



# 2023

Primary Care Reimbursement Service  
Statistical Analysis of Claims  
and Payments 2023

**Feidhmeannacht na Seirbhíse Sláinte  
Seirbhís Aisíocaíochta Cúraim Phríomhúil**

Bealach amach 5 M50  
An Bóthar Thuaidh  
Fionnghlas  
Baile Átha Cliath 11  
D11 XKF3

Fón: (01) 864 7100  
Facs: (01) 834 3589

Ríomhphost: [and.pcrs@hse.ie](mailto:and.pcrs@hse.ie)  
Láithreán Gréasáin: [www.hse.ie](http://www.hse.ie)

**Health Service Executive  
Primary Care Reimbursement Service**

Exit 5 M50  
North Road  
Finglas  
Dublin 11  
D11 XKF3

Ph: (01) 864 7100  
Fax: (01) 834 3589

Email: [and.pcrs@hse.ie](mailto:and.pcrs@hse.ie)  
Website: [www.hse.ie](http://www.hse.ie)



# **Primary Care Reimbursement Service**

STATISTICAL ANALYSIS OF CLAIMS AND PAYMENTS  
2023

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## Réamhrá

Tá an tSeirbhís Aisíocaíochta um Chúram Phríomhúil (PCRS) mar chuid den FnaSS agus freagrach as aisíocaíocht a thabhairt do Dhochtúirí Teaghlaigh, Fiaclóirí, Cógaiseoirí, Optaiméadraithe/Ophthalmolaithe agus conraitheoirí eile a sholáthraíonn seirbhísí saor in aisce nó ar chostas laghdaithe don phobal thar raon scéimeanna cúraim príomhúil.

Tugann an tuarascáil um Anailís Staitistiúil ar Éilimh agus Íocaíochtaí 2023 miondealú ar na híocaíochtaí a rinneadh faoi na scéimeanna éagsúla, san áireamh an Scéim um Sheirbhísí Ginearálta Leighis (GMS), an Scéim Íocaíochta Drugaí (DPS), an Scéim um Bhreiteacht Fadtéarmach (LTI), an Scéim um Sheirbhísí Cóireála Fiaclóireachta. (DTSS) agus an Scéim um Sheirbhísí Oftalmacha Pobail (COSS). San áireamh gheofar sonraí faoi líon na ndaoine incháilithe a bhaineann leas as na scéimeanna seo. Tá sonraí ann freisin maidir le líon na n-earraí cógaslainne a dáileadh agus líon na gcóireálacha fiaclóireachta agus na scrúduithe optúla a rinneadh in 2023.

San áireamh sa tuarascáil tá na híocaíochtaí do sholáthróirí agus déantóirí drugaí ardteicneolaíochta agus sonraí na híocaíochtaí ospidéal maidir leis an gClár Náisiúnta um Rialú Ailse, an Clár Cóireála Náisiúnta Heipitíteas C agus Seirbhísí Ilsléaróise.

Le leathnú na gcritéar incháilitheachta i 2023, tá rochtain anois ag 42% den daonra ar chúram DG saor in aisce. Tugadh cúram Dochtúra Teaghlaigh saor in aisce do gach paiste faoi 8 bliana d'aois ó Lúnasa 2023, agus le síneadh na tairisí acmhainne bhí deis dóibh siúd ar nó faoi bhun an ioncaim airmheánaigh iarratas a dhéanamh ar Chárta Cuartaíochta Dochtúra Teaghlaigh ó Mheán Fómhair 2023. Lean dídeanaithe ag teacht ón Úcráin i 2023 agus chuir siad seo le huimhreacha incháilitheachta an Chárta Leighis.

Ar an iomlán, tháinig méadú 137,500 ar an líon incháilitheachta in 2023, arbh é sin an méadú is mó ó 2015 nuair a tugadh isteach Cáirtaí Cuairte Dochtúra Ginearálta do dhaoine faoi 6 bliana d'aois agus os cionn 70 bliain d'aois. San iomlán, rinne PCRS íocaíochtaí agus aisíocaíochtaí iomlána de €3.7 billiún in 2023.

Chun an t-eolas íocaíochta míosúil cothrom le dáta a fháil tabhair cuairt ar an suíomh Gréasáin [www.hsepcrs.ie](http://www.hsepcrs.ie) agus seiceáil na tuarascálacha is déanaí faoi 'PCRS Publications'.

Ba mhaith liom an deis seo a thapú chun aitheantas a thabhairt do dhíograis agus d'obair chrua fhoireann PCRS agus iad ag freagairt do riachtanais ár gcustaiméirí go léir i rith na bliana.

Thar ceann PCRS FnaSS, ba mhaith liom buíochas a ghabháil lenár gconraitheoirí agus lena n-ionadaithe as a gcomhoibriú le linn 2023.

**Shaun Flanagan**  
**Stiúrthóir Cúnta Náisiúnta**  
**Seirbhís Aisíocaíochta do Chúram Príomhúil**

## Introduction

The Primary Care Reimbursement Service (PCRS) is part of the HSE and 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.

The 2023 Statistical Analysis of Claims and Payments report gives a breakdown of the payments made 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). It includes details on the number of eligible persons availing of these schemes. There are also details on the number of pharmacy items dispensed and the number of dental treatments and optical examinations that took place in 2023.

Included in the report are the payments to suppliers and manufacturers of High Tech drugs and details of hospital payments in relation to the National Cancer Control Programme, the National Hepatitis C Treatment Programme and Multiple Sclerosis Services.

With the expansion of the eligibility criteria in 2023, 42% of the population now have access to free GP care. Free GP care was granted to all children under 8 years of age from August 2023, while the extension of the means threshold allowed those on or below the median income to apply for a GP Visit Card from September 2023. Refugees continued to arrive from Ukraine in 2023 and these added to the Medical Card eligibility numbers.

Overall, eligibility numbers increased by 137,500 in 2023, which was the largest increase since 2015 when universal GP Visit Cards for under 6s and over 70s was introduced. In all, PCRS made total payments and reimbursements in 2023 of €3.7 billion.

To obtain up to date monthly payment information visit the website [www.hsepcrs.ie](http://www.hsepcrs.ie) and check out the latest reports under "PCRS Publications".

I want to take this opportunity to acknowledge the dedication and hard work of PCRS staff in responding to the needs of all our customers throughout the year.

On behalf of the HSE PCRS, I would like to thank our contractors and their representatives for their cooperation during 2023.

**Shaun Flanagan**  
**Assistant National Director**  
**Primary Care Reimbursement Service**





# **SCHEMES OVERVIEW**

## Schemes – Claim Reimbursement and Payment Arrangements

During 2023, the HSE Primary Care Reimbursement Service (PCRS) reimbursed claims and made payments totalling €4,073.27m 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 Pharmacies. 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 eligible persons 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 1st 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. Since the 1<sup>st</sup> November 2020, the prescription charge is €1.50 for each item that is dispensed, up to a maximum of €15 per month

per person or family. For people aged 70 or over, the prescription charge is €1.00 per item, up to a maximum of €10 per month per person or family. The prescription charge is recouped by the HSE from the Community Pharmacy.

From March 2022, people coming from Ukraine were entitled to apply for a medical card.

### 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 of free GP services and this was extended to all children under 8 years of age from 11<sup>th</sup> August 2023. From 5<sup>th</sup> August 2015, all persons aged 70 and over were granted automatic entitlement to free GP services. A change in the GPVC means assessment threshold to extend eligibility to those on or below the median income came into effect towards the end 2023.

### 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 1st 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 1st 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. A medical card is issued in respect of the child for a period of five years from date of diagnosis.

### 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 1st 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 adult medical card holders 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.

### 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 has been exceeded in a calendar month (€80 from 1<sup>st</sup> March 2022). 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.



## Schemes – Claim Reimbursement and Payment Arrangements continued

### 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. LTI Card holders can have both LTI and GMS eligibility.

### European Economic Area (EEA) entitlements

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. A person provides evidence of eligibility under these arrangements by producing a current European Health Insurance Card (EHIC).

### High Tech Arrangements (HT)

Arrangements are in place for the supply and dispensing of High Tech medicines through Community Pharmacies. 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 Pharmacies 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 which enables Hospital Consultants and prescribers to register patients for High Tech medicines

and to prepare 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.

### Mother and Infant Care Scheme

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

### 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 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 contracted Hepatitis C directly or indirectly from the use of Human Immunoglobulin - Anti D, or who received within the State another blood product or blood transfusion. The HAA Card gives eligibility to additional HSE services on more flexible terms and conditions than the medical card. HAA Card holders can have both HAA and GMS eligibility. 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 and HAA Eligible Persons

Immunisations that are provided free of charge include Pneumococcal, Influenza, Hepatitis B, combined Pneumococcal /Influenza and Covid-19 vaccinations.

### 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

## Schemes – Claim Reimbursement and Payment Arrangements continued

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.

From 2019 in an extension to pilot community sites, certain hospital administered drugs for Multiple Sclerosis (MS) were also reimbursed under the national management system in PCRS.

### 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. 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.

### Cycle of Care for Asthmatic Patients

The Asthma Cycle of Care allows GPs to maintain a register of children under 8 years of age with a diagnosis of asthma and provide services to them in accordance with the agreed Cycle of Care. An information return is submitted by the GP via an online browser when the patient is 2 years old and again at 8 years of age.

### Chronic Disease Management Programme (CDM)

The Structured Chronic Disease Management (CDM) Programme was launched in January 2020, following the introduction of the GP Agreement 2019. The GP arranges two scheduled reviews in a 12 month period to support GMS patients manage their chronic condition(s). HAA Cardholders are also eligible. The programme covers all eligible adults 18 years and over who have a diagnosis of one or more of the following conditions:-

- Asthma
- Type 2 Diabetes
- Chronic Obstructive Pulmonary Disease (COPD)
- Cardiovascular Disease including Stable Heart Failure, Ischaemic Heart Disease, Cerebrovascular Disease (Stroke/Transient Ischemic Attack (TIA)) and Atrial Fibrillation.

An Opportunistic Case Finding (OCF) Programme and High Risk Preventative Programme (PP) commenced in January 2022 for people 65 years and over. Patients diagnosed with a chronic disease covered by the CDM programme are registered onto it while those found to be at high risk of cardiovascular disease and/or Type 2 Diabetes are registered on the PP. In 2023 both OCF and PP were extended to include those aged 45 years and over and from the fourth quarter of 2023 the Prevention Programme was extended to include the addition of GMS patients over 18 years with Hypertension and patients over 18 years (Cardholders and non-Cardholders) diagnosed since 1<sup>st</sup> January 2023 with Gestational Diabetes and Pre-Eclampsia.

### Termination of Pregnancy Service

Termination of Pregnancy (ToP) Services in the community setting were commenced by the HSE on the 1st January 2019.

### Nicotine Replacement Therapy (NRT)

The Department of Health approved the reimbursement of Nicotine Replacement Therapy (NRT) for eligible GMS persons only, with effect from the 1st April 2001.

### Covid – 19

A number of General Practice oriented measures were commenced in 2020 to address the Covid-19 pandemic. The remuneration for the provision of remote consultations to patients who may have contracted Covid-19 infection and the provision of dedicated respiratory clinics on their practice premises, continued in 2022. The rollout of Covid-19 vaccinations through GPs and Pharmacies began in 2021 and continued into 2023.

### Free Contraception Service

From September 2022 the free contraception scheme was made available from GPs, primary care centres and pharmacists who signed up to provide services under the scheme. All consultations with a medical practitioner required to access prescription contraception, the fitting of Long-Acting Reversible Contraception (LARCs) and their removal, and the provision of prescription contraception by pharmacists were made available to 17–25 year olds. Extension of the free contraception scheme to 26 year olds commenced on 1<sup>st</sup> January 2023 and from 1<sup>st</sup> September 2023 it was extended to 27-30 year-olds women inclusive. The scheme will be expanded to include 31 year olds from 1<sup>st</sup> January 2024 with a further expansion to include women aged 32-35, from 1<sup>st</sup> July 2024.

## Summary Statement of Activity - 2023

- Payments and reimbursements during 2023 were approximately €4,073.27m.
- 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 €1,657.43m:
  - GMS: Prescriptions €1,039.09m, Stock Order Forms €6.15m
  - DPS €167.93m
  - LTI €347.40m
  - EEA €0.44m
  - The Health (Amendment) Act 1996, Opioid Substitution Treatment Scheme, DTSS prescriptions, Medical Cannabis Access Programme, Pharmacy Training Grants €16.43m
  - Contraception Scheme €14.87m
  - Influenza Vaccination Scheme €9.34m
  - Covid-19 Vaccination Scheme €9.91m
  - Patient Care Fees of €45.87m were paid to pharmacists under High Tech Arrangements.
- Total cost of Pharmacy fees €452.31m.
- Total cost of phased fees €54.54m.
- Prescription charges of €65.30m.
- Over 98m prescription items were paid for by the PCRS – an increase of over 6.58m items on 2022.
- Payments to GPs of fees and allowances totalled €873.48m.
- Payments to GPs for investment in General Practice Development totalled €0.36m.
- Payments to Manufacturers/Wholesalers of High Tech drugs and medicines totalled €1,146.60m.
- Payments to Dentists under the DTSS totalled €64.82m.
- Payments to Optometrists/Ophthalmologists under the HSE-COSS totalled €26.63m.
- Payments under centralised reimbursement of certain approved high cost Oncology, Hepatitis C, Multiple Sclerosis, Gainshare Initiative, Outpatient Parenteral Antimicrobial Therapy (OPAT) drugs, medicines and appliances totalled €253.13m.
- Administration costs were €50.82m.

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

## Total Payments and Reimbursements – 2023

Total Payments & Reimbursements	2023	2022
	€ 4,073.27m	€3,813.62m
GP Fees	€667.21m	€668.79m
GP Allowances	€206.27m	€191.47m
Investment in General Practice Development	€0.36m	€0.06m
Pharmacist Drugs and Medicines	€1,159.25m	€1,086.61m
Pharmacist Fees and Stock Order Mark-Up	€452.31m	€436.18m
Pharmacist High Tech Patient Care Fees	€45.87m	€40.92m
Manufacturers / Wholesalers High Tech Drugs and Medicines	€1,146.60m	€1,064.33m
Dentists	€64.82m	€49.48m
Optometrists / Ophthalmologists	€26.63m	€26.12m
Hospital - Oncology Drugs and Medicines	€187.13m	€151.09m
Hospital - Hepatitis C Drugs and Medicines	€17.96m	€13.95m
Hospital - Multiple Sclerosis Medicines (MS)	€35.70m	€27.47m
Hospital - Gainshare Initiative	€-0.47m	€2.75m
Outpatient Parenteral Antimicrobial Therapy (OPAT) - Drugs, Medicines and Appliances	€12.81m	€11.46m
Administration	€50.82m	€42.94m

Note: The figures have been rounded for reporting purposes

## Number of Agreements with Contractor Groups

General Practitioners 3,110	Pharmacists 1,911	Dentists 923	Optometrists 604
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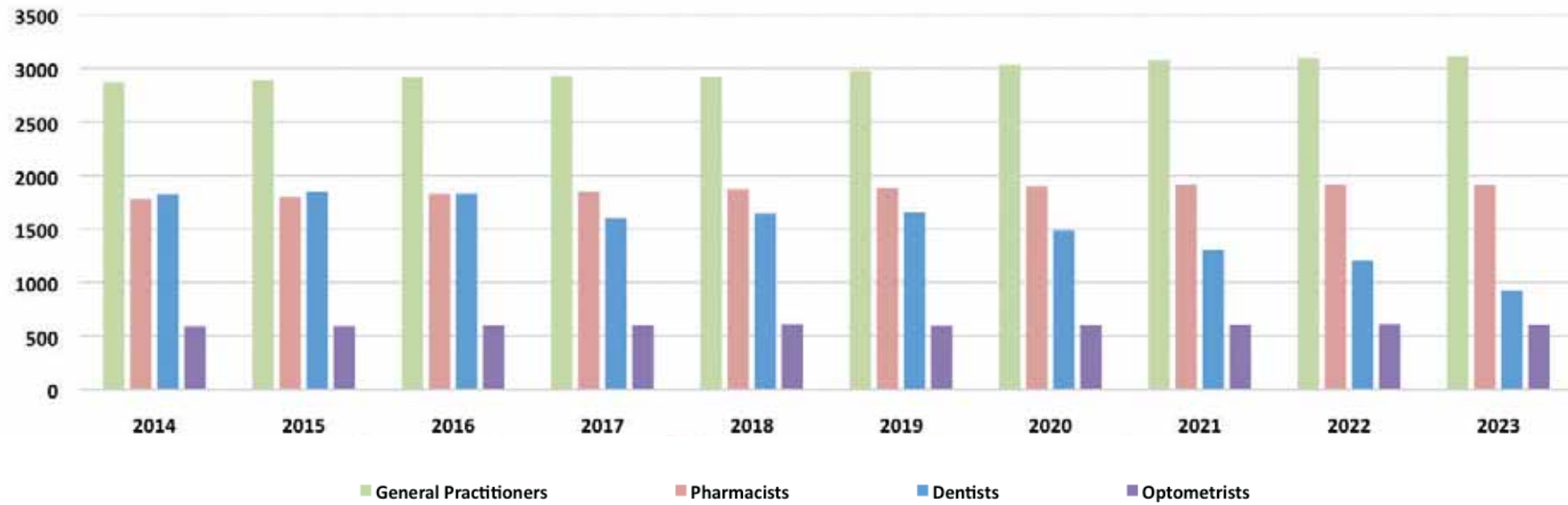
### Number of Agreements as at 31<sup>st</sup> December 2023

Community Healthcare Organisation	General Practitioners	Pharmacists	Dentists	Optometrists
CHO Area 1	240	164	116	71
CHO Area 2	320	203	91	76
CHO Area 3	259	162	79	49
CHO Area 4	473	279	225	81
CHO Area 5	304	218	84	73
CHO Area 6	320	166	38	46
CHO Area 7	451	244	117	74
CHO Area 8	333	254	83	70
CHO Area 9	410	221	90	64
<b>National</b>	<b>3,110</b>	<b>1,911</b>	<b>923</b>	<b>604</b>

Notes: Included in the table above are the following:

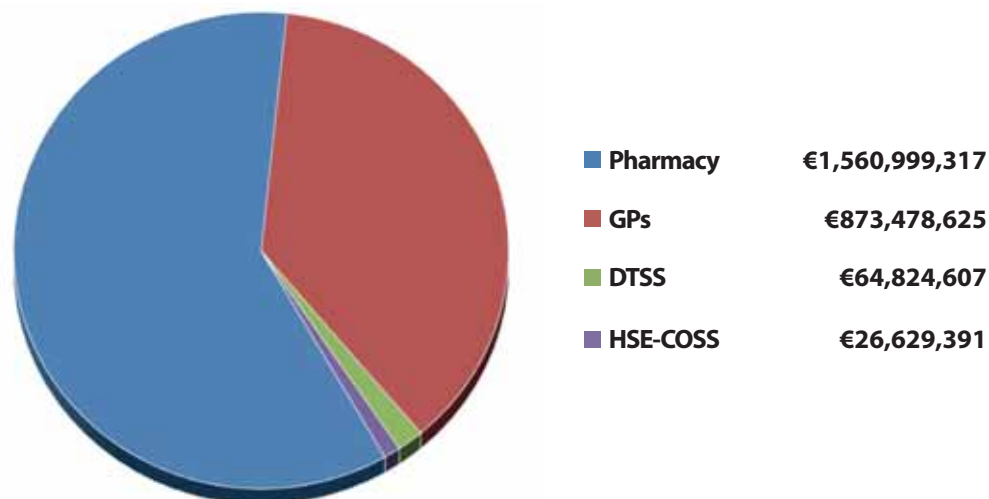
- (i) 592 GPs not contracted to the GMS Scheme who are registered to provide services under the Primary Childhood Immunisation Scheme, the Health (Amendment) Act 1996, Heartwatch, Opioid Substitution Treatment Scheme and National Cancer Screening Service.
- (ii) 11 Pharmacists who are registered to provide services under non GMS Schemes.
- (iii) 118 Dentists employed by the HSE who provide services under the Dental Treatment Services Scheme.
- (iv) 24 Clinical Dental Technicians.

## Number of Agreements with Contractor Groups 2014 - 2023



Year	General Practitioners	Pharmacists	Dentists	Optometrists
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
2020	3,033	1,900	1,486	598
2021	3,074	1,915	1,302	604
2022	3,097	1,915	1,201	609
2023	3,110	1,911	923	604

## Total Payments to Contractor Groups by CHO 2023



Community Healthcare Organisation	*GPs	**Pharmacy	***DTSS	HSE-COSS
CHO Area 1	€81,732,974	€137,609,902	€9,083,392	€3,006,642
CHO Area 2	€93,276,996	€162,961,519	€5,059,956	€2,774,250
CHO Area 3	€75,746,619	€133,507,375	€6,131,640	€2,162,144
CHO Area 4	€134,385,225	€235,746,567	€10,308,116	€3,814,546
CHO Area 5	€107,802,894	€194,186,545	€8,529,092	€3,917,579
CHO Area 6	€68,429,711	€108,542,202	€2,725,042	€1,576,055
CHO Area 7	€104,580,195	€203,193,255	€7,846,793	€3,266,255
CHO Area 8	€108,567,381	€208,555,239	€8,614,770	€3,454,073
CHO Area 9	€98,956,630	€176,696,713	€6,525,806	€2,657,847
<b>National</b>	<b>€873,478,625</b>	<b>€1,560,999,317</b>	<b>€64,824,607</b>	<b>€26,629,391</b>
<b>Corresponding figures for 2022</b>	<b>€860,259,186</b>	<b>€1,472,133,843</b>	<b>€49,484,119</b>	<b>€26,120,431</b>

Notes: (i) \*GP figures include GMS and non GMS GPs.

(ii) \*\*Pharmacy figures include GMS, Stock Orders, DPS, LTI and EEA claims. Excluded are additional payments of claims reimbursed to Pharmacists totalled €50,557,957.

(iii) \*\*\*Since 2017 dental figures include HAA claims.







# **CARDHOLDER SECTION**

## Number of Eligible Persons per Scheme - 2023

*GMS 1,611,187	*GPVC 630,475	DPS 1,813,437	LTI 345,019
<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 dependents 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. Since 1st November 2020 the prescription charge is €1.50 per item subject to a limit of €15.00 per family per month and €1.00 per item subject to a limit €10.00 for over 70s and their dependents. This charge is recouped from payments made to Pharmacists. An eligible person is entitled to select a GP of his/her choice, and have drugs, medicines and appliances provided through Community Pharmacies, Dentists and Optometrists/Ophthalmologists who have a contract 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 11,993 persons who were entitled and had opted to have their medicines dispensed by their GPs.</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, €80 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 2023

Community Healthcare Organisation	GMS	Discretionary GMS	GPVC	Discretionary GPVC	**DPS	**LTI
CHO Area 1	169,957	19,432	50,457	4,205	28,693	17,817
CHO Area 2	168,067	20,907	60,429	4,682	45,109	19,119
CHO Area 3	141,263	17,544	50,565	3,388	44,247	17,979
CHO Area 4	232,057	32,250	95,071	6,925	81,829	30,860
CHO Area 5	203,941	23,747	66,435	4,974	48,776	26,357
CHO Area 6	82,751	7,986	67,322	1,563	90,159	16,549
CHO Area 7	207,251	21,478	82,784	4,430	68,402	29,771
CHO Area 8	224,430	24,177	79,210	5,576	60,572	29,458
CHO Area 9	181,470	17,103	78,202	3,501	58,832	25,063
<b>National</b>	<b>1,611,187</b>	<b>184,624</b>	<b>630,475</b>	<b>39,244</b>	<b>526,619</b>	<b>212,973</b>
<b>*** % of Population</b>	<b>30.51%</b>		<b>11.94%</b>		<b>9.97%</b>	<b>4.03%</b>

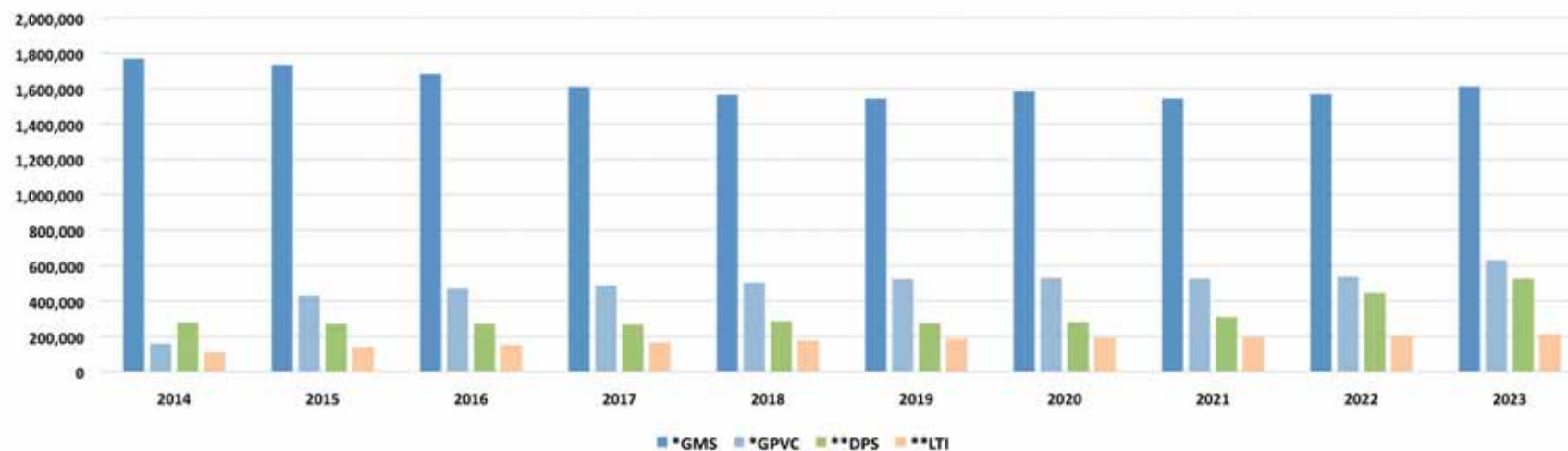
**GMS** - General Medical Services Scheme. **GPVC** - GP Visit Card Scheme. **DPS** - Drugs Payment Scheme. **LTI** - Long Term Illness Scheme.

\*GMS and GPVC figures are inclusive of cards granted on a discretionary basis.

\*\*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 (5,281,600) are based on CSO estimates for April 2023

## Number of Eligible Persons per Scheme 2014 - 2023



### Figures as at 31st December

Year	*GMS	Discretionary GMS	*GPVC	Discretionary GPVC	**DPS	**LTI
2014	1,768,700	76,665	159,576	34,605	278,227	111,940
2015	1,734,853	99,396	431,306	41,266	269,930	138,415
2016	1,683,792	116,362	470,505	45,260	270,525	153,446
2017	1,609,820	131,160	487,510	36,364	265,891	166,818
2018	1,565,049	148,396	503,329	38,099	285,599	177,481
2019	1,544,374	162,888	524,494	39,542	273,594	185,903
2020	1,584,790	169,458	529,842	39,028	280,703	190,829
2021	1,545,222	176,136	525,918	39,277	308,665	195,064
2022	1,568,379	181,947	535,741	39,369	445,725	202,558
2023	1,611,187	184,624	630,475	39,244	526,619	212,973

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

\*GMS and GPVC figures are inclusive of cards granted on a discretionary basis.

\*\*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 2019 - 2023

Year ended December:-	2023	2022	2021	2020	2019	Year ended December:-	2023	2022	2021	2020	2019
<b>(i) Number of Eligible Persons in December</b>	2,241,662	2,104,120	2,071,140	2,114,632	2,068,868	<b>Number of GP Contracts</b>	3,110	3,097	3,074	3,033	2,974
						<b>Number of Pharmacist Contracts</b>	1,911	1,915	1,915	1,900	1,884
<b>General Practitioners</b>	(000's)	(000's)	(000's)	(000's)	(000's)		(000's)	(000's)	(000's)	(000's)	(000's)
<b>*Total Payments</b>	€833,436	€820,083	€814,277	€757,679	€561,940	<b>Total Cost of Stock Orders</b>	€ 6,146	€ 5,955	€ 5,570	€ 5,952	€ 6,594
<b>(ii) Avg. Payment to GPs per Eligible Person</b>	€371.79	€389.75	€393.15	€358.30	€271.62	Ingredient Cost	€ 4,625	€ 4,508	€ 4,207	€ 4,514	€ 5,042
						Pharmacy Fees	€ 925	€ 902	€ 841	€ 903	€ 1,008
<b>Pharmacists</b>	(000's)	(000's)	(000's)	(000's)	(000's)	VAT	€ 596	€ 545	€ 522	€ 535	€ 544
<b>Total Cost of Prescriptions</b>	€ 1,039,091	€ 1,009,653	€ 986,202	€ 969,304	€ 963,193	<b>Overall Cost of Drugs and Medicines</b>	€ 1,045,237	€ 1,015,608	€ 991,772	€ 975,256	€ 969,787
Ingredient Cost	€ 684,312	€ 664,440	€ 649,866	€ 639,610	€ 628,119	<b>(iii) Avg. Payment to Pharmacists per Eligible Person</b>	€ 749.40	€ 740.91	€ 750.71	€ 744.20	€ 697.51
Dispensing Fee	€ 321,179	€ 312,738	€ 305,497	€ 300,246	€ 305,231	<b>**Overall Payments</b>	€1,878,673	€1,835,691	€1,806,049	€1,732,935	€1,531,727
VAT	€ 33,600	€ 32,475	€ 30,839	€ 29,448	€ 29,843						
Number of Forms	20,966	19,403	18,389	18,358	19,156						
Number of Items	68,264	65,246	62,674	60,975	60,073						
Avg. Cost per Form	€ 49.56	€ 52.04	€ 53.63	€ 52.80	€ 50.28						
Avg. Cost per Item	€ 15.22	€ 15.47	€ 15.74	€ 15.90	€ 16.03						
Avg. Ingredient Cost per Item	€ 10.02	€ 10.18	€ 10.37	€ 10.49	€ 10.46						
Avg. Items per Form	3.26	3.36	3.41	3.32	3.14						

Notes: (i) Number of eligible persons in 2023 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 2023. The number of persons who availed of services in 2023 was 1,394,773.

(iv) \*Total payments for 2023 reflects the services provided during the Covid-19 pandemic.

(v) \*\*Overall payments are based on the number of persons who availed of services during 2023 and include payments made under Discretionary Hardship Arrangements.

## LTI / DP Schemes: Summary of Statistical Information for 2019 - 2023

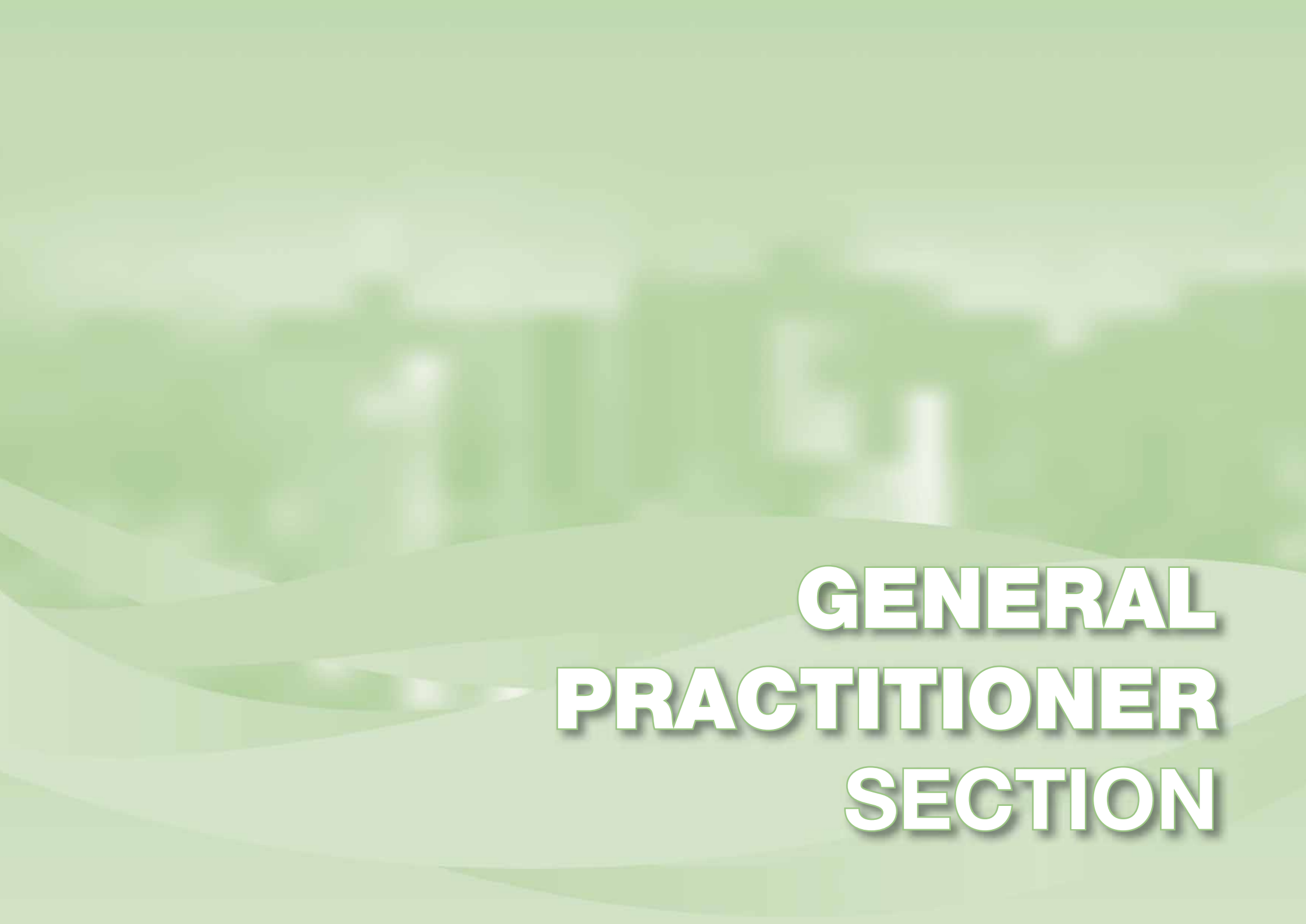
Year ended December:-	2023	2022	2021	2020	2019	Year ended December:-	2023	2022	2021	2020	2019
<b>LTI Scheme</b>						<b>DP Scheme</b>					
						Number of Eligible Persons in December	1,813,437	1,654,375	1,504,614	1,429,554	1,362,639
*Number of Claimants	212,973	202,558	195,064	190,829	185,903	*Number of Claimants	526,619	445,725	308,665	280,703	273,594
						**Number of Families	347,313	306,672	219,052	195,278	188,119
	<b>(000's)</b>	<b>(000's)</b>	<b>(000's)</b>	<b>(000's)</b>	<b>(000's)</b>		<b>(000's)</b>	<b>(000's)</b>	<b>(000's)</b>	<b>(000's)</b>	<b>(000's)</b>
Number of Items	11,026	10,479	10,170	9,953	9,464	Number of Items	16,156	13,571	9,585	8,555	7,901
Total Cost	€347,396	€312,646	€292,106	€283,086	€262,625	Gross Cost	€303,759	€260,620	€198,603	€177,647	€165,306
<b>Avg. Cost per Item</b>	<b>€31.51</b>	<b>€29.83</b>	<b>€28.72</b>	<b>€28.44</b>	<b>€27.75</b>	***Net Cost	€167,926	€143,502	€96,139	€82,666	€75,471
<b>*Avg. Cost per Claimant</b>	<b>€1,631.17</b>	<b>€1,543.49</b>	<b>€1,497.49</b>	<b>€1,483.45</b>	<b>€1,412.70</b>	<b>Avg. Gross Cost per Item</b>	<b>€18.80</b>	<b>€19.20</b>	<b>€20.72</b>	<b>€20.77</b>	<b>€20.92</b>
						<b>*Avg. Net Cost per Claimant</b>	<b>€318.88</b>	<b>€321.95</b>	<b>€311.47</b>	<b>€294.50</b>	<b>€275.85</b>

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

(ii) \*\*These figures are based on the number of families who availed of services during 2023.

(iii) \*\*\*The Net Cost is inclusive of claims below the monthly co-payment of €80 payable to the Pharmacy by an individual or family.





**GENERAL  
PRACTITIONER  
SECTION**

## Fees and Allowances under Capitation Agreement as at 31st December 2023

Ages	Male €	Female €
6 - 7	100.00	100.00
8 - 12	100.00	100.00
13 - 15	70.71	71.52
16 - 44	90.26	147.60
45 - 64	180.29	198.10
65 - 69	189.92	211.87
Capitation rate for children aged under 5 years where the GP does not hold an under 6 contract.	74.59	72.76
Capitation rate for children aged 5 years where the GP does not hold an under 6 contract.	43.29	43.79
Capitation rate for children aged under 6 years issued with a GP Visit Card.	125.00	125.00
Capitation rate for patients aged 70 years or more residing in the community.	403.31	403.31
Capitation rate for patients aged 70 years or more residing in a private nursing home (approved by the HSE) for continuous periods in excess of 5 weeks.	644.63	644.63
The above rates are exclusive of Supplementary Out-of-Hours Fee.	3.64	3.64

Notes: (i) The rates for children under 6 (effective 1st July 2015) and 6 to 12 years (effective Aug 2023) includes the Supplementary Out-of-Hours fee.  
(ii) Capitation rates as per GP agreement 2023.

### 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

### Temporary Residents/EEA Visitors/Emergency

Surgery	€40.94
Domiciliary	€40.94
Fee for Second Medical Opinion	€26.46

### Rural Practice Support Framework

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	€22,000.00
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	€11,000.00
Opt-in GP (dispensing doctor)	€48.58
Pilot GP (dispensing doctor)	€56.05
Continuous GP (dispensing doctor)	€12.48



## Fees and Allowances under Capitation Agreement as at 31st December 2023 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
AH	TOP patients first consultation	€150.00
AI	TOP Combined termination procedure, including the administration/dispensing for medicines and aftercare	€300.00
AJ	Provision of aftercare by the contractor, where the patient has received termination of pregnancy service in a hospital and has been discharged to the community setting	€100.00
AL	Therapeutic Phlebotomy for Haemochromatosis	€100.00
AM	Virtual Clinic	€100.00
AN	Involuntary Admissions to Acute Mental Health Facilities	€150.00
AO	Chronic Disease Management (one condition)	€105.00
AP	Chronic Disease Management (two conditions)	€125.00
AQ	Chronic Disease Management (three or more conditions)	€150.00
AR	Modified Chronic Disease Virtual Consultation (one condition)	€55.00
AS	Modified Chronic Disease Virtual Consultation (two conditions)	€65.00
AT	Modified Chronic Disease Virtual Consultation (three or more conditions)	€75.00
*AU	Covid-19 1st Vaccine	€25.00
*AV	Covid-19 2nd Vaccine	€25.00
AY	Covid-19 Vaccine Additional Shot 1	€25.00
AZ	Covid-19 Vaccine Booster Shot 1	€25.00
B	Suturing of cuts and lacerations	€50.00
BB	Prevention Programme	€82.00
BC	Opportunistic Case Finding	€60.00
C	Draining of Hydroceles	€24.80
CA	Respiratory assessment for patients regardless of eligibility (Ceased 9th Dec 2023)	€75.00
CE	GP on sick leave due to Covid 19	€40.94
CF	Contraception Consultation for the purpose of accessing relevant products	€55.00
CG	Larc Implant fitting	€100.00
CH	Larc Coil Fitting	€160.00
CI	Larc Implant Removal	€110.00
CJ	Larc Coil Removal	€50.00
CK	Follow up consultation post LARC fitting	€55.00
CL	Contraception Consultation for the purpose of accessing relevant products Agreement 2023 (31 - 44 years old)	€55.00
CM	Larc Coil Fitting Agreement 2023 (31 - 44 years old)	€160.00

## Fees and Allowances under Capitation Agreement as at 31st December 2023 continued

Special Items of Service continued		
CN	Larc Coil Removal Agreement 2023 (31 - 44 years old)	€50.00
CO	Larc Implant Fitting Agreement 2023 (31 - 44 years old)	€100.00
CP	Paxlovid assessment of relevant at-risk patients, prescribe and monitor as appropriate	€55.00
CQ	Larc Implant Removal Agreement 2023 (31 - 44 years old)	€110.00
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
O	Disease Outbreak Vaccination	€28.50
R	Pneumococcal Vaccination	€28.50
**S	Influenza Vaccination - QIV (Quadrivalent Influenza Vaccine)	€15.00
***S	Influenza Vaccination - LAIV (Nasal Vaccine)	€20.00
T	Pneumococcal / Influenza Vaccinations	€42.75
U	Hepatitis B Vaccination	€142.57

\* GP is eligible for a payment of €10 for an unique patient to whom the vaccine is administered during a pandemic.

\*\* GP is eligible for a payment of €100 for every 10 unique patients to whom the QIV vaccine is administered.

\*\*\* GP is eligible for a payment of €150 for every 10 unique patients to whom the LAIV vaccine is administered.

Practice Support	
Allowance for increased capacity of GP Practice (Increased hours or new staff effective 2nd July 2023) (Weight panel 500+) per Annum of:	€15,000.00
Allowance for Practice Secretary up to a maximum Per Annum of:	€26,652.00
Allowance for Practice Nurse up to a maximum Per Annum of:	€43,725.75
Allowance for Practice Manager up to a maximum Per Annum of:	€41,643.75
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	
Study Leave	
Adoptive Leave	Up to a maximum of €2,761.30 per week
Maternity Leave	
Paternity Leave	

## Fees and Allowances under Capitation Agreement as at 31st December 2023 continued

### 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 2023**

<b>GP Surgery Consultations</b>		
Day	Normal Hours	€11.87
Late	Outside Normal Hours other than night	€16.88
Night	Midnight to 8:00 a.m.	€33.38
<b>Domiciliary Consultations</b>		
Day		€17.51
Late		€22.93
Night		€44.96
<b>Temporary Residents/EEA Visitors/Emergency</b>		
Surgery		€40.94
Domiciliary		€40.94
<b>Rural Practice Allowance</b>		
Per Annum		€7,042.91
<b>Locum and Practice Expense Allowance</b>		
Per Annum		€1,371.06
<b>Sessional Rate - Homes for the Aged</b>		
Per 3 Hour Session		€73.18
<b>Immunisation Fees</b>		
Registration of child with a GP		€37.78
6 in one Vaccine		€206.31
95% uptake bonus		€60.63
<b>Health (Amendment) Act 1996</b>		
Surgery Fee		€30.53
Domiciliary Fee		€40.27
<b>Opioid Substitution Treatment Scheme</b>		
Level 1 Contractor		€159.97
Level 2 Contractor		€176.43
<b>Heartwatch Programme</b>		
Heartwatch Programme		€39.31

**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 2023 continued**

Special Items of Service		
AH	TOP patients first consultation	€150.00
AI	TOP Combined termination procedure, including the administration/dispensing for medicines and aftercare	€300.00
AJ	Provision of aftercare by the contractor, where the patient has received termination of pregnancy service in a hospital and has been discharged to the community setting	€100.00
AL	Therapeutic Phlebotomy for Haemochromatosis	€100.00
AN	Involuntary Admissions to Acute Mental Health Facilities	€150.00
AO	Chronic Disease Management (one condition)	€105.00
AP	Chronic Disease Management (two conditions)	€125.00
AQ	Chronic Disease Management (three or more conditions)	€150.00
AR	Modified Chronic Disease Virtual Consultation (one condition)	€55.00
AS	Modified Chronic Disease Virtual Consultation (two conditions)	€65.00
AT	Modified Chronic Disease Virtual Consultation (three or more conditions)	€75.00
*AU	Covid-19 1st Vaccine	€25.00
AV	Covid-19 2nd Vaccine	€25.00
AY	Covid-19 Vaccine Additional Shot 1	€25.00
AZ	Covid-19 Vaccine Booster Shot 1	€25.00
BB	Prevention Programme	€82.00
BC	Opportunistic Case Finding	€60.00
CE	GP on sick leave due to Covid 19	€40.94
CF	Contraception Consultation for the purpose of accessing relevant products	€55.00
CG	LARC Implant Fitting	€100.00
CH	LARC Coil Fitting	€160.00
CI	LARC Implant Removal	€110.00
CJ	LARC Coil Removal	€50.00
CK	Follow up consultation post LARC fitting	€55.00
CL	Contraception Consultation for the purpose of accessing relevant products Agreement 2023 (31 - 44 years old)	€55.00
CM	Larc Coil Fitting Agreement 2023 (31 - 44 years old)	€160.00
CN	Larc Coil Removal Agreement 2023 (31 - 44 years old)	€50.00
CO	Larc Implant Fitting Agreement 2023 (31 - 44 years old)	€100.00
CP	Paxlovid assessment of relevant at-risk patients, prescribe and monitor as appropriate	€55.00
CQ	Larc Implant Removal Agreement 2023 (31 - 44 years old)	€110.00
F	Suturing of cuts and lacerations	€22.43
G	Treatment and Plugging of Dental and Nasal Haemorrhages	€22.43
H	Draining of Hydroceles	€22.43
J	Recognised Vein Treatment	€22.43

**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 2023 continued**

<b>Special Items of Service continued</b>		
K	Excisions / Cryotherapy / Diathermy of Skin Lesions	€22.43
M	ECG Tests and their Interpretation	€22.43
O	Disease Outbreak Vaccination	€28.50
R	Pneumococcal Vaccination	€28.50
**S	Influenza Vaccination	€15.00
***S	Influenza Vaccination - LAIV (Nasal Vaccine)	€20.00
T	Pneumococcal / Influenza Vaccinations	€42.75
U	Hepatitis B Vaccination	€142.57

\* GP is eligible for a payment of €10 for an unique patient to whom the vaccine is administered during a pandemic.

\*\* GP is eligible for a payment of €100 for every 10 unique patients to whom the QIV vaccine is administered.

\*\*\* GP is eligible for a payment of €150 for every 10 unique patients to whom the LAIV vaccine is administered.

## Fees and Allowances under the Capitation / Fee-Per-Item Agreement as at 31st December 2023

### 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.

### Chronic Disease Management

Annual fee payable in respect of eligible patient (aged 18 years and over) with one of the chronic conditions listed in the Agreement of 2019 of €210.

Annual fee payable in respect of eligible patient (aged 18 years and over) with two of the chronic conditions listed in the Agreement of 2019 of €250.

Annual fee payable in respect of eligible patient (aged 18 years and over) with three or more of the chronic conditions listed in the Agreement of 2019 of €300.

Practice Nurse grant per patient registered for Chronic Disease Management or Modified Chronic Disease Management Programme in Agreement of 2019 of €28.75.

Practice Nurse grant per patient registered for Chronic Disease Prevention Programme in Agreement of 2022 of €14.35.

Practice Nurse grant per patient assessed under Chronic Disease Opportunistic Case Finding in Agreement of 2022 of €3.20.

### National Cervical Cancer Screening

Payment in respect of a Cervical screening service in Agreement of 2022 of €65.00.

### Social Deprivation Grant System for 2022

Grant amounts are payable for qualifying practices in the below amounts and are based on the absolute number of patients living in disadvantaged areas. A practice must first qualify through the ranking system before it is determined which band they will come under and receive the corresponding grant amount. GPs in receipt of rural practice supports are not eligible to apply for the social deprivation grant.

#### Number of Patients in Disadvantaged Areas;

200 - 400	€7,500.00
401 - 800	€10,000.00
800 +	€12,500.00

## Fees and Allowances under the Capitation / Fee-Per-Item Agreement as at 31st December 2023 continued

### Children in the Community aged Under 8

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.

The Capitation rate is €100.00 per annum for children between 6 and 7 years issued with a GP Visit Card.

This rate includes the Supplementary Out-of-Hours fee, effective 3rd July 2023.

### Children aged Under 8 - Asthma Cycle of Care

A once off registration fee of €50.00 for children aged under 8 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 8th birthday as GP Agreement 2023.

### Special Items of Service - Under 8

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 2023

### Fees €667.21m

Payments to General Practitioners are categorised as fees and/or allowances. For the majority of GPs who operate under the 2023 agreement the principal fee is the capitation per person which is weighted for gender and age - capitation fees totalled €432,007,667 in 2023. Fees totalling €564,689 were paid to a minority of GPs who continue to provide services under the Fee-Per-Item of service agreements.

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.

### Payments to GPs in each CHO Area

Community Healthcare Organisation	2023
CHO Area 1	€81,732,974
CHO Area 2	€93,276,996
CHO Area 3	€75,746,619
CHO Area 4	€134,385,225
CHO Area 5	€107,802,894
CHO Area 6	€68,429,711
CHO Area 7	€104,580,195
CHO Area 8	€108,567,381
CHO Area 9	€98,956,630
<b>National</b>	<b>€873,478,625</b>

### Reimbursement of claims made by GPs include:

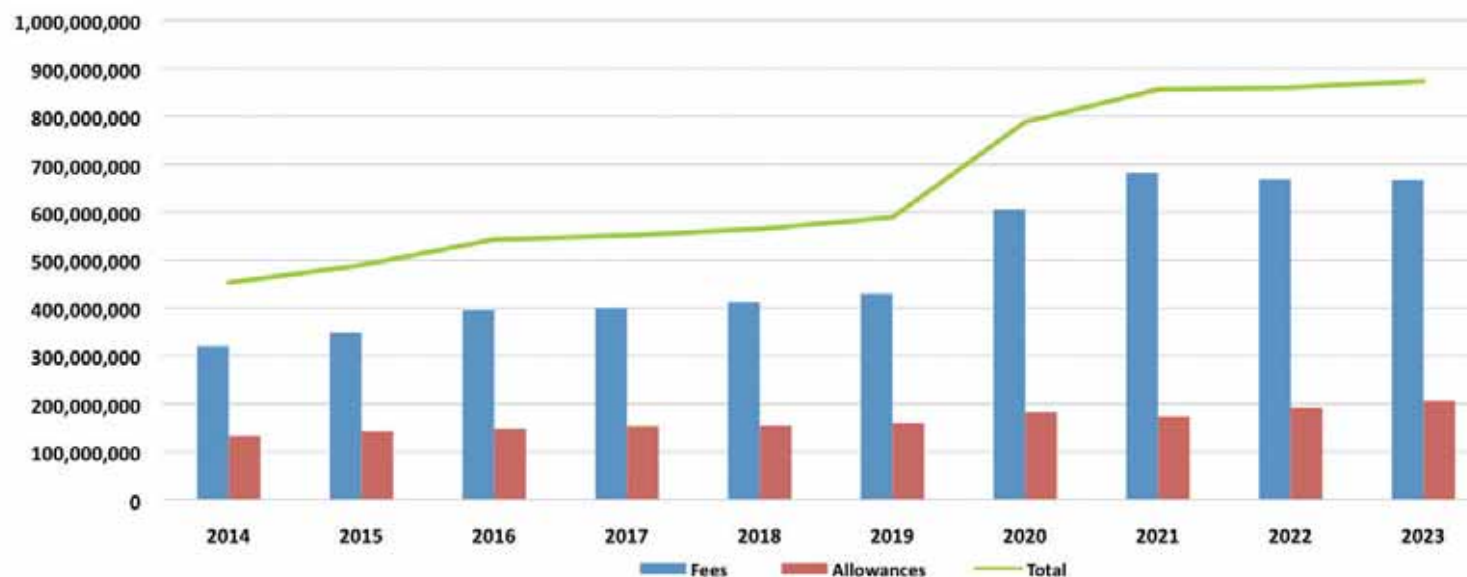
Primary Childhood Immunisation Scheme	€7,328,593
Opioid Substitution Treatment Scheme	€7,845,503
Maternity and Infant Care Scheme	€10,099,702
National Cancer Screening Services	€15,106,423
Heartwatch	€119,260
Health (Amendment) Act 1996	€117,763

### Allowances €206.27m

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 the following morning (Monday to Friday) and all hours on Saturdays, Sundays and Bank Holidays. Special fees are payable for a range of additional services such as excisions, suturing, vaccinations, catheterization, family planning, etc.

Annual and study leave together with locum, nursing and other practice support payments, account for most of the €206,268,695 allowances paid to GPs in 2023.

## Payments to General Practitioners 2014 - 2023



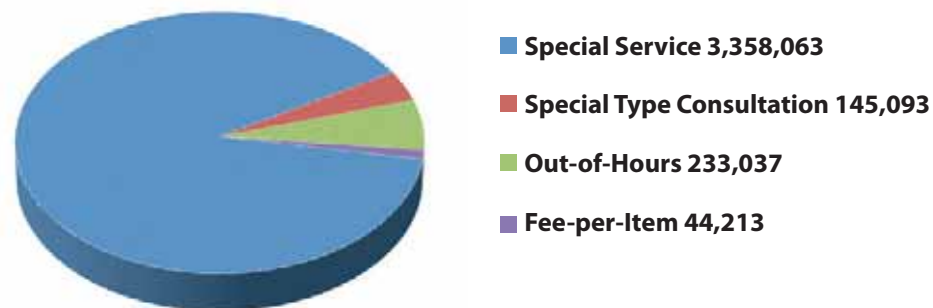
### Payments to General Practitioners 2014 - 2023

Year	Fees	Allowances	Total
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
2020	€605,224,515	€183,027,185	€788,251,700
2021	€682,093,836	€174,030,088	€856,123,924
2022	€668,790,921	€191,468,265	€860,259,186
2023	€667,209,931	€206,268,694	€873,478,625

Note: Payments since 2020 include services provided in respect of Covid-19.

## Number of Claims by General Practitioners

### National – 2023



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

Community Healthcare Organisation	Special Service	Out-of-Hours	Special Type Consultation	Fee-per-Item
CHO Area 1	288,947	12,304	7,862	-
CHO Area 2	371,516	17,733	12,724	-
CHO Area 3	297,608	8,432	13,803	-
CHO Area 4	536,735	35,026	21,871	29,167
CHO Area 5	453,649	13,572	7,136	-
CHO Area 6	285,585	11,806	4,175	-
CHO Area 7	384,706	41,001	33,071	15,046
CHO Area 8	394,096	40,316	10,923	-
CHO Area 9	345,221	52,847	33,528	-
<b>National</b>	<b>3,358,063</b>	<b>233,037</b>	<b>145,093</b>	<b>44,213</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 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 Fee-per-Item Agreement.

## Number of Claims by General Practitioners 2014 - 2023



Year	Special Service	Out-of-Hours	Special Type Consultation	Fee-per-Item
2014	938,890	806,522	286,222	55,047
2015	969,709	885,861	299,568	52,634
2016	1,084,881	987,711	307,742	46,100
2017	1,174,931	959,121	285,461	47,476
2018	1,328,715	961,873	261,254	36,343
2019	1,312,012	939,342	242,633	39,473
2020	6,526,186	329,270	155,495	27,958
2021	7,114,636	144,699	130,111	37,562
2022	4,266,234	143,297	152,913	39,025
2023	3,358,063	233,037	145,093	44,213

Note: Payments since 2020 include services provided in respect of Covid-19.

## GMS: Payments to General Practitioners

		<b>2023</b>	<b>2022</b>
		<b>€</b>	<b>€</b>
<b>FEES</b>	- Capitation	432,007,667	408,274,294
	- Special Claims/Services	154,319,857	173,534,911
	- Out-of-Hours	8,197,759	4,907,292
	- Dispensing	514,353	584,322
	- Item of Service Contract	564,688	473,670
	- Asylum Seekers	1,877,241	1,007,576
	- Vaccinations	20,128,018	29,203,675
	- Asthma Registration	182,000	150,500
	- Asthma Capitation	481,055	336,311
	- Contribution for GP Height Measure and Self Zeroing Scale	4,548	2,304
	- Diabetes Capitation	4,036,568	5,630,444
	- Diabetes Registration	3,900	7,470
	- Ukrainian Patient Registration	4,275,032	4,502,218
<b>ALLOWANCES</b>	- Secretarial/Nursing	107,018,316	94,961,104
	- Annual Leave	11,109,523	10,620,115
	- Rostering/Out-of-Hours	6,210,060	6,284,943
	- Medical Indemnity Insurance	7,671,224	7,821,045
	- Rural Practice	4,793,863	4,910,153
	- Study Leave	2,047,392	1,885,022
	- Sick Leave	2,110,335	3,055,248
	- Maternity Leave/Paternity Leave	4,747,462	4,081,128
	- Locum and Practice Expenses	2,742	3,428
	- Social Deprivation Grant	3,105,000	2,542,500
	- CDM Nursing Support Grant	5,821,839	0
	- Winter Plan Support Grant	1,028,050	7,477,000
<b>SALARIES</b>	- Benefits to retired DMOs and their dependants	1,133,664	1,398,891
	- Former District Medical Officers	759,976	955,223
<b>SUPERANNUATION FUND</b>	- Contribution	50,417,761	46,871,355
<b>TOTAL</b>		<b>€834,569,893</b>	<b>€821,482,142</b>

Note: Claims in respect of the CDM Nursing Support Grant were not included in the 2022 report.



The background of the slide is a blurred image of a pharmacy interior, showing shelves stocked with various bottles and containers. A semi-transparent pink overlay with wavy, horizontal bands covers the bottom half of the image. The text 'PHARMACY SECTION' is positioned in the lower right area, overlaid on the pink bands.

**PHARMACY  
SECTION**

## Scale of Fees Payable to Participating Pharmacists as at 31st December 2023

<b>GMS Scheme</b>	<b>€</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 (€80 from 1st March 2022) 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>	
<b>Pharmacy Vaccinations</b>	
<b>Influenza Vaccination - QIV (Quadrivalent Influenza Vaccine)</b>	15.00
<b>Influenza Vaccination - LAIV (Nasal Vaccine)</b>	20.00
<b>Covid-19 Vaccination</b>	25.00 per dose
<b>Pharmacist is eligible for a once off payment for every patient to whom the vaccine is administered</b>	10.00 per patient
<b>Pharmacist is eligible for a payment of €100 for every 10 unique patients to whom the QIV vaccine is administered.</b>	
<b>Pharmacist is eligible for a payment of €150 for every 10 unique patients to whom the LAIV vaccine is administered.</b>	



## Scale of Fees Payable to Participating Pharmacists as at 31st December 2023 continued

Contraception Scheme	€
Contraception - Long-acting and Emergency Hormonal Contraceptive supply on a single occasion	6.50
Contraception - of supply on a single occasion, dispensing 1 month	6.50
Contraception - of supply on a single occasion, dispensing 2 month	10.00
Contraception - of supply on a single occasion, dispensing 3 month	13.50
Contraception - of supply on a single occasion, dispensing 4 month	17.00
Contraception - of supply on a single occasion, dispensing 5 month	21.50
Contraception - of supply on a single occasion, dispensing 6 month	24.00
Emergency contraceptive without a prescription - Additional fee for dispensing	11.50
Contraception once off administrative fee on the first dispensing	5.00

## Payments to Pharmacists: Claims Reimbursed 2023

GMS €1,045.24m	DPS €167.93m	LTI €347.40m	EEA €0.44m
<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 2023 there were 20.97m GMS prescription forms containing over 68.26m prescription items which were dispensed at a cost of €1,039,090,614. (This figure excludes the cost of GMS stock orders of €6,146,297 in 2023). This equates to an average cost of €15.29 per dispensed item. During 2023, 87% of all GMS cardholders availed of prescription items at an average cost of €749.40 per person.</p>		<p>Under General Medical Services (GMS) Scheme, Drug Payment Scheme (DPS), Long Term Illness (LTI), Dental Treatment Services Scheme (DTSS) 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 125,078 persons who availed of High Tech Arrangements and patient care fees of €45.9m 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	€100,352,840	€9,406,491	€27,778,656	€71,915	€137,609,902
CHO Area 2	€117,286,637	€14,558,112	€31,029,513	€87,257	€162,961,519
CHO Area 3	€92,328,292	€12,855,042	€28,243,674	€80,367	€133,507,375
CHO Area 4	€159,858,254	€25,248,495	€50,552,422	€87,396	€235,746,567
CHO Area 5	€135,237,385	€16,269,600	€42,641,528	€38,032	€194,186,545
CHO Area 6	€56,663,350	€24,576,407	€27,293,979	€8,466	€108,542,202
CHO Area 7	€130,424,514	€23,690,034	€49,062,499	€16,208	€203,193,255
CHO Area 8	€138,909,391	€19,742,043	€49,870,514	€33,291	€208,555,239
CHO Area 9	€114,176,248	€21,579,950	€40,923,212	€17,303	€176,696,713
<b>National</b>	<b>€1,045,236,911</b>	<b>€167,926,174</b>	<b>€347,395,997</b>	<b>€440,235</b>	<b>€1,560,999,317</b>

\*GMS - This figure includes Stock Order costs.

- Also included in the above GMS figure is an amount of €0.52m which was paid for items dispensed under Redress for Women Resident in Certain Institutions, and €15.01m which was paid in respect of Non GMS Reimbursable Items dispensed under Discretionary Hardship Arrangements.

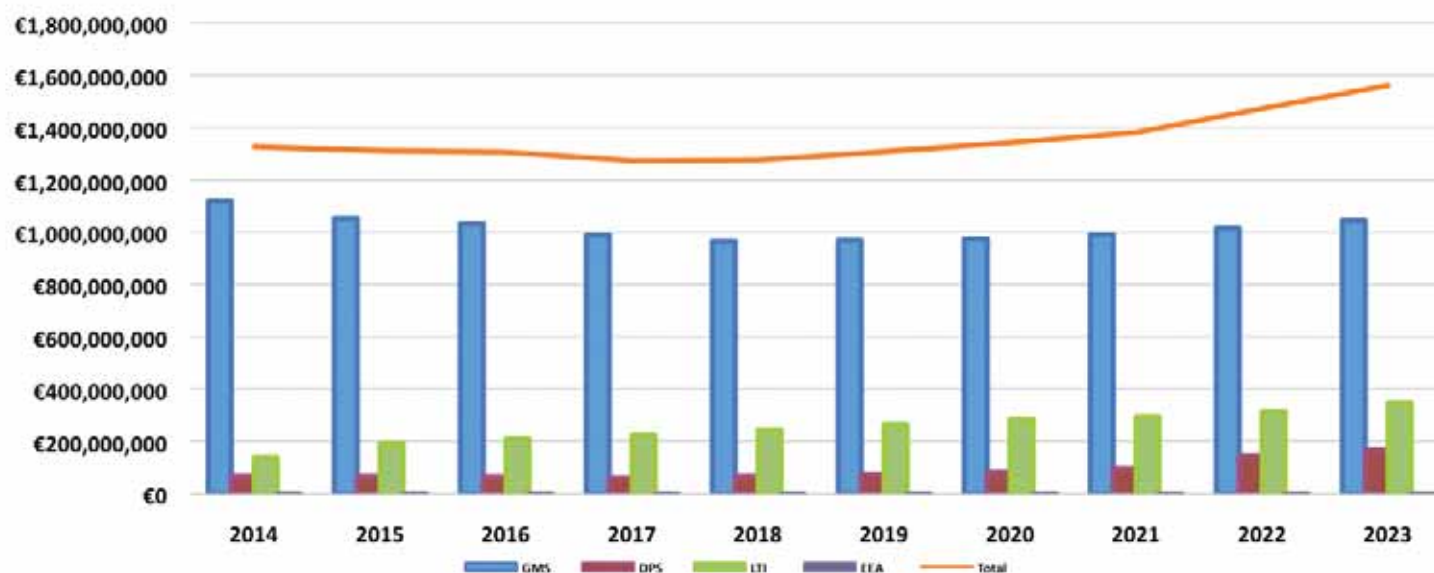
#### Additional payment of claims reimbursed to Pharmacists include:

High Tech Arrangements - Patient Care Fees	€45,871,494
Opioid Substitution Treatment Scheme	€13,491,866
Covid-19 Vaccinations Scheme	€9,913,007
Influenza Vaccination Scheme	€9,339,604
Contraception Scheme	€14,870,508
Health (Amendment) Act 1996	€1,554,145
Dental Treatment Services Scheme	€698,183
Pharmacy Training Grant	€452,930
Medical Cannabis Access Programme	€237,714

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

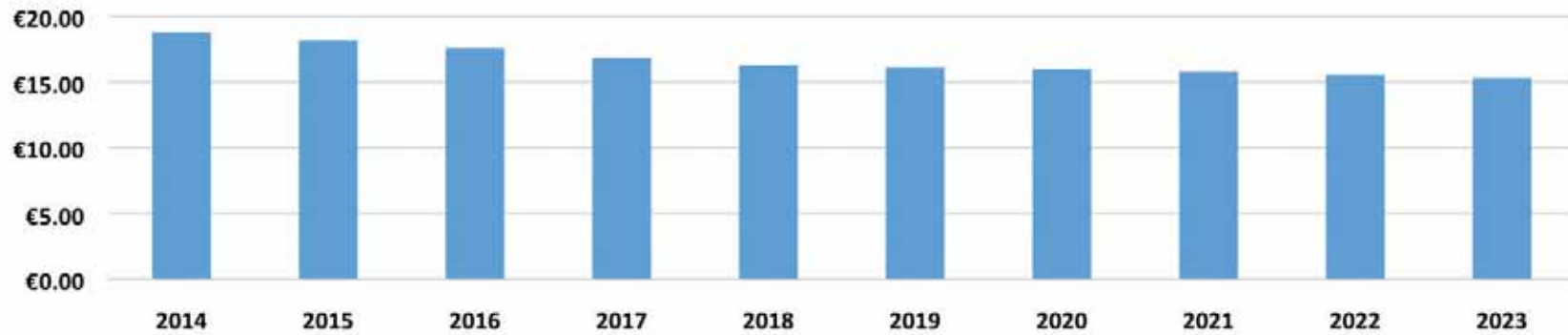
High Tech Arrangements - Drugs and Medicines	€1,146,597,534
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## Payments to Pharmacists: Claims Reimbursed 2014 - 2023



Year	GMS	DPS	LTI	EEA	Total
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
2020	€975,255,894	€82,666,086	€283,086,179	€599,158	€1,341,607,317
2021	€991,772,194	€96,139,505	€292,106,251	€402,029	€1,380,419,979
2022	€1,015,607,700	€143,502,112	€312,645,717	€378,314	€1,472,133,843
2023	€1,045,236,911	€167,926,174	€347,395,997	€440,235	€1,560,999,317

## Average GMS Cost per Pharmacy Item 2014 - 2023

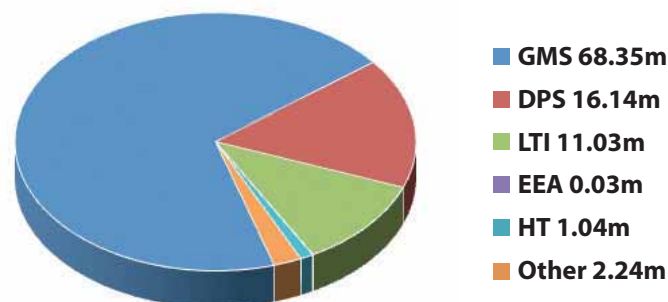


Year	*Total Number of Items	Total Payments	Average Cost per Item
2014	59,524,407	€1,118,945,050	€18.80
2015	58,093,584	€1,054,304,114	€18.15
2016	58,797,149	€1,033,290,114	€17.57
2017	58,713,753	€989,833,465	€16.86
2018	59,326,912	€966,349,869	€16.29
2019	60,176,425	€969,787,344	€16.12
2020	61,062,484	€975,255,894	€15.97
2021	62,754,498	€991,772,194	€15.80
2022	65,327,676	€1,015,607,700	€15.55
2023	68,347,247	€1,045,236,911	€15.29

\*Total number of Items includes Stock Order Items.

## Number of Items Claimed by Pharmacists

### National – Number of Items Claimed 2023



GMS prescription forms processed for payment in the year totalled 20.97m - the total of prescribed items was more than 68.26m - these accounted for approximately 71% of all items paid for by the Primary Care Reimbursement Service in 2023.

Approximately 45.07% of GMS forms contained a single item - 16.28% contained 2 items - the average number per form was approximately 3.26 items (2022 - 3.36).

### Number of Items claimed in each CHO

Community Healthcare Organisation	*GMS	DPS	LTI	EEA	HT	Other	Total
CHO Area 1	6,546,970	918,488	941,761	5,707	78,869	147,357	8,639,152
CHO Area 2	7,303,339	1,392,112	953,904	6,523	100,532	168,623	9,925,033
CHO Area 3	6,154,941	1,350,718	966,383	5,994	81,884	159,205	8,719,125
CHO Area 4	10,352,005	2,558,726	1,545,618	6,728	173,959	305,124	14,942,160
CHO Area 5	8,977,523	1,678,822	1,430,621	2,950	109,856	259,888	12,459,660
CHO Area 6	3,703,983	1,918,422	784,175	735	96,182	196,624	6,700,121
CHO Area 7	8,679,177	2,340,216	1,511,740	1,190	149,909	370,889	13,053,121
CHO Area 8	9,225,210	1,978,905	1,599,535	2,483	125,202	306,061	13,237,396
CHO Area 9	7,404,099	2,019,473	1,292,259	1,415	120,042	330,716	11,168,004
<b>National</b>	<b>68,347,247</b>	<b>16,155,882</b>	<b>11,025,996</b>	<b>33,725</b>	<b>1,036,435</b>	<b>2,244,487</b>	<b>98,843,772</b>

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

#### Other:

Opioid Substitution Treatment Scheme  
Influenza Vaccinations Scheme  
Covid-19 Vaccination Programme

#### Claims:

360,854  
334,620  
397,391

#### Other:

Discretionary Hardship Arrangements  
Dental Treatment Services Scheme  
Health (Amendment) Act 1996  
Contraception Scheme

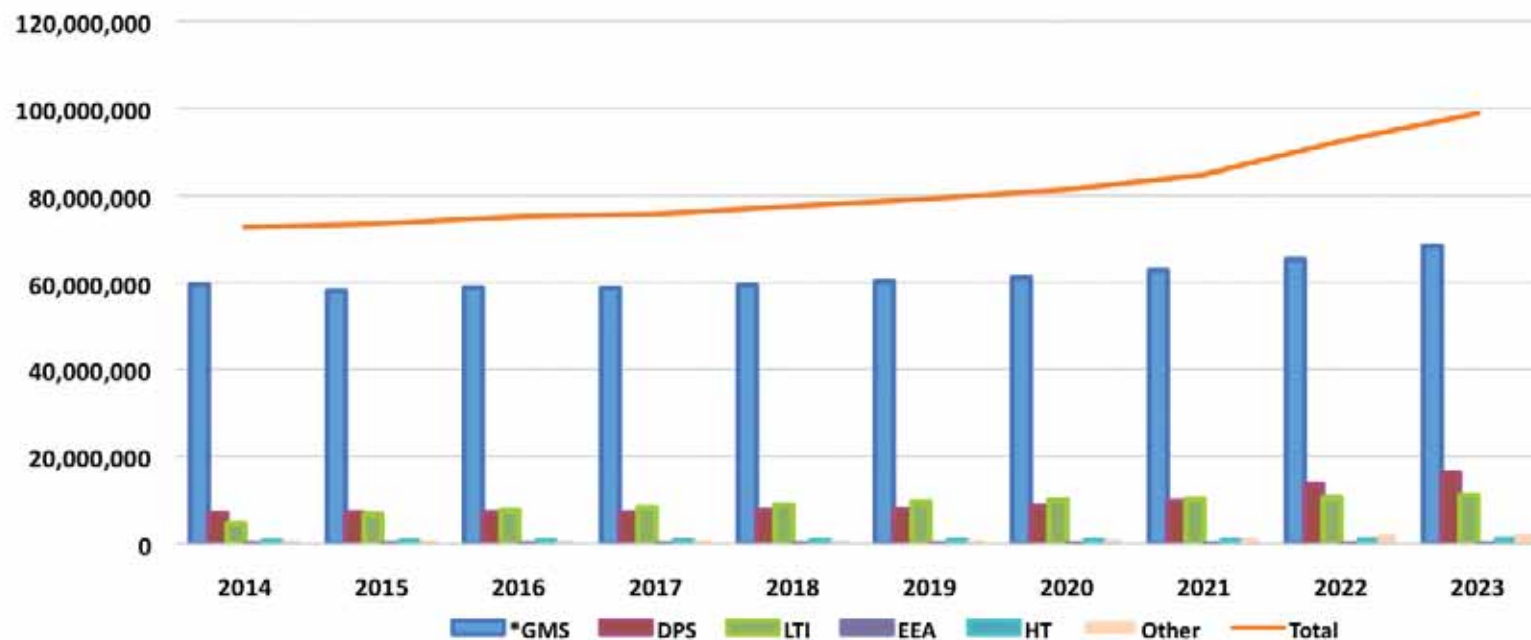
#### Claims:

196,739  
113,321  
99,528  
742,034

**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), Discretionary Hardship Arrangements and Contraception Scheme.

## Number of Items Claimed by Pharmacists 2014 - 2023



Year	*GMS	DPS	LTI	EEA	HT	Other	Total
2014	59,524,407	7,007,029	4,696,579	89,210	582,744	815,567	72,715,536
2015	58,093,584	7,158,877	6,759,211	84,328	631,042	815,181	73,542,223
2016	58,797,149	7,203,742	7,593,728	76,369	681,631	823,222	75,175,841
2017	58,713,753	7,135,002	8,304,668	67,970	746,052	795,652	75,763,097
2018	59,326,912	7,633,295	8,936,045	63,739	818,114	767,859	77,545,964
2019	60,176,425	7,901,647	9,464,596	56,577	887,263	782,959	79,269,467
2020	61,062,484	8,554,971	9,952,633	44,867	798,437	1,013,240	81,426,632
2021	62,754,498	9,585,130	10,169,870	28,198	867,469	1,383,372	84,788,537
2022	65,327,676	13,570,809	10,479,449	27,179	945,484	2,072,100	92,422,697
2023	68,347,247	16,155,882	11,025,996	33,725	1,036,435	2,244,487	98,843,772

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

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

The 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 Drugs Initiative is an ongoing project supporting prescribers in choosing the most efficient drug option in various therapeutic areas. The MMP also manages an increasing number of medicines and ancillary products through Health Technology Management (HTM) to ensure cost-effective prescribing and utilisation; this includes the use of both reimbursement application systems and managed access protocols.

Therapeutic Area	MMP Preferred Drug
Angiotensin-Converting Enzyme (ACE) Inhibitor	Ramipril
Angiotensin-II Receptor Blocker (ARB)	Candesartan
Beta Blocker	Bisoprolol
Calcium Channel Blocker (CCB)	Amlodipine
Oral Anticoagulant	Warfarin or Apixaban
Proton Pump Inhibitor (PPI)	Pantoprazole
Serotonin Noradrenaline Reuptake Inhibitor (SNRI)	Venlafaxine
Selective Serotonin Reuptake Inhibitor (SSRI)	Sertraline
Statin	Atorvastatin
Urology (Urinary incontinence, frequency and overactive bladder)	Tolterodine extended-release

### Preferred Drugs Initiative

The Preferred Drugs Initiative aims to promote safe, effective and cost-effective use of the most commonly prescribed medicines in Ireland. The Preferred Drugs Initiative identifies a single preferred drug within a therapeutic class and offers prescribers guidance on selecting, prescribing and monitoring the drug for a particular condition. For each preferred drug an evaluation report with Prescribing Tips and Tools are available on the MMP website ([www.hse.ie/mmp](http://www.hse.ie/mmp)). Prescribers are encouraged to make the preferred drug their drug of first choice when prescribing a drug from that therapeutic class.

### Health Technology Management (HTM)

**Reimbursement application systems** are accessed through PCRS online services for: lidocaine (Versatis®) medicated plasters, sacubitril/valsartan (Entresto®) film-coated tablets, standard oral nutritional supplements (List B) and continuous glucose monitoring (CGM) sensors.

**Managed Access Protocols (MAPs)** are in place for a wide variety of medicines in order to facilitate access for patients. A MAP outlines the criteria that must be satisfied for a patient to be recommended for reimbursement of the medicine. Examples include:

- Community Drug Schemes: liraglutide (Saxenda®), rivaroxaban 2.5 mg.
- High Tech Arrangement: medicines for the prophylaxis of chronic migraine, medicines for moderate-to-severe atopic dermatitis, dupilumab (Dupixent®) for severe asthma, inotersen (Tegsedi®), lanadelumab (Takhzyro®), larotrectinib (Vitrakvi®), obeticholic acid (Ocaliva®), risdiplam (Evrydsi®), tafamidis (Vyndaqel®), teduglutide (Revestive®), delta-9-tetrahydrocannabinol/cannabidiol (Sativex®).
- Hospital pricing approval: eculizumab (Soliris®), nusinersen (Spinraza®), onasemnogene abeparvovec (Zolgensma®), patisiran (Onpattro®), voretigene neparvovec (Luxtorna®).

### Best-value biological (BVB) / Best-value medicines (BVM)

The MMP has identified BVB/BVMs for the following:

- Adalimumab
- Etanercept
- Glatiramer
- Long-acting granulocyte-colony stimulating factors
- Teriparatide

Further information on these initiatives is available on [www.hse.ie/mmp](http://www.hse.ie/mmp)



The HSE-Medicines Management Programme (MMP) are engaged in research into the design and implementation of health technology management initiatives. The MMP provide regular updates on the utilisation of drugs subject to managed access protocols, some examples are outlined here. Also available on [www.hse.ie/mmp](http://www.hse.ie/mmp) under Data Snapshots and Publications.

## Calcitonin gene-related peptide (CGRP) monoclonal antibodies (MABs) erenumab, fremanezumab, and galcanezumab

**Reimbursed indication:** prophylaxis of chronic migraine in adults who have failed three or more prophylactic treatments.

**Number of patients in receipt of CGRP MABs per month on the High Tech Arrangement**

CGRP MAB	Medicinal Product	Maximum annual reimbursement cost per patient*
Erenumab	Aimovig® PPF 140 mg	€6,111.82
Erenumab	Aimovig® PPF 70 mg	€6,103.51
Fremanezumab	Ajovy® PPF 225 mg	€5,472.75
Fremanezumab	Ajovy® PFS 225 mg	€5,472.75
Galcanezumab	Emgality® PPF 120 mg	€5,655.83

**Key Metrics:**

- 42 Number of approved prescriptions
- 45 years Mean age of recipients
- 82% Proportion female recipients

PPF: Pre-filled pen, PFS: Pre-filled syringe  
Data used: Health Service Executive (HSE) Primary Care Reimbursement Service (PCRS) reimbursement claims data and HSE Medicines Management Programme (MMP) application data. Reimbursement price excludes fees, VAT and any confidential rebates. Information correct as of October 2023. \*Expenditure January to September 2023 inclusive under the Drug Payment and General Medical Services schemes. Information correct as of May 2024, 2023.

## Sacubitril/Valsartan (Entresto®)

**Reimbursed indication:** Treatment of symptomatic chronic heart failure with reduced ejection fraction (HFrEF) in adult patients who meet the following criteria at the time of application:

- Left ventricular ejection fraction of  $\leq 35\%$
- Symptomatic with NYHA functional class II to IV symptoms
- Receiving optimal medical therapy for heart failure (HF)
- Systolic blood pressure  $\geq 100$  mmHg
- Serum potassium  $\leq 5.4$  mmol/L

**Number of patients in receipt of Entresto® per month on the Community Drug Schemes**

Medicinal Product	Pack size	Reimbursement price
Entresto® Film Coated Tablets 24 mg/26 mg	28	€62.99
Entresto® Film Coated Tablets 49 mg/51 mg	28	€63.08
Entresto® Film Coated Tablets 49 mg/51 mg	56	€126.76
Entresto® Film Coated Tablets 97 mg/103 mg	56	€126.79

**Key Metrics:**

- 10,132 Reimbursed applications up to September 2023
- 6,145 Average number of patients per month receiving Entresto® in 2023\*
- €34.3 m Expenditure on Entresto® in 2023\*

HF: Heart failure, HFrEF: Chronic heart failure with reduced ejection fraction. NYHA: New York Heart Association. Data used: Health Service Executive (HSE) Primary Care Reimbursement Service (PCRS) reimbursement claims data and HSE Medicines Management Programme application data. Reimbursement price includes fees and any confidential rebates. Information correct as of September 2023. \*Average based on claims data from January to September 2023. \*Expenditure from December 2021 to November 2023 inclusive on community drug schemes.

## Liraglutide (Saxenda®) for weight management

**Reimbursed indication:** As an adjunct to a reduced-calorie diet and increased physical activity for weight management in adult patients, with an initial body mass index of  $\geq 35$  kg/m<sup>2</sup> with prediabetes and high-risk for cardiovascular disease.

**Number of patients in receipt of Liraglutide (Saxenda®) per month on the Community Drug Schemes**

Medicinal Product	Pack size	Reimbursement price
Saxenda® 6mg/1ml Soln for inj in Pre-filled pen	5	€186.98

**Key Metrics:**

- €1.8 million Expenditure to date\*
- 3,675 Number of approved Phase I applications
- 528 Number of approved Phase II applications

Data used: Health Service Executive (HSE) Primary Care Reimbursement Service (PCRS) reimbursement claims data and HSE Medicines Management Programme (MMP) application data. Reimbursement price excludes fees, VAT and any confidential rebates. Information correct as of October 2023. \*Expenditure January to September 2023 inclusive under the Drug Payment and General Medical Services schemes.

## Tafamidis (Vyndaqel® 61mg capsules)

**Reimbursed indication:** for the treatment of adult patients with wild-type or hereditary transthyretin amyloidosis with cardiomyopathy

**Number of patients in receipt of tafamidis per month on the High Tech Arrangement**

BNP	Product	Maximum annual reimbursement cost per patient*
Tafamidis	Vyndaqel® 61mg capsules	€103,973

**Key Metrics:**

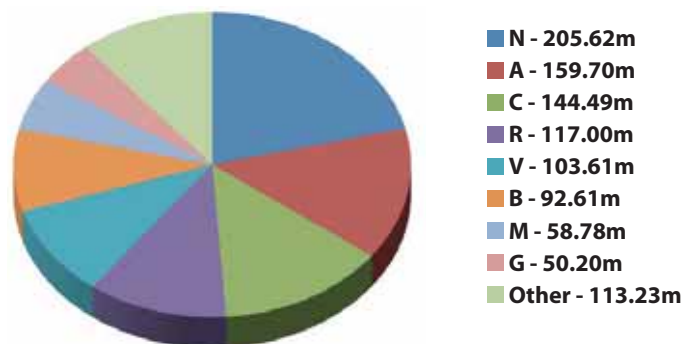
- 33 Number of approved prescriptions
- 19.2% Applicants with hereditary transthyretin amyloidosis
- 85% Proportion male applicants

Data used: Health Service Executive (HSE) Primary Care Reimbursement Service (PCRS) reimbursement claims data and HSE Medicines Management Programme application data. Reimbursement price includes fees and any confidential rebates. Information correct as of March 2023.



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

National 2023

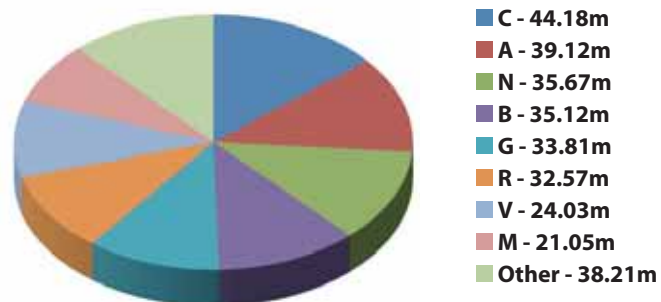


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	<b>Alimentary Tract and Metabolism</b>	<b>159.70</b>	<b>11,844,283</b>
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>92.61</b>	<b>4,794,188</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>144.49</b>	<b>14,303,489</b>
<b>D</b>	Dermatologicals	23.80	1,518,889
<b>G</b>	<b>Genito Urinary System and Sex Hormones</b>	<b>50.20</b>	<b>2,857,993</b>
<b>H</b>	Systemic Hormonal Preps. excl. Sex Hormones and Insulins	17.24	2,314,212
<b>J</b>	Antiinfectives for Systemic Use	31.01	2,700,116
<b>L</b>	Antineoplastic and Immunomodulating Agents	9.94	389,470
<b>M</b>	<b>Musculo-Skeletal System</b>	<b>58.78</b>	<b>3,336,382</b>
<b>N</b>	<b>Nervous System</b>	<b>205.62</b>	<b>14,481,194</b>
<b>P</b>	Antiparasitic Products, Insecticides and Repellents	2.21	158,549
<b>R</b>	<b>Respiratory System</b>	<b>117.00</b>	<b>6,035,374</b>
<b>S</b>	Sensory Organs	29.03	1,915,612
<b>V</b>	<b>Various (below)</b>	<b>103.61</b>	<b>1,697,496</b>
	Clinical Nutritional Products	48.28	681,623
	Ostomy Requisites	26.16	427,477
	Urinary Requisites	15.55	182,392
	Diagnostic Products	4.44	135,292
	Dressings	3.52	50,708
	Other Therapeutic Products	1.93	21,298
	Needles/Syringes/Lancets	1.70	83,991
	Allergens	0.17	2,072
	Miscellaneous	1.86	112,643
	<b>Total</b>	<b>€1,045.24m</b>	<b>68,347,247</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 2023

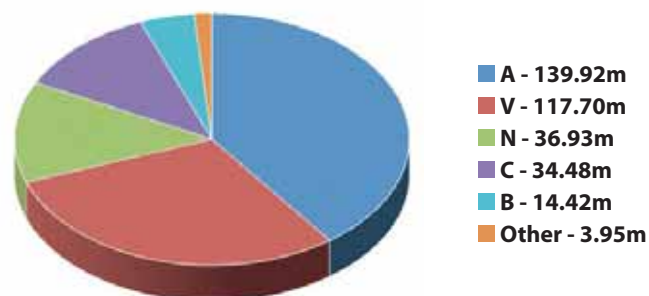


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	<b>Alimentary Tract and Metabolism</b>	<b>39.12</b>	<b>2,555,181</b>
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>35.12</b>	<b>1,274,152</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>44.18</b>	<b>3,941,022</b>
<b>D</b>	Dermatologicals	7.89	344,611
<b>G</b>	<b>Genito Urinary System and Sex Hormones</b>	<b>33.81</b>	<b>1,060,812</b>
<b>H</b>	Systemic Hormonal Preps. excl. Sex Hormones and Insulins	5.95	598,794
<b>J</b>	Antiinfectives for Systemic Use	10.29	669,144
<b>L</b>	Antineoplastic and Immunomodulating Agents	5.82	168,315
<b>M</b>	<b>Musculo-Skeletal System</b>	<b>21.05</b>	<b>735,006</b>
<b>N</b>	<b>Nervous System</b>	<b>35.67</b>	<b>2,466,660</b>
<b>P</b>	Antiparasitic Products, Insecticides and Repellents	1.11	56,518
<b>R</b>	<b>Respiratory System</b>	<b>32.57</b>	<b>1,534,583</b>
<b>S</b>	Sensory Organs	7.15	393,644
<b>V</b>	<b>Various (below)</b>	<b>24.03</b>	<b>357,440</b>
	Clinical Nutritional Products	7.68	81,425
	Ostomy Requisites	7.53	98,984
	Urinary Requisites	3.87	32,160
	Diagnostic Products	0.78	15,926
	Needles/Syringes/Lancets	0.64	48,397
	Allergens	0.62	7,305
	Other Therapeutic Products	0.54	5,422
	Dressings	0.23	3,362
	Miscellaneous	2.14	64,459
	<b>Total</b>	<b>303.76m</b>	<b>16,155,882</b>

Notes: (i) The above costs are inclusive of the monthly co-payment of €80 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 2023

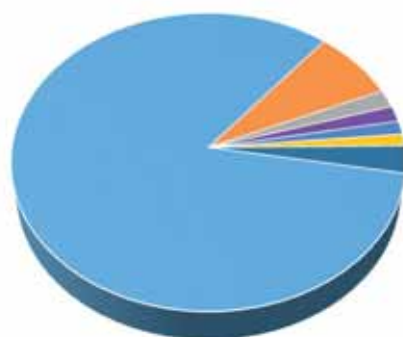


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	<b>Alimentary Tract and Metabolism</b>	<b>139.92</b>	<b>3,336,429</b>
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>14.42</b>	<b>950,446</b>
<b>C</b>	<b>Cardiovascular System</b>	<b>34.48</b>	<b>3,940,675</b>
<b>D</b>	Dermatologicals	0.02	922
<b>G</b>	Genito Urinary System and Sex Hormones	0.80	27,916
<b>H</b>	Systemic Hormonal Preps. excl. Sex Hormones and Insulins	1.24	40,481
<b>J</b>	Antiinfectives for Systemic Use	0.65	26,484
<b>L</b>	Antineoplastic and Immunomodulating Agents	0.10	1,405
<b>M</b>	Musculo-Skeletal System	0.47	26,795
<b>N</b>	<b>Nervous System</b>	<b>36.93</b>	<b>980,278</b>
<b>P</b>	Antiparasitic Products, Insecticides and Repellents	0.02	364
<b>R</b>	Respiratory System	0.56	21,293
<b>S</b>	Sensory Organs	0.09	2,400
<b>V</b>	<b>Various (below)</b>	<b>117.70</b>	<b>1,670,108</b>
	Diagnostic Products	80.19	913,383
	Needles/Syringes/Lancets	20.54	504,566
	Clinical Nutritional Products	8.56	71,178
	Urinary Requisites	3.39	19,234
	Nutritional/Ancillary Devices	0.32	1,661
	Ostomy Requisites	0.25	3,816
	Dressings	0.07	679
	Other Therapeutic Products	0.05	184
	Miscellaneous	4.33	155,407
	<b>Total</b>	<b>€347.40m</b>	<b>11,025,996</b>

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

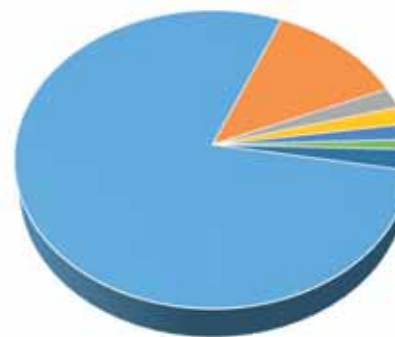
## LTI: Spend by Illness 2023

### National 2023



- F - Diabetes Mellitus €288.82m
- H - Epilepsy €26.35m
- K - Parkinsonism €6.61m
- M - Phenylketonuria €5.93m
- A - Intellectual Disability €4.98m
- J - Multiple Sclerosis €4.41m
- Other - €10.30m

### No. of Persons



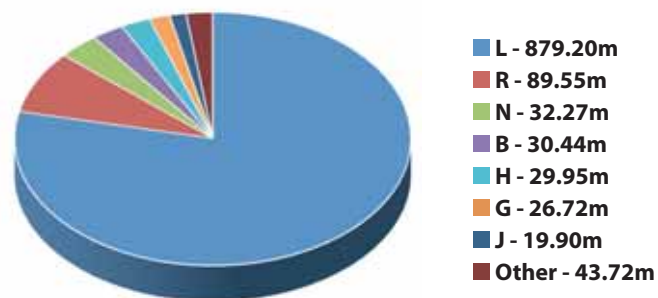
- F - Diabetes Mellitus 167,118
- H - Epilepsy 26,304
- K - Parkinsonism 4,730
- J - Multiple Sclerosis 4,105
- A - Intellectual Disability 3,596
- P - Mental Illness (U16s) 2,304
- Other - 4,815

Long Term Illness		€m	No. of Persons
<b>A</b>	<b>Intellectual Disability</b>	<b>4.98</b>	<b>3,596</b>
<b>B</b>	Hydrocephalus	0.57	226
<b>C</b>	Cerebral Palsy	1.83	893
<b>D</b>	Muscular Dystrophy	0.20	187
<b>E</b>	Haemophilia	0.02	41
<b>F</b>	<b>Diabetes Mellitus (does not include Gestational Diabetes)</b>	<b>288.82</b>	<b>167,118</b>
<b>G</b>	Diabetes Insipidus	0.31	264
<b>H</b>	<b>Epilepsy</b>	<b>26.35</b>	<b>26,304</b>
<b>J</b>	<b>Multiple Sclerosis</b>	<b>4.41</b>	<b>4,105</b>
<b>K</b>	<b>Parkinsonism</b>	<b>6.61</b>	<b>4,730</b>
<b>L</b>	Cystic Fibrosis	3.41	1,433
<b>M</b>	<b>Phenylketonuria (PKU)</b>	<b>5.93</b>	<b>686</b>
<b>N</b>	Acute Leukaemia	0.38	406
<b>P</b>	<b>Mental Illness (Under 16 years)</b>	<b>1.20</b>	<b>2,304</b>
<b>Q</b>	Spina Bifida	2.38	679
	<b>Total</b>	<b>€347.40m</b>	<b>212,972</b>

Notes: (i) Based on data available from claims submitted by pharmacies.  
(ii) Number of Persons dispensed to is based on Primary Illness.

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

### National 2023

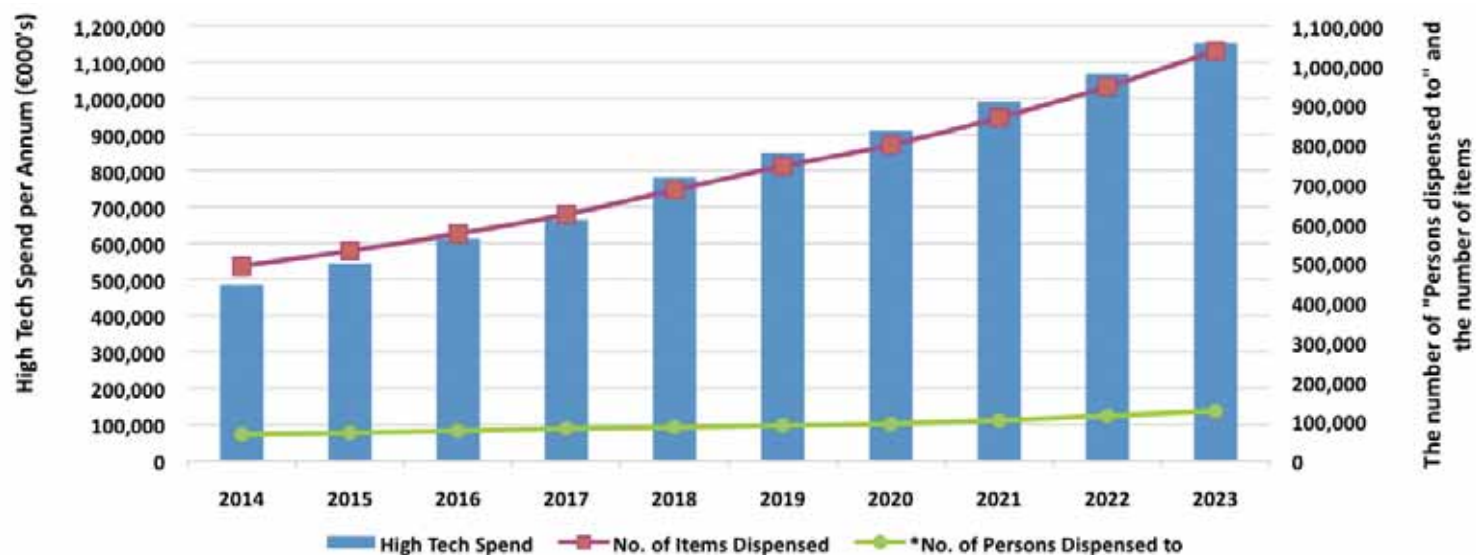


Major Therapeutic Classification		€m	Prescribing frequency
<b>A</b>	Alimentary Tract and Metabolism	11.19	2,334
<b>B</b>	<b>Blood and Blood Forming Organs</b>	<b>30.44</b>	<b>42,146</b>
<b>C</b>	Cardiovascular System	14.23	14,314
<b>D</b>	Dermatologicals	10.69	7,380
<b>G</b>	<b>Genito Urinary System and Sex Hormones</b>	<b>26.72</b>	<b>26,045</b>
<b>H</b>	<b>Systemic Hormonal Preps. excl. Sex Hormones and Insulins</b>	<b>29.95</b>	<b>69,693</b>
<b>J</b>	<b>Antiinfectives for Systemic Use</b>	<b>19.90</b>	<b>20,833</b>
<b>L</b>	<b>Antineoplastic and Immunomodulating Agents</b>	<b>879.20</b>	<b>787,641</b>
<b>M</b>	Musculo-Skeletal System	6.64	7,573
<b>N</b>	<b>Nervous System</b>	<b>32.27</b>	<b>24,775</b>
<b>R</b>	<b>Respiratory System</b>	<b>89.55</b>	<b>31,494</b>
<b>V</b>	Various (below)	0.97	2,207
	Other Therapeutic Products	0.97	2,207
	<b>Total</b>	<b>€1,151.75m</b>	<b>1,036,435</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 2014 - 2023

### Movement in Number of "persons dispensed" to v's High Tech Spend



The graph illustrates the High Tech spend over a 10 year period from 2013 -- 2022 and the trend in the number of items and people dispensed to.

Year	High Tech Spend	No. of Items Dispensed	*No. of Persons Dispensed to
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
2020	€909,793,962	798,437	92,693
2021	€991,143,684	867,469	101,151
2022	€1,067,768,028	945,484	113,016
2023	€1,151,747,335	1,036,435	125,078

\* 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 2023

Treatment Type	Routine €
Oral Examination	40.00
Prophylaxis	42.00
Restoration (Amalgam)	65.00
Restoration (Composite) 6 anterior teeth only	80.00
Exodontics (Extraction under local anaesthetic)	60.00
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	67.00
Each Subsequent Item	21.48
Maximum payable	109.96
Apicectomy / Amputation of Roots	168.70
Endodontics (Anterior teeth only)	206.49
Protracted Periodontal Treatment per visit (Max 4)	26.36
<b>Miscellaneous</b>	
(e.g. Haemorrhage and Dressing)	22.65
Prescription	11.32
<b>Prosthetics</b>	
Full Upper or Lower Denture	456.71
Partial Upper or Lower Acrylic Denture	334.98
Complete Upper or Lower Reline	182.83
Complete Upper and Lower Reline	304.33
Full Upper and Lower Denture	670.24



## Payments to Dentists: Claims Reimbursed 2023

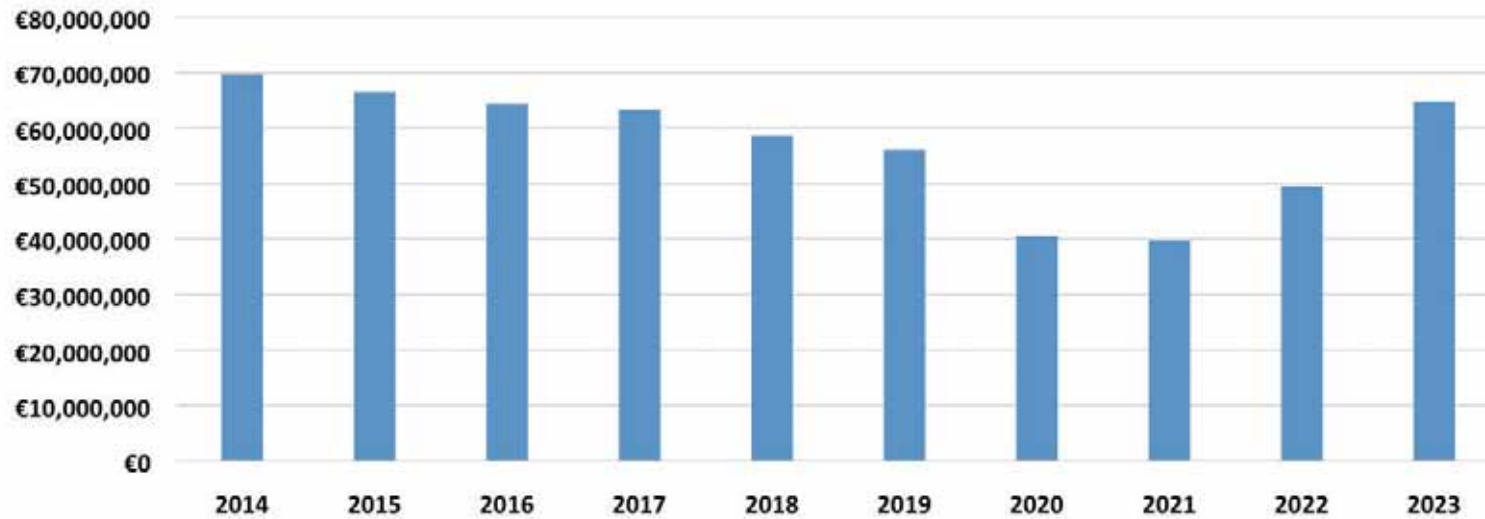
Above the Line €48.60m	Below the Line €16.22m
<p>Dentists were reimbursed a total of €64.82m in 2023 in respect of treatments provided for 283,658 GMS persons under the DTS Scheme.</p> <p>The following treatments were available to all GMS eligible persons.</p> <p><b>ROUTINE:</b> Routine treatments are categorised as either 'Above the Line' or 'Below the Line'.</p> <p>'Above the Line' treatments are uncomplicated procedures, e.g. Amalgam (Filling) and Extractions.</p> <p>'Below the Line' treatments are advanced procedures, e.g. Protracted Periodontal and Prosthetics.</p>	<p>'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.</p>

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

Community Healthcare Organisation	2023
CHO Area 1	€9,083,392
CHO Area 2	€5,059,956
CHO Area 3	€6,131,640
CHO Area 4	€10,308,116
CHO Area 5	€8,529,092
CHO Area 6	€2,725,042
CHO Area 7	€7,846,793
CHO Area 8	€8,614,770
CHO Area 9	€6,525,806
<b>National</b>	<b>€64,824,607</b>

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

## Payments to Dentists: Claims Reimbursed 2014 - 2023

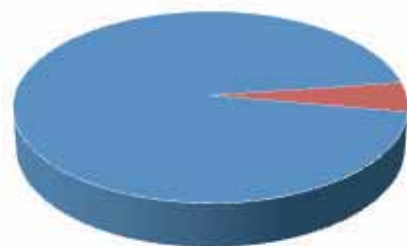


Year	Payments to Dentists
2014	€69,782,332
2015	€66,505,516
2016	€64,393,261
2017	€63,369,808
2018	€58,680,201
2019	€56,075,566
2020	€40,549,163
2021	€39,636,355
2022	€49,484,119
2023	€64,824,607

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

## Number of Dental Treatments Claimed 2023

### National – Number of Treatments Claimed 2023



**Above the Line 932,612**

**Below the Line 38,104**

### 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	123,465	5,533	39,008	€9,083,392
CHO Area 2	76,449	2,699	24,593	€5,059,956
CHO Area 3	91,959	3,311	27,422	€6,131,640
CHO Area 4	154,186	5,529	46,311	€10,308,116
CHO Area 5	123,177	5,418	36,231	€8,529,092
CHO Area 6	39,458	1,343	11,947	€2,725,042
CHO Area 7	112,655	4,536	35,447	€7,846,793
CHO Area 8	118,630	5,666	36,593	€8,614,770
CHO Area 9	92,633	4,069	26,106	€6,525,806
<b>National</b>	<b>932,612</b>	<b>38,104</b>	<b>283,658</b>	<b>€64,824,607</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.*

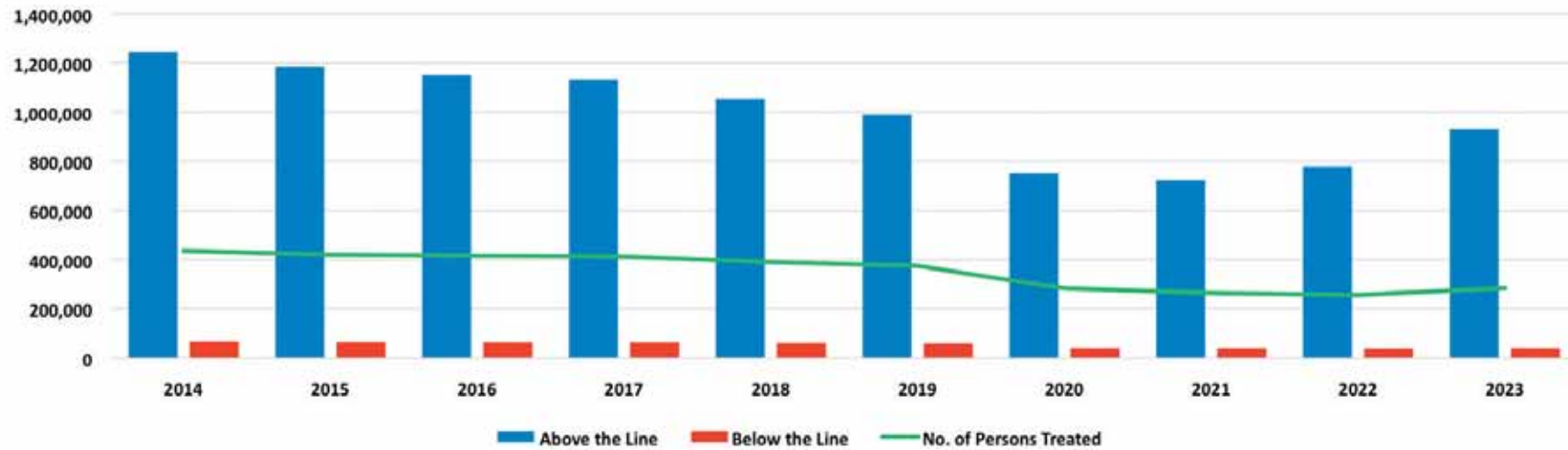
*\* The most frequently used ATL service was Oral Examinations, which was used by 257,819 patients followed by Composite Restoration.*

*\*\* 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 reimbursed fees in respect of Health (Amendment) Act 1996 claims.*

## Number of Dental Treatments Claimed 2014 - 2023



Year	Above the Line	Below the Line	No. of Persons Treated
2014	1,245,135	67,248	436,433
2015	1,186,342	64,583	420,459
2016	1,151,562	63,480	416,662
2017	1,131,347	63,383	413,111
2018	1,053,116	60,658	389,791
2019	990,169	59,124	374,408
2020	752,494	38,233	282,796
2021	722,767	37,902	264,591
2022	779,017	36,914	256,949
2023	932,612	38,104	283,658

Note: Since 2017 dental figures include HAA claims.

The background features a blurred cityscape with various buildings and structures. A semi-transparent purple overlay covers the entire scene. In the foreground, there are several overlapping, wavy, light-purple bands that create a sense of depth and movement. The text 'OPTICAL SECTION' is positioned in the lower right area, rendered in a bold, white, sans-serif font with a subtle drop shadow.

**OPTICAL  
SECTION**

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

As at 31st December 2023	€	As at 31st December 2023	€
<b>Examinations</b>		<b>Single Vision Lenses to Own Frame</b>	
Eye Examination Ophthalmic Optician	22.51	Replacement Distance Lens (1) to own Frame	16.46
Eye Examination Ophthalmologist / Ophthalmic Medical Practitioner	24.78	Replacement Distance Lenses (2) to own Frame	32.94
Medical Eye Examination by Ophthalmologist	49.58	Replacement Reading Lens (1) to own Frame	16.46
Eye Examination for Contact Lenses (Grant)	68.44 (H)	Replacement Reading Lenses (2) to own Frame	32.94
Eye Examination Ophthalmic (Dilation)	45.03	<b>Single Vision Lenses to Non-Standard Frame</b>	
Domiciliary Visit Ophthalmic Optician	67.53	Single Vision Lens (1) (Glass) Distance	23.70 (H)
Domiciliary Visit Ophthalmologist / Ophthalmic Medical Practitioner	67.53	Single Vision Lenses (2) (Glass) Distance	47.41 (H)
<b>Domiciliary Fees</b>		Single Vision Lens (1) (Glass) Reading	23.70 (H)
1st Patient Exam	67.53	Single Vision Lenses (2) (Glass) Reading	47.41 (H)
2nd Patient Exam	45.02	Single Vision Lens (1) (Plastic) Distance	27.03 (H)
3rd - 15th Patient Exam	22.51	Single Vision Lenses (2) (Plastic) Distance	54.06 (H)
1st Patient Dilation	22.51	Single Vision Lens (1) (Plastic) Reading	27.03 (H)
2nd Patient Dilation	15.00	Single Vision Lenses (2) (Plastic) Reading	54.06 (H)
3rd - 15th Patient Dilation	7.50	<b>Additional Specification For Lenses To All Spectacle Types</b>	
<b>Appliances</b>		Special grant towards additional specification for Lens (1)	82.62 (H)
<b>Single Vision Complete Appliances</b>		- applies to all spectacle types	
Spectacles - Distance	42.37	Special grant towards additional specification for Lenses (2)	165.26 (H)
Spectacles - Reading	42.37	- applies to all spectacle types	
Spectacles - Uncollected	29.49		
Contact Lenses (Pair)	42.36		
Contact Lenses Standard or Disposable per pair (Grant)	64.78 (H)		
Single Vision Spectacles - with Glass Lenses Distance	122.85 (H)		
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)		

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

Notes: (i) Domiciliary Fees: Adults requiring a domiciliary visit in a hospital or other group care setting.

(ii) 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 2023	€	As at 31st December 2023	€
<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 2023

The Community Ophthalmic Services Scheme (COSS) provides access to certain Optical treatments to eligible persons living in the community. Reimbursement for adult medical card holders, which include free eye examinations and necessary spectacles/appliances, is made by the Primary Care Reimbursement Service (PCRS).

Payment is also made by PCRS for teenage medical card holders for eye examinations and necessary spectacles/appliances and for necessary spectacles/appliances for children.

In the 12-month period to the end of December 2023, claims were received on behalf of 287,513 GMS persons for 701,628 treatments costing €26,629,391.

Eye examinations by Optometrists/Ophthalmologists totalled 267,463; complete spectacles (distance, reading and bi-focals) and other appliances provided under the Scheme totalled 434,165.

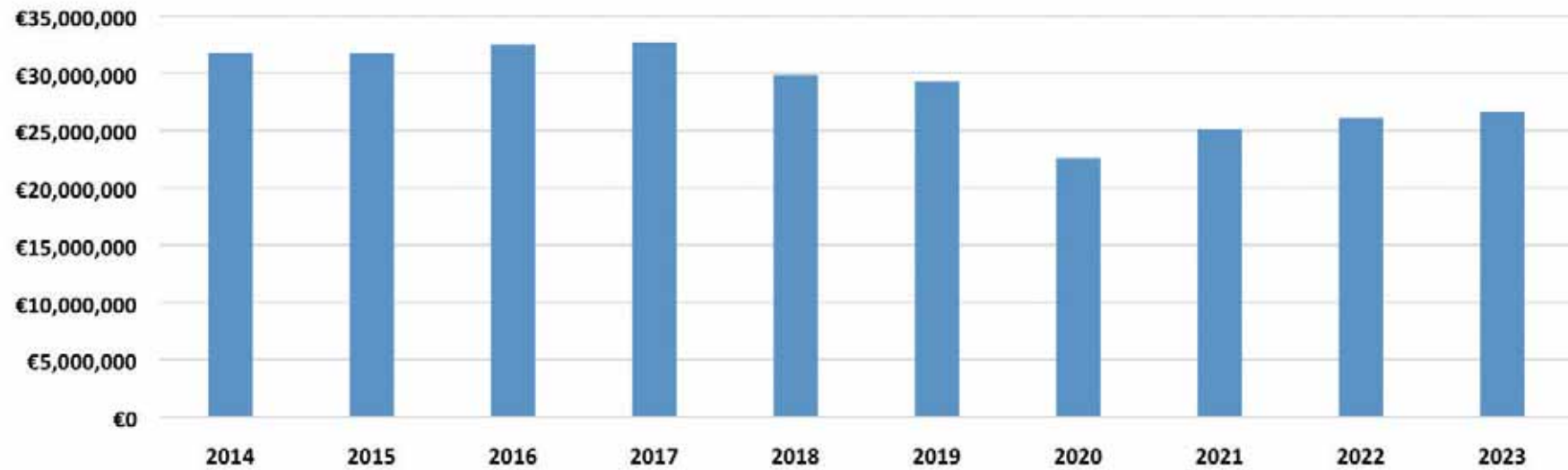
### Payments to Optometrists/Ophthalmologists: Claims Reimbursed in each CHO

Community Healthcare Organisation	2023
CHO Area 1	€3,006,642
CHO Area 2	€2,774,250
CHO Area 3	€2,162,144
CHO Area 4	€3,814,546
CHO Area 5	€3,917,579
CHO Area 6	€1,576,055
CHO Area 7	€3,266,255
CHO Area 8	€3,454,073
CHO Area 9	€2,657,847
<b>National</b>	<b>€26,629,391</b>

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



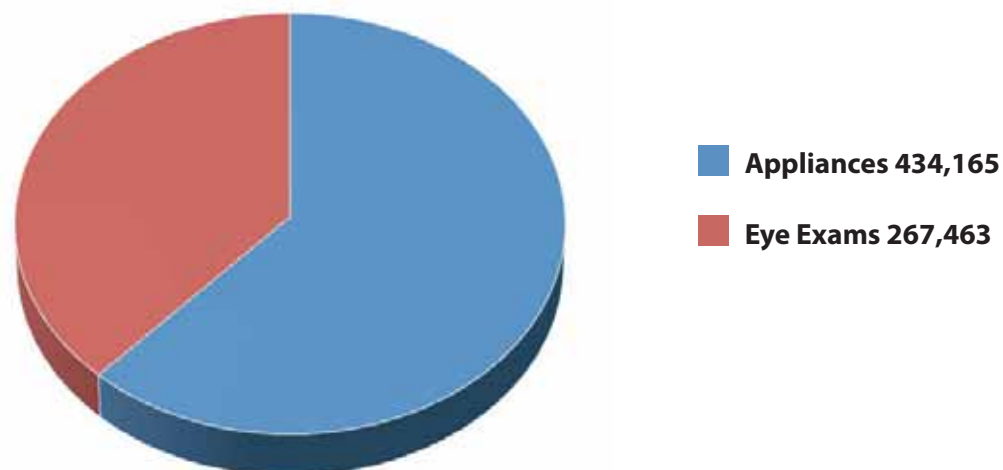
## Payments to Optometrists/Ophthalmologists: Claims Reimbursed 2014 - 2023



Year	Payments to Optometrists/Ophthalmologists
2014	€31,787,039
2015	€31,743,068
2016	€32,508,917
2017	€32,706,469
2018	€29,832,040
2019	€29,261,845
2020	€22,581,523
2021	€25,107,697
2022	€26,120,431
2023	€26,629,391

## Number of Treatments by Optometrists/Ophthalmologists

### National Number of Treatments 2023

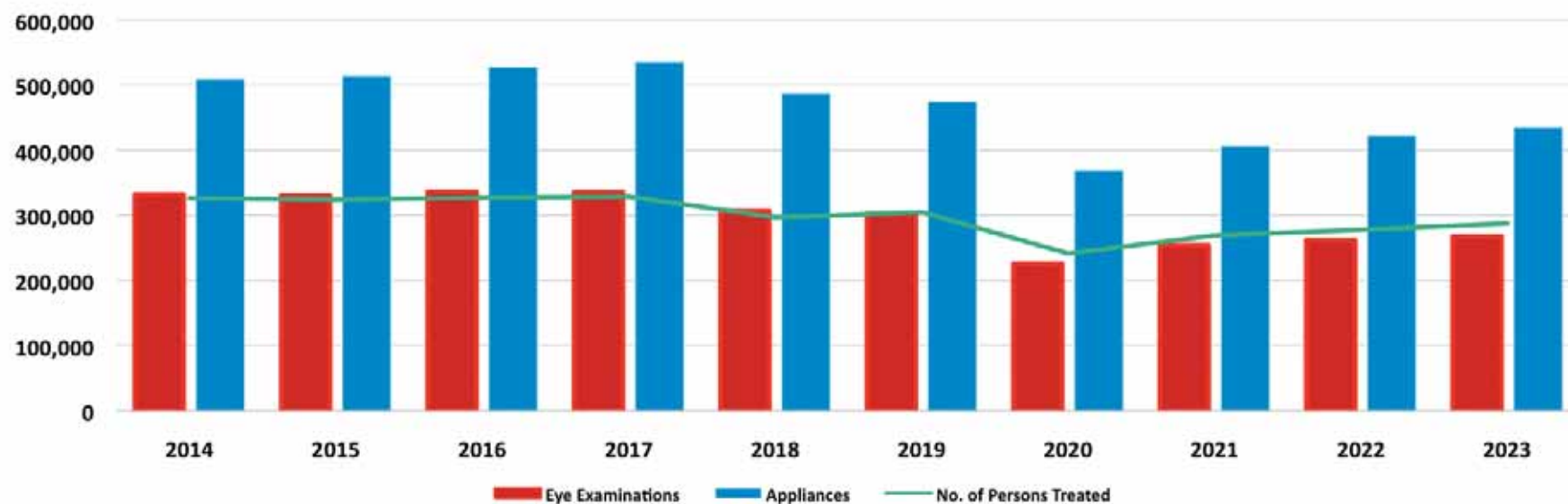


### Number of Treatments by Optometrists/Ophthalmologists in each CHO

Community Healthcare Organisation	Eye Examinations	Appliances	No. of Persons Treated	Value of Reimbursements
CHO Area 1	30,640	50,016	34,695	€3,006,642
CHO Area 2	25,637	49,296	30,441	€2,774,250
CHO Area 3	22,638	36,331	24,862	€2,162,144
CHO Area 4	41,048	58,526	39,869	€3,814,546
CHO Area 5	37,785	70,419	43,555	€3,917,579
CHO Area 6	17,637	19,833	15,511	€1,576,055
CHO Area 7	32,076	51,863	34,366	€3,266,255
CHO Area 8	32,708	58,780	37,049	€3,454,073
CHO Area 9	27,294	39,101	27,165	€2,657,847
<b>National</b>	<b>267,463</b>	<b>434,165</b>	<b>287,513</b>	<b>€26,629,391</b>

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

## Number of Treatments by Optometrists/Ophthalmologists 2014 - 2023



Year	Eye Examinations	Appliances	No. of Persons Treated	Value of Reimbursements
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
2020	225,684	368,808	241,128	€22,581,523
2021	253,817	406,517	268,979	€25,107,697
2022	261,669	422,522	277,445	€26,120,431
2023	267,463	434,165	287,513	€26,629,391



## **Appendix**

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

### **PCRS Annual Reports**

Statistical Analysis of Claims and Payments 1998 - 2023

### **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

Payments to Pharmacists: Claims Reimbursed

Number of Items Claimed by Pharmacists

Benzodiazepine and Z Drugs Claims

### **Dental Reports**

Monthly Expenditure Report for DTSS

DTSS Payments and Number of Treatments

### **Optical Reports**

### **High Tech Reports**

### **Contractor Reports**

### **Annual Flu Reports**

