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6 December 2023

Dr Mike Freeland, MP
Member for McArthur
Chair of the Standing Committee on Health, Aged Care and Sport
Department of the House of Representatives
PO Box 6021 | R1.109.2 Parliament House | Canberra ACT 2600

Via Email: Cathy.Rouland.Reps@aph.gov.au

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Dear Chair

Re: STANDING COMMITTEE ON HEALTH, AGED CARE AND SPORT, Inquiry into Diabetes in Australia: Questions on Notice

I write to formally provide responses to questions taken on notice from my recent committee appearance on Friday 17 November 2023 in Canberra.

Please see response below and attached for the committee's consideration.

- *Response to question from the Chair – page 37 of the Hansard relating to type 2 diabetes and what data is available from overseas that could be provided to the committee.*

Answer:

International pump use rates and reimbursement criteria in people with T2D are provided in Table 1. The average T2D pump penetration in countries with reimbursement is 4.80%. This reduces to 4.20% in countries with no reimbursement. On the basis of this data, it can be expected that pump penetration will be much lower in T2D compared to T1D if access to AID is expanded to people with T2D on insulin as proposed in our submission.

The submission very conservatively put forward an upper estimate of investment required to implement the recommendations as proposed. A key driver of this estimate was the pump penetration rate applied, or in other words the uptake of AID therapy. The submission aggressively estimated that the penetration would be the same for T2D as for T1D (22.60%).

Based on the data provided in Table 1 from international experience, the real penetration rate for T2D is likely to be substantially lower. Applying a pump penetration of 4.8% in T2D, the investment required to implement the recommendations as proposed would be reduced by more than half (total annual cost to IPP ~15.6M and total annual cost to NDSS ~543M; note that assumptions and caveats apply).

Regardless of the financial impact to the Commonwealth, AID therapy is cost effective based on commonly used methods and will result in savings over a patient's lifetime.

Table 1: International pump use rates and reimbursement criteria - T2D

	% T2DM on pump out of basal + bolus T2	Pump reimbursement in T2DM
Norway	7.1%	Yes
US	9.0%	Yes
Sweden	0.27%	Yes
France	6.0%	Yes
Germany	0.4%	No
Switzerland	7.0%	Yes
Denmark	7.1%	No
Netherlands	7.1%	No
Austria	7.0%	No
Poland	2.2%	No
Czech Republic	0.20%	Yes
Canada	6.0%	No
Italy	0.0%	No
UK	4.0%	No
Portugal	4.0%	No
Spain	4.0%	Yes

Source: Ypsomed Data on File

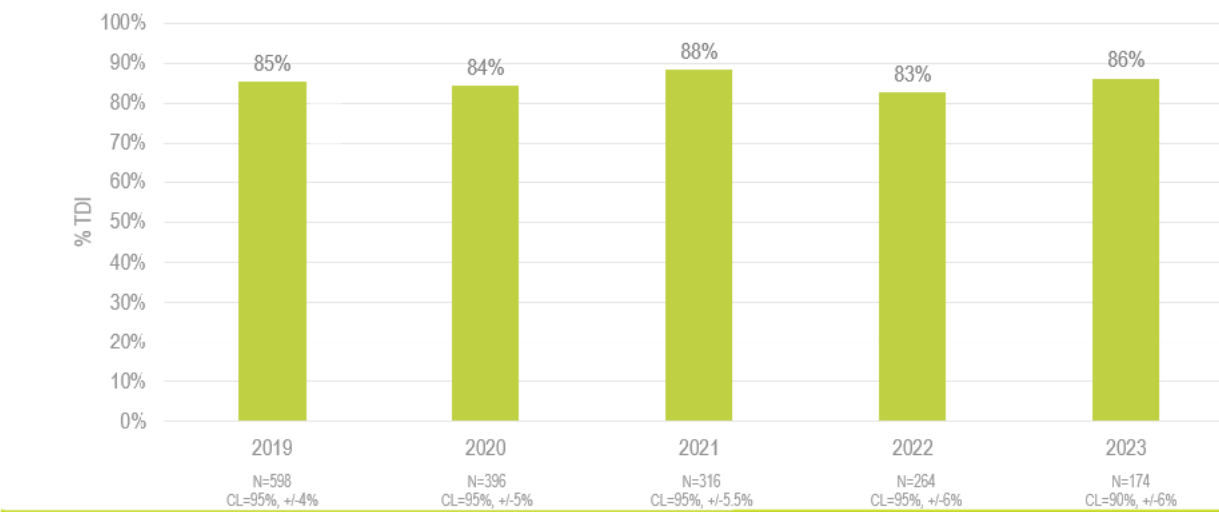
- *Response to question from Ms STANLEY – page 38 of the Hansard relating to survey data for type 1 diabetes with private health fund insurance.*

Answer:

Each year, Ypsomed undertakes quantitative market research. Diabetes Australia chapters in WA and VIC assist with the recruitment of their members and the survey is also emailed to Ypsomed's database of previous survey participants. The survey is blinded.

According to this research (2019-2023), it is estimated that 83-88% of people with T1D have Private Health Insurance (Figure 1).

Figure 1: Percentage of people with T1D with Private Health Insurance in Australia



Source: Ypsomed quantitative market research data on file

We hope these responses assist the committee as part of their ongoing deliberations.

Yours sincerely

James Mayjor
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Ypsomed Australia