 0.075MG/ ETHINYLESTRADIOL 0.02MG	YES
GESTODENE 0.075MG/ ETHINYLESTRADIOL 0.03MG	YES
GESTODENE 0.05MG/ ETHINYLESTRADIOL 0.03MG & GESTODENE 0.07MG/ ETHINYLESTRADIOL 0.04MG & GESTODENE 0.1MG/ ETHINYLESTRADIOL 0.03MG	YES
<u>L</u>	
LEVONORGESTREL 0.05MG/ ETHINYLESTRADIOL 0.05MG & LEVONORGESTREL 0.125MG/ ETHINYLESTRADIOL 0.05MG	YES
LEVONORGESTREL 0.05MG/ ETHINYLESTRADIOL 0.03MG & LEVONORGESTREL 0.075MG/ ETHINYLESTRADIOL 0.04MG & LEVONORGESTREL 0.125MG/ ETHINYLESTRADIOL 0.03MG	YES
LEVONORGESTREL 0.15MG/ ETHINYLESTRADIOL 0.03MG	YES
LEVONORGESTREL 0.25MG/ ETHINYLESTRADIOL 0.05MG	YES

ACTIVE INGREDIENT	ALL OPTIONS
<u>M</u>	
METFORMIN 500MG	YES
METFORMIN 850MG	YES
METFORMIN 1000MG	YES
METFORMIN XR 500MG	YES
METFORMIN XR 1000MG	YES
<u>N</u>	
NORGESTIMATE 0.25MG/ ETHINYLESTRADIOL 0.035MG	YES
NORGESTREL 0.5MG/ ETHINYLESTRADIOL 0.05MG	YES