



Access & Integration
Room 138, Dr. Steevens' Hospital,
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D08 W2A8

2nd September 2024

Mr Michael Lowry, T.D.
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.

PQ 31012: To ask the Minister for Health the measures that were taken to communicate changes in the reimbursement rate for cataract surgery from €1,928 to €863 to patients (details supplied); and if he will make a statement on the matter. - Michael Lowry

Dear Deputy,

Thank you for your Parliamentary Question referenced above which has been forwarded to me for reply.

I am describing below the process by which reimbursements under the overseas treatment schemes.

Reimbursement under the Cross Border Directive (CBD) scheme and the Northern Ireland Planned Healthcare Scheme (NIPHS) is made at the lesser of either the cost of the treatment in Ireland, or the cost of the treatment incurred by the patient in the other State. Reimbursement rates are set by the HSE and are those applicable to the cost of treatment in the Public Health Service in Ireland.

Under the provisions of the CBD and NIPHS patients may claim back their treatment cost up to the (Diagnostic Related Group) DRG price for that treatment. DRG costs relate to hospital inpatient or day case treatments. The Healthcare Pricing Office (HPO) within the HSE, sets prices for all 795 DRGs based on the average cost of all public hospitals with activity in that DRG, using HIPE activity data and Costing data. DRG (ABF) price list is primarily used to determine the price paid to public hospitals. Its use for the CBD and the NIPHS reimbursements is a secondary use of the data.

The HPO DRG price list has changed in 2024 across the Irish public health system to reflect the availability of costing data for the ABF 2024 price for the first time in a number of years due to the impact of COVID-19 and also to reflect an update in the Australian AR-DRG Classification System on which it is based.

No decision was taken to reduce the price of any DRG. Activity Based Funding (ABF) was resumed for 2024 funding of public hospitals post COVID and all 795 DRG prices are set

based on the cost of treating patient within each DRG. These prices are then applied to the funding for public hospitals in Ireland. Some went up, some went down, and some cases ended up in different DRGs due to the change in the versions of the DRG Classification.

For example, in relation to Cataract treatment - the DRG (C15Z) in the previous DRG Version (Version 8) has been partitioned into 2 DRGs in the most recent DRG Version (Version 10). The A DRG (C15A) which is the more complex case, has increased from €1,912 to €4,206. The B DRG (C15B) has decreased from €1,912 to € 863. Version 8 had only one DRG (C15Z) so all patients were paid the same price of €1,912 regardless of the complexity of the patient's clinical needs. This is why changes are made to DRG Classifications.

In order to allow time to advise service users and providers of the new prices for cataract procedures, the HSE deferred these cost changes as they apply to cataract procedures until 1st September 2024. Information was provided to healthcare providers and service user organisations with regard to this change and the applicable date on 15th July. In addition the HSE website had the information available on it on the same date.

The DRG code and the healthcare cost which will apply to healthcare will be the DRG healthcare code cost which applied at the time the healthcare was accessed. For example if a patient accessed the healthcare in July 2022 the July 2022 price list will apply.

Yours sincerely,



Frances McNamara
Assistant National Director
Access & Integration