

## RPBS Medicinal Cannabis Tier 2 Application

The Department of Veterans' Affairs (DVA) considers funding medicinal cannabis on a case by case basis through the Repatriation Pharmaceutical Benefits Scheme (RPBS) in accordance with DVA's medicinal cannabis policy framework. Please see <a href="https://www.dva.gov.au/medcannabisproviders">www.dva.gov.au/medcannabisproviders</a> for further information.

DVA processes requests for funding under a 2-tiered classification:

- Tier 1 must meet all three criteria below.
  - Doctor can obtain an RPBS Authority Prescription via phone call to Veterans' Affairs Pharmaceutical Advisory Centre (VAPAC) on 1800 552 580 and providing the information required.
     Please see www.dva.gov.au/medcannabisproviders for further information.
- Tier 2 if any one of the criteria exist as noted below.
  - Doctor applies to DVA for funding by completing this form and returning to PPO@dva.gov.au or via fax (07) 3223 8651.
  - Doctor to include a written assessment from the treating non-GP specialist that medicinal cannabis would clinically benefit the patient.

## **DVA's Medicinal Cannabis Framework Two-tier Classification**

	Tier 1	Tier 2	
Number of products	The client is receiving a maximum of 2 products at any one time.	The client is receiving 3 or more products at any one time.	
Total THC dosage	The client is receiving any product or products containing the equivalent, or less, of a total 40 mg per day of THC, or no THC.	The client is receiving any product or products that contain a total of over 40 mg per day of THC.	
Health conditions  – see www.dva.gov.au/ medcannabisproviders	For these health conditions where we have already established that the treatment is supported under our framework.	For these health conditions where we have already established that the treatment is supported under our framework <i>and</i> where either of the tier 2 circumstances above exist.  Or	
		For other health conditions not listed on the website where the application would need to include evidence to support efficacy of the proposed treatment.	

**Privacy Notice** – Personal information is protected by law, including the *Privacy Act 1988*. Personal information may be collected by the Department of Veterans' Affairs (DVA) for the delivery of government programs for war veterans, members of the Australian Defence Force, members of the Australian Federal Police and their dependants.

More information about how DVA manages personal information is available from www.dva.gov.au/about-us/overview/legal-resources/privacy and www.dva.gov.au/medcannabisproviders

Date of application					
	Veteran details				
1.	Name	Surname Given name(s)			
2.	Date of birth				
3.	DVA file number				
4.	Card type	Gold	Orange	White	
5.	DVA accepted conditions to be treated (white card only)				

	Medical practition	ner details						
6.	Provider name							
7.	Prescriber number							
8.	<b>Provider type</b> (e.g. Gl specialist, Neurologis							
9.	Address						Postcoo	de
10.	Contact numbers (including area code	if applicable)	Phone			Fax		
11.	Email address							
	Product details							
12.	Total daily dose		THC		mg	CBD	mg	
13.	Have you obtained a state/territory/com approvals, including authorisations to promedicinal cannabis	monwealth TGA escribe	No Yes			ation after you ha	red the approva	al(s) from
14.	Product details (Attach a separate page if more than 4 products)	Product 1	Trade name  Active ir and stre			Form (eg. oil,	TGA category (	
		Product 2	Trade name Active in and stre	ngredient(s)		solution)	TGA category [	
		Product 3	Direction dosage	ns/		Form (eg. oil, solution)	TCA aptogray	
		Product 3	name L Active ir and stre	ngredient(s) ength			TGA category	
			Direction dosage	ns/		Form (eg. oil, solution)		
	Product 4		Trade name				TGA category [	
			Active ir and stre	ngredient(s) ength				
			Direction dosage	ns/		Form (eg. oil, solution)		

	Clinical justification					
15.	List the medical condition(s) being treated with medicinal cannabis					
16.	Has DVA approved funding for this client via a previous Tier 2 application for medicinal cannabis?	No Continue to next question  Yes <b>Go to question 21</b>				
17.	Relevant clinical indication(s) Tick all that apply	Chronic cancer pain  Chronic pain e.g. neuropathy or other condition  Cancer related nausea and vomiting  Palliative care indications  Anorexia and wasting associated with chronic illness (such as cancer)  Spasticity from neurological conditions  Refractory paediatric epilepsy  Other – please specify  If other, please attach evidence that the proposed treatment is supported by several high quality scientific studies with very few or no credible opposing				
		findings that it is effective in treating the condition.				
18.	Has a relevant treating non-GP specialist provided their own written assessment that medicinal cannabis is clinically indicated and may benefit the patient?	Note: Under the DVA framework, the speciality should have direct relevance to the condition being treated.  The non-GP specialist written assessment should also include detailed clinical information about the medical conditions being treated, and previous treatment strategies which lead to their recommendation that medicinal cannabis should be trialled as part of the treatment protocol for the patient.  No A written assessment from a relevant non-GP specialist is required by DVA				
		Yes Please <b>attach</b> the assessment letter from the treating non-GP specialist				
19.	Have evidence-based standard treatments (if available and appropriate) for the condition(s) been attempted and failed?	No DVA is unable to consider funding medicinal cannabis unless standard treatments have been attempted and failed.  Yes Please list attempted treatment(s) and their outcomes (If you need more space attach a separate sheet)				

20. Please confirm the following statements:	The patient has been advised of potential contra-indications with medicinal cannabis treatment.
	A suicide and mental health assessment has been undertaken and documented, determining there is no increased risk from medicinal cannabis on suicide ideation or mental health.
	The patient has no current substance use disorder, and has low risk for substance use disorder.
	The patient has agreed to their personal information being provided to DVA for the purpose of assessing their eligibility for the medicinal cannabis treatment.
	If this is not a re-application, go to Submitting this form below
Re-application	
21. Please specify the reason(s)	Ongoing treatment
for re-application	Increasing total daily dose of THC or CBD
	Changing prescriber
	Other - please specify
22. Please report on the outcomes of this therapy including objective treatment results (e.g. pain scores), any functional improvement, changes to prescribed medicines	
23. Please report on the ongoing monitoring of the patient's mental health status	
Submitting this form	
24. Submitting this form	Once this form is fully completed, please provide to DVA by either:
	Email: PPO@dva.gov.au
	Fax: (07) 3223 8651
	Please ensure all information provided is clearly written, complete and correct as missing or incorrect information, including clinical justification for request, may delay the processing of your request.