

Managed Reimbursement of Continuous Glucose Monitoring Sensors in Ireland: Year One Review

Alma Hanevy^{1,2}, Fiona McGahan^{1,2}, Stephen Doran^{1,2}, Prof. Michael Barry^{1,2}, Dr. Claire Gorry^{1,2}
1. Medicines Management Programme, Health Service Executive, St James' Hospital, Dublin 8.
2. Department of Pharmacology & Therapeutics, Trinity Centre for Health Sciences, St James' Hospital, Dublin 8.

OBJECTIVE

Ireland's healthcare payer, the Health Service Executive (HSE), has experienced a significant increase in expenditure on Continuous Glucose Monitoring (CGM) sensors. According to analysis conducted by the HSE-Medicines Management Programme (MMP), there has been a significant growth in the utilisation of and expenditure on CGM sensors, under the Community Drug Schemes (CDS); increasing from €23.78 million in 2021 (6,000 patients) to €55.72 million in 2023 (16,900 patients).

Following a rapid health technology assessment (HTA) on the use of CGM systems in adults with type 1 diabetes mellitus (T1DM), an online reimbursement application system (RAS) for CGM sensors was introduced on 1 December 2023, with access confined to relevant hospital clinicians. Reimbursement is supported for patients with T1DM treated with insulin from the outset. Reimbursement support is not extended to any other patient cohort at this time. This retrospective study evaluates the impact of the RAS as a cost containment measure for CGM sensors during its first year of implementation.

METHODS

Data pertaining to individual reimbursement applications was obtained from the online RAS. Utilisation and expenditure data were extracted from the HSE-Primary Care Reimbursement Service (PCRS) national pharmacy claims database. Data was compiled and analysed in Microsoft Excel™. The study period was from 1 December 2023 to 30 November 2024 inclusive.

RESULTS

A total of 4,552 applications were submitted for reimbursement approval (Figure 1). The overall approval rate was 65% (n=2,949), which represents an additional investment of approximately €9 million across the first full year of reimbursement support for eligible patients with T1DM. Figure 2 highlights that the number of patients accessing CGM sensors continues to rise.

The avoided costs estimated from negative reimbursement recommendations amount to over €1.77 million in year one (Figure 3). This estimate is based only on applications submitted via the RAS, and the true avoided cost is likely higher.

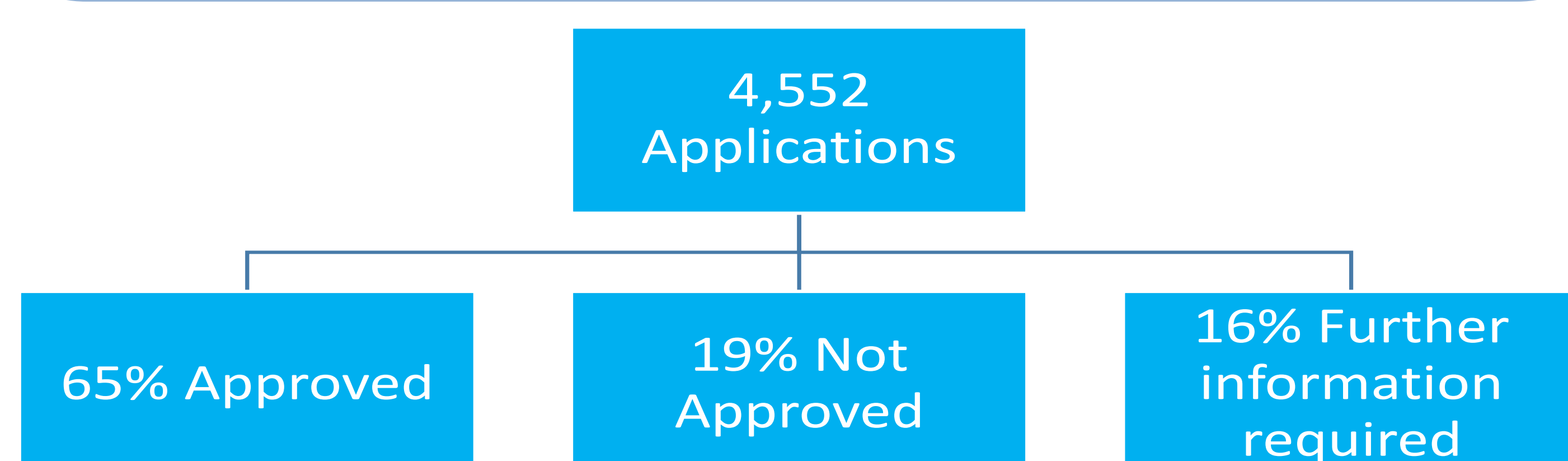


Figure 1: Outcomes of applications submitted under the Reimbursement Application System from December 2023 to November 2024 inclusive

CONCLUSION

In the first year of implementation, the RAS has supported access to CGM sensor technology for almost 3,000 additional patients with T1DM in Ireland, whilst at the same time containing expenditure and providing budgetary oversight for the payer.



Figure 2: Total number of patients in receipt of CGM sensors under the Community Drug Schemes from January 2021 to November 2024 inclusive.



RAS: Reimbursement Application System

Figure 3: Estimated additional monthly expenditure on CGM sensors for patients approved with RAS, compared to a counterfactual scenario where all applications submitted were approved