



# 2019

## Primary Care Reimbursement Service Statistical Analysis of Claims and Payments 2019

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á Forbairt

Building a  
Better Health  
Service

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# **Primary Care Reimbursement Service**

STATISTICAL ANALYSIS OF CLAIMS AND PAYMENTS  
2019

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## Introduction

The Primary Care Reimbursement Service (PCRS) is responsible for reimbursing GPs, Dentists, Pharmacists, Optometrists/Ophthalmologists and other contractors who provide free or reduced-cost services to the public across a range of primary care schemes. These schemes form the infrastructure through which the HSE delivers a significant proportion of primary care to the public. In total, 3.7 million people were registered under the various primary care schemes in 2019. As at 31<sup>st</sup> Dec 2019, 2,068,868 or 43.45% of the population had Medical Card or GP Visit Card eligibility.

In 2019 PCRS reimbursed approximately 7,100 contractors for the provision of health services to the public under the various schemes, including the General Medical Services Scheme (GMS), Drugs Payment Scheme (DPS), Long Term Illness Scheme (LTI), Dental Treatment Services Scheme (DTSS) and Community Ophthalmic Services Scheme (COSS). PCRS also made payments to suppliers and manufacturers of High Tech drugs as part of the High Tech Arrangements and facilitated direct payments to hospitals involved in the provision of national treatment programmes such as the National Cancer Control Programme, the National Hepatitis C Treatment Programme and Multiple Sclerosis Services. In all, PCRS made total payments and reimbursements of €3.0 billion.

The Statistical Analysis of Claims and Payments report gives an overview of the volume of claims and payments made during the year and the number of people who benefitted. Further details and updated monthly reports are available online at [www.hsepcrs.ie](http://www.hsepcrs.ie) under “PCRS Publications”.

On behalf of the HSE, I would like to thank all of our clients and contractors for their co-operation throughout 2019 and I look forward to working with you to continue to improve all of the services we provide into the future.

I would also like to take this opportunity to thank the staff in PCRS involved in the continued delivery of day to day services, for their contribution and commitment to the delivery of these vital support services to the public.

**Shaun Flanagan**  
**Interim Assistant National Director**  
**Primary Care Eligibility & Reimbursement Service**



The background of the slide features a complex, abstract network diagram. It consists of numerous small, light purple circular nodes connected by thin, dark purple lines. The connections form a dense, interconnected web that fills the entire background, with some areas appearing more concentrated than others. The overall aesthetic is modern and technological.

# **SCHEMES**

## OVERVIEW

## Schemes – Claim Reimbursement and Payment Arrangements

During 2019, HSE Primary Care Reimbursement Service reimbursed claims and made payments to General Practitioners (GPs), Community Pharmacists, Dentists and Optometrists/Ophthalmologists totalling €3,042.46m, in respect of primary care schemes.

Claim data is processed and payments are made by the Primary Care Reimbursement Service under the following Schemes/Payment Arrangements:

### General Medical Services (GMS) Scheme

Persons who are unable without undue hardship to arrange general practitioner medical and surgical services for themselves and their dependants are eligible for the GMS Scheme. Drugs, medicines and appliances approved under the Scheme are provided through Community Pharmacists. In most cases the GP gives a completed prescription form to an eligible person, who takes it to any Pharmacy that has an agreement with the Health Service Executive to dispense drugs, medicines and appliances on presentation of GMS prescription forms. In rural areas a small number of GPs hold contracts to dispense drugs and medications to GMS cardholders who opt to have their medicines dispensed by him/her directly.

### Medical Card (MC)

Once eligibility for a Medical Card is confirmed, patients are entitled to receive certain Doctor, Dentist, Clinical Dental Technician, Optometrist and Ophthalmologist treatments/services free of charge and prescribed medicines from Pharmacists.

Since the 1<sup>st</sup> October 2010, an eligible person who is supplied a drug, medicine or medical or surgical appliance on the prescription of a Registered Medical Practitioner, Registered Dentist or Registered Nurse Prescriber, is charged a prescription charge by the Community Pharmacy of €2.00 per item, capped

monthly at €20.00. From 1<sup>st</sup> April 2019, the prescription charge for persons aged 70 and over and their dependents was reduced from €2.00 to €1.50 per item and the monthly cap for prescription charges reduced from €20.00 to €15.00. The prescription charge is recouped by the HSE from the Pharmacist.

### General Practitioner Visit Card (GPVC)

Persons who do not meet the eligibility criteria for a Medical Card but who meet the criteria for a GP Visit Card receive free access to GP services only. From 1<sup>st</sup> July 2015, all children under 6 years of age were granted automatic entitlement to free GP services. From 5<sup>th</sup> August 2015, all persons aged 70 and over were granted automatic entitlement to free GP services. From 1<sup>st</sup> April 2019 there was a 10% increase to the eligibility income threshold.

### Mother and Infant Care Scheme

A new online service was made available to General Practitioners who opt for online submission to process all new Maternity & Infant registrations and subsequent visits from the 1<sup>st</sup> July 2019.

### Medical cards for children with Domiciliary Care Allowance (DCA) eligibility

The Health (Amendment) Act 2017 provides for the granting of full medical card eligibility to children in respect of whom a Domiciliary Care Allowance (DCA) is payable. The Minister for Health announced that, with effect from 1<sup>st</sup> June 2017, such children aged under 16 years who do not already have full eligibility will be eligible to receive a medical card.

### Medical cards for children with cancer

From 1<sup>st</sup> July 2015, following a recommendation of the Clinical Advisory Group, the HSE extended medical card eligibility to all children under the age of 18 years with a diagnosis of cancer.

### GP Visit Card for persons in receipt of Carer's Allowance or Carer's Benefit

The Health (General Practitioner Service) Act 2018 provides for the granting of eligibility for GP services without charge to all those in receipt of full, or half-rate, Carer's Allowance or Carer's Benefit. From 1<sup>st</sup> September 2018, all persons in receipt of Carer's Allowance or Carer's Benefit were eligible to obtain GP services free of charge.

### Dental Treatment Services Scheme (DTSS)

Under the Dental Treatment Services Scheme GMS eligible adults have access to a range of treatments and clinical procedures comprised of Routine Treatments and Full Upper and Lower Dentures. Routine Treatments are available for all eligible persons. Dentists may also prescribe a range of medicines, as part of their treatment, to eligible persons.

### HSE Community Ophthalmic Services Scheme (HSE-COSS)

Under the Health Service Executive Community Ophthalmic Services Scheme, adult medical card holders and their dependants are entitled, free of charge, to eye examinations and necessary spectacles/appliances. Claims by Optometrists/Ophthalmologists are paid by the Primary Care Reimbursement Service. Claims for spectacles provided under the Children's Scheme are also paid by the Primary Care Reimbursement Service.



## Schemes – Claim Reimbursement and Payment Arrangements continued

### Drugs Payment Scheme (DPS)

The Drugs Payment Scheme (DPS) provides for payment to the Pharmacist for the supply of medicines to individuals and families where the threshold of €124, effective from 1<sup>st</sup> April 2019, has been exceeded in a calendar month. In order to avail of the Drugs Payment Scheme a person or family must register for the Scheme with the HSE PCRS. Drugs, medicines and appliances currently reimbursable under the Scheme are listed on the HSE website. Other items which were reimbursable under the Drug Cost Subsidisation Scheme and Refund of Drugs Scheme continue, in certain circumstances, to be reimbursable under the Drugs Payment Scheme.

### Long Term Illness Scheme (LTI)

On approval by the Health Service Executive, persons who suffer from one or more of a schedule of illnesses are entitled to obtain, without charge, irrespective of income, necessary drugs/medicines and/or appliances under the LTI Scheme. From 1<sup>st</sup> June 2019, PCRS began processing all LTI application forms.

### European Economic Area (EEA)

Residents from one of the other states of the European Economic Area, with established eligibility, who require emergency general practitioner services while on a temporary visit to the State are entitled to receive from a General Practitioner a GMS prescription form for necessary medication and to have such medication dispensed in a Pharmacy that has entered into an agreement with the Health Service Executive within the State.

### High Tech Arrangements (HT)

Arrangements are in place for the supply and dispensing of High Tech medicines through Community Pharmacists. Such medicines are generally only prescribed or initiated in hospital and would include items such as anti-rejection drugs for transplant patients or medicines used in conjunction with chemotherapy or hormonal therapy. The medicines are purchased by the Health Service Executive and supplied through Community Pharmacists for which Pharmacists are paid a patient care fee. The cost of the medicines and patient care fees are paid by the Primary Care Reimbursement Service.

### High Tech Hub Ordering and Management System

In December 2017 PCRS introduced a new High Tech medicines ordering and management hub. This is an online system in which Hospital Consultants and prescribers can register patients for High Tech medicines and can prepare and print prescriptions for those patients. Pharmacists can view and order High Tech medicines from suppliers and manufacturers through the High Tech hub. In turn, suppliers can accept and arrange for the delivery of ordered medicines to Community Pharmacists.

### Primary Childhood Immunisation Scheme

A National Primary Childhood Immunisation Scheme provides for immunisation of the total child population with the aim of eliminating, as far as possible, such conditions as Diphtheria, Polio, Measles, Mumps, Rubella and more recently Meningococcal C Meningitis. Payments to GPs under this Scheme are made by the Primary Care Reimbursement Service.

### Health (Amendment) Act 1996

Under the Health (Amendment) Act 1996 certain health services are made available without charge to persons who have contracted Hepatitis C directly or indirectly from the use of Human Immunoglobulin - Anti D or the receipt within the State of another blood product or blood transfusion. GP services, pharmaceutical services, dental services and optometric/ophthalmic services provided under the Act are paid for by the Primary Care Reimbursement Service.

### Opioid Substitution Treatment Scheme

Methadone and Medicinal Products containing Buprenorphine are prescribed by Doctors and dispensed by Pharmacists for approved clients under the Opioid Substitution Treatment Scheme - capitation fees payable to participating GPs and Community Pharmacists and claims by Pharmacists for the ingredient cost of the Methadone and Medicinal Products containing Buprenorphine dispensed and the associated dispensing fees are processed and paid by the Primary Care Reimbursement Service.

### Immunisations for GMS Eligible Persons

Agreement was reached between the Department of Health and the Irish Medical Organisation on fee rates to be applied to certain immunisations for GMS eligible persons. The immunisations encompassed by the agreement are - Pneumococcal, Influenza, Hepatitis B and the combined Pneumococcal /Influenza.

## Schemes – Claim Reimbursement and Payment Arrangements continued

### **Discretionary Hardship Arrangements**

Medical Card patients, for whom Non GMS reimbursable items have been prescribed, may make application to the HSE Community Healthcare Organisation (CHO) for approval to have such items dispensed by a Community Pharmacist. Previously, the CHO reimbursed Community Pharmacists directly in respect of such prescribed items. In July 2009 reimbursement for these items transferred to the Primary Care Reimbursement Service.

### **Centralised reimbursement of selected high cost drugs administered or dispensed to patients in hospitals**

The HSE reimburses selected Oncology and Hepatitis C drugs.

The National Cancer Control Programme (NCCP) established the National Cancer Drug Management Programme to develop and improve the care provided to patients receiving treatment with oncology drugs. A national management system for cancer drugs was set up within the PCRS to facilitate centralised reimbursement and data capture of selected high-cost oncology drugs. This allows national oversight of the expenditure on high-cost oncology drugs in line with approved indications, improved service planning and budgetary projections and a national approach to provision of oncology drugs.

The Hepatitis C drugs are dispensed to patients in the designated adult hepatology units.

### **Centralised reimbursement of Outpatient Parenteral Antimicrobial Therapy (OPAT)**

The HSE reimburses Outpatient Parenteral Antimicrobial Therapy (OPAT) drugs, medicines and appliances administered by healthcare professionals or self-administered by patients in the community.

### **Redress for Women Resident in Certain Institutions**

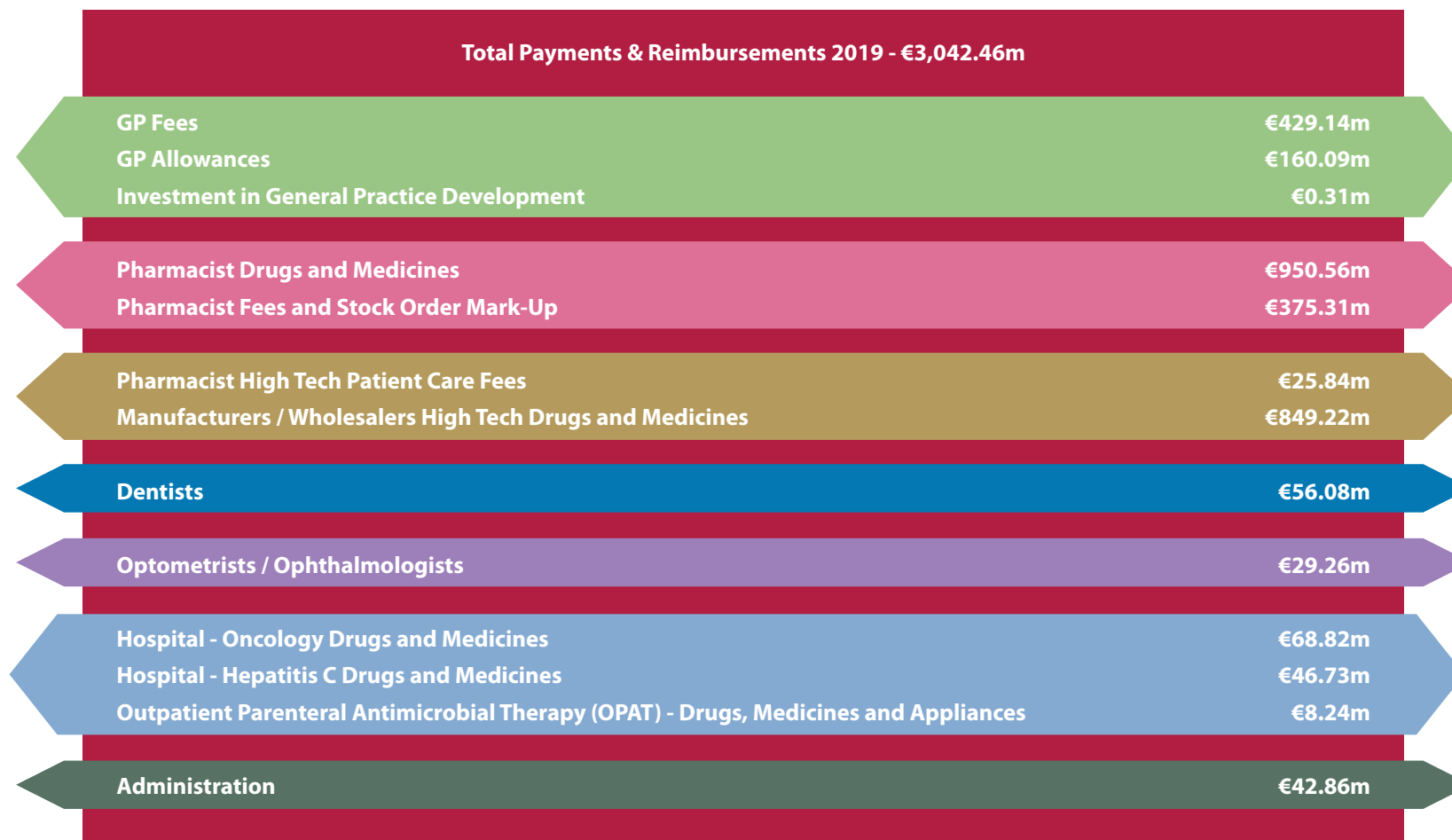
Under the Redress for Women Resident in Certain Institutions Act 2015, it was provided that the Health Service Executive (HSE) would make available specified services to women eligible for the Restorative Justice Scheme, administered by the Department of Justice and Equality. Services include General Practitioner services, drugs, medicines and medical and surgical appliances, dental, ophthalmic and aural services, home nursing service, home support services, chiropody services, physiotherapy services, and a counselling service. Card holders are not required to pay any prescription fees.

## Summary Statement of Activity - 2019

- Payments and reimbursements during 2019 were approximately €3,042.46m.
- Claim data is processed and reimbursements are made by the HSE PCRS under the following Schemes:
  - General Medical Services (GMS);
  - Drugs Payment Scheme (DPS);
  - Long Term Illness (LTI);
  - Dental Treatment Services Scheme (DTSS);
  - European Economic Area (EEA);
  - High Tech Arrangements (HT);
  - Primary Childhood Immunisation;
  - Health (Amendment) Act 1996;
  - Opioid Substitution Treatment Scheme;
  - Health Service Executive Community Ophthalmic Services Scheme (HSE-COSS).
- Payments to Pharmacists totalled €1,351.71m:
  - GMS: Prescriptions €963.19m, Stock Order Forms €6.60m;
  - DPS €75.47m;
  - LTI €262.62m;
  - EEA €0.71m;
  - The Health (Amendment) Act 1996, Opioid Substitution Treatment Scheme, DTSS prescriptions, and Pharmacy Training Grants €16.26m;
  - Influenza Vaccination Scheme €1.02m.
  - Patient Care Fees of €25.84m were paid to pharmacists under High Tech Arrangements;
- Total cost of Pharmacy fees €375.31m.
- Prescription charges of €85.33m.
- Over 79m prescription items were paid for by the PCRS – an increase of over 1.72m items on 2018.
- Payments to GPs for fees and allowances totalled €589.23m.
- Payments to Manufacturers/Wholesalers of High Tech drugs and medicines totalled €849.22m.
- Payments to Dentists under the DTSS totalled €56.08m.
- Payments to Optometrists/Ophthalmologists under the HSE-COSS totalled €29.26m.
- Payments under centralised reimbursement of certain approved high cost Oncology, Hepatitis C drugs and medicines and Outpatient Parenteral Antimicrobial Therapy (OPAT) drugs, medicines and appliances totalled €123.79m.
- Administration costs were €42.86m.

**Note:** The figures detailed above have been rounded for reporting purposes.

## Total Payments and Reimbursements – 2019



*The figures detailed above have been rounded for reporting purposes.*

## Total Payments and Reimbursements – 2019 continued

- Fees paid to GPs include €7.87m in respect of the Primary Childhood Immunisation Scheme, €0.19m in respect of the Health (Amendment) Act 1996 and €8.00m in respect of the Opioid Substitution Treatment Scheme.
- Payments to Pharmacists include €1.45m in respect of drugs/medicines dispensed under the Health (Amendment) Act 1996, €13.57m in respect of the Opioid Substitution Treatment Scheme, €0.44m in respect of Pharmacy Training Grants, €0.80m in respect of DTSS prescriptions and €1.02m in respect of the Influenza Vaccination Scheme.
- Fees paid to Pharmacists include €68.14m in respect of the phased dispensing of a reimbursable item based on one of the reasons specified under the agreement between the Department of Health and Children and the Irish Pharmaceutical Union.
- Payments to Optometrists/Ophthalmologists include €2.26m in respect of Optical Services for Children, €0.16m in respect of Optical Services for Teenagers and €0.12m in respect of treatments under the Health (Amendment) Act 1996.
- The corresponding figures for 2018 are:
  - Total payments and reimbursements €2,908.29m.
  - GP Fees €411.75m and GP Allowances €153.66m.
  - Phased Fees €75.70m.
  - Investment in General Practice Development €0.49m.
  - Pharmacy Drugs and Medicines €919.07m, Fees and Stock Order Mark-Up €375.20m.
  - Payments to Dentists under the DTSS €58.68m.
  - Payments to Optometrists/Ophthalmologists under the COSS €29.83m.
  - High Tech Arrangements – Payment to wholesalers €781.23m which includes a deduction related to returned stock and patient care fees paid to pharmacists of €23.36m.
  - Hospital Oncology Drugs €44.95m.
  - Hospital Hepatitis C Drugs €64.62m.
  - Outpatient Parenteral Antimicrobial Therapy (OPAT) €6.46m.
  - Administration costs were €38.99m.

*The figures detailed above have been rounded for reporting purposes.*

## Number of Agreements with Contractor Groups

General Practitioners 2,974	Pharmacists 1,884	Dentists 1,654	Optometrists 590
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The number of agreements between the Health Service Executive and General Practitioners for the provision of services to GMS cardholders reflects the policy position agreed between the Department of Health and the Irish Medical Organisation on entry to the GMS Scheme. At December 2019 there were 2,974 agreements.

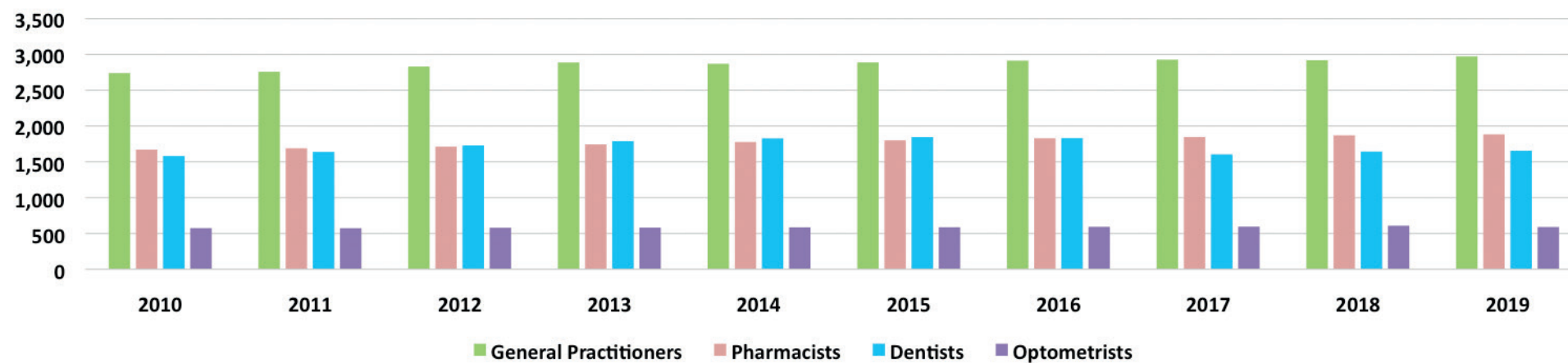
### Number of Agreements as at 31st December 2019

Community Healthcare Organisation	General Practitioners	Pharmacists	Dentists	Optometrists
CHO Area 1	232	167	157	64
CHO Area 2	318	196	197	77
CHO Area 3	250	162	107	47
CHO Area 4	472	274	334	74
CHO Area 5	294	210	182	68
CHO Area 6	290	164	102	49
CHO Area 7	398	246	216	71
CHO Area 8	334	245	165	77
CHO Area 9	386	220	194	63
<b>National</b>	<b>2,974</b>	<b>1,884</b>	<b>1,654</b>	<b>590</b>

Note: Included in the table above are the following:

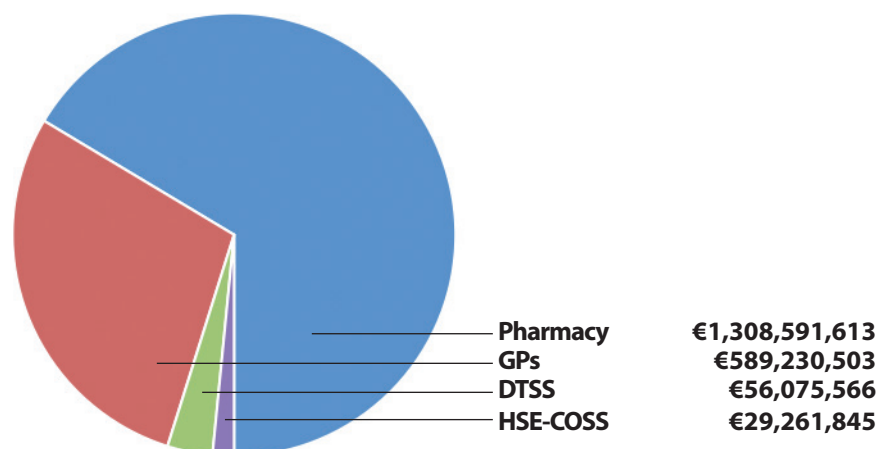
- (i) 465 GPs not contracted to the GMS Scheme who are registered to provide services under the Primary Childhood Immunisation Scheme, the Health (Amendment) Act 1996, Heartwatch, Opioid Substitution Treatment Scheme and National Cancer Screening Service.
- (ii) 11 Pharmacists who are registered to provide services under non GMS Schemes.
- (iii) 158 Dentists employed by the HSE who provide services under the Dental Treatment Services Scheme.
- (iv) 29 Clinical Dental Technicians.

## Number of Agreements with Contractor Groups 2010 - 2019



Year	General Practitioners	Pharmacists	Dentists	Optometrists
2010	2,740	1,671	1,582	574
2011	2,758	1,690	1,639	573
2012	2,832	1,713	1,730	580
2013	2,888	1,744	1,790	582
2014	2,870	1,778	1,827	586
2015	2,889	1,801	1,847	587
2016	2,914	1,830	1,831	593
2017	2,928	1,849	1,604	595
2018	2,921	1,870	1,644	608
2019	2,974	1,884	1,654	590

## Total Payments to Contractor Groups by CHO 2019



Community Healthcare Organisation	*GPs	**Pharmacy	***DTSS	HSE-COSS
CHO Area 1	€54,964,311	€119,310,882	€6,270,918	€3,015,480
CHO Area 2	€63,543,910	€138,532,274	€5,604,714	€3,224,126
CHO Area 3	€52,065,299	€114,591,716	€4,802,641	€2,790,893
CHO Area 4	€93,453,639	€199,632,917	€8,858,151	€4,173,293
CHO Area 5	€73,039,511	€163,874,274	€7,892,376	€4,502,512
CHO Area 6	€44,030,182	€83,509,936	€2,531,527	€1,599,008
CHO Area 7	€68,163,026	€168,335,474	€6,735,779	€3,357,268
CHO Area 8	€75,146,864	€170,998,631	€7,555,957	€3,922,029
CHO Area 9	€64,823,761	€149,805,509	€5,823,503	€2,677,236
<b>National</b>	<b>€589,230,503</b>	<b>€1,308,591,613</b>	<b>€56,075,566</b>	<b>€29,261,845</b>
<b>Corresponding figures for 2018</b>	<b>€565,410,997</b>	<b>€1,277,224,156</b>	<b>€58,680,201</b>	<b>€26,987,051</b>

Note: (i) \*GP figures include GMS and non GMS GPs.  
(ii) \*\*Pharmacy figures include GMS, Stock Orders, DPS, LTI and EEA claims.  
(iii) \*\*\*Dental figures include HAA claims since 2017.





# CARDHOLDER SECTION

## Number of Eligible Persons per Scheme - 2019

GMS 1,544,374	GPVC 524,494	DPS 1,362,639	LTI 295,033
<p>Persons who are unable without undue hardship to arrange General Practitioner medical and surgical services plus dental and ophthalmic services for themselves and their dependants are provided with such services under the GMS Scheme. Since 1st October 2010, a person who is supplied by a Community Pharmacy Contractor with a drug, medicine or surgical appliance on the prescription of a Registered Medical Practitioner, Registered Dentist or Registered Nurse Prescriber is charged a prescription charge, currently (1st January 2018) €2.00 per item subject to a limit of €20.00 per family per month and this charge is recouped from payment to the Pharmacist. Since the 1st April 2019, the prescription charge for over 70s and their dependents is €1.50 per item subject to a limit of €15.00 per family per month. An eligible person is entitled to select a GP of his/her choice, from among those GPs who have entered into agreements with the Health Service Executive. Drugs, medicines and appliances prescribed by participating GPs for their GMS patients are provided through Community Pharmacies. Dental and ophthalmic services are provided by Dentists and Optometrists/Ophthalmologists who have contracts with the Health Services Executive. GMS prescription forms may be dispensed in any Pharmacy that has an agreement with the Health Service Executive to dispense GMS prescription forms.</p>		<p>In rural areas, where a GP has a centre of practice three miles or more from the nearest Community Pharmacy participating in the Scheme, the GP dispenses for those persons served from the centre who opt to have their medicines dispensed by him/her. The number of eligible GMS persons at year end included 14,078 persons who were entitled and had opted to have their medicines dispensed by their GP.</p>	<p>Under the terms of the Drugs Payment Scheme, persons who do not have a medical card may apply for a Drugs Payment Scheme card on an individual or family unit basis. Prescribed medicines, which are reimbursable under the GMS Scheme, costing in excess of a specified amount per month, €124 (effective 1st April 2019), per family, is claimed by the Pharmacy and is paid by the Primary Care Reimbursement Service.</p>
		<p>On approval by the Health Service Executive, persons who suffer from one or more of a schedule of illnesses are entitled to obtain, without charge, irrespective of income, necessary drugs/medicines and/or appliances under the LTI Scheme. The Primary Care Reimbursement Service makes payments on behalf of the Health Service Executive for LTI claims submitted by Pharmacies.</p>	

### Figures as at 31st December 2019

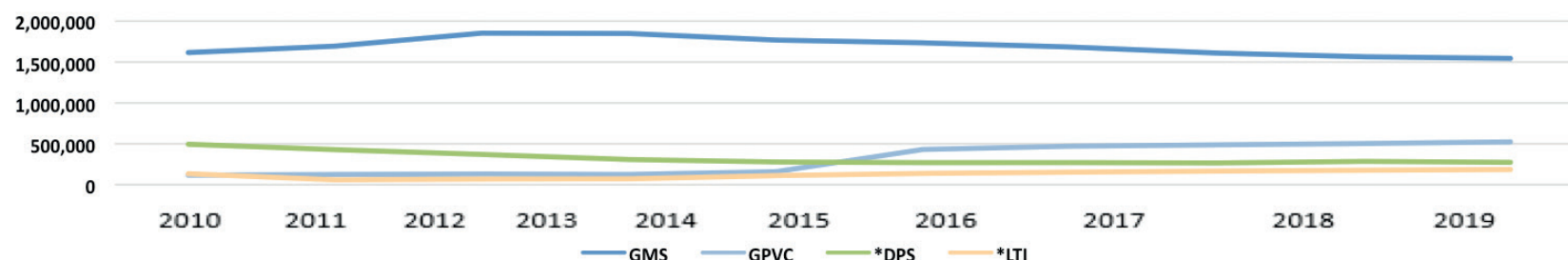
Community Healthcare Organisation	GMS	GPVC	*DPS	*LTI
CHO Area 1	161,581	41,904	15,781	16,220
CHO Area 2	162,365	49,229	25,209	16,331
CHO Area 3	135,796	41,789	23,769	16,235
CHO Area 4	222,191	79,819	45,495	26,845
CHO Area 5	197,719	55,632	27,331	23,165
CHO Area 6	78,544	55,481	31,063	14,629
CHO Area 7	200,996	69,201	38,910	25,451
CHO Area 8	216,359	66,374	32,350	25,251
CHO Area 9	168,823	65,065	33,686	21,776
<b>National</b>	<b>1,544,374</b>	<b>524,494</b>	<b>273,594</b>	<b>185,903</b>
<b>** % of Population</b>	<b>32.44%</b>	<b>11.01%</b>	<b>5.75%</b>	<b>3.90%</b>

**GMS** - General Medical Services Scheme. **GPVC** - GP Visit Card Scheme. **DPS** - Drugs Payment Scheme. **LTI** - Long Term Illness Scheme.

\*The DPS and LTI figures shown refer to the number of eligible patients for whom claims were submitted to PCRS by pharmacies.

\*\*National population figures are based on the Census figures for 2016.

## Number of Eligible Persons per Scheme 2010 - 2019



Figures as at 31st December

Year	GMS	GPVC	*DPS	*LTI
2010	1,615,809	117,423	494,550	134,926
2011	1,694,063	125,657	429,102	59,274
2012	1,853,877	131,102	370,791	69,513
2013	1,849,380	125,426	308,357	71,926
2014	1,768,700	159,576	278,227	111,940
2015	1,734,853	431,306	269,930	138,415
2016	1,683,792	470,505	270,525	153,446
2017	1,609,820	487,510	265,891	166,818
2018	1,565,049	503,329	285,599	177,481
2019	1,544,374	524,494	273,594	185,903

**GMS** - General Medical Services Scheme. **GPVC** - GP Visit Card Scheme. **DPS** - Drugs Payment Scheme. **LTI** - Long Term Illness Scheme.

\*The DPS and LTI figures shown refer to the number of eligible patients for whom claims were submitted to PCRS by pharmacies.

## GMS: Summary of Statistical Information for 2015 - 2019

Year ended December:-	2019	2018	2017	2016	2015	Year ended December:-	2019	2018	2017	2016	2015
(i) Number of Eligible Persons in December	2,068,868	2,068,378	2,097,330	2,154,297	2,166,159	Number of GP Contracts	2,974	2,921	2,928	2,914	2,889
						Number of Pharmacist Contracts	1,884	1,870	1,849	1,830	1,801
General Practitioners	(000's)	(000's)	(000's)	(000's)	(000's)		(000's)	(000's)	(000's)	(000's)	(000's)
Total Payments	€561,940	€531,631	€522,375	€515,166	€460,973	Total Cost of Stock Orders	€ 6,594	€ 6,165	€ 6,529	€ 6,553	€ 7,168
(ii) Avg. Payment to GPs per Eligible Person	€271.62	€257.03	€249.07	€252.12	€226.07	Ingredient Cost	€ 5,042	€ 4,663	€ 4,980	€ 5,023	€ 5,514
						Pharmacy Fees	€ 1,008	€ 933	€ 996	€ 1,005	€ 1,104
Pharmacists	(000's)	(000's)	(000's)	(000's)	(000's)	VAT	€ 544	€ 569	€ 553	€ 525	€ 550
Total Cost of Prescriptions	€ 963,193	€ 960,185	€ 983,304	€ 1,026,737	€ 1,047,136	Overall Cost of Drugs and Medicines	€ 969,787	€ 966,350	€ 989,833	€ 1,033,290	€ 1,054,304
Ingredient Cost	€ 628,119	€ 621,634	€ 635,268	€ 673,260	€ 695,478	(iii) Avg. Payment to Pharmacists per Eligible Person	€ 697.51	€ 679.40	€ 677.16	€ 671.44	€ 673.33
Dispensing Fee	€ 305,231	€ 309,306	€ 314,685	€ 318,580	€ 316,374						
VAT	€ 29,843	€ 29,245	€ 33,351	€ 34,897	€ 35,284	*Overall Payments	€1,531,727	€1,497,981	€1,512,208	€1,548,456	€1,515,277
Number of Forms	19,156	18,949	18,979	19,244	19,011						
Number of Items	60,073	59,218	58,595	58,683	57,973						
Avg. Cost per Form	€ 50.28	€ 50.67	€ 51.81	€ 53.35	€ 55.08						
Avg. Cost per Item	€ 16.03	€ 16.21	€ 16.78	€ 17.50	€ 18.06						
Avg. Ingredient Cost per Item	€ 10.46	€ 10.50	€ 10.84	€ 11.47	€ 12.00						
Avg. Items per Form	3.14	3.13	3.09	3.05	3.05						

Note: (i) Number of eligible persons in 2019 includes the number of eligible persons with Medical Cards and GP Visit Cards.  
(ii) Average payment to GPs is inclusive of GP Visit Card costs and exclusive of superannuation paid to retired DMOs.  
(iii) Average pharmacy payment per person is calculated on the number of persons who availed of services during 2019. The number of persons who availed of services in 2019 was 1,390,347.  
(iv) Overall payment per eligible person is based on the number of persons who availed of services during 2019.  
(v) \*Overall Payments includes payments made under Discretionary Hardship Arrangements.

## LTI / DP Schemes: Summary of Statistical Information for 2015 - 2019

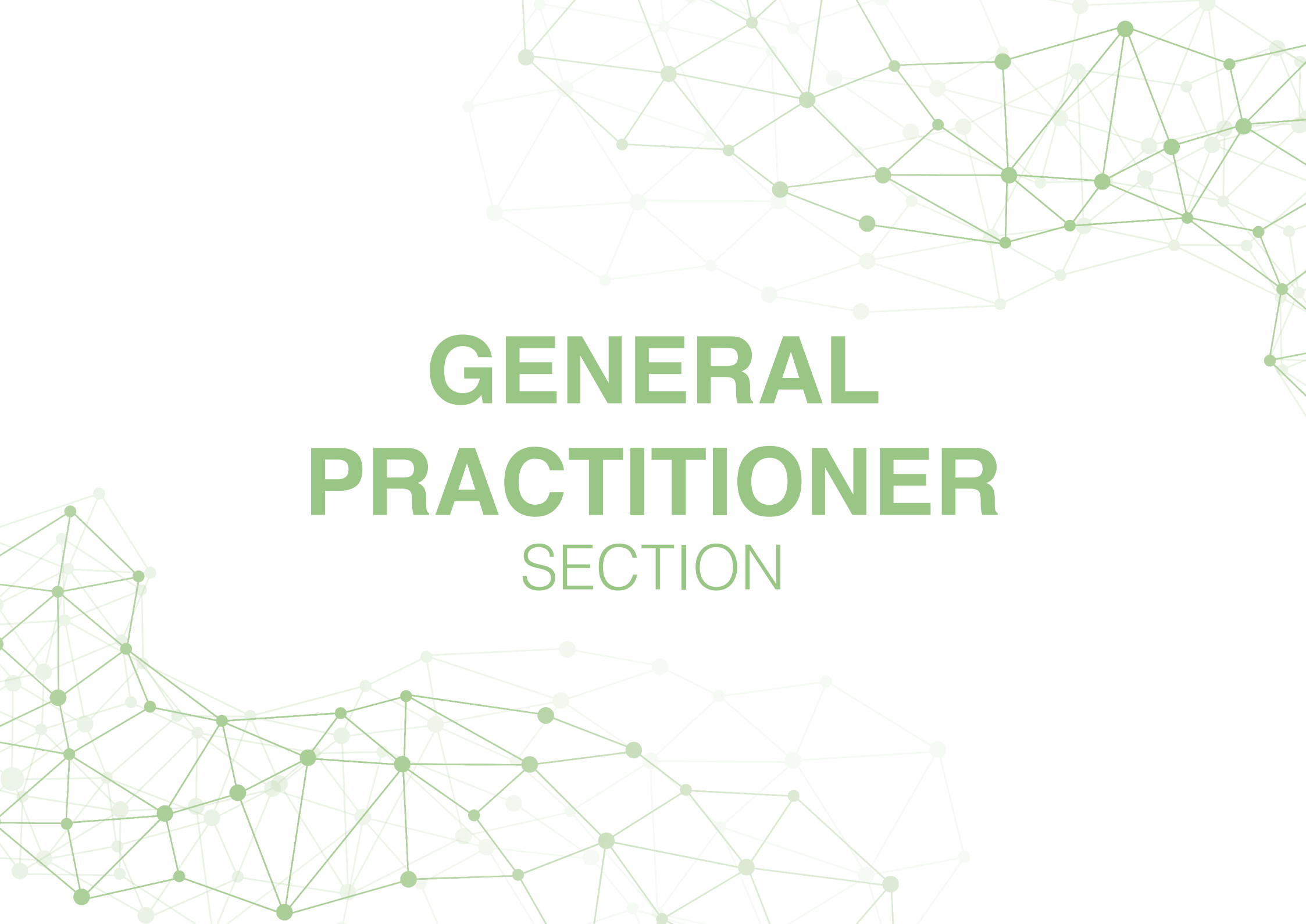
Year ended December:-	2019	2018	2017	2016	2015	Year ended December:-	2019	2018	2017	2016	2015
<b>LTI Scheme</b>						<b>DP Scheme</b>					
						Number of Eligible Persons in December	1,362,639	1,290,634	1,258,531	1,272,771	1,301,952
*Number of Claimants	185,903	177,481	166,818	153,446	138,415	*Number of Claimants	273,594	285,599	265,891	270,525	269,930
						**Number of Families	188,119	187,789	168,978	170,531	169,312
	(000's)	(000's)	(000's)	(000's)	(000's)		(000's)	(000's)	(000's)	(000's)	(000's)
Number of Items	9,464	8,936	8,305	7,594	6,759	Number of Items	7,901	7,633	7,135	7,204	7,159
Total Cost	€262,625	€242,694	€221,904	€207,445	€189,484	Gross Cost	€165,306	€157,050	€148,335	€153,670	€155,869
<b>Avg. Cost per Item</b>	<b>€27.75</b>	<b>€27.16</b>	<b>€26.72</b>	<b>€27.32</b>	<b>€28.03</b>	***Net Cost	€75,471	€67,363	€62,095	€65,300	€67,109
<b>*Avg. Cost per Claimant</b>	<b>€1,412.70</b>	<b>€1,367.44</b>	<b>€1,330.21</b>	<b>€1,351.91</b>	<b>€1,368.95</b>	<b>Avg. Gross Cost per Item</b>	<b>€20.92</b>	<b>€20.57</b>	<b>€20.79</b>	<b>€21.33</b>	<b>€21.77</b>
						<b>*Avg. Net Cost per Claimant</b>	<b>€275.85</b>	<b>€235.87</b>	<b>€233.53</b>	<b>€241.38</b>	<b>€248.61</b>

Note: (i) \*These figures are based on the number of eligible persons who availed of services under each Scheme.

(ii) \*\*These figures are based on expenditure above and below the monthly co-payment.

(iii) \*\*\*The Net Cost is inclusive of claims below the monthly co-payment of €124 (effective 1st April 2019) payable to the Pharmacy by an individual or family.





# GENERAL PRACTITIONER SECTION

## Fees and Allowances under Capitation Agreement as at 31st December 2019

Ages	Male €	Female €
Under 5 Years	74.59	72.76
5 - 15	43.29	43.79
16 - 44	55.26	90.37
45 - 64	110.38	121.29
65 - 69	116.28	129.72

The Capitation rate is €125 for GPs who hold a contract for children under 6.

The Capitation rate is €271.62 per annum for persons aged 70 years and over in the community issued with a medical card.

A Capitation rate of €434.15 per annum will apply to anyone aged 70 years and over in a private nursing home (approved by the Health Service Executive) for a continuous period in excess of five weeks.

The above rates are exclusive of Supplementary Out-of-Hours Fee of €3.64.

### Services rendered by the service provider under the Agreement of 2019 (S.I. No.290 effective 1st July 2019).

Ages	Male €	Female €
Under 6 Years	125.00	125.00
6 - 15	51.96	52.56
16 - 44	66.33	108.47
45 - 64	132.49	145.58
65 - 69	139.57	155.70

The Capitation rate is €326.02 per annum for persons aged 70 years and over in the community issued with a medical card.

A Capitation rate of €521.10 per annum will apply to anyone aged 70 years and over in a private nursing home (approved by the Health Service Executive) for a continuous period in excess of five weeks.

The above rates are exclusive of Supplementary Out-of-Hours Fee of €3.64.

Out-of-Hours Payment	
Surgery (6 p.m. - 8 a.m.)	€41.63
Surgery (8 - 9 a.m. and 5 - 6 p.m.)	€13.88
Domiciliary	€41.63
Additional Fee (Surgery or Domiciliary)	€13.88



## Fees and Allowances under Capitation Agreement as at 31st December 2019 continued

Special Items of Service			
A	Excisions / Cryotherapy / Diathermy of Skin Lesions		€24.80
AB	Long Acting Reversible Contraceptive (LARC)		€70.00
AC	Removal Long Acting Reversible Contraceptive (LARC)		€50.00
AD	24 Hour Ambulatory Blood Pressure Monitoring		€60.00
AE	Cervical Screening Consultation		€50.00
B	Suturing of cuts and lacerations		€50.00
C	Draining of Hydroceles		€24.80
D	Treatment and Plugging of Dental and Nasal Haemorrhages		€24.80
F	ECG Tests and their Interpretation		€24.80
H	Removal of adherent foreign bodies from the conjunctival surface of the eye		€24.80
J	Removal of lodged or impacted foreign bodies from the ear, nose and throat		€24.80
K	Nebuliser treatment in the case of acute asthma attack		€37.21
L	Bladder Catheterization		€60.00
M	Attendance at case conferences (where authorised by the HSE)		€62.02
R	Pneumococcal Vaccination		€28.50
S	Influenza Vaccination		€15.00
T	Pneumococcal / Influenza Vaccinations		€42.75
U	Hepatitis B Vaccination		€142.57
V	H1N1 Vaccination		€10.00

Temporary Residents/EEA Visitors/Emergency	
Surgery	€40.94
Domiciliary	€40.94
Fee for Second Medical Opinion	€26.46

Rural Practice Allowance	
Rural Practice Allowance Per Annum	€16,216.07
Rural Practice Support Framework Allowance Per Annum, where there is one or no other practice unit in the area	€20,000.00
Rural Practice Support Framework Allowance Per Annum, where there are two practice units in the area however, one or both practice units is not in receipt of Rural Practice Allowance	€10,000.00
Opt-in GP (dispensing doctor)	€38.03
Pilot GP (dispensing doctor)	€43.88
Continuous GP (dispensing doctor)	€12.48

## Fees and Allowances under Capitation Agreement as at 31st December 2019 continued

Practice Support		
Allowance for Practice Secretary up to a maximum Per Annum of:		€24,068.99
Allowance for Practice Nurse up to a maximum Per Annum of:		€37,822.72
Allowance for Practice Manager up to a maximum Per Annum of:		€30,945.86
Contributions to Locum Expenses (Subject to the conditions of the Agreement)		
Annual Leave	Up to a maximum of €1,380.65 per week	
Sick Leave	Up to a maximum of €1,380.65 per week	
Study Leave	Up to a maximum of €197.24 per day	
Adoptive Leave		
Maternity Leave		
Paternity Leave		
Contributions to Medical Indemnity Insurance		
Calculation of contributions related to GMS panel numbers and net premium		
Asylum Seekers		
A once off superannuable registration fee of €173.69 per patient is payable to GPs in respect of patients on their GMS panel who are seeking asylum in Ireland		

**Fees and Allowances under the Fee-Per-Item Agreement and Fees under the Immunisation Scheme, Health (Amendment) Act 1996, Opioid Substitution Treatment Scheme and Heartwatch Programme as at 31st December 2019**

GP Surgery Consultations			Special Items of Service		
Day	Normal Hours	€11.87	AE	Cervical Screening Consultation	€50.00
Late	Outside Normal Hours other than night	€16.88	F	Suturing of cuts and lacerations	€22.43
Night	Midnight to 8:00 a.m.	€33.38	G	Treatment and Plugging of Dental and Nasal Haemorrhages	€22.43
Domiciliary Consultations			H	Draining of Hydroceles	€22.43
Day		€17.51	J	Recognized Vein Treatment	€22.43
Late		€22.93	K	Excisions / Cryotherapy / Diathermy of Skin Lesions	€22.43
Night		€44.96	M	ECG Tests and their Interpretation	€22.43
Temporary Residents/EEA Visitors/Emergency			N	Instruction in the fitting of a diaphragm	€22.43
Surgery		€40.94	R	Pneumococcal Vaccination	€28.50
Domiciliary		€40.94	S	Influenza Vaccination	€15.00
Rural Practice Allowance			T	Pneumococcal / Influenza Vaccinations	€42.75
Per Annum		€7,042.91	U	Hepatitis B Vaccination	€142.57
Locum and Practice Expense Allowance			V	H1N1 Vaccination	€10.00
Per Annum		€1,371.06	Immunisation Fees		
Sessional Rate - Homes for the Aged				Registration of child with a GP	€37.78
Per 3 Hour Session		€73.18		6 in one Vaccine	€206.31
				95% uptake bonus	€60.63
			Health (Amendment) Act 1996		
				Surgery Fee	€30.53
				Domiciliary Fee	€40.27
			Opioid Substitution Treatment Scheme		
				Level 1 Contractor	€159.97
				Level 2 Contractor	€176.43
			Heartwatch Programme		
				Heartwatch Programme	€39.31

## Fees and Allowances under the Capitation / Fee-Per-Item Agreement as at 31st December 2019

### Type 2 Diabetes - Cycle of Care

A once off registration fee of €30.00 per registered patient.

Following registration, GPs receive the monthly element of the agreed annual fee of €100.

### Children in the Community aged Under 6

The Capitation rate is €125.00 per annum for children aged under 6 years issued with a GP Visit Card.

This rate includes the Supplementary Out-Of-Hours fee, effective 1st July 2015.

### Children aged Under 6 - Asthma Cycle of Care

A once off registration fee of €50.00 for children aged under 6 years diagnosed with asthma.

Following registration, GPs receive the monthly element of the agreed fee of €90 in the first year and receive the monthly element of the agreed fee of €45 in subsequent years up to the child's 6th birthday.

### Special Items of Service - Under 6

A	Excisions / Cryotherapy / Diathermy of Skin Lesions	€24.80
D	Treatment and Plugging of Dental and Nasal Haemorrhages	€24.80
H	Removal of adherent foreign bodies from the conjunctival surface of the eye	€24.80
M	Attendance at case conferences	€62.02
W	Nebuliser treatment in the case of acute asthma attack	€37.21
X	Removal of lodged or impacted foreign bodies from the ear, nose and throat and skin	€24.80
Y	Suturing of cuts and lacerations (including application of tissue glue)	€37.21
Z	Draining of Abscesses	€24.80

## Payments to General Practitioners 2019

### Fees €429.14m

Payments to General Practitioners are categorised as fees and/or allowances. For the majority of GPs who operate under the 1989 agreement the principal fee is the capitation per person which is weighted for gender and age - capitation fees totalled €302,385,364 in 2019. Fees totalling €485,929 were paid to 3 GPs who continue to provide services under the Fee-Per-Item of Service agreement.

Apart from 'Out-of-Hours' fees and fees for a range of special services, the cost of services provided in normal hours by GPs for GMS persons, including the prescribing of necessary medicines, is encompassed by the capitation fee. All GMS persons can avail of full GP services and in many cases they can benefit from specialist clinics provided by GPs for issues such as Women's Health, Family Planning and Asthma.

### Allowances €160.09m

In addition to a capitation fee an 'Out-of-Hours' fee is payable for non routine consultations when a GMS cardholder is seen by their GP or another GP acting on his/her behalf from 5 pm in the evening to 9 am on the following morning (Monday to Friday) and all hours on Saturdays, Sundays and Bank Holidays. The number of 'Out-of-Hours' claims for 2019 was 939,342 with expenditure totalling €35,909,494. Special fees are payable for a range of additional services such as excisions, suturing, vaccinations, catheterization, family planning etc. 1,312,012 special services were claimed in 2019 with expenditure totalling €31,689,216.

Annual and study leave together with locum, nursing and other practice support payments account for most of the €160,093,276 allowances paid to GPs in 2019.

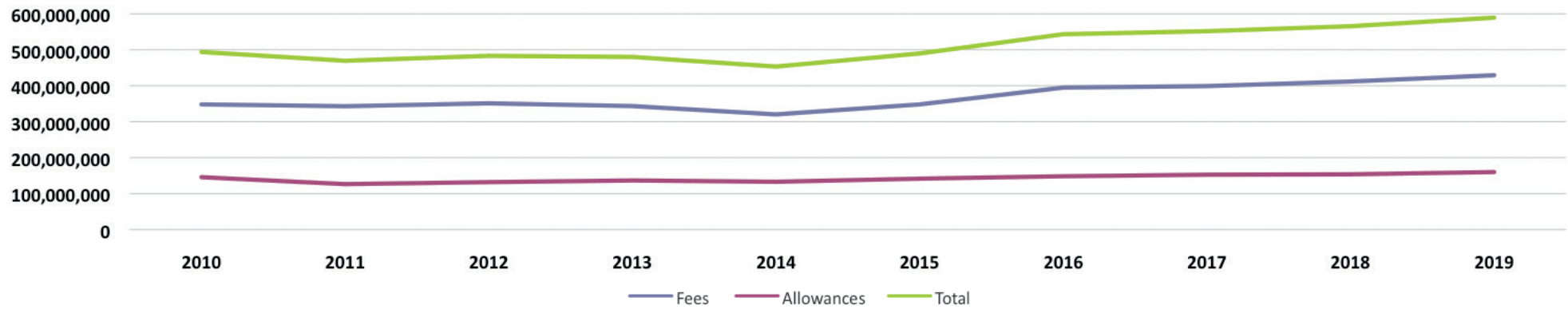
### Payments to GPs in each CHO Area

Community Healthcare Organisation	2019
CHO Area 1	€54,964,311
CHO Area 2	€63,543,910
CHO Area 3	€52,065,299
CHO Area 4	€93,453,639
CHO Area 5	€73,039,511
CHO Area 6	€44,030,182
CHO Area 7	€68,163,026
CHO Area 8	€75,146,864
CHO Area 9	€64,823,761
<b>National</b>	<b>€589,230,503</b>

### Reimbursement of claims made by GPs include:

National Cancer Screening Services	€10,005,254
Opioid Substitution Treatment Scheme	€7,998,677
Primary Childhood Immunisation Scheme	€7,874,118
Heartwatch	€902,756
Maternity and Infant Care Scheme	€319,822
Health (Amendment) Act 1996	€190,300

## Payments to General Practitioners 2010 - 2019

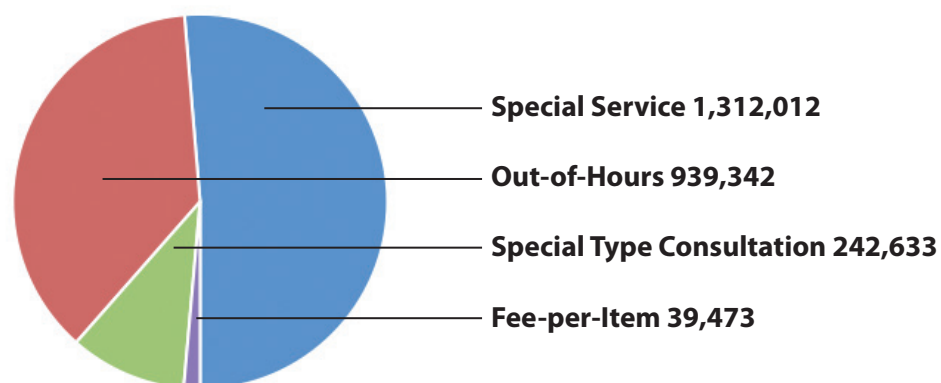


### Payments to General Practitioners 2010 - 2019

Year	Fees	Allowances	Total
2010	348,130,051	145,703,446	493,833,497
2011	342,935,677	126,426,925	469,362,602
2012	351,088,405	132,051,034	483,139,439
2013	343,404,031	136,622,499	480,026,530
2014	320,269,633	132,983,184	453,252,817
2015	348,035,815	141,659,008	489,694,823
2016	394,797,667	148,334,217	543,131,884
2017	398,912,575	152,662,775	551,575,350
2018	411,754,432	153,656,565	565,410,997
2019	429,137,227	160,093,276	589,230,503

## Number of Claims by General Practitioners

### National – 2019



### Number of Claims by General Practitioners in each CHO

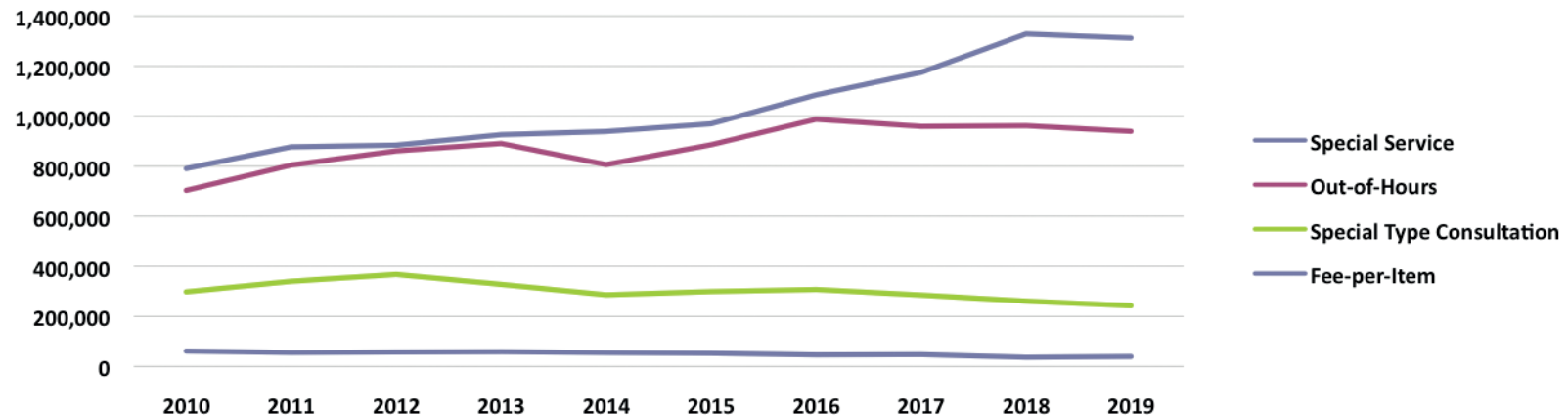
Community Healthcare Organisation	Fee-per-Item	Special Type Consultation	Special Service	Out-of-Hours
CHO Area 1	-	20,687	132,370	60,119
CHO Area 2	-	27,917	162,362	88,093
CHO Area 3	-	25,483	109,930	85,482
CHO Area 4	24,719	36,779	214,503	214,784
CHO Area 5	1,198	19,497	173,644	149,502
CHO Area 6	-	8,852	92,160	36,295
CHO Area 7	13,556	50,195	131,749	97,655
CHO Area 8	-	23,565	167,416	120,596
CHO Area 9	-	29,658	127,878	86,816
<b>National</b>	<b>39,473</b>	<b>242,633</b>	<b>1,312,012</b>	<b>939,342</b>

A majority of GPs are paid an annual capitation fee for each eligible person - the rate of payment is determined by the age/gender of the person. A minority of GPs (3) who have continued to provide services under the Fee-per-Item of Service agreement are paid a fee for each Doctor/Patient contact.

A Special Type Consultation (STC) fee may be claimed when a GP provides a service to a GMS eligible person who is not on their GMS panel. Such GMS eligible persons may require medical services such as an Out-of-Hours, or emergency consultation, or they may be temporarily resident in an area not served by their GP.

General Practitioners can claim fees for special items of service provided to eligible persons under the Capitation Agreement and the Fee-per-Item Agreement.

## Number of Claims by General Practitioners 2010 - 2019



Year	Fee-per-Item	Special Type Consultation	Special Service	Out-of-Hours
2010	61,408	298,354	790,908	703,623
2011	55,432	340,349	877,357	804,670
2012	57,331	367,788	884,313	861,133
2013	58,660	328,062	926,105	890,914
2014	55,047	286,222	938,890	806,522
2015	52,634	299,568	969,709	885,861
2016	46,100	307,742	1,084,881	987,711
2017	47,476	285,461	1,174,931	959,121
2018	36,343	261,254	1,328,715	961,873
2019	39,473	242,633	1,312,012	939,342



## GMS: Payments to General Practitioners

		2019 €	2018 €
<b>FEES</b>			
	- Capitation	302,385,364	277,190,633
	- Special Claims/Services	41,607,157	42,880,713
	- Out-of-Hours	35,909,494	36,870,234
	- Dispensing	679,653	855,561
	- Item of Service Contract	485,929	447,013
	- Asylum Seekers	547,124	413,209
	- Vaccinations	8,893,345	8,812,459
	- Asthma Registration	266,300	250,700
	- Asthma Capitation	803,891	918,446
	- Contribution for GP Height Measure and Self Zeroing Scale	4,602	2,676
	- Diabetes Capitation	9,826,192	8,970,202
	- Diabetes Registration	437,250	362,730
<b>ALLOWANCES</b>			
	- Secretarial/Nursing	91,687,863	89,418,026
	- Annual Leave	10,738,548	10,377,553
	- Rostering/Out-of-Hours	6,192,291	6,237,205
	- Medical Indemnity Insurance	7,552,800	6,685,376
	- Rural Practice	4,629,155	4,666,268
	- Study Leave	2,222,023	2,099,921
	- Sick Leave	1,596,985	1,312,582
	- Maternity Leave/Paternity Leave	2,120,697	2,007,492
	- Locum and Practice Expenses	4,113	4,113
<b>SALARIES</b>			
	- Benefits to retired DMOs and their dependants	2,081,067	2,238,257
	- Former District Medical Officers	1,257,545	1,307,125
<b>SUPERANNUATION FUND</b>			
	- Contribution	32,091,255	29,540,904
<b>TOTAL</b>		<b>€564,020,643</b>	<b>€533,869,398</b>





# PHARMACY SECTION

## Scale of Fees Payable to Participating Pharmacists as at 31st December 2019

<b>GMS Scheme</b>	€
<b>*Fee-Per-Item</b>	
- for each of the first 1,667 items dispensed by the Community Pharmacy Contractor in a month	5.00
- for each of the next 833 items dispensed by the Community Pharmacy Contractor in that month	4.50
- for each other item dispensed by the Community Pharmacy Contractor in that month	3.50
<b>Extemporaneous Fee</b>	6.53
<b>Extemporaneous dispensing and compounding of</b>	
- Powders	19.60
- Ointments and Creams	13.07
<b>Non-Dispensing Fee - exercise of professional judgement</b>	3.27
<b>Phased Dispensing Fee - each part of phased dispensing</b>	3.27
*A Fee-Per-Item is also payable on prescription forms issued by Dentists under the DTS Scheme.	
<b>Supplies to Dispensing Doctors</b>	
Pharmacists supplying Dispensing Doctors are reimbursed on the basis of the reimbursement price plus the relevant mark-up.	
<b>DPS/LTI/EEA Schemes and Health (Amendment) Act 1996</b>	
<b>*The Fee-Per-Item structure shown for the GMS Scheme above, also applies to the DPS/LTI/EEA Schemes and Health (Amendment) Act 1996.</b>	
<b>Reimbursement under these four schemes includes ingredient cost plus the Fee-Per-Item.</b>	
In the case of the Drugs Payment Scheme the PCRS makes payments to Pharmacists in respect of authorised patients whose monthly costs of prescribed drugs and medicines are in excess of the specified monthly amount (€124 1st April 2019) payable to the Pharmacist by an individual or family.	
<b>High Tech Arrangements</b>	
<b>Patient Care Fee: €62.03 per month.</b>	
<b>Non Dispensing Patient Care Fee: €31.02</b>	
- Fee payable for a maximum of 3 consecutive months where there has been no dispensing of High Tech medicines.	
<b>Opioid Substitution Treatment Scheme</b>	
<b>Patient Care Fee: Up to a Maximum of €62.00 per month.</b>	

## Payments to Pharmacists: Claims Reimbursed 2019

GMS €969.79m	DPS €75.47m	LTI €262.62m	EEA €0.71m
<p>A GMS cardholder who is provided with a properly completed GMS prescription form by his or her GP can choose to have their prescription forms dispensed in any of the Pharmacies who have entered into agreements with the Health Service Executive for the provision of services under Section 59 of the Health Act, 1970.</p> <p>In 2019 there were 19.16m GMS prescription forms containing over 60.07m prescription items which were dispensed at a cost of €963,192,621. (This figure excludes the cost of GMS stock orders of €6,594,723 in 2019). This equates to an average cost of €16.03 per dispensed item. During 2019, 90% of all GMS cardholders availed of prescription items at an average cost of €697.51 per person.</p> <p>Payments made to Pharmacists under the GMS and DTSS Schemes are inclusive of the ingredient cost of medicines, dispensing fees, and VAT where applicable.</p>		<p>Under Drug Payment Scheme (DPS), Long Term Illness (LTI) and European Economic Area (EEA) Schemes, Pharmacists are reimbursed the ingredient cost of items dispensed, dispensing fees and VAT where applicable.</p> <p>There were 88,748 persons who availed of High Tech Arrangements and patient care fees of €25.84m were paid to pharmacists under these arrangements.</p>	

### Payments to Pharmacists: Claims Reimbursed in each CHO

Community Healthcare Organisation	*GMS	DPS	LTI	EEA	Total
CHO Area 1	€93,012,325	€4,165,944	€22,026,883	€105,730	€119,310,882
CHO Area 2	€109,375,537	€6,167,126	€22,848,562	€141,049	€138,532,274
CHO Area 3	€86,788,727	€5,874,040	€21,825,494	€103,455	€114,591,716
CHO Area 4	€149,039,510	€11,750,450	€38,696,334	€146,623	€199,632,917
CHO Area 5	€124,796,420	€6,954,073	€32,054,367	€69,414	€163,874,274
CHO Area 6	€52,953,182	€10,408,218	€20,124,674	€23,862	€83,509,936
CHO Area 7	€120,270,816	€11,144,693	€36,888,631	€31,334	€168,335,474
CHO Area 8	€125,085,785	€8,346,841	€37,515,702	€50,303	€170,998,631
CHO Area 9	€108,465,042	€10,659,871	€30,644,025	€36,571	€149,805,509
<b>National</b>	<b>€969,787,344</b>	<b>€75,471,256</b>	<b>€262,624,672</b>	<b>€708,341</b>	<b>€1,308,591,613</b>

\*GMS - This figure includes Stock Order costs.

- Also Included in the above GMS figure is an amount of €0.38m which was paid for items dispensed under Redress for Women Resident in Certain Institutions, and €13.38m which was paid in respect of Non GMS Reimbursable Items dispensed under Discretionary Hardship Arrangements.

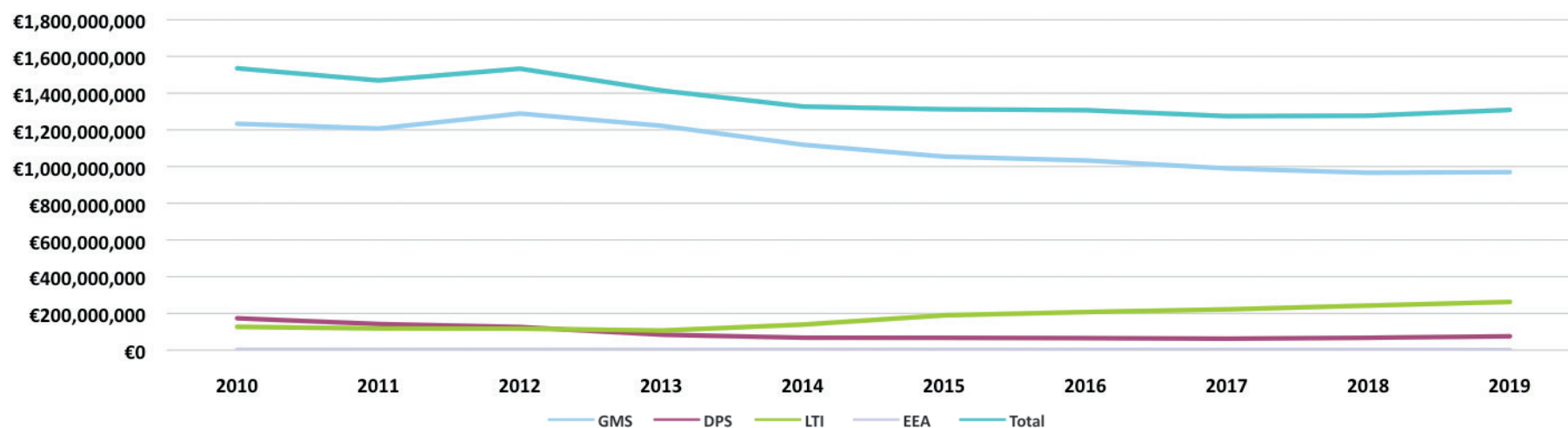
#### Additional payment of claims reimbursed to Pharmacists include:

High Tech Arrangements - Patient Care Fees	€25,843,066
Opioid Substitution Treatment Scheme	€13,574,227
Health (Amendment) Act 1996	€1,446,615
Influenza Vaccination Scheme	€1,017,585
Dental Treatment Services Scheme	€797,422
Pharmacy Training Grant	€441,055

#### Payments to Wholesalers and Manufacturers for High Tech Drugs and Medicines supplied to Pharmacists:

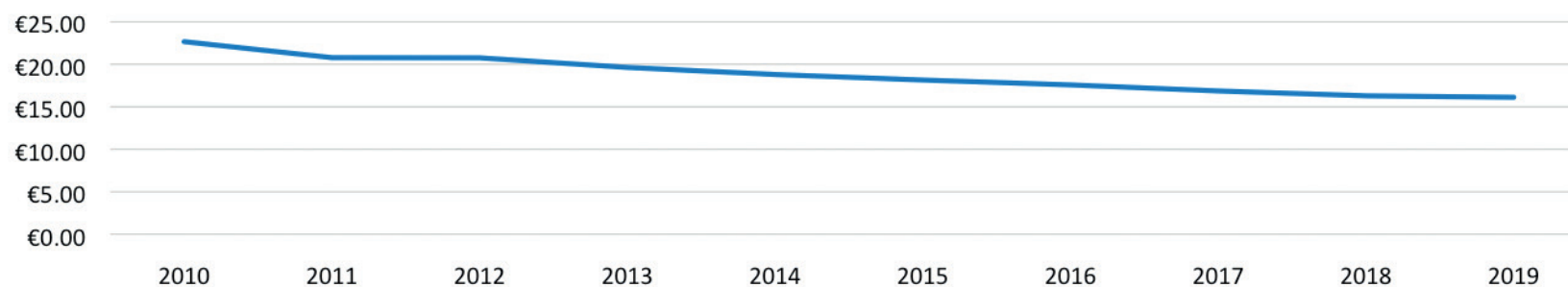
High Tech Arrangements - Drugs and Medicines	€849,224,988
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## Payments to Pharmacists: Claims Reimbursed 2010 - 2019



Year	GMS	DPS	LTI	EEA	Total
2010	€1,233,261,559	€173,435,072	€126,921,779	€1,744,446	€1,535,362,856
2011	€1,207,338,461	€142,138,915	€118,098,284	€1,598,020	€1,469,173,680
2012	€1,288,815,871	€125,691,064	€117,101,875	€1,778,697	€1,533,387,507
2013	€1,222,212,846	€84,045,549	€106,510,059	€1,490,790	€1,414,259,244
2014	€1,118,945,050	€67,534,381	€139,191,408	€1,248,767	€1,326,919,606
2015	€1,054,304,114	€67,108,587	€189,483,531	€1,136,724	€1,312,032,956
2016	€1,033,290,114	€65,299,554	€207,444,771	€998,483	€1,307,032,922
2017	€989,833,465	€62,094,671	€221,903,709	€884,229	€1,274,716,074
2018	€966,349,869	€67,362,845	€242,694,497	€816,945	€1,277,224,156
2019	€969,787,344	€75,471,256	€262,624,672	€708,341	€1,308,591,613

## Average GMS Cost per Pharmacy Item 2010 - 2019

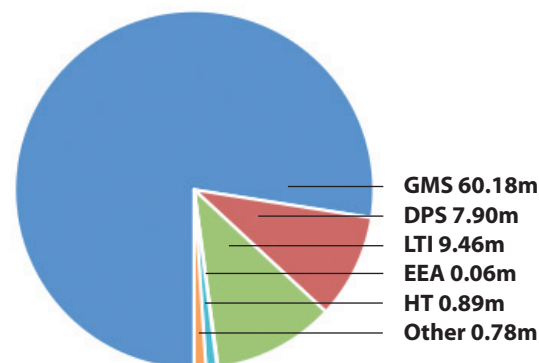


Year	*Total Number of Items	Total Payments	Average Cost per Item
2010	54,424,660	€1,233,261,559	€22.66
2011	58,099,381	€1,207,338,461	€20.78
2012	62,084,126	€1,288,815,871	€20.76
2013	62,272,035	€1,222,212,846	€19.63
2014	59,524,407	€1,118,945,050	€18.80
2015	58,093,584	€1,054,304,114	€18.15
2016	58,797,149	€1,033,290,114	€17.57
2017	58,713,753	€989,833,465	€16.86
2018	59,326,912	€966,349,869	€16.29
2019	60,176,425	€969,787,344	€16.12

\* Total number of Items includes Stock Order Items.

## Number of Items Claimed by Pharmacists

### National – Number of Items Claimed 2019



GMS prescription forms processed for payment in the year totalled 19.16m - the total of prescribed items was more than 60.07m - these accounted for approximately 76% of all items paid for by the Primary Care Reimbursement Service in 2019.

Approximately 38.79% of GMS forms contained a single item - 18.71% contained 2 items - the average number per form was approximately 3.14 items (2018 - 3.13).

### Number of Items claimed in each CHO

Community Healthcare Organisation	*GMS	DPS	LTI	EEA	HT	Other	Total
CHO Area 1	5,724,948	444,506	833,171	8,883	70,043	49,753	7,131,304
CHO Area 2	6,418,534	648,056	794,281	10,734	88,643	42,130	8,002,378
CHO Area 3	5,451,843	658,505	854,419	8,821	70,009	55,083	7,098,680
CHO Area 4	9,146,633	1,247,586	1,335,422	11,689	145,532	82,811	11,969,673
CHO Area 5	7,801,087	766,199	1,244,349	5,339	93,842	94,559	10,005,375
CHO Area 6	3,308,981	991,202	675,763	1,712	86,263	55,984	5,119,905
CHO Area 7	7,669,571	1,163,838	1,269,071	2,552	127,741	153,231	10,386,004
CHO Area 8	7,946,189	892,560	1,363,097	3,975	102,135	104,222	10,412,178
CHO Area 9	6,708,639	1,089,195	1,095,023	2,872	103,055	145,186	9,143,970
<b>National</b>	<b>60,176,425</b>	<b>7,901,647</b>	<b>9,464,596</b>	<b>56,577</b>	<b>887,263</b>	<b>782,959</b>	<b>79,269,467</b>

\*GMS includes: claim items and Stock Order items.

Other:	Claims:
Opioid Substitution Treatment Scheme	343,644
Discretionary Hardship Arrangements	140,752
Dental Treatment Services Scheme	136,251

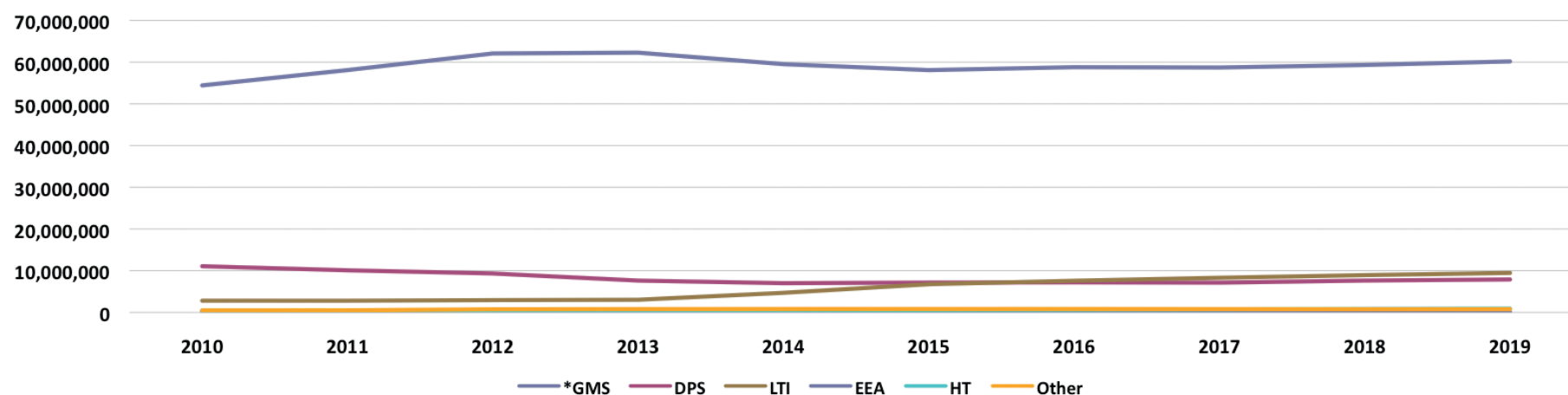
Other:	Claims:
Health (Amendment) Act 1996	94,452
Pharmacy Vaccinations	67,860

**GMS:** General Medical Services. **DPS:** Drugs Payment Scheme. **LTI:** Long Term Illness Scheme. **EEA:** European Economic Area. **HT:** High Tech Arrangements.

**Other:** Opioid Substitution Treatment Scheme, Health (Amendment) Act 1996, Dental Treatment Services Scheme, Vaccinations for GMS eligible persons (through Community Pharmacy) and Discretionary Hardship Arrangements.



## Number of Items Claimed by Pharmacists 2010 - 2019



\*GMS includes: claim items and Stock Order items.

## HSE – Medicines Management Programme (MMP)

The Medicines Management Programme (MMP) aims to promote safe, effective and cost-effective prescribing in Ireland.

The HSE-MMP is a multidisciplinary unit led by Prof Michael Barry, Clinical Lead, and aims to provide sustained national leadership relating to the quality of the medicines management process, access to medicines and overall expenditure on medicines. The Preferred Drug initiative is an ongoing project supporting prescribers in choosing the most efficient drug option in various therapeutic areas.

### HSE-MMP Preferred Drugs

Therapeutic Area	HSE-MMP Preferred Drug
PPI	<b>Pantoprazole</b>
Statin	<b><i>Under Review</i></b>
ACE inhibitor	<b>Ramipril</b>
ARB	<b>Candesartan</b>
Beta blocker	<b>Bisoprolol</b>
Calcium channel blocker	<b>Amlodipine</b>
Oral anticoagulant	<b>Warfarin (DOAC: Apixaban)</b>
SSRI	<b>Citalopram</b>
SNRI	<b>Venlafaxine</b>
Urinary agent	<b>Tolterodine prolonged release</b>

#### Managed access processes are in place in relation to:

- **Versatis®** medicated plasters
- **Entresto®** (sacubitril/valsartan) film-coated tablets
- **Direct Oral Anti-Coagulants (DOACs)** [Dabigatran, Edoxaban, Rivaroxaban]
- **Standard Oral Nutritional Supplements [List B]**
- **Evolocumab**

In order to support implementation of the *MMP Preferred Drugs* and managed access processes, resources are available on [www.hse.ie/yourmedicines](http://www.hse.ie/yourmedicines) including:

- Evaluation Reports
- Prescribing Tips and Tools
- Managed Access Protocols

The MMP has also published guidance to support prescribers in the following areas:

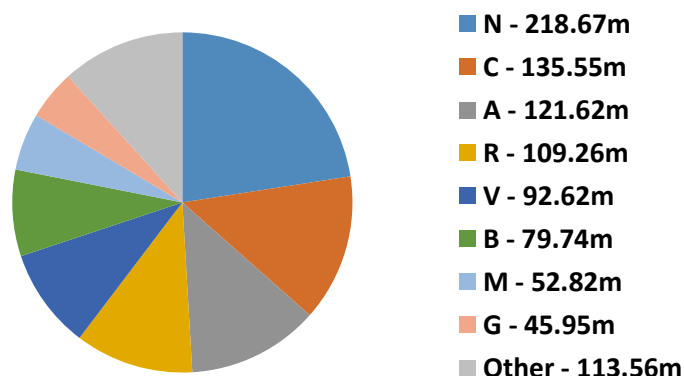
- Inhaled Medicines for Chronic Obstructive Pulmonary Disease (COPD)
- Benzodiazepines and Z-drugs (BZRA) for the treatment of Anxiety and Insomnia
- Oral Anticoagulants for Stroke Prevention in Non-valvular Atrial Fibrillation
- Standard Oral Nutritional Supplements (ONS)
- The use of Aspirin in the Primary Prevention of Cardiovascular Disease
- Appropriate prescribing of Pregabalin

In 2019, the MMP identified **best-value biological (BVB) medicines** for TNF- $\alpha$  inhibitors under the High Tech Arrangements. The MMP will progress implementation of the BVB initiative in 2020.

For more information, visit [www.hse.ie/yourmedicines](http://www.hse.ie/yourmedicines)

## GMS: Major Therapeutic Classification of Drugs, Medicines and Appliances

National 2019

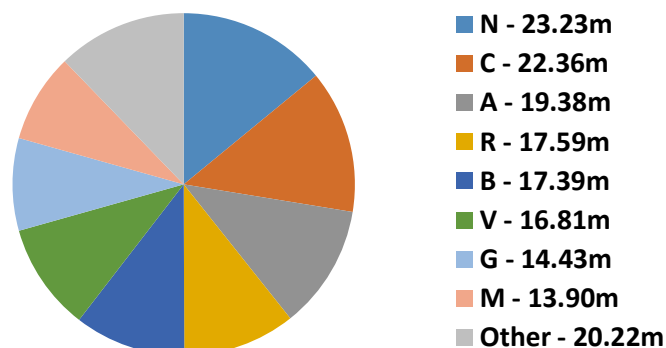


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	<b>Alimentary Tract and Metabolism</b>	<b>121.62</b>	<b>8,899,941</b>
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>79.74</b>	<b>4,421,155</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>135.55</b>	<b>12,528,109</b>
<b>D</b>	Dermatologicals	24.01	1,486,009
<b>G</b>	<b>Genito Urinary System and Sex Hormones</b>	<b>45.95</b>	<b>2,337,421</b>
<b>H</b>	Systemic Hormonal Preps. excl. Sex Hormones and Insulins	22.05	2,735,504
<b>J</b>	Antiinfectives for Systemic Use	31.39	2,682,658
<b>L</b>	Antineoplastic and Immunomodulating Agents	9.16	362,547
<b>M</b>	<b>Musculo-Skeletal System</b>	<b>52.82</b>	<b>3,047,067</b>
<b>N</b>	<b>Nervous System</b>	<b>218.67</b>	<b>13,156,626</b>
<b>P</b>	Antiparasitic Products, Insecticides and Repellents	1.70	136,621
<b>R</b>	<b>Respiratory System</b>	<b>109.26</b>	<b>5,336,076</b>
<b>S</b>	Sensory Organs	25.25	1,649,697
<b>V</b>	<b>Various (below)</b>	<b>92.62</b>	<b>1,396,994</b>
	Clinical Nutritional Products	44.01	543,296
	Ostomy Requisites	21.37	328,748
	Urinary Requisites	12.89	147,201
	Diagnostic Products	5.55	129,748
	Dressings	2.69	43,357
	Other Therapeutic Products	2.26	23,760
	Needles/Syringes/Lancets	1.85	82,385
	Allergens	0.08	952
	Miscellaneous	1.92	97,547
	<b>Total</b>	<b>€969.79m</b>	<b>60,176,425</b>

Note: The above table shows total expenditure i.e. ingredient cost, fees and VAT where applicable.

## DPS: Major Therapeutic Classification of Drugs, Medicines and Appliances

National 2019

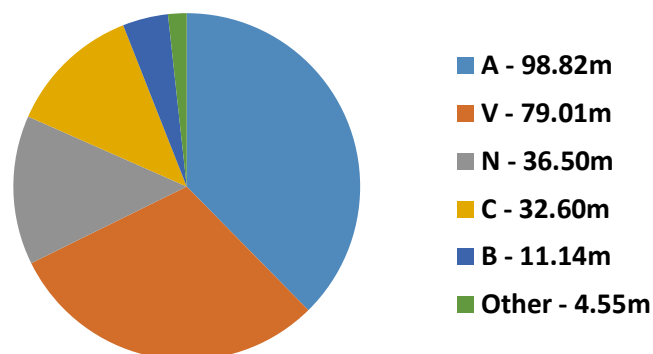


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	<b>Alimentary Tract and Metabolism</b>	<b>19.38</b>	<b>1,119,378</b>
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>17.39</b>	<b>647,237</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>22.36</b>	<b>1,790,785</b>
<b>D</b>	Dermatologicals	4.54	185,544
<b>G</b>	<b>Genito Urinary System and Sex Hormones</b>	<b>14.43</b>	<b>354,521</b>
<b>H</b>	Systemic Hormonal Preps. excl. Sex Hormones and Insulins	3.60	402,570
<b>J</b>	Antiinfectives for Systemic Use	4.92	329,263
<b>L</b>	Antineoplastic and Immunomodulating Agents	3.15	98,126
<b>M</b>	<b>Musculo-Skeletal System</b>	<b>13.90</b>	<b>400,857</b>
<b>N</b>	<b>Nervous System</b>	<b>23.23</b>	<b>1,332,156</b>
<b>P</b>	Antiparasitic Products, Insecticides and Repellents	0.37	24,772
<b>R</b>	<b>Respiratory System</b>	<b>17.59</b>	<b>782,947</b>
<b>S</b>	Sensory Organs	3.64	200,745
<b>V</b>	<b>Various (below)</b>	<b>16.81</b>	<b>232,746</b>
	Ostomy Requisites	5.56	73,908
	Clinical Nutritional Products	5.32	57,178
	Urinary Requisites	2.77	22,386
	Diagnostic Products	0.66	11,874
	Other Therapeutic Products	0.49	4,741
	Needles/Syringes/Lancets	0.33	22,693
	Allergens	0.20	2,249
	Dressings	0.14	2,447
	Miscellaneous	1.34	35,270
	<b>Total</b>	<b>€165.31m</b>	<b>7,901,647</b>

Note: (i) The above costs are inclusive of the monthly co-payment of €124 (1st April 2019) payable to the Pharmacy by an individual or family.  
(ii) The above table shows total expenditure i.e. ingredient cost, fees and VAT where applicable.

## LTI: Major Therapeutic Classification of Drugs, Medicines and Appliances

National 2019

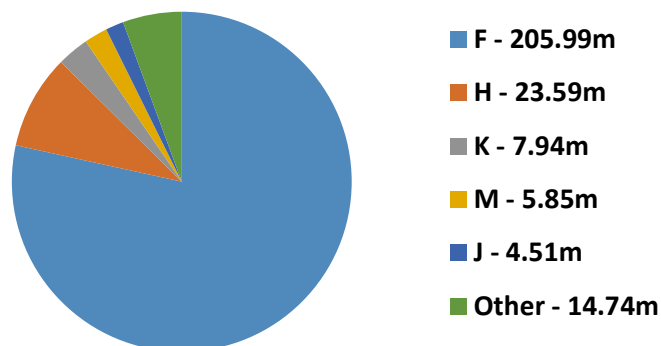


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	<b>Alimentary Tract and Metabolism</b>	<b>98.82</b>	<b>2,642,004</b>
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>11.14</b>	<b>927,137</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>32.60</b>	<b>3,431,633</b>
<b>D</b>	Dermatologicals	0.03	1,334
<b>G</b>	Genito Urinary System and Sex Hormones	0.78	29,102
<b>H</b>	Systemic Hormonal Preps. excl. Sex Hormones and Insulins	1.16	39,105
<b>J</b>	Antiinfectives for Systemic Use	1.10	33,474
<b>L</b>	Antineoplastic and Immunomodulating Agents	0.16	1,991
<b>M</b>	Musculo-Skeletal System	0.46	26,889
<b>N</b>	<b>Nervous System</b>	<b>36.50</b>	<b>903,812</b>
<b>P</b>	Antiparasitic Products, Insecticides and Repellents	0.01	318
<b>R</b>	Respiratory System	0.64	24,833
<b>S</b>	Sensory Organs	0.21	4,208
<b>V</b>	<b>Various (below)</b>	<b>79.01</b>	<b>1,398,756</b>
	Diagnostic Products	48.16	807,271
	Needles/Syringes/Lancets	17.38	452,369
	Clinical Nutritional Products	7.68	46,890
	Urinary Requisites	3.07	19,923
	Nutritional/Ancillary Devices	0.57	1,850
	Ostomy Requisites	0.20	2,868
	Other Therapeutic Products	0.05	315
	Dressings	0.04	588
	Miscellaneous	1.86	66,682
	<b>Total</b>	<b>€262.62m</b>	<b>9,464,596</b>

Note: The above table shows total expenditure i.e. ingredient cost, fees and VAT where applicable.

## LTI: Spend by Illness

### National 2019



Long Term Illness		€m	No. of Persons Dispensed to
A	Intellectual Disability	4.24	3,381
B	Hydrocephalus	0.47	205
C	Cerebral Palsy	1.77	904
D	Muscular Dystrophy	0.23	221
E	Haemophilia	0.04	72
F	<b>Diabetes Mellitus (does not include Gestational Diabetes)</b>	<b>205.99</b>	<b>143,224</b>
G	Diabetes Insipidus	0.31	275
H	<b>Epilepsy</b>	<b>23.59</b>	<b>24,049</b>
J	<b>Multiple Sclerosis</b>	<b>4.51</b>	<b>3,832</b>
K	<b>Parkinsonism</b>	<b>7.94</b>	<b>4,360</b>
L	Cystic Fibrosis	4.16	1,342
M	<b>Phenylketonuria (PKU)</b>	<b>5.85</b>	<b>684</b>
N	Acute Leukaemia	0.39	390
P	Mental Illness (Under 16 years)	1.12	2,292
Q	Spina Bifida	2.01	669
R	Thalidomide Conditions	0.00	3
<b>Total</b>		<b>€262.62m</b>	<b>185,903</b>

Note: Based on data available from claims submitted by pharmacies.

## HSE–Medicines Management Programme: BVB Medicines

The HSE-Medicines Management Programme (MMP) has identified best-value biological (BVB) medicines for **TNF- $\alpha$  inhibitors** on the High Tech Arrangements.

The MMP recommends the following BVB medicines:

- Adalimumab:
  - Citrate-containing: **Idacio<sup>®</sup>**, **Imraldi<sup>®</sup>**
  - Citrate-free: **Amgevita<sup>®</sup>**, **Hulio<sup>®</sup>**
- Etanercept: **Benepali<sup>®</sup>**

Clinicians should give due consideration to the prescription of these agents when prescribing a TNF- $\alpha$  inhibitor. Implementation of the BVB medicines will lead to significant savings for the health service in the order of millions of euros.



### Initiation

When initiating a patient on a biological medicine containing a TNF- $\alpha$  inhibitor, the clinician should prescribe a BVB medicine:

- Adalimumab:
  - Citrate-containing: **Idacio<sup>®</sup>**, **Imraldi<sup>®</sup>**
  - Citrate-free: **Amgevita<sup>®</sup>**, **Hulio<sup>®</sup>**
- Etanercept: **Benepali<sup>®</sup>**



### Switching

When issuing a repeat prescription for a biological medicine containing adalimumab or etanercept, patients on the reference medicinal product (Humira<sup>®</sup> or Enbrel<sup>®</sup>) should be considered for switching to a BVB medicine:

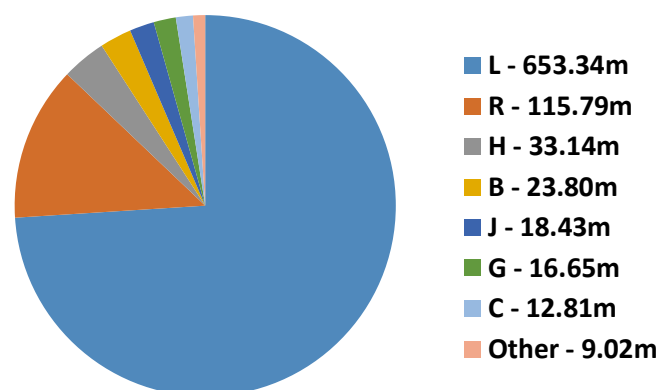
- Adalimumab:
  - Citrate-containing: **Idacio<sup>®</sup>**, **Imraldi<sup>®</sup>**
  - Citrate-free: **Amgevita<sup>®</sup>**, **Hulio<sup>®</sup>**
- Etanercept: **Benepali<sup>®</sup>**

From 1 February 2020, it is HSE policy that all adult patients who are commencing treatment with adalimumab or etanercept should be prescribed a BVB medicine. Resources to support the prescribing of the BVB medicines are available on the MMP website [www.hse.ie/yourmedicines](http://www.hse.ie/yourmedicines).

The MMP has been actively engaging with clinical teams to promote the prescribing of the BVB medicines. By May 2020, over 7,000 patients have been initiated on or switched to one of the BVB medicines for adalimumab or etanercept.

## High Tech: Major Therapeutic Classification of Drugs and Medicines

National 2019

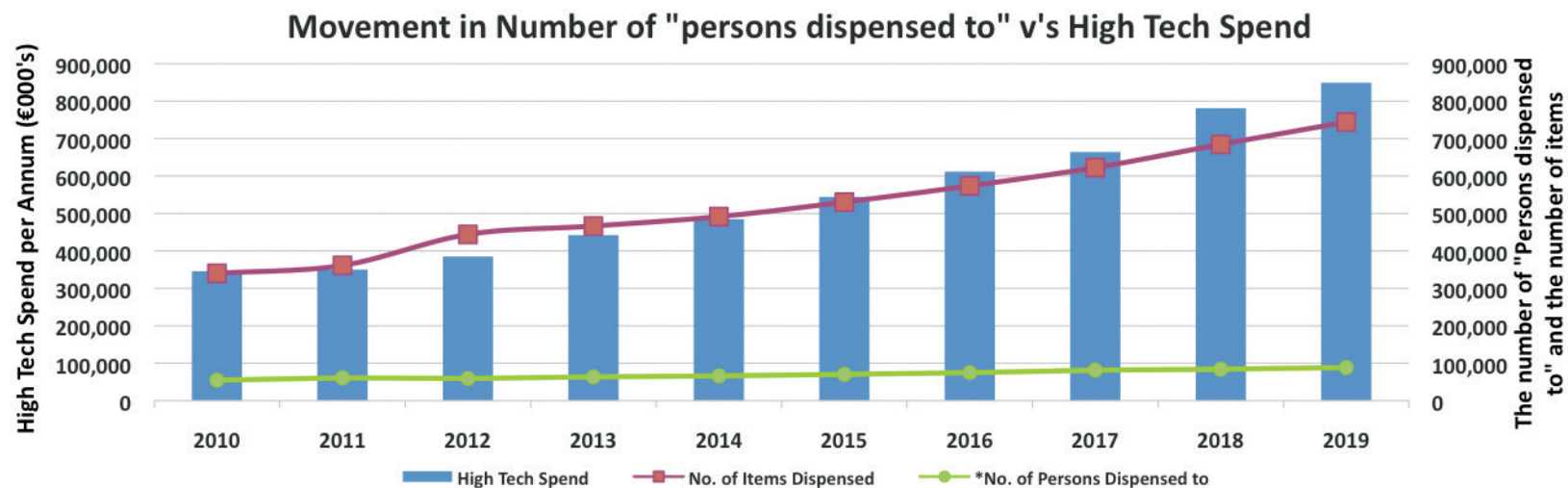


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	Alimentary Tract and Metabolism	1.94	956
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>23.80</b>	<b>43,962</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>12.81</b>	<b>13,431</b>
<b>G</b>	<b>Genito Urinary System and Sex Hormones</b>	<b>16.65</b>	<b>29,278</b>
<b>H</b>	<b>Systemic Hormonal Preps. excl. Sex Hormones and Insulins</b>	<b>33.14</b>	<b>69,829</b>
<b>J</b>	<b>Antiinfectives for Systemic Use</b>	<b>18.43</b>	<b>21,840</b>
<b>L</b>	<b>Antineoplastic and Immunomodulating Agents</b>	<b>653.34</b>	<b>673,358</b>
<b>M</b>	Musculo-Skeletal System	3.38	7,862
<b>N</b>	Nervous System	1.28	4,699
<b>R</b>	<b>Respiratory System</b>	<b>115.79</b>	<b>18,025</b>
<b>V</b>	Various (below)	2.42	2,713
	Other Therapeutic Products	2.42	2,713
<b>Total</b>		<b>€882.98m</b>	<b>885,953</b>

Note: The above table shows total expenditure i.e. ingredient cost, fees and VAT where applicable, based on claims submitted by Pharmacists.



## High Tech Trends 2010 - 2019



The graph illustrates how the increase in the number of people dispensed to has impacted on the High Tech spend over a 10 year period 2010 - 2019.

Year	High Tech Spend	No. of Items Dispensed	*No. of Persons Dispensed to
2010	345,758,331	340,138	54,974
2011	350,181,003	361,419	60,888
2012	385,035,723	443,981	59,276
2013	442,271,580	466,485	63,701
2014	484,706,257	491,678	66,264
2015	544,185,172	530,368	70,321
2016	611,737,633	573,867	74,877
2017	664,215,525	622,596	81,580
2018	781,234,364	684,582	84,109
2019	849,224,988	744,377	88,748

\* Based on data available from claims submitted by Pharmacists.





# **DENTAL** SECTION

## Scale of Fees Payable under the Dental Treatment Services Scheme as at 31st December 2019

Treatment Type	Routine €
Oral Examination	33.00
Prophylaxis	31.00
Restoration (Amalgam)	50.06
Restoration (Composite) 6 anterior teeth only	51.88
Exodontics (Extraction under local anaesthetic)	39.50
Surgical Extraction - Maximum 2 units:	
Fee payable for each 15 minute unit	35.00
Maximum payable	70.00
1st Stage Endodontic Treatment (Anterior teeth only)	57.30
<b>Denture Repairs</b>	
1st Item of Repair	47.86
Each Subsequent Item	15.34
Maximum payable	78.54
Apicectomy / Amputation of Roots	168.70
Endodontics (Anterior teeth only)	137.66
Protracted Periodontal Treatment per visit (Max 4)	26.36
<b>Miscellaneous</b>	
(e.g. Haemorrhage and Prescriptions only)	22.65
<b>Prosthetics</b>	
Full Upper or Lower Denture	326.22
Partial Upper or Lower Acrylic Denture	239.27
Complete Upper or Lower Reline	130.59
Complete Upper and Lower Reline	217.38
Full Upper and Lower Denture	478.74

## Payments to Dentists: Claims Reimbursed 2019

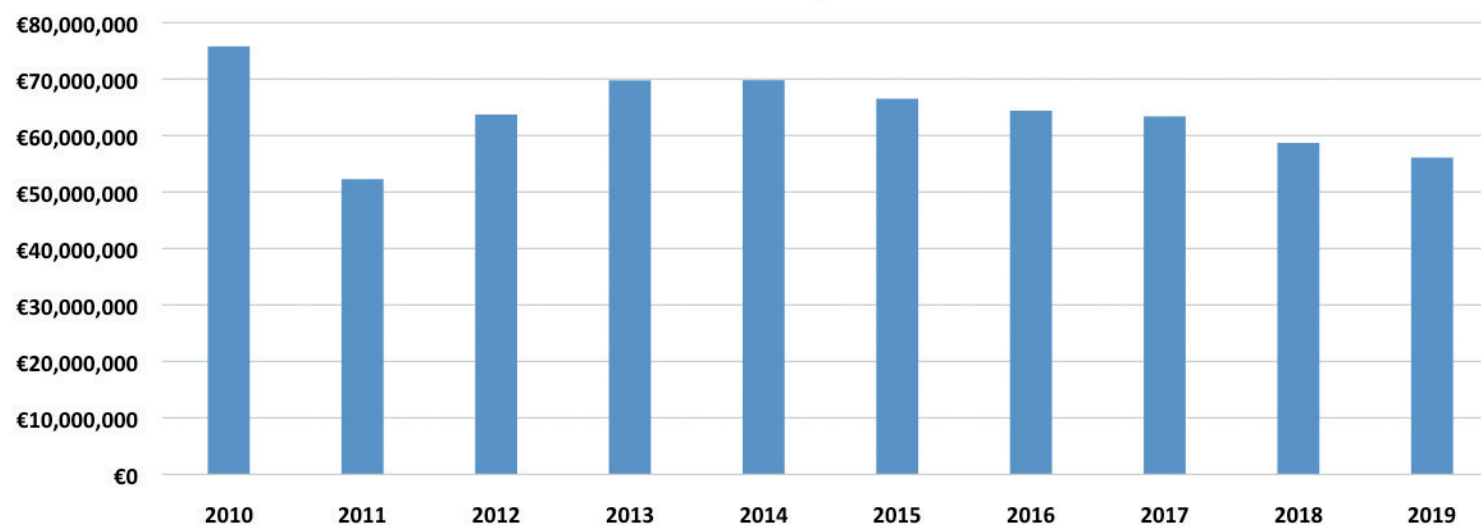
Above the Line €39.75m	Below the Line €16.33m
Dentists were reimbursed a total of €56,075,566 in 2019, in respect of treatments provided for more than 374,408 GMS persons under the DTS Scheme.	'Below the Line' treatments - prior Health Service Executive approval for a specific course of treatment under this category is required. Full denture treatment is available, with prior Health Service Executive approval, to all eligible GMS persons over 16 years.
The following treatments were available to all GMS eligible persons.	
<b>ROUTINE:</b> Routine treatments are categorised as either 'Above the Line' or 'Below the Line';	
'Above the Line' treatments are uncomplicated procedures e.g. Amalgam (Filling); Extractions;	
'Below the Line' treatments are advanced procedures e.g. Protracted Periodontal; Prosthetics.	

### Payments to Dentists: Claims Reimbursed in each CHO

Community Healthcare Organisation	2019
CHO Area 1	€6,270,918
CHO Area 2	€5,604,714
CHO Area 3	€4,802,641
CHO Area 4	€8,858,151
CHO Area 5	€7,892,376
CHO Area 6	€2,531,527
CHO Area 7	€6,735,779
CHO Area 8	€7,555,957
CHO Area 9	€5,823,503
<b>National</b>	<b>€56,075,566</b>

*Note: Figures include reimbursed fees in respect of Health (Amendment) Act 1996 claims.*

## Payments to Dentists: Claims Reimbursed 2010 - 2019

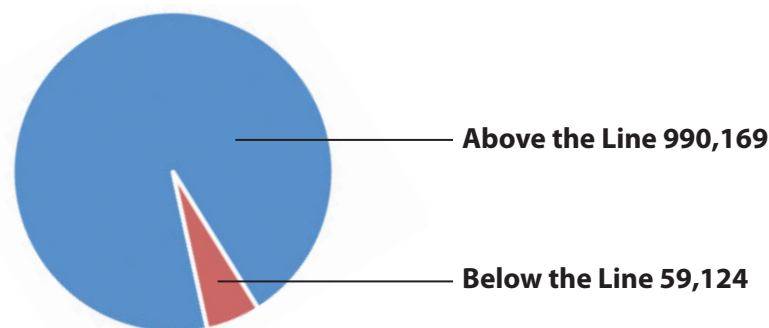


Year	Payments to Dentists
2010	€75,768,061
2011	€52,260,023
2012	€63,717,122
2013	€69,749,991
2014	€69,782,332
2015	€66,505,516
2016	€64,393,261
2017	€63,369,808
2018	€58,680,201
2019	€56,075,566

*Note: Figures from 2017 included reimbursed fees in respect of Health (Amendment) Act 1996 claims.*

## Number of Dental Treatments Claimed 2019

### National – Number of Treatments Claimed 2019



### Number and Value of Dental Treatments Claimed by CHO

Community Healthcare Organisation	*Above the Line	**Below the Line	***No. of Persons Treated	Value of Reimbursements
CHO Area 1	104,285	6,954	40,272	€6,270,918
CHO Area 2	105,028	5,608	41,793	€5,604,714
CHO Area 3	86,918	4,823	31,615	€4,802,641
CHO Area 4	159,970	8,959	59,050	€8,858,151
CHO Area 5	140,936	9,142	51,598	€7,892,376
CHO Area 6	45,920	2,269	18,348	€2,531,527
CHO Area 7	117,340	7,065	44,820	€6,735,779
CHO Area 8	132,377	7,940	51,311	€7,555,957
CHO Area 9	97,395	6,364	35,601	€5,823,503
<b>National</b>	<b>990,169</b>	<b>59,124</b>	<b>374,408</b>	<b>€56,075,566</b>

*ROUTINE - Routine treatments are categorised as either 'Above the Line' or 'Below the Line':*

*'Above the Line' (ATL) treatments are uncomplicated procedures;*

*'Below the Line' (BTL) treatments are advanced procedures.*

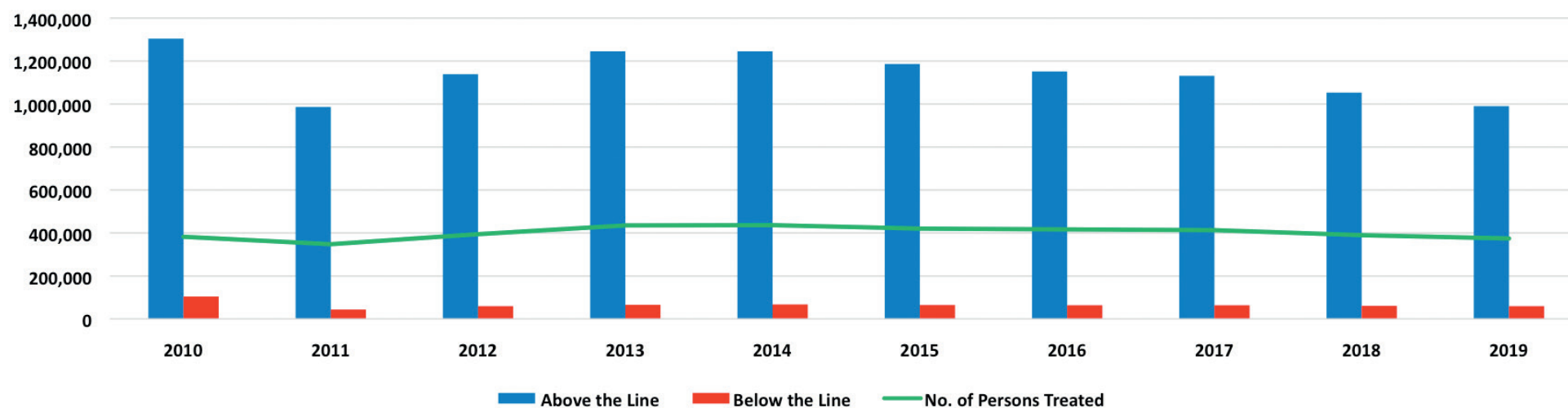
*\* The most frequently used ATL service was Oral Examination, which was used by 338,828 patients followed by Amalgam Restoration.*

*\*\* In the BTL category the most frequently used service was Prosthetics followed by Protracted Periodontal and Endodontics.*

*\*\*\* This figure is the number of unique GMS persons treated.*

*Note: Figures include claims under the Health (Amendment) Act 1996.*

## Number of Dental Treatments Claimed 2010 - 2019



Note: Figures from 2017 include claims in respect of Health (Amendment) Act 1996.





# OPTICAL SECTION

## Scale of Fees Payable under the Health Service Executive Community Ophthalmic Services Scheme

As at 31st December 2019	€	As at 31st December 2019	€
<b>Examinations</b>		<b>Single Vision Lenses to Non-Standard Frame</b>	
Eye Examination Ophthalmic Optician	22.51	Single Vision Lens (1) (Glass) Distance	23.70 (H)
Eye Examination Ophthalmologist / Ophthalmic Medical Practitioner	24.78	Single Vision Lenses (2) (Glass) Distance	47.41 (H)
Medical Eye Examination by Ophthalmologist	49.58	Single Vision Lens (1) (Glass) Reading	23.70 (H)
Eye Examination for Contact Lenses (Grant)	68.44 (H)	Single Vision Lenses (2) (Glass) Reading	47.41 (H)
Eye Examination Ophthalmic (Dilation)	45.03	Single Vision Lens (1) (Plastic) Distance	27.03 (H)
<b>Appliances</b>		Single Vision Lenses (2) (Plastic) Distance	54.06 (H)
<b>Single Vision Complete Appliances</b>		Single Vision Lens (1) (Plastic) Reading	27.03 (H)
Spectacles - Distance	42.37	Single Vision Lenses (2) (Plastic) Reading	54.06 (H)
Spectacles - Reading	42.37	<b>Additional Specification For Lenses To All Spectacle Types</b>	
Spectacles - Uncollected	29.49	Special grant towards additional specification for Lens (1)	82.62 (H)
Contact Lenses (Pair)	42.36	- applies to all spectacle types	
Contact Lenses Standard or Disposable per pair (Grant)	64.78 (H)	Special grant towards additional specification for Lenses (2)	165.26 (H)
Single Vision Spectacles - with Glass Lenses Distance	122.85 (H)	- applies to all spectacle types	
Single Vision Spectacles - with Glass Lenses Reading	122.85 (H)		
Single Vision Spectacles - with Plastic Lenses Distance	132.00 (H)		
Single Vision Spectacles - with Plastic Lenses Reading	132.00 (H)		
<b>Single Vision Lenses to Own Frame</b>			
Replacement Distance Lens (1) to own Frame	16.46		
Replacement Distance Lenses (2) to own Frame	32.94		
Replacement Reading Lens (1) to own Frame	16.46		
Replacement Reading Lenses (2) to own Frame	32.94		

**(H)** Denotes Fees Payable in Respect of Services under the Health (Amendment) Act 1996 only.

Note: Where applicable values are inclusive of materials and VAT.

## Scale of Fees Payable under the Health Service Executive Community Ophthalmic Services Scheme continued

As at 31st December 2019	€	As at 31st December 2019	€
<b>Other Items - Single Vision</b>		<b>Bifocals</b>	
Lenticular Lens (1 Surface)	11.75	Spectacles Bifocal Complete	84.19
Lenticular Lenses (2 Surfaces)	23.51	Fused Bifocal Spectacles	163.88 (H)
Lenticular Lenses (3 Surfaces)	35.27	Varifocal Spectacles - Glass or Plastic	252.73 (H)
Lenticular Lenses (4 Surfaces)	47.02		
Tinted Lens (1)	7.49	<b>Bifocal Lenses</b>	
Tinted Lenses (2)	14.98	Replacement Bifocal Lens (1) to own Frame	37.43
Tinted Lenses (3)	22.47	Replacement Bifocal Lenses (2) to own Frame	74.85
Tinted Lenses (4)	29.97	Bifocal Lens (1) to Non-Standard Frames	48.15 (H)
Prism (1)	6.36	Bifocal Lenses (2) to Non-Standard Frames	96.32 (H)
Prisms (2)	12.72	Varifocal Lens (1) (Grant)	95.61 (H)
Prisms (3)	19.09	Varifocal Lenses (2) (Grant)	191.20 (H)
Prisms (4)	25.45		
Prisms (5)	31.81	<b>Other Items - Bifocals</b>	
Prisms (6)	38.17	Sphere over 6.00 and up to 9.00 extra charge (1) Lens	4.22
Prisms (7)	44.53	Sphere over 6.00 and up to 9.00 extra charge (2) Lenses	8.44
Prisms (8)	50.90	Sphere over 9.00 extra charge (1) Lens	9.37
Dioptric powers higher than 8.00 (1) Lens	6.25	Sphere over 9.00 extra charge (2) Lenses	18.75
Dioptric powers higher than 8.00 (2) Lenses	12.50	Tinted Lens (1)	8.27
Dioptric powers higher than 8.00 (3) Lenses	18.75	Tinted Lenses (2)	16.55
Dioptric powers higher than 8.00 (4) Lenses	24.99	Prism (1)	8.84
Anti-Reflective Coating on Plastic Lens (1)	18.33 (H)	Prisms (2)	17.67
Anti-Reflective Coating on Plastic Lenses (2)	36.66 (H)		
Dioptric powers higher than 6.00 (Plastic) (1) Lens	15.62	<b>Repairs</b>	
Dioptric powers higher than 6.00 (Plastic) (2) Lenses	31.24	Replacement Frame to own Lenses	12.16
Dioptric powers higher than 6.00 (Plastic) (3) Lenses	46.86	Replacement front to own Lenses	5.83
Dioptric powers higher than 6.00 (Plastic) (4) Lenses	62.48	Replacement Side (1) to own Frame	2.45
Plastic Lens (1) for children as prescribed	4.73	Replacement Sides (2) to own Frame	4.90
Plastic Lenses (2) for children as prescribed	9.45	Complete new Frames	90.60 (H)
Plastic Lens (1) Adult	4.58 (H)		
Plastic Lenses (2) Adult	9.16 (H)		

(H) Denotes Fees Payable in Respect of Services under the Health (Amendment) Act 1996 only.

Note: Where applicable values are inclusive of materials and VAT.

## Payments to Optometrists/Ophthalmologists: Claims Reimbursed 2019

Under the Health Service Executive Community Ophthalmic Services Scheme, Optometric/Ophthalmic services are provided to adult medical card holders, which include free eye examinations and necessary spectacles/appliances.

Payments in respect of spectacles provided under the Children's Scheme are also made by the Primary Care Reimbursement Service on behalf of the majority of Health Service Executive Areas.

Payments in respect of eye examinations and necessary spectacles/appliances are provided under the Teenager's Scheme for eligible medical card holders on behalf of certain Health Service Executive Areas.

In the 12-month period to the end of December 2019, claims were received on behalf of 304,504 GMS persons for 776,032 treatments costing €29,261,845.

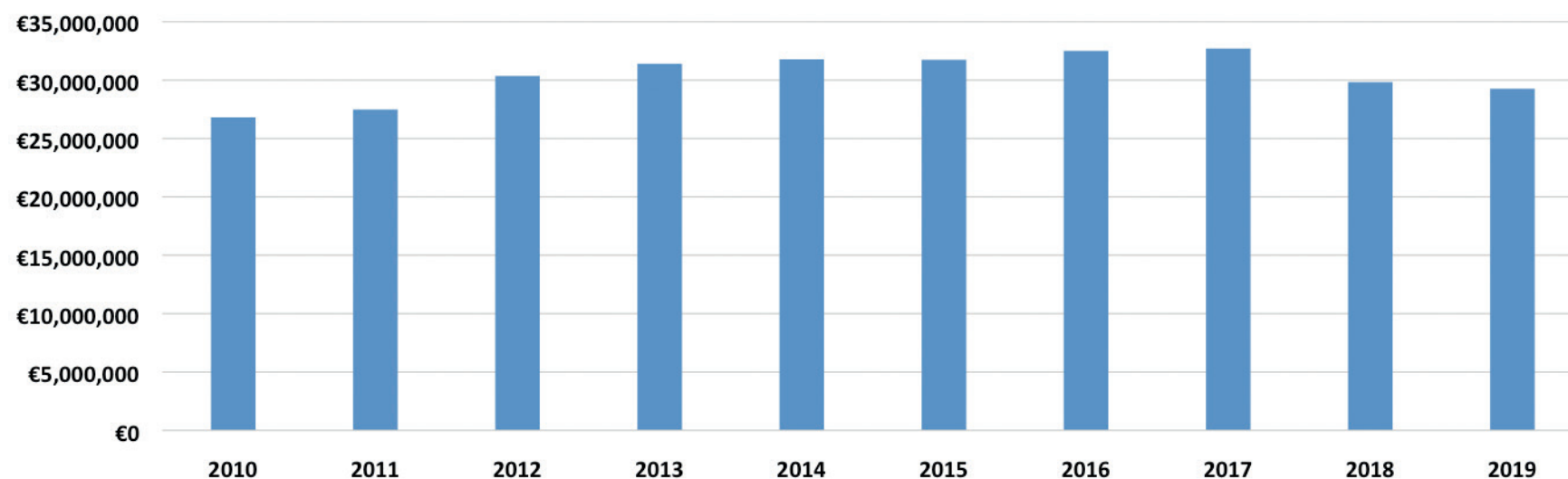
Eye examinations by Optometrists/Ophthalmologists totalled 301,847; complete spectacles (distance, reading and bi-focals) and other appliances provided under the Scheme totalled 474,185.

### Payments to Optometrists/Ophthalmologists: Claims Reimbursed in each CHO

Community Healthcare Organisation	2019
CHO Area 1	€3,015,480
CHO Area 2	€3,224,126
CHO Area 3	€2,790,893
CHO Area 4	€4,173,293
CHO Area 5	€4,502,512
CHO Area 6	€1,599,008
CHO Area 7	€3,357,268
CHO Area 8	€3,922,029
CHO Area 9	€2,677,236
<b>National</b>	<b>€29,261,845</b>

*Note: Payments include services for Children, Teenagers and Health (Amendment) Act 1996.*

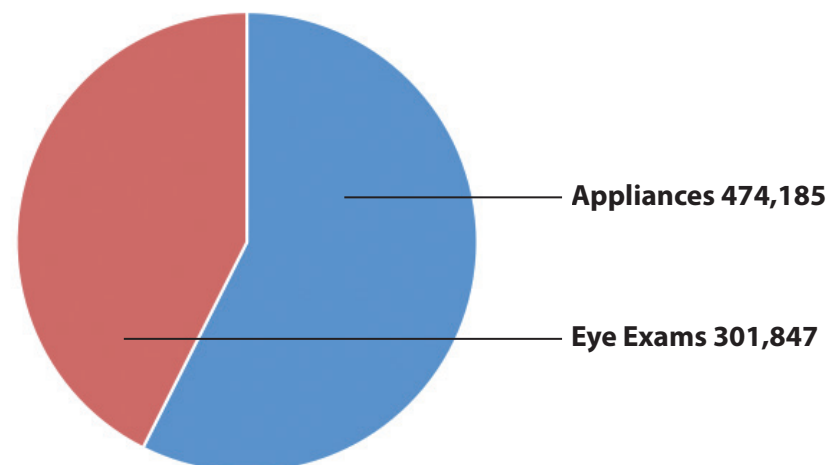
## Payments to Optometrists/Ophthalmologists: Claims Reimbursed 2010 - 2019



Year	Payments to Optometrists/Ophthalmologists
2010	€26,817,078
2011	€27,478,109
2012	€30,355,035
2013	€31,400,553
2014	€31,787,039
2015	€31,743,068
2016	€32,508,917
2017	€32,706,469
2018	€29,832,040
2019	€29,261,845

## Number of Treatments by Optometrists/Ophthalmologists

### National Number of Treatments 2019

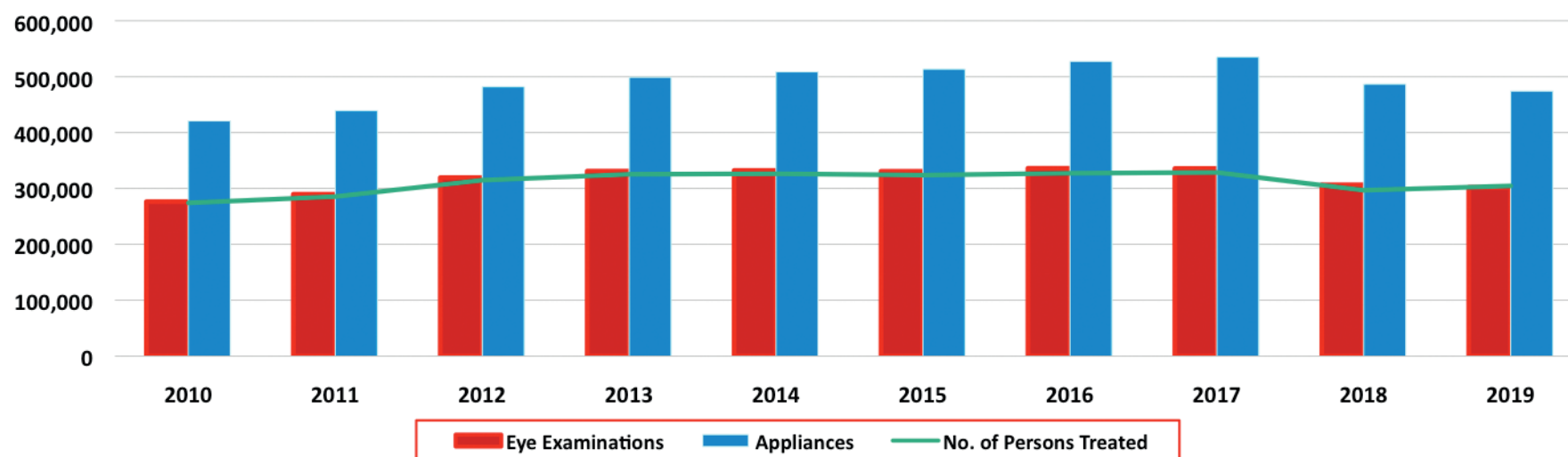


### Number of Treatments by Optometrists/Ophthalmologists in each CHO

Community Healthcare Organisation	Eye Examinations	Appliances	No. of Persons Treated	Value of Reimbursements
CHO Area 1	31,756	49,984	33,975	€3,015,480
CHO Area 2	30,978	56,417	34,000	€3,224,126
CHO Area 3	28,192	48,661	29,418	€2,790,893
CHO Area 4	44,765	67,705	42,489	€4,173,293
CHO Area 5	43,928	82,655	48,507	€4,502,512
CHO Area 6	19,152	18,756	16,028	€1,599,008
CHO Area 7	36,835	45,902	33,914	€3,357,268
CHO Area 8	37,059	67,302	38,972	€3,922,029
CHO Area 9	29,182	36,803	27,212	€2,677,236
<b>National</b>	<b>301,847</b>	<b>474,185</b>	<b>304,515</b>	<b>€29,261,845</b>

*Note: Payments include services for Children, Teenagers and Health (Amendment) Act 1996.*

## Number of Treatments by Optometrists/Ophthalmologists 2010 - 2019



Year	Eye Examinations	Appliances	No. of Persons Treated	Value of Reimbursements
2010	276,349	420,752	274,125	€26,817,078
2011	289,570	438,879	285,428	€27,478,109
2012	319,354	481,672	314,750	€30,355,035
2013	330,995	498,872	325,317	€31,400,553
2014	332,142	508,469	326,249	€31,787,039
2015	330,691	513,460	323,866	€31,743,068
2016	336,108	527,239	327,169	€32,508,917
2017	335,756	534,781	328,630	€32,706,469
2018	306,577	486,787	296,662	€29,832,040
2019	301,847	474,185	304,515	€29,261,845





## **Appendix**

Online PCRS Publications @ <https://www.hse.ie/eng/staff/pcrs/pcrs-publications/>

### **PCRS Annual Reports**

Statistical Analysis of Claims and Payments 1998 - 2019

### **Eligibility Reports**

Eligibility Figures

Domiciliary Care Allowance

Under 6s and Over 70s Eligibility

Eligibility per Scheme

Eligible Medical Card Holders by CHO, Gender and Age Group

Eligible GP Visit Card Holders by CHO, Gender and Age Group

### **General Practitioner Reports**

Number and Costs of Claims by GPs

Dispensing Doctors

Special Items of Service

Payments to GPs

GP Panel Size

Capitation Payments to GPs

### **Pharmacy Reports**

Number of Items per Claim

Pharmacy Fees

Top 100 Prescribed Products

Top 100 Products by Cost

Top 20 Medicines and Appliances

Distribution of Medicines by ATC

GMS Payments to Pharmacists

### **High Tech Reports**

### **Dental Reports**

### **Optical Reports**

### **Contractor Reports**

### **Annual Flu Reports**





