

The ODPRN conducted a population based study examining the impact of the introduction of quantity limits for blood glucose test strips (BGTS) on expenditures and utilization. Key information, policy recommendations, and details from the study are highlighted

BGTS Quantity Limits in Ontario Result in Significant Reductions in Utilization and Cost

Implementing quantity limits for blood glucose test strips that align with clinical evidence resulted in a 22% decrease in utilization and a similar decrease in cost

Why did we do this study?

To determine the impact of newly imposed BGTS quantity limits. The Research Minute summarizes key points from a research study conducted by the ODPRN.

What were we investigating?

In this study we explored the use and costs of BGTS before and after the implementation of quantity limits that align with recommendations from the Canadian Diabetes Association

Where can I find more information?

The full study is available [here](#)

About ODPRN

We leverage cutting-edge research methodology and rapidly incorporate findings into policy reports for decision-makers on real-world drug utilization, safety, effectiveness, and costs.

Follow us on:



KEY POINTS

- In August 2013, the Ontario Public Drug Program (OPDP) introduced quantity limits for BGTS that aligned with recommendations from the Canadian Diabetes Association.
- In July 2013, the month prior to the implementation of Ontario's quantity limit policy, BGTS utilization increased by 38% costing \$12.6 million compared to a monthly average of \$9.1 million in the months prior.
- In the year following the policy change, there was a 22% decrease in BGTS dispensing leading to a corresponding savings of nearly \$24 million. The majority of the decreased use occurred among individuals with diabetes not treated with insulin.

POLICY IMPLICATIONS

- Implementation of quantity limits that align with clinical evidence resulted in significant reductions in utilization and considerable cost savings. Other jurisdictions considering similar policies should take note of our findings of increased BGTS dispensing in the month prior to the policy implementation.
- Further research is needed to assess whether reduced access to BGTS has led to changes in clinical outcomes for those impacted by this policy.

STUDY DETAILS

- The ODPRN conducted a population-based, cross-sectional time series analysis of all individuals aged 65 years and older who received publically-funded BGTS between August 2010 and July 2015 in Ontario, Canada.
- In July 2013, BGTS utilization increased by 38% to 16,672,407 test strips dispensed (costing \$12.6 million) from a monthly average of 12,075,188 test strips (average cost \$9.1 million) in the six months prior.
- In the year following the policy's implementation, test strip utilization decreased by 22.2% compared with the year prior (from 145,232,024 test strips to 113,007,795 test strips; net decrease of 32,224,229 strips), resulting in a 22.5% reduction in costs (from \$106.5 million to \$82.6 million; net cost reduction of approximately \$24 million).