

## ANU WOMEN'S DEPARTMENT BIRTH CONTROL SUBSIDY

### Who's eligible?

The ANU Women's Department and ANUSA Birth Control Subsidy commenced in 2022 for all current ANU Students - undergraduate, postgraduate, coursework, and HDR! This includes students not currently enrolled in courses, provided they have an active enrolment in a program/degree.

The subsidy allows students to receive a **50% reimbursement** of the cost of their birth control/contraceptive prescriptions, regardless of which pharmacy they purchase from.

### What can I purchase?

All eligible birth control/contraception prescriptions can be bought under the Subsidy, including

- Oral contraceptive pills,
- Intrauterine devices (IUDs),
- Implants, and
- Injectables.

The four tables below provide a comprehensive summary of the eligible products under each form of contraception, all of which are TGA-approved. They also provide information on the hormones in each option and average prices for both PBS and non-PBS listed for each prescription.

### What can't I purchase?

Condoms and menstrual products are not eligible, but are both readily available at the BKSS Mutual Aid Shelf and in the Women's Department Rose Room in the Crisp Building.

### How am I reimbursed?

To be reimbursed, please [*fill out the form on the ANUSA website I presume?*] or [*email the Women's Officer at [sa.womens@anu.edu.au](mailto:sa.womens@anu.edu.au) if this is still going to be an option?*] with your current bank account details, student u-number and an eligible receipt.

This must be done **within 2 weeks** of purchasing the product. Reimbursements can only be processed **after** the purchase has been made. If you need support for the initial purchase, you can apply for an [ANUSA medical grant](#).

An eligible receipt must be a *tax invoice* and not a terminal receipt from an EFTPOS machine. Tax invoices will list the pharmacy's ABN and the amount of GST paid.

Once processed, ordinarily processed within two business days, it will be directly deposited into your bank account and appear on your bank statement as a deposit from ANUSA.

#### **How much can I subsidise?**

The Subsidy is limited to \$250 per student per year. This means that you can receive up to \$250 back in reimbursements (*eg. give example of average bc costing compared to actual price/subsided price*)

You may be eligible for other ANUSA grants, such as the Medical Grant, if you reach this spending cap or require another form of contraception outside the average price range, such as an IUD which can range from \$100-\$1000 if you require ultrasounds or other examinations for proper insertion placement.

## COMMONLY HEARD WORDS!

### What is Progestin?

Progestin is a synthetic (human-made) form of progesterone that helps treat certain conditions. Progesterone is a reproductive hormone your body makes in varying amounts. Everyone has progesterone, regardless of sex. Sometimes, your body produces too little progesterone or needs more progesterone. For this reason, scientists created progestin in a lab to mimic the effects of progesterone in your body.

### What is Oestrogen?

Oestrogen is a synthetic version of the female sex hormone (*also called oestrogen! - a group of hormones vital for the female sexual and reproductive system and is produced in the hormones*) that, when combined with progestin, prevents pregnancy by suppressing ovulation and thickening cervical mucus.

^ these are both the primary female sex hormones

### Androgenic

Androgenic refers to the effects or actions of androgens, which are male sex hormones, like testosterone. In the context of medications like birth control, androgenic means the extent to which a drug acts like or mimics testosterone in the body. Some older-generation progestins have higher androgenic activity, while later generations were designed to be low-androgenic or even anti-androgenic. This influences:

- Side effects of birth control
- Skin condition (e.g., acne-prone users often do better on less androgenic pills)
- Suitability for people with hormonal conditions like PCOS

### Ovulation

The release of an egg from the ovary. Most hormonal contraceptives work in part by preventing ovulation.

### Withdrawal bleed vs Breakthrough bleed

Withdrawal bleeds are period-like bleeds that occur during the placebo or hormone-free days of the pill cycle. It's not an actual period, as ovulation is typically suppressed. A breakthrough bleed is unscheduled bleeding or spotting that can occur while using hormonal contraception, especially during the first few months.

### Cervical mucus

The fluid produced by the cervix; hormonal contraceptives often thicken it to block sperm from entering the uterus

### Pharmaceutical Benefits Scheme

Also known as the PBS, the Pharmaceutical Benefits Scheme is an Australian Government program that subsidises the cost of many prescription medicines to make them more affordable for all Australians. It ensures access to essential medications by covering most of the cost, with Patients pay only a small co-payment.

To access the scheme, you must have a *Medicare card* and be an *Australian citizen*.

Term	What it means	Do you pay this?
<b>DPMQ</b>	"Dispensed Price for Maximum Quantity" – the full, raw price of the medicine	✗ Not usually - unless it's cheaper than the set cap
<b>General Patient Charge</b>	The max amount a non-concession holder pays under PBS (currently <b>\$31.60</b> )	✓ Yes - <b>this is what you pay</b> , unless the DPMQ is cheaper

<b>Max Safety Net</b>	The threshold where your scripts become free or cheaper once you've spent a certain amount on meds in a year	✗ Not relevant at the checkout unless you've hit the safety net
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## ELIGIBLE BIRTH CONTROL SUBSIDY PRODUCTS

The below contraception and birth control prescriptions are all Therapeutic Goods Administration (TGA) approved and show either the Pharmaceutical Benefits Scheme (PBS) or privately listed options, including average pricing.

### BCS ORAL CONTRACEPTIVE PILLS

Pills taken orally (swallowing) daily that contain synthetic hormones (progestin and/or oestrogen) to prevent pregnancy.

<b>Monophasic Combinations</b>	<b>Generation</b> <i>When the drug was released into the market</i>	<b>Amount (mcg) of Progestin</b>	<b>Amount (mcg) of Oestrogen</b>	<b>Brands on the PBS</b>	<b>Non-PBS (or private) brands</b>
<p>This is a type of combination pill that contains the same amount of estrogen and progestin in each active pill throughout the cycle. They typically come in 21 or 28-day packs where:</p> <p><b>21 pack</b> &gt; contains 21 active pills and is followed by a 7-day pill-free period which some</p>	<p><b>First Generation</b> First released in 1961 and still used today!</p> <p>More androgenic effects, such as acne and weight</p>	<b>Norethisterone (500)</b>	<b>Ethinylestradiol (35)</b>	Norimin 28 day <b>\$24.81</b> Noriday	Brevinor <b>\$18.70</b>

<p>people have a withdrawal bleed</p> <p><b>28 pack</b> &gt; contains 21 active pills and then 7 inactive/placebo pills (iron and/or sugar).</p>	<p>changes, and less potent, meaning more breakthrough Bleeding.</p>	<p><i><b>Norethisterone (1000)</b></i></p>	<p><i><b>Ethinylestradiol (35)</b></i></p>	<p>Norimin-1 28 Day Brevinor-1</p>	
		<p><i><b>Nomegestrol acetate (2500)</b></i></p>	<p><i><b>Estradiol (1500)</b></i></p>		<p>Zoely</p>
	<p><b>Second Generation</b> First released in the 1970s.</p> <p>Like first generation progestins, they are more potent and have more substantial androgenic effects.</p>	<p><i><b>Levonorgestrel (150)</b></i></p>	<p><i><b>Ethinylestradiol (30)</b></i></p>	<p>Eleanor 150/30 ED Evelyn 150/30 ED Femme-Tab ED 30/150 Lenest 30 ED Micronelle 30 ED Monofeme 28 Levlen ED      <b>\$17.87</b></p>	<p>Microgynon 30      <b>\$17.87</b> Nordette</p>
		<p><i><b>Levonorgestrel (100)</b></i></p>	<p><i><b>Ethinylestradiol (20)</b></i></p>	<p>Femme-Tab ED 20/100</p>	<p>Lenest 20 ED Microgynon 20 ED Microlevlen ED Micronelle 20 ED</p>
		<p><i><b>Levonorgestrel (125)</b></i></p>	<p><i><b>Ethinylestradiol (50)</b></i></p>	<p>Microgynon 50 ED</p>	
	<p><b>Third Generation</b> Introduced in the 1990s with lower androgenic effects.</p>	<p><i><b>Cyproterone (2000)</b></i></p>	<p><i><b>Ethinyl estradiol (35)</b></i></p>		<p>Diane 35 ED Estelle – 35 ED Juliet – 35 ED Brenda-35 ED</p>

	<b>Fourth Generation</b> Introduced in the early 2000s, this generation is commonly used and actually has antiandrogenic effects.	<i>Drospirenone (3000)</i>	<i>Ethinylestradiol (20)</i>	Yaz	Yana Bella
		<i>Drospirenone (3000)</i>	<i>Ethinylestradiol (30)</i>	Yasmin	Isabelle Petibelle Yelena
		<i>Dienogest (2000)</i>	<i>Ethinylestradiol (30)</i>		Valette
<b>Multiphasic Combinations</b>  This is another form of the combination pill unlike monophasic pills that contain varying doses of oestrogen and progestin throughout the cycle. These are designed to mimic the natural fluctuations of hormones during a menstrual cycle, and they are also intended to reduce bc side effects and provide better cycle control.  <b>The same 21 or 28 day pack applies to this pill.</b>		<i>Levonorgestrel (50,75,125)</i>	<i>Ethinylestradiol (30, 40, 30)</i>	Logynon ED Trifeme 28 Triphasil 28 Triquilar ED	
		<i>Levonorgestrel (50,125)</i>	<i>Ethinylestradiol (50,50)</i>		
		<i>Dienogest (0,2000,3000, 0,0)</i>	<i>Estradiol (3000,2000,2000,1000,0)</i>		Qlaira
<b>Extended Combination</b>  This combination pill is designed to lengthen the time between withdrawal bleeds, often with 84 days of active pills followed by 7 days of placebo or low-dose oestrogen. This means you typically wouldn't have a period for 3 months, and is helpful for those with heavy or painful periods to reduce the frequency of periods.		<i>Levonorgestrel (150)</i>	<i>Ethinylestradiol (30)</i>		Seasonique

The pill packs come in 91 day packs over 3 blister packs.				
<b>Progestin Only</b>  Often called the 'mini-pill', this is a type of oral contraceptive that contains only progestin and no oestrogen. Its good for those who can't take oestrogen (such as a blood clot risk. Older generation pills have a 3-hour window (taken at the same time every day) whereas newer generation pills have a longer missed pill window (24 hours).	Levonorgestrel (30)		Microlut 28	
	Norethisterone (350)		Noriday 28	
	Drospirenone (4000)		Slinda (from 1st May)	

Looking at the differences between *monophasic*, *multiphasic*, and *extended combination* pills, it can be hard to determine which one suits you best. But the main differences between the three main forms (excluding progestin only) of birth control pills revolve around the **quantity (dosing)** of the hormones Progestin and Oestrogen and the **schedule (timeframe)** over which they're delivered. They can all contain a progestin (like Levonorgestrel) and a synthetic oestrogen (such as Ethinylestradiol), but **how these hormones are dosed and cycled defines the type**.

### BCS INTRAUTERINE DEVICES (IUDS)

Small T-shaped devices inserted into the uterus to prevent pregnancy - can be hormonal or copper-based.

IUD form	Amount (mcg) of Progestin	Amount (mcg) of Oestrogen	Brands on the PBS	Non-PBS (or private) brands
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<b>Hormonal IUD</b> A small T-shaped plastic device inserted into the uterus that slowly releases progestin to suppress ovulation. A doctor inserts it, and last 5 years, so is very low-maintenance.	<i>Levonorgestrel 52 mg (releases 20 mcg/day)</i>		Mirena (5 years)	
	<i>Levonorgestrel 19.5 mg (releases 17.5 mcg/day)</i>		Kyleena (5 years)	
<b>Copper IUD</b> A hormone-free, T-shaped device wrapped in copper that's inserted into the uterus. Copper creates an inflammatory reaction that is toxic to sperm and eggs, preventing fertilisation. It can last up to 10 years.	<i>Copper</i>			Cu375 (5 years) TT 380 standard (10 years)

### **BCS IMPLANTS**

A small rod inserted under the skin of the arm or a vaginal ring that releases hormones over time.

Implant form	Amount (mcg) of Progestin	Amount (mcg) of Oestrogen	Brands on the PBS	Non-PBS (or private) brands
<b>The 'Rod'</b> A matchstick-sized rod that releases progestin is inserted under the skin of the arm. Lasting over 3 years, it's long but requires minor insertion and removal procedures.	<i>Etonogestrel</i>		Implanon NXT	

<b>Vaginal Ring</b> A flexible ring placed inside the vagina that releases estrogen and progestin. It is worn for 3 weeks then removed for 1.	<i>Etonogestrel (releases 120 mcg/day)</i>	<i>Ethinyl estradiol (releases 15 mcg/day)</i>		Nuvaring
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### BCS INJECTABLES

Hormone injections given every few months to prevent ovulation.

Injectable form	Amount (mcg) of Progestin	Amount (mcg) of Oestrogen	Brands on the PBS	Non-PBS (or private) brands
<b>Hormonal Contraceptive Injection</b> An injection of progestin is given every 12 weeks. It's good for people who can't take oestrogen but can delay return to fertility and cause weight gain or bone density loss.	<i>Medroxyprogesterone</i>		Depo-Ralovera Depo-Provera	