Use of Cost-Effectiveness Leads to Access Restrictions in Australia

Australia utilizes multiple methods to limit spending on medicines, including therapeutic reference pricing and health technology assessments with lowest cost comparators.  

The health technology assessments, which help to determine reimbursement for medicines covered through Australia’s public health insurance, utilizes quality-adjusted life year (QALY)-based cost-effectiveness assessments. Application of these stringent assessments have resulted in challenging barriers for patients in Australia where innovative new medicines are often placed out of reach for those who need them.

"If Australians finally gain access to Trikafta, they deserve to take a victory lap. For them, it will represent the end of a hard-won advocacy campaign. But we still owe it to them to question the several years’ delay they have suffered in the name of bad math."

Controlling seizures is essential for patients with Dravet Syndrome, especially children and babies. Reports from Australia underscore the terror experienced by families fighting to access medication. “Families calling for greater access to a medication that helps manage a severe form of epilepsy have been left ‘desperate’ and disappointed after being told it has not been recommended for addition to the Pharmaceutical Benefits Scheme (PBS).”

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4 “WA families hail public funds for cystic fibrosis drug.” The West Australian, August 2018
5 Esiason, Gunnar, “For Two Years, Australia Failed People With Cystic Fibrosis; It Can’t Happen Again.” Real Clear Health, Feb. 18, 2022.
6 “Mum vows to keep pushing for fenfluramine PBS listing for Dravet syndrome, a severe form of epilepsy.” ABC Central Victoria, Sept. 4, 2023.