

# Updates from the HSE-Medicines Management Programme (MMP), focusing on glucose monitoring initiatives.

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IIOP 30<sup>th</sup> April 2025



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- Health Technology Management relating to glucose monitoring:
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  - The rationale for the recent initiatives relating to continuous glucose monitoring (CGM) sensors
  - The process for the identification of preferred CGM sensors
  - The outcome and recommendations from the preferred CGM sensors initiative





# **HSE-Medicines Management Programme**

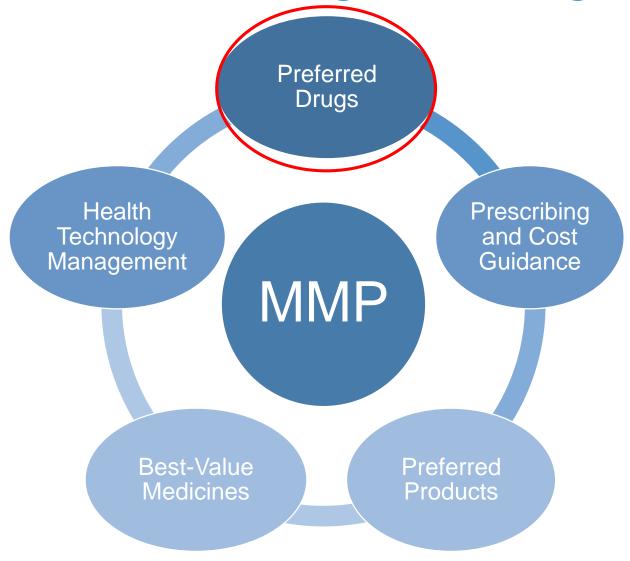
#### The HSE-MMP was established in January 2013

Aim - Sustained National Leadership relating to:

- ✓ Safe
- ✓ Effective
- ✓ Cost-effective prescribing



**HSE-Medicines Management Programme** 









# **Preferred Drug Evaluation Reports**

- ➤ Clinical outcome data
- ➤ Clinical guidelines
- ➤ Adverse drug reactions
- ➤ Contraindications and cautions
- ➤ Drug interactions
- ➤ Patient factors
- >Cost
- ➤ National prescribing trends



www.hse.ie/mmp





MEDICINES MANAGEMENT PROGRAMME

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



# **HSE-Medicines Management Programme**







#### Prescribing Tips and Tools for the Management of Dry Eye Syndrome (DES)



First-line treatment options should be considered when prescribing for people with DES.

First-line treatment options are considered the BEST-VALUE preparation by the Medicines Management Programme (MMP).

Products listed on this page are examples of the best-value option, per category listed. Full evaluation report is available at: <a href="www.hse.ie/yourmedicines">www.hse.ie/yourmedicines</a>. For a full list of reimbursed items and for further information see overleaf. Costs refers to the reimbursed cost of the eye preparation as listed on the HSE PCRS website (www.pcrs.ie). The prices listed do not include mark-up or dispensing fees that private/Drugs Payment scheme patients may be charged.

#### **Prescribing Considerations**

- ✓ First-line treatment options should be considered initially when prescribing for people with DES.
- √ All pharmacological treatments should be used in conjunction with lifestyle advice.
- ✓ Choose the BEST-VALUE preparation and prescribe by BRAND name.
- ✓ Some preparations have up to six months in-use expiry. Do not prescribe these on a monthly-basis without checking the patient's requirement.

Abbreviations: DDU: Daily dose units; DES: Dry eye syndrome; MMP: Medicines Management Programme; PVA: Polyvinyl alcohol; SDU: Single dose units

#### **First-Line Treatment**

#### Polyvinyl Alcohol (PVA)

Equifilm Tears® 1.4% €2.15 (15 ml) In-use expiry: 28 days Contains preservative

#### Hypromellose

Artelac® 0.32 % €2.30 (10 ml) In-use expiry: 28 days Contains preservative

#### Alternative First-Line

#### Carbomer

Xailin® Gel 0.2 % €2.89 (10 g) In-use expiry: 28 days Preservative-free\*

\*Preservative-free in the eye

# Second-Line Treatment Sodium

#### Hyaluronate HydraMed® 0.2 %

€5.67 (10 ml)
In-use expiry: 3 months
Preservative-free

#### +/- Night Lubrication

Xailin® Night €2.76 (5 g) In-use expiry: 60 Hylo-Night® €2.91 (5 g) In-use expiry: 6 months

Night Lubrication: All first- and secondline options can be used with or without additional lubricating agents at night.

- Choose one first-line treatment option initially +/- night lubrication.
- . If there is insufficient improvement after 6-8 weeks, consider another first-line agent or a second-line treatment option.

#### First-Line Treatment Information

- All recommended first-line treatments are multi-dose preparations.
- Hypromellose may require more frequent administration than carbomer or PVA but may be better tolerated due to lower viscosity.
- \* Xailin® gel is a first-line option for those requiring preservative-free treatment. It contains sodium perborate which is a preservative that disappears upon contact with the eye. Contact lenses must be removed prior to use.

#### **Practice Point**

Only consider preservative-free preparations first-line where the patient:



- has evidence of epithelial toxicity to the preservatives contained in the preparation,
- · needs to use more than six applications of eye drops daily over a prolonged period of time,
- wears contact lenses,
- uses multiple eye products.

#### Daily Dose Unit (DDU) / Single Dose Unit (SDU)

DDU/SDU preparations are individual dosing units. A DDU is designed for multiple dose administrations within 12 hours, whilst SDUs are for single use only. Due to the high acquisition cost of DDU/SDU products compared to multi-dose alternatives, particularly for more frequent dosing, prescribing should be reserved for circumstances where:

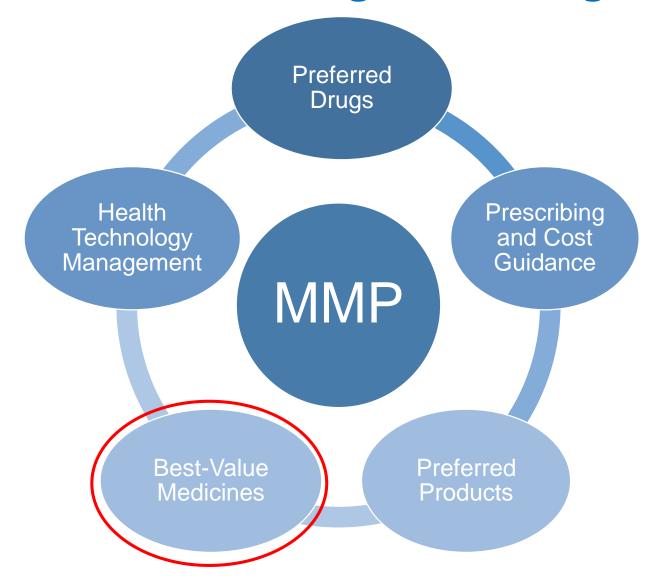
- · there are no alternative preparations available,
- the patient has dexterity issues,
- inpatient hospital use (consider multi-dose alternative for discharge).

#### DDU SDU Carmellose Carmellose Sodium Hyaluronate Carmellose HydraMed® 0.2 % Carmellose sodium Celluvisc 0.50 % Xailin® Fresh 0.50 % €5.67 (Alissa) 0.50 % €3.89 (0.4 ml SDU x 30) €3.50 (0.4 ml SDU x 30) (0.5 ml DDU x 30) €3.50 (0.4 ml SDU x 30) In-use expiry: single use In-use expiry: single use In-use expiry: 12 hours In-use expiry: single use MMP Version 1.0 December 2021





# **HSE-Medicines Management Programme**







### **Best-value medicines**

The Medicines Management Programme has identified best-value medicines in the following areas:

- Best-value biological medicines: adalimumab + etanercept
- <u>Filgrastim</u>
- Glatiramer acetate
- <u>Long-acting granulocyte-colony stimulating factors</u>
- <u>Teriparatide</u>

#### **BVB/BVM Processes 2025**

Information in relation to potential best-value biological (BVB) medicine and best-value medicine (BVM) processes for 2025.

MMP BVB and BVM Processes 2025 (PDF, size 454.5 KB, 1 page)









#### **Medicines Management Programme**

# Best-value biological medicine: Filgrastim on the High Tech Arrangement

Approved by	Professor Michael Barry, Clinica	al Lead, MMP
Date approved:	Version 1.0	05/03/2025

# www.hse.ie/mmp

#### Best-value biological medicines: Filgrastim

The Medicines Management Programme has identified best-value biological (BVB) medicines for medicinal products containing filgrastim on the High Tech Arrangement.

The MMP recommends the following as BVB medicines for filgrastim on the High Tech Arrangement:

- Accofil® (Accord Healthcare Ireland Limited)
- Tevagrastim® (Teva Pharmaceuticals Ireland).

A copy of the MMP Evaluation Report is available in the Related Files section below.





#### Feidhmeannacht na Seirbhíse Sláinte, Seirbhís Aisíocha Príomhchúraim

Bealach amach 5, M50, An Bóthar Thuaidh, Fionnghlas, Baile Átha Cliath 11, D11XKF3 Primary Care Reimbursement Service

Exit 5, M50, North Road, Finglas, Dublin 11, D11 XKF3 w ww.pcrs.ie

t 01 8647100 e PCRS@hse.ie

Circular 005/25

RE: High Tech Hub Ordering and Management System/Best Value Medicines

26th March 2025

Dear Pharmacist.

Following review of the medicinal products containing filgastrim that are available on the High Tech Arrangement, a number of best -value biological medicines (BVBs) have been recommended. Please find enclosed a copy of a letter and supporting documentation issued to prescribing consultants, by the HSE Medicines Management Programme.

From 1<sup>st</sup> April 2025, the High Tech Hub will be extended to include medicinal products containing filgrastim and lenograstim. Medicinal products containing the long-acting granulocyte-colony stimulating factors (G-CSFs) (lipegfilgrastim and pegfilgrastim) were previously added to the High Tech Hub on 1 April 2024.

The updated drug codes listed in Appendix 1 which are licensed for use across the therapeutic area of haematology and oncology will be added to those that are already available for ordering via the hub.

The following are the relevant suppliers for the next cohort of medications:

- United Drug Dublin
- United Drug Limerick
- United Drug Ballina
- Uniphar Dublin

The most efficient way to place orders is to use the Hub to set up your preferred high tech supplier(s) or alternatively you can select a preferred supplier(s) at drug level. It is vitally important that you set up your preferred supplier as soon as you access the Hub for the first time. Should you have any queries the support team in the High Tech Co-Ordination Unit can be contacted by email at <a href="mailto:pcrs.hitech@hse.ie">pcrs.hitech@hse.ie</a> or by phone at 01 864 7135.



Please note reimbursement will only be facilitated for orders placed through the hub for the listed "hub only" High Tech medications. Any High Tech drug available for ordering through the Hub but ordered via a separate mechanism will be treated as a private transaction and will result in the pharmacy being liable for payment. The suppliers of listed 'hub' drugs will not be able to process an order that does not occur through the hub. We are continuously updating our User Guide and FAQ documents and these are available under the 'Help' section on the High Tech Hub application. Please ensure you inform your staff and locums of this process.

At this point in time, all valid High Tech prescriptions for medicinal products containing filgrastim on the HSE Reimbursement List remain eligible for reimbursement under the High Tech Arrangement, for patients commencing or established on treatment with filgrastim.

Clinicians have been requested to clearly indicate the medicinal product (e.g. Accofil®, Neupogen®, Nivestim®, Tevagrastim®) that they are prescribing on paper-based High Tech prescriptions. If the medicinal product is not clearly stated on the prescription (e.g. filgrastim), the prescriber should be contacted to confirm the medicinal product containing filgrastim that they are prescribing.

Other medicines on the High Tech Arrangement in the areas of haematology and oncology will be added to the High Tech Hub at a later date. Further update communications in relation to this will issue in due course.

I would like to take this opportunity to thank you for your continued co-operation and support regarding the High Tech Hub.

Yours Sincerely

Shaun Flanagan

Primary Care Reimbursement Service



# **HSE-Medicines Management Programme**







# **Health Technology Management (HTM)**

Measures being put in place to enhance the safe, effective and cost-effective use of medicines and devices thereby controlling utilisation and expenditure.

# Examples include:

- Best-value medicines
- Managed access protocols
- Reimbursement application systems
- Preferred drugs and devices



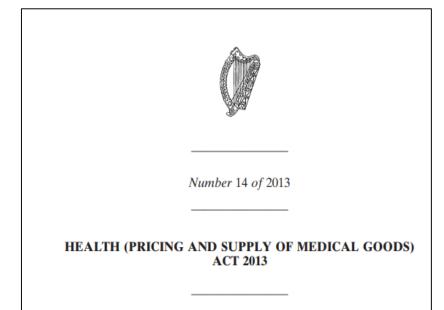


# **Health Act 2013**

#### Part 4 (20):

Executive may attach conditions to the supply of listed items in the interests of one or more of the following:

- a) Patient safety;
- b) Cost-effectiveness;
- c) Maximising appropriate use of listed items;
- d) Appropriately applying the resources available to the Executive.







# **Bempedoic Acid**

# First-in-class adenosine triphosphate citrate lyase (ACL) inhibitor

 Lowers low-density lipoprotein cholesterol (LDL-C) by inhibition of cholesterol synthesis in the liver.

HSE reimbursement is supported for a subpopulation of the licensed indication, subject to a managed access protocol.





**Medicines Management Programme** 

**Managed Access Protocol –** 

Bempedoic Acid 180 mg film-coated tablets (Nilemdo®)

&

Bempedoic Acid 180 mg + Ezetimibe

10 mg film-coated tablets (Nustendi®)

Medicine	Date of addition to Managed Access Protocol	
Bempedoic acid (Nilemdo®)	01/09/2024	
Bempedoic acid + ezetimibe (Nustendi®)	01/09/2024	

Approved by	Professor Michael Barry, Clinical Lead, MMP		
Date approved:	Version 1.0	27/08/2024	

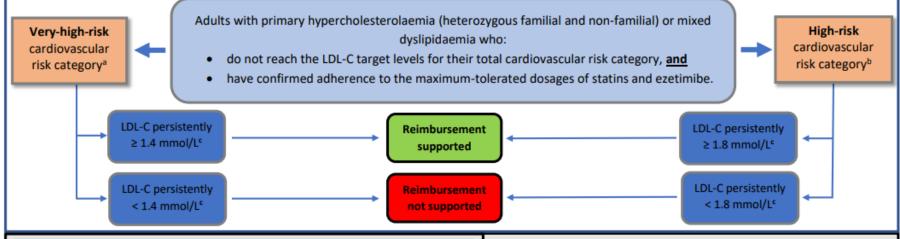




# HE

# Reimbursement Information – Bempedoic Acid film-coated tablets (Nilemdo®) & Bempedoic Acid plus Ezetimibe film-coated tablets (Nustendi®)





Cardiovascular risk category	People with any of the following:
<sup>a</sup> Very-high-risk	<ul> <li>Documented ASCVD, either clinical or unequivocal on imaging</li> <li>DM with target organ damage<sup>¥</sup>, or at least three major risk factors, or early onset of Type 1 DM of long duration (&gt; 20 years)</li> <li>Severe CKD (eGFR &lt; 30 ml/minute/1.73 m²)</li> <li>A calculated SCORE ≥ 10% for 10-year risk of fatal CVD</li> <li>FH with ASCVD or with another major risk factor</li> </ul>
<sup>b</sup> High-risk	<ul> <li>Markedly elevated single risk factors, in particular total cholesterol &gt; 8 mmol/L, LDL-C &gt; 4.9 mmol/L, or blood pressure &gt; 180/110 mmHg</li> <li>FH without other major risk factors</li> <li>DM without target organ damage<sup>¥</sup>, with DM duration ≥ 10 years or another additional risk factor</li> <li>Moderate CKD (eGFR 30 - 59 ml/minute/1.73 m²)</li> <li>A calculated SCORE ≥ 5% and &lt; 10% for 10-year risk of fatal CVD</li> </ul>

Two LDL-C levels must be provided to demonstrate that LDL-C is **persistently** above the specified thresholds:

- The current LDL-C level must have been taken in the 30-day period prior to the date of application for reimbursement approval.
- The previous LDL-C level should have been taken at least three months prior to the current LDL-C level.
- The current LDL-C level must be reflective of confirmed adherence to ezetimibe
   10 mg daily for a minimum of three months and one of the following:\*
  - o adherence to high-dose statin therapy for a minimum of three months
  - adherence to maximum-tolerated statin therapy for a minimum of three months, where the individual was unable to tolerate high-dose statin therapy
  - statin intolerance
  - contraindication to statin therapy.
- A copy of the blood test results showing the current LDL-C level must be provided as part of the application for reimbursement approval.

\*see the HSE-Managed Access Protocol for further details

A Managed Access Protocol (MAP) is in place through the Health Service Executive (HSE)-Medicines Management Programme (MMP): https://www.hse.ie/eng/about/who/cspd/medicines-management/managed-access-protocols/.

Prescribers, once user-registered with the Primary Care Reimbursement Service (PCRS), are required to apply for reimbursement approval on an individual patient basis through the PCRS online application system (www.pcrs.ie). This can be accessed for GPs via the 'GP Application Suite' and for hospital prescribers via 'Services for Hospitals'.

Abbreviations: ASCVD: Atherosclerotic cardiovascular disease; CKD: Chronic kidney disease; CVD: Cardiovascular disease; DM: Diabetes Mellitus; eGFR: estimated glomerular filtration rate; FH: Familial hypercholesterolaemia; LDL-C: Low-density lipoprotein-cholesterol; SCORE: Systematic coronary risk estimation. \*Target organ damage is defined as microalbuminuria, retinopathy, or neuropathy.

Version 1 August 2024



## Romosozumab

Romosozumab (Evenity®) is a monoclonal antibody that binds and inhibits sclerostin.

HSE reimbursement is supported for a subpopulation of the licensed indication, subject to a managed access protocol.





#### **Medicines Management Programme**

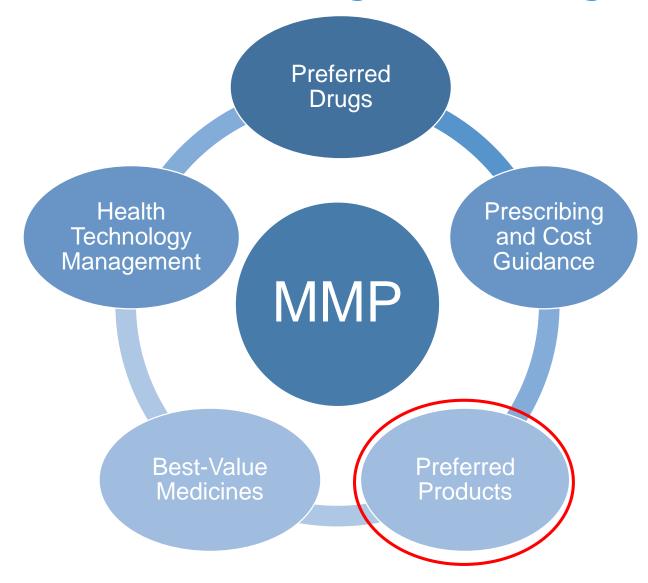
Managed Access Protocol 
Romosozumab for the treatment of severe osteoporosis

Medicine	Date of addition to Managed Access Protocol	
Romosozumab (Evenity®)	01/11/2024	

Approved by	Professor Michael Barry, Clinica	al Lead, MMP
Date approved	Version 1.0	21/10/2024



# **HSE-Medicines Management Programme**

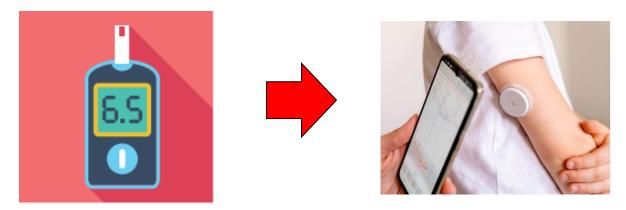






# **Glucose monitoring**

 Glucose monitoring has long been an accepted part of diabetes management, recent years have seen rapid developments in the available technologies for glucose monitoring, with associated increases in costs.



 Health Technology Management (HTM) refers to measures being put in place to enhance the safe, effective and cost-effective use of medicines as well as medical devices, thereby controlling utilisation and expenditure.





# Health Technology Management of Glucose Monitoring Devices

#### 2016

Automated maximum reimbursement quantities of BGTS 2021

Preferred **BGTS** initiative 2023

Online reimbursement application system for all CGM sensors

2024

**Preferred CGM** sensor(s) with associated system(s) initiative





# 2016: Automated maximum reimbursement quantities for BGTS

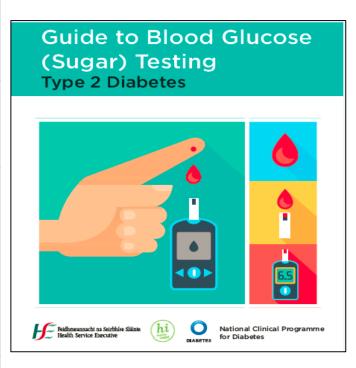
- April 2016 based on MMP recommendations in collaboration with the National Clinical Programme for Diabetes, the HSE-PCRS introduced an automated validation on pharmacy claims, that limited the number of BGTS that are reimbursed for individuals with type 2 diabetes mellitus.
- The maximum quantities reimbursed were based on the recommended testing frequency for different hypoglycaemic therapies.
- Allowed for a sufficient level of testing for patients while also reducing waste and inappropriate testing.





# Blood glucose testing recommendations for type 2 diabetes

Patient group	Testing recommendation	Limit on yearly reimbursement
Patients receiving insulin (alone or in combination with other hypoglycaemic drugs).	Individualised, and may be up to 4 times daily and more frequently if required.	No limit recommended. Test according to specialist recommendations.
Patients receiving non-insulin hypoglycaemic drugs.	Patients receiving sulphonylurea or meglitinide drugs: Test 1-2 times daily or if feeling hypoglycaemic.	1200 test strips per year. Two boxes (100 test strips) per month will be reimbursed.
	Patients on oral drugs other than sulphonylurea or meglitinides (i.e. metformin and/or a thiazolidinedione, DPP-4 inhibitor, GLP-1 analogue, SGLT2 inhibitor): May test 3 times per week if needed.	600 test strips per year. One box (50 test strips) per month will be reimbursed.
Diet alone.	Not required.	100 test strips per year. One pack per 6 months to allow for periodic testing where recommended.





# Health Technology Management of Glucose Monitoring Devices

2016

Automated maximum reimbursement quantities of BGTS 2021

Preferred **BGTS** initiative 2023

Online reimbursement application system for all CGM sensors

2024

**Preferred CGM** sensor(s) with associated system(s) initiative





# Criteria evaluated

- 1. Acquisition cost of the test strips (reimbursed price)
- 2. Shelf-life of the test strips
- 3. Availability of patient support services by the supplier
- 4. Availability of education resources to healthcare professionals by the supplier
- 5. Robustness of supply of test strips to the Irish Market
- 6. Associated meter(s)
- 7. Patient factors
- 8. Acquisition cost of associated lancets
- 9. Any other relevant factors





tone test strips) are correct as of 1st March 2025.

#### Preferred Blood Glucose Test Strips (BGTS) for adults with type 1 and type 2 diabetes



#### The MMP recommends a preferred BGTS (List A) with an associated meter for:

- ✓ People who are newly diagnosed with diabetes (type 1 and type 2) and require self monitoring of blood glucose (SMBG).
- ✓ People with diabetes where continued SMBG is recommended on review.
- ✓ People with diabetes changing their current meter where SMBG is recommended.

Prescribers should give due consideration to the use of preferred BGTS when commencing SMBG and when changing a meter in established patients.

Preferred BGTS (List A)			
BGTS	Reim	bursement	Associated meters
	Code	Price (as of 1 <sup>st</sup> March 2025)	
inetest Lite blood glucose test strips	85131	€6.95	Finetest Lite Finetest Lite Smart
Accu-Chek Instant test strips	85132	€8.54	Accu-Chek Instant
Glucomen Areo Sensor test strips	85110	€8.63	Glucomen Areo GK*
Mylife Aveo test strips	97630	€8.75	Mylife Aveo**
TD-4183-4363 blood glucose test strips	85579	€10.25	TD-4183
4Sure blood glucose test strips	94170	€11.22	4Sure SMART 4Sure SMART DUO*
GlucoRx Nexus test strips	85120	€11.27	GlucoRx Nexus GlucoRx Nexus Mini Ultra GlucoRx Nexus Voice <sup>0</sup>
GlucoRx HCT glucose test strips	85139	€11.27	GlucoRx HCT* GlucoRx HCT Connect/*
Freestyle Optium test strips	10051	€13.30	Freestyle Optium Neo*
Contour Next blood glucose test strips	15963	€13.90	Contour Next One Contour Next Contour Next Link 2.4**
One Touch Verio test strips	68321	€13.90	One Touch Verio Reflect

All featured BGTS come in packs of 50 strips (some as 2x25 strips) \* Compatible with blood ketone testing \*\* Compatible with insulin pumps \* 'Talking' capability

This list is not exhaustive and represents information submitted to the MMP by suppliers. Refer to individual suppliers for further information. Prices listed (for preferred BGTS, blood

#### Practice Point

As part of diabetes care, the meter should be reviewed regularly and, where suitable, a patient should be considered for a preferred BGTS (List A) with associated meter.

Meters should be registered with the company at the time of initiation of use.

#### Lancet Recommendation

The use of a universal lancing device with lancets costing ≤ €6 per 200 for all patients undertaking SMBG is recommended.

#### \* Compatible blood ketone test strips

Code	Blood ketone test strip (10)	Price
97605	4Sure B-ketone strips	€11.22
85140	Glucomen Areo B-ketone sensors	€11.24
97601	GlucoRx HCT ketone strips	€11.27

#### \*\* Insulin pumps

Freestyle Optium B-ketone

There are BGTS with associated meters available on List A that have compatibility with insulin pumps (see overleaf).

Full evaluation report is available at: www.hse.ie/mmp

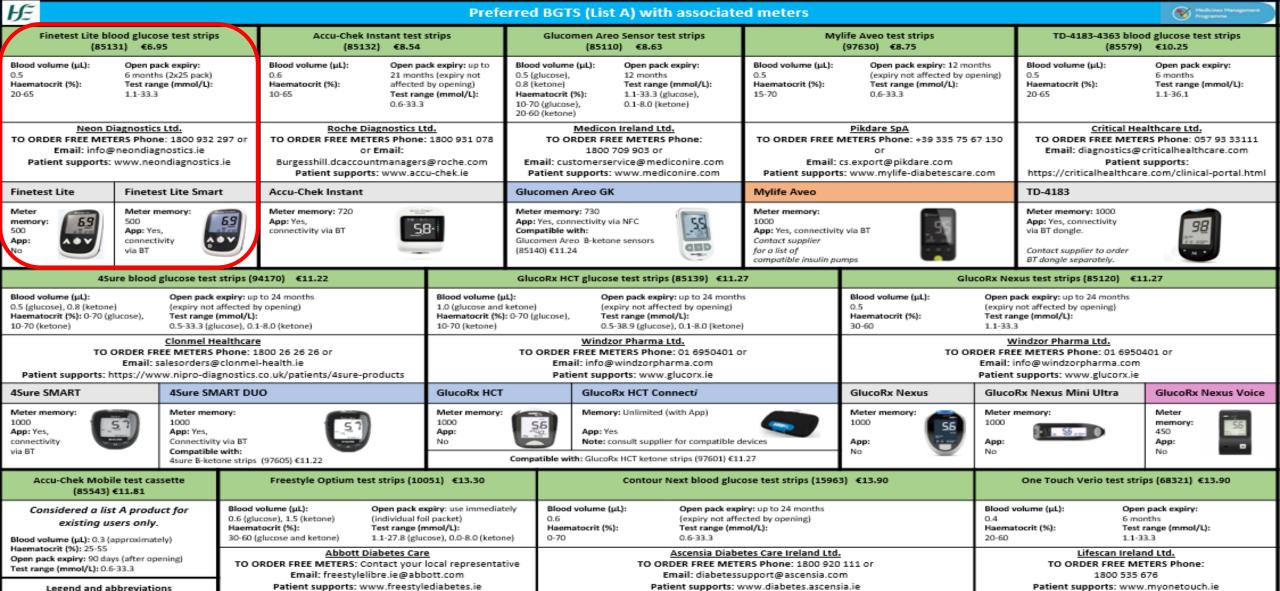
See overleaf for further information.

MMP

Version 4

March 2025

€22.83



Legend and abbreviations Blue: Compatible with ketone testing Pink: "Talking" capability

Orange: Compatible with insulin Pumps Wireless connectivity: BT: Bluetooth\*; NFC: Near field communication

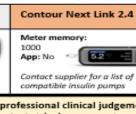












One Touch Verio Reflect Meter memory: 750 Yes, connectivity via BT





# **Preferred BGTS**

- The MMP recommends the use of a preferred BGTS when:
  - Commencing self-monitoring of blood glucose
  - Changing BGTS in people who are not currently using a preferred product.

 Choose a meter that best suits the individual's needs e.g. consider visual impairment, dexterity, technology needs.







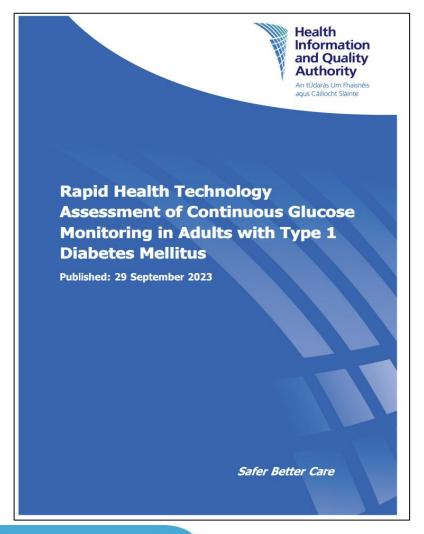
# **Continuous Glucose Monitoring**

- CGM systems provide an alternative approach to self-monitoring of blood glucose by measuring glucose levels in the interstitial fluid.
- These systems comprise of:
  - sensors (self-administered subcutaneously, typically in the upper arm and replaced every 7 to 14 days depending on the system),
  - transmitters (or combined sensors and transmitters),
  - mechanism to display the results (readers/receivers or smart device application).
- There are two types of CGM systems; real-time (rtCGM) and intermittently scanned (isCGM).





# HIQA Rapid Health Technology Assessment of Continuous Glucose Monitoring in Adults with Type 1 Diabetes Mellitus



- Assuming the HSE continues to reimburse CGM systems, consideration should be given to a single managed access programme for all CGM systems for all individuals with T1DM regardless of age. Such a system would need clearly defined criteria for access.
- For people with T1DM, CGM should be provided in the context of the existing model of care which includes oversight by specialist diabetes services and empowerment of people with diabetes through access to structured diabetes self-management education.





# **HSE-National Service Plan 2024**

- Establish the following HSE Medicines Management Programme work streams for efficiency generation:
  - Ongoing best-value biological programme to include best-value medicines process for generic medicines on the High Tech Arrangement
  - Implementation of a reimbursement application system for continuous glucose monitoring sensors and publication of a preferred product(s) evaluation





# Health Technology Management of Glucose Monitoring Devices

#### 2016

Automated maximum reimbursement quantities of BGTS 2021

Preferred **BGTS** initiative 2023

Online reimbursement application system for all CGM sensors

2024

**Preferred CGM** sensor(s) with associated system(s) initiative





# 2023:CGM Sensors Reimbursement Application System

- From 1st December 2023, all patients newly initiated on CGM sensors must receive prior approval for reimbursement support.
- Access to the online reimbursement application system is restricted to diabetes hospital clinicians responsible for the initiation of CGM systems i.e. diabetes medical doctors and nurses.

Approval is visible at the pharmacy level through the secure schemes checker.

Patient Specific Arrangements

CGM Sensors: Approved Show / Hide List Expiry Date:



# Health Technology Management of Glucose Monitoring Devices

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Online reimbursement application system for all CGM sensors

2024

**Preferred CGM** sensor(s) with associated system(s) initiative



# 2024:HIQA Rapid Health Technology Assessment of Continuous Glucose Monitoring in Adults with Type 1 Diabetes Mellitus

 Switching to an economically advantageous system, when clinically appropriate to do so, may result in cost savings for the HSE.

The MMP initiated a "Preferred CGM" process to support access for people while also managing the significant expenditure in this area.











### Identification of preferred continuous glucose monitoring sensor(s) with associated system(s)

#### **Cover Page for Submissions**

For all submissions relating to a particular continuous glucose monitoring (CGM) sensor, section A must be completed and included as the cover page for the submission. All CGM sensors included in the submission must be listed in the table below, along with information relating to the accompanying systems (associated transmitters and readers/receivers, where relevant).

In addition, suppliers of CGM sensors must also complete section B, and include as the cover page for the submission.

#### Section A:

CGM sensor name	PCRS reimbursement code	Accompanying systems (include information in relation to associated transmitters and readers/receivers, where relevant)

HSE-Primary Care Eligibility and Reimbursement Service. Personal Diagnostic, Monitoring & Delivery Devices Guidelines for Suppliers. March 2022. Available: <a href="https://www2.healthservice.hse.ie/organisation/national-pppgs/personal-diagnostic-monitoring-delivery-devices-guidelines-for-suppliers/">https://www2.healthservice.hse.ie/organisation/national-pppgs/personal-diagnostic-monitoring-delivery-devices-guidelines-for-suppliers/</a>

#### Section B:

I, the undersigned, confirm compliance with:

- Applicable national standards and European Commission standards
- All applicable laws

For all products (CGM sensors and accompanying systems) listed in the table in section A above.

Managing Director Signature	:
Managing Director Name:	
Company name:	
Date of submission:	

Submissions can be emailed to <a href="mmp@hse.ie">mmp@hse.ie</a>. Alternatively, the MMP can provide access to a secure file transfer system for submissions, please contact the MMP for further details. The MMP will issue confirmation of receipt of submission within 72 hours. Please contact the MMP if you do not receive confirmation of receipt after this time.



November 2023 Version 1



### Criteria evaluated

- 1. Acquisition cost of the CGM sensor
- 2. CGM sensor features
- 3. Associated system features (and acquisition costs if applicable)
- 4. Expenditure in the area and potential for cost efficiencies
- 5. Provision of patient support services by the supplier
- 6. Provision of education resources to healthcare professionals by the supplier
- 7. Robustness of supply of CGM sensor with associated system to the Irish Market
- 8. Patient factors
- 9. Any other relevant factors (e.g. requirement for calibration with blood glucose test strips).





# **Preferred CGM Sensors**

The MMP has identified two preferred CGM sensors (List A) with associated systems, for people with diabetes requiring CGM who are not insulin pump users.

Preferred CGM sensors – List A		
CGM sensor	Reimbursement code	Pack size
Freestyle Libre 2	85581	1
Dexcom ONE+	97636	1





CGM Sensor	Freestyle Libre 2	Dexcom ONE+
Cost per day	€3.14	€3.16
Sensor type	rtCGM*	rtCGM
Age requirement	4 years and older	2 years and older
Application site(s)	Back of upper arm	2 to 6 years: abdomen, upper buttocks, back of upper arm 7 years and older: abdomen, back of upper arm
Lifespan of sensor	14 days	10 days (12 hour grace period)
Sensor warm up time	60 minutes	30 minutes
Capillary glucose calibration required	No	No
Separate transmitter required	No	No
Separate reader/receiver available	Yes, at no cost	Yes, at no cost
Smartphone application	Freestyle LibreLink App	Dexcom ONE+ App
High and low glucose alarms	Yes	Yes
Data sharing with HCP	Yes - LibreView	Yes – Dexcom Clarity, Glooko
Data sharing with family/friends	Yes – LibreLinkUp App	Yes – Dexcom Follow App





# **Preferred CGM Sensors Recommendation**

The MMP recommends a preferred CGM sensor with associated system from List A for people with diabetes requiring CGM who are not insulin pump users, when:

- First initiating CGM
- Continuing CGM upon review
- Changing CGM sensor with associated system







## **Preferred CGM Sensors**

- Publication of preferred CGM sensor(s)
   with associated system(s) evaluation report
- Publication of preferred CGM sensors poster
- Issuing correspondence to stakeholders
  - PCRS Circular to pharmacists & GPs
  - Correspondence issued to stakeholders from consultation





**Medicines Management Programme** 

Preferred continuous glucose monitoring sensor(s) with associated system(s)

**Evaluation report** 

Approved by:	Professor Michael Barry, Clinical Lead, Medicines Management	
	Programme	
Date approved:	11/07/2024	
Version:	1.0	





# **Non-preferred CGM Sensors**

CGM sensors with associated systems from List B are not routinely recommended by the MMP in the absence of clinical justification (e.g. patient is an insulin pump user).

Non-preferred CGM sensor	Cost per day €	Insulin pump compatibility
Freestyle Libre (86900)	3.21	No
Dexcom G6 (97628, 97629)	6.80	Yes
Dexcom G7 (97631)	6.80	Yes
Medtronic Guardian™ Sensor 4 MMT-7040C1 (97645)	7.07	Yes
Medtronic Guardian™ Sensor 4 MMT-7040QC1 (97671)	7.07	No
Medtronic Guardian™ Sensor 3 MMT-7020C1 (97680)	7.07	Yes
GlucoRx Aidex™ (85241)	2.52	No



#### **Preferred Continuous Glucose Monitoring** (CGM) Sensors



The HSE-Medicines Management Programme (MMP) recommends a preferred CGM sensor with associated system from List A for people with diabetes\* requiring CGM who are not insulin pump users when:

√ First initiating CGM

✓ Continuing CGM upon review

√ Changing CGM sensor with associated system

Clinical judgement should be used when choosing a CGM sensor with associated system for a patient.
\*Reimbursement is supported in accordance with Primary Care Reimbursement Service circular 033/23 Continuous Glucose Monitoring (CGM) Reimbursement Application System.

#### Preferred CGM sensors – List A:

- ✓ Freestyle Libre 2
- ✓ Dexcom ONE+

#### List A - Preferred CGM sensor features

List A - Freierred Colvi sensor leatures			
CGM Sensor	Freestyle Libre 2	Dexcom ONE+	
Reimbursement code; pack size	85581; 1 pack	97636; 1 pack	
Reimbursement price <sup>7</sup>	€44.00	€31.62	
Cost per day <sup>β</sup>	€3.14	€3.16	
Sensor type	rtCGM*	rtCGM	
Age requirement	4 years and older	2 years and older	
Application site(s)	Back of upper arm	2 to 6 years: abdomen, upper buttocks, back of upper arm 7 years and older: abdomen, back of upper arm	
Lifespan of sensor	14 days	10 days (12 hour grace period)	
Sensor warm up time	60 minutes	30 minutes	
Capillary glucose calibration required	No	No	
Separate transmitter required	No	No	
Separate reader/receiver available	Yes	Yes	
Smartphone application	Freestyle LibreLink App	Dexcom ONE+ App	
Smartphone compatibility	https://www.diabetes care.abbott/support/manuals/uk.html	https://www.dexcom.com/en-IE/compatibility	
Size	35 mm (D) × 5 mm (H) disk	27.4 mm (L) x 24.1 mm (W) x 4.7 mm (H)	
High and low glucose alarms	Yes	Yes	
Predictive low-glucose alarm	No	No	
Insulin pump compatibility**	No	No	
Data sharing with HCP	Yes - LibreView	Yes – Dexcom Clarity, Glooko	
Data sharing with family/friends	Yes – LibreLinkUp App	Yes – Dexcom Follow App	
Website	https://pro.freestyle.abbott/ie- en/home.html	https://ie.provider.dexcom.com/education- and-resources	
Email address	adchelpuk@abbott.com	ukie.orders@dexcom.com	
This table represents information submitted to the MMP by suppliers, and does not constitute a complete list of features of the devices. Abbreviations: App: application; D: diameter;			

H: height; HCP: healthcare professional; L: length; mm: millimeter; rtCGM: real-time continuous glucose monitoring; W: width. \*Reimbursement price correct as of 01/07/2024. Passumes each sensor is worn for the maximum wear time. Based on the reimbursement price, exclusive of pharmacy fees and value added tax; \*When Freestyle LibreLink App on a smartphone is used (intermittently scanned continuous glucose monitoring (isCGM) when the reader is used as the display device); \*\*Insulin pump compatibility refers to continuous

Full evaluation report at: www.hse.ie/mmp See next page for further information. Version 1



#### **Preferred Continuous Glucose Monitoring** (CGM) Sensors



#### Preferred CGM sensors - List A:

- ✓ Freestyle Libre 2
- ✓ Dexcom ONE+

#### Practice points for preferred CGM sensors

- √ Advise patients on resources available with information about their CGM sensors:
  - Freestyle Libre 2 (Abbott Diabetes Care): www.freestyle.abbott/ie-en
  - Dexcom ONE+: (Dexcom): www.dexcom.com/en-ie
- ✓ Advise patients to rotate the application site of the CGM sensor to avoid irritation and discomfort.
- ✓ All List A CGM sensors can be used while swimming, showering or taking a bath (see evaluation report for further). details).

#### Replacement sensors

If replacement sensors are required, patients should be advised to contact the individual companies:

- Freestyle Libre 2 (Abbott Diabetes Care): 1800 776 633 open from 8 am to 8 pm Monday to Friday and from 9 am to 5 pm on Saturdays
- Dexcom ONE+ (Dexcom): 1800 827 603 open Monday to Friday from 7 am to 6 pm and Saturday and Sunday from 8:30 am to 4:30 pm

#### Concomitant self-monitoring of blood glucose with blood glucose test strips

- ✓ Review requirement for self-monitoring of blood glucose (SMBG) with blood glucose test strips (BGTS) and associated meters while also using a CGM sensor.
- ✓ If prescribing BGTS, due consideration should be given to the MMP's preferred BGTS list and aim to use to the lowest cost preferred BGTS that suits individual requirements.
- ✓ Further information on the MMP's preferred BGTS list is available at: https://www.hse.ie/eng/about/who/cspd/medicines-management/glucose-monitoring/blood-glucose-test-strips/

#### Non-preferred CGM sensors - List B

- The MMP recommends a preferred CGM sensor with associated system from List A (see previous page) for people with diabetes\* requiring CGM who are not insulin pump users.
- CGM sensors with associated systems from List B are not routinely recommended by the MMP in the absence of clinical justification (e.g. patient is an insulin pump user).
- Patients currently in receipt of a List B CGM sensor should be considered for switching to a preferred CGM sensor from List A, unless there is clinical justification for continued use of a CGM sensor from List B.

\*Reimbursement is supported in accordance with Primary Care Reimbursement Service circular 033/23 Continuous Glucose Monitoring (CGM) Reimbursement Application System.

Clinical judgement should be used when choosing a CGM sensor with associated system for a patient.

Full evaluation report at: www.hse.ie/mmp

Non-preferred CGM sensor (reimbursement code[s])	Cost per day <sup>¥</sup> €	Insulin pump compatibility**
Freestyle Libre (86900*)	3.21	No
Dexcom G6 (97628, 97629)	6.80	Yes
Dexcom G7 (97631)	6.80	Yes
Medtronic Guardian™ Sensor 4 MMT-7040C1 (97645)	7.07	Yes
Medtronic Guardian™ Sensor 4 MMT-7040QC1 (97671)	7.07	No
Medtronic Guardian™ Sensor 3 MMT-7020C1 (97680)	7.07	Yes
GlucoRx Aidex™ (85241)	2.52	No

This table represents information submitted to the MMP by suppliers \*Does not account for higher quantities, which may be required due to the available pack size. Assumes each sensor is worn for the maximum wear time. Based on the reimbursement price, exclusive of pharmacy fees and value added tax. Reimbursement price correct as of 01/07/2024; \*Administrative code; \*\*Insulin pump compatibility refers to continuous subcutaneous insulin infusion and/or hybrid closed loop systems

See previous page for further information.

MMP Version 1 July 2024



# www.hse.ie/mmp

### Preferred CGM Sensors

The HSE-Medicines Management Programme (MMP) has identified preferred continuous glucose monitoring (CGM) sensors with associated systems.

The evaluation process was undertaken in accordance with the MMP roadmap for the identification of preferred continuous glucose monitoring sensor(s) with associated system(s).

The MMP recommends the following preferred CGM sensors:

Preferred CGM sensors – List A			
CGM sensor	Reimbursement code	Pack size	
Freestyle Libre 2	85581	1	
Dexcom ONE+	97636	1	

The MMP recommends that healthcare professionals should give due consideration to the use of a preferred CGM sensor with associated system from List A, for people with diabetes requiring CGM who are not insulin pump users, when:

- First initiating CGM
- Continuing CGM upon review
- · Changing CGM sensor with associated system

Reimbursement is supported in accordance with Primary Care Reimbursement Service Circular 033/23 Continuous Glucose Monitoring (CGM) Reimbursement Application System.

The MMP has developed resources to support the prescribing of the preferred products, including a preferred CGM sensors poster outlining notable features of these products and other useful information.

#### **Related Files**



<u>Preferred continuous glucose monitoring</u> <u>sensor(s) with associated system(s) evalua-</u> <u>tion report</u>

Format:PDF | File Size:1.17MB



#### <u>Preferred CGM sensors poster</u>

Format:PDF | File Size:595KB



# <u>Correspondence to healthcare professionals - preferred CGM sensors</u>

Format:PDF | File Size:593KB



# **Acknowledgements**

**HSE-Medicines Management Programme** 

**HSE-Primary Care Reimbursement Service** 

Thank you for listening!

Find us at:

www.hse.ie/mmp

Email: mmp@hse.ie



