

Oifig an Phríomhoifigigh Airgeadais

Feidhmeannacht na Seirbhise Sláinte, Seomra 125, Ospidéal Dr. Steevens, BÁC 8. D08 W2A8

Office of Chief Financial Officer

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6th March 2025

Deputy Albert DolanTD, Dáil Éireann, Leinster House, Kildare Street, Dublin 2.

Re PQ 4425 25:

To ask the Minister for Health the amount spent on diabetes-related treatment and care within the health service in 2023 and 2024, broken down by year and expenditure, in tabular form.

Dear Deputy Dolan,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. Your PQ above has been referred to me for response.

In Ireland, acute hospital activity data for admitted patients (daycases and inpatients) are captured on the Hospital Inpatient Enquiry (HIPE) system. Diagnoses and procedures are classified using International Statistical Classification of Diseases and related health problems, 10th revision - Australian Modification/Australian Classification of Health Interventions/Australian Coding standards/Irish Coding Standards (ICD10-AM/ACHI/ACS/ICS). Costs for inpatients and daycases are allocated at the DRG level. The HIPE system does not cover Emergency Department, outpatient or Community activity. For further information on what is collected on HIPE please refer to www.hpo.ie.

The Healthcare Pricing Office (HPO) generates national prices at the Diagnosis Related Group (DRG) level rather than at the individual diagnosis or procedure level.

A DRG is a classification which groups cases which are clinically similar and which are expected to consume similar amounts of resources. This grouping, although mainly diagnosis driven, is carried out by examination of the case in its entirety including all diagnoses, all procedures carried out and demographic and administrative information. The actual assignment of a case to a particular DRG takes into account each of the (up to) 30 diagnosis and (up to) 20 procedure codes associated with the case in addition to the patient's demographic information. This means that depending on the treatment received, two cases with the same principal diagnosis can be assigned to two (or more) different DRGs.

Due to the complexity of the clinical classification and sequencing rules of diabetes coding it is not possible to uniquely identify those treated with 'diabetes related illnesses' from HIPE, and also therefore the costs involved. Diabetes is always coded when documented on the medical chart as per the classification rule. The patient may not have been treated during their care for diabetes however, e.g. they may have been admitted for a broken leg, but if that patient happened to have diabetes and this is documented on the chart then diabetes is coded.

In light of the fact that the HIPE system does not cost at diagnosis or procedure level it is not possible for us to provide costs at the level required to respond to your PQ.



If you have any queries, please do not hesitate to contact me at sarah.anderson1@hse.ie or tel: 045 882559.

Yours sincerely

Sarah Anderson

Bainisteoir Ginearálta | General Manager

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