



HELPING MORE KIWIS FIGHT CANCER



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National will increase access to lifesaving and life-extending cancer medicines by investing \$280 million over four years to fund 13 treatments that are currently available in Australia but not New Zealand.

New Zealand needs to lift its game on cancer

Each year, more than 25,000 Kiwis are diagnosed with cancer, and more than 10,000 tragically lose their battle. This means almost every New Zealander will have some experience with cancer in their lifetime – either personally or through a friend, colleague or loved one.

New Zealand's health care professionals do an excellent job of caring for Kiwis suffering from this terrible disease, but despite their efforts, cancer survival rates in New Zealand are not as high as Australia or other developed countries.

Health care experts suggest at least some of this difference in outcomes is due to the gap in access to modern cancer medicines.

According to the New Zealand Cancer Control Agency, there are 13 cancer treatments for lung cancer, bowel cancer, kidney cancer, and head and neck cancer that provide “substantial clinical benefit” and are funded in Australia but not in New Zealand.

New Zealanders suffering from these cancers who have exhausted available treatments currently face a bleak choice; either give up, move overseas or try to raise the significant amount from friends and family to fund their treatment themselves.

National wants to give these New Zealanders and their medical professionals another choice – to stay in New Zealand and fight their cancer with the full support of a world-class health system.

National will fund 13 new cancer treatments

To give more Kiwis the chance to fight and win their battle with cancer, National will invest \$280 million over four years to fund the 13 cancer treatments the Cancer Control Agency says provide “substantial clinical benefit” that are funded in Australia but not in New Zealand.

Those cancer treatments are:

- **Osimertinib for lung cancer – first-line therapy**
- **Osimertinib for lung cancer – second-line therapy**
- **Atezolizumab with bevacizumab for liver cancer**
- **Cetuximab or panitumumab for bowel cancer – first-line therapy**
- **Cetuximab for bowel cancer – second-line therapy**
- **Nivolumab with ipilimumab for kidney cancer – first-line therapy**
- **Nivolumab for kidney cancer – second-line therapy**
- **Axitinib for kidney cancer – second-line therapy**
- **Pembrolizumab for bladder cancer**
- **Nivolumab for head and neck cancer**
- **Nivolumab or pembrolizumab for melanoma (adjuvant)**
- **Dabrafenib with trametinib for melanoma (adjuvant)**
- **BRAF/MEK inhibitors for melanoma (unresectable)**

Prioritising cancer treatment over untargeted prescription subsidies

National will fund increased access to these cancer treatments by targeting funding for the removal of the \$5 prescription fees to those who most need the support, low-income Kiwis and superannuitants.

Unfunded cancer treatments can cost tens of thousands of dollars, with patients often forced to rely on Givealittle pages or friends and family just to give themselves a fighting chance at beating cancer.

The Government recently announced a policy to remove the \$5 fee for prescriptions for all patients, at a cost of \$620 million over four years. In National's view, when there are so many health needs going unmet, an untargeted subsidy going to people who don't need it is not the best use of scarce health dollars.

That's why National will replace the untargeted subsidy with a more targeted one, making prescriptions free for low-income Kiwis and superannuitants (using the Community Services Card and SuperGold Card). For everyone else, the total amount any person or family will pay for prescriptions in a year will be capped at \$100.

This change will reduce the cost of the prescription subsidy by approximately \$316 million over four years, which we will use to fund our investment in 13 new cancer treatments. The remaining savings will remain in the health budget.

Prioritising funding for cancer treatments over additional untargeted prescription subsidises for those who can afford them shows what New Zealand can achieve when health funding is guided by health needs and common sense, not politics.

Cost (\$M)

	2024/25	2025/26	2026/27	2027/28	Four Year Total
13 new cancer treatments	\$70.0	\$70.0	\$70.0	\$70.0	\$280.0

Savings (\$M)

	2024/25	2025/26	2026/27	2027/28	Four Year Total
Ending untargeted removal of \$5 prescription co-pay	\$149.1	\$153.7	\$158.4	\$158.4	\$619.5
Targeting free prescriptions to low-income Kiwis and superannuitants	\$72.9	\$74.7	\$76.6	\$78.5	\$302.7
Total saving	\$76.2	\$79.0	\$81.8	\$79.9	\$316.8