



Australian Government

Department of Health

Active Ingredient Prescribing

The 2018-19 Budget announced the Government's commitment to the development and implementation of electronic prescribing, including active ingredient prescribing. Active Ingredient Prescribing is expected to provide a number of benefits, including:

- Empowering and equipping prescriber communities and patients to better understand the active ingredients in their medicines;
- Reducing patient safety concerns relating to patients taking multiple doses of medicines due to confusion;
- Assisting conversations between pharmacists and patients concerning generic alternatives;
- Decreasing out-of-pocket expenses for patients by promoting the uptake of generic and biosimilar medicines;
- Improving the financial sustainability of the Pharmaceutical Benefits Scheme (PBS), with savings to be reinvested to list new medicines and health technologies on the PBS;
- Enhancing prescribers' stewardship role of the PBS, and encouraging more sustainable prescribing practices; and
- Aligning Australian prescribing practices with International standards.

Preserving prescribers' clinical decision making autonomy and choice of medicine has been a major consideration throughout the development of the implementation approach for Active Ingredient Prescribing, which will become mandatory on 1 February 2021. Prescribers will continue to be able to choose a specific brand of medicine for their patient, and can include a brand name on the prescription wherever they believe it is necessary for the treatment of their patient.


Implementation

To implement Active Ingredient Prescribing, The Department of Health has amended the *National Health (Pharmaceutical Benefits) Regulations 2017* to require the inclusion of active ingredients on all Pharmaceutical Benefits Scheme (PBS) and Repatriation PBS (RPBS) prescriptions, except for:

- Handwritten prescriptions;
- Paper based medication charts in the residential aged care sector;
- Medicinal items with four or more active ingredients; and
- Other items determined by the Secretary for safety or practicality reasons.

Prescribers may continue to include a brand name on prescriptions wherever clinically necessary for their patient. Where a brand name is included on prescriptions, the active ingredient must appear first. Prescribers also retain the ability to disallow brand substitution. Prescribing software is not able to automatically include brand names on prescriptions by default.

The Department of Health is working with the clinical software industry to make appropriate changes to their software to align with the amended legislative requirements from 31 October 2019. The legislative changes include a transition period to enable the changes to be made and to ensure prescribers are using software which generates prescriptions in accordance with these requirements by 1 February 2021.



To support the implementation of Active Ingredient Prescribing, the Department has engaged the Australian Commission on Safety and Quality in Healthcare to develop clinical support documentation for prescriber. This includes Australian Guidelines for Active Ingredient Prescribing and a list of medicines prescribers may want to consider prescribing by active ingredient and brand, if it is necessary for the clinical treatment of their patient. These support materials will be developed in consultation with relevant stakeholders, including a number of clinical groups.

Activities to Support Consistent and Standardised Medicines Information

Active Ingredient Prescribing is part of a wider government initiative to ensure consistent and standardised medicines information to support safe and appropriate use of medicines. Consumers' ability to identify a medicine's active ingredient is critical for medicines safety. Confusion surrounding active ingredients within medicines is a prevalent medicines safety issue, which poses significant risk to consumers. Research indicates that a substantial number of consumers only know their medicines by their brand name, and can easily double dose if they are inadvertently prescribed two different brands of medicine containing the same active ingredient. This risk is exacerbated for elderly or chronically ill patients who are often required to take a number of medicines.

Presentation of the active ingredient name in all places where the consumer accesses medicines information is central to medication safety. A range of supporting activities have been undertaken by the Commonwealth to increase education and awareness around the active ingredients in medicines, including:

- The Therapeutic Goods Administration have amended medicine labelling requirements to make active ingredients more visible on medicines packaging;
- The Australian Commission on Safety and Quality in Health Care have developed National Guidelines for On-Screen Display of Medicines Information, which requires Active Ingredients to appear on screen before brand names;
- The Australian Commission on Safety and Quality in Health Care are in the process of developing a National Standard for Dispensed Prescription Medicine Labels which will recommend mandatory inclusion of active ingredients for dispense view; and
- The Australian Digital Health Agency's My Health Record Shared Health Summary includes active ingredients for medicines before brand names.

Communications

The Department of Health has undertaken a range of communication activities to ensure that prescribers, pharmacists and consumers are aware of the changes for Active Ingredient Prescribing. Materials have been distributed through a variety of channels to ensure all stakeholders are aware of the changes required to enable Active Ingredient Prescribing.

Further enquiries on the implementation of AIP should be directed to aiprescribing@health.gov.au.
