Practice Update

November 2024

Changes to funding for stimulant treatments

From 1 December 2024, the Special Authority renewal criteria will be removed from modafinil, methylphenidate and dexamfetamine. This means that any patients with new Special Authority approval will be able to access funded treatment without the requirement for this approval to be renewed. **Patients with current or recent (expired within the last two years) Special Authority approval for these treatments will automatically be issued an approval that is valid without the need for it to be renewed.** Pharmac and Health New Zealand will manage this so prescriber do not need to reapply for renewal.

From 1 December 2024, lisdexamfetamine will be also funded when prescribed for people with Attention Deficit Hyperactivity Disorder (ADHD) who meet certain eligibility criteria, including those who currently privately fund lisdexamfetamine if they met the eligibility criteria when they first started treatment with lisdexamfetamine. There will also be some changes to those eligible to apply for Special Authority for dexamfetamine.

However there have been no changes to the legal requirement for stimulant treatment. As per Regulation 22 of the *Misuse of Drugs Regulations 1977* dexamfetamine, methylphenidate and lisdexamfetamine may only be prescribed by a practitioner with a specified vocational scope of practice, or a practitioner acting on their written recommendation. Each prescription will still need to include the name of the specialist, but due to the funding change, the recommendation no longer needs to be renewed in writing every 2 years.

Agent	Who can apply for Special Authority?	Misuse of Drugs Regulations 1977 restriction on prescribing
Dexamfetamine	For patients 5 years of age or over: Paediatrician, psychiatrist or medical practitioner on the recommendation of a paediatrician or psychiatrist (in writing). *Change from 1 December:* Nurse practitioners can also submit a Special Authority application for dexamfetamine on the recommendation of a paediatrician or psychiatrist. For patients under 5 years of age: Applications only from a paediatrician or psychiatrist.	Yes
Methylphenidate	Paediatrician, psychiatrist OR medical practitioner, nurse practitioner on the recommendation of a paediatrician or psychiatrist (in writing).	Yes
Modafinil	Neurologist or respiratory specialist	No
Lisdexamfetamine	*Change from 1 December:* Paediatrician, psychiatrist OR medical practitioner, nurse practitioner on the recommendation of a paediatrician or psychiatrist (in writing).	Yes

Further reading

- See the Pharmac announcement on their decision to fund lisdexamfetamine for the treatment of ADHD. This also includes the Special Authority criteria.
- See the Pharmac announcement on their decision to remove the renewal criteria for stimulant treatments.
- See HealthPathways for more information on the treatment of ADHD in Children and Youth.
- See Medsafe for more details on medicines with restrictions.
- See NZF for other legal considerations when writing prescriptions for controlled drugs and drug dependence.

CARM:
Prescribers should continue to report adverse reactions to all medications to the Centre for Adverse Reactions Monitoring (CARM). This allows continued monitoring of the benefit/risk balance of the medicine. Healthcare professionals can report any suspected adverse reactions via this form.

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