Diseases On The Social Security

evaluation in a randomized trial.

System

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TIA patients should be referred by paramedics to

specialist care, 2/4 by telephone, and 2/4 by fax.

pilot in one service, no formal evaluation of

effectiveness was reported.

CONCLUSIONS:

Although protocol compliance was audited in an initial

Several UK ambulance services have introduced similar

transportation of patients to the ED. Existing initiatives

PP060 Burden Of Nervous System

referral pathways for low risk TIA patients, avoiding

can inform the development of an intervention for

INTRODUCTION:

The aim of the study was to estimate the benefits provided and pension costs of patients with central nervous system (CNS) diseases and specifically for multiple sclerosis (MS), between 2009 and 2015 by age in the Italian regions.

METHODS:

The database of approved claims was analyzed and the mean cost per benefit of the National Institute of Social Security (INPS) determined for four types of social security benefits: incapacity pensions (for workers without work ability), disability pensions and disability benefits (for workers with reduced work ability) and attendance allowance (for people without work ability with physical and/or mental disability). From this data we estimated the total benefit provided and the total costs for CNS and MS, considering the regional distribution and age of the applicants. A probabilistic model with a Monte Carlo simulation was developed in order to estimate the total benefits provided and costs.

RESULTS:

The model estimated for CNS diseases a total of incapacity pensions paid (thirteen grants for each beneficiary for every single year) from 2009 to 2015 of about 1.7 million (13,000 beneficiaries on average annually with a mean annual increase of 1 percent) corresponding to EUR1.1 billion (EUR165 million each year with a mean annual increase of 2 percent); a total of disability pensions paid of about 9.8 million (180,000 annual beneficiaries with a mean annual decrease of -10 percent) for a cost of EUR5.3 billion (EUR763 million each year with a mean annual decrease of -9 percent) and a total of disability benefits provided of about 2.7 million (30,000 annual beneficiaries with a mean annual increase of 5 percent) corresponding to EUR1.8 billion (EUR255 million every year with a mean annual increase of 7 percent). For the attendance allowance the model estimated a total of 8,900 beneficiaries in 2015 for a total cost of EUR57 million. The results of the regional analysis showed that the central and part of the southern regions (in particular the Sardinia region) reported the highest rates of benefits provided related to the resident population.

CONCLUSIONS:

The most important indirect costs in Italy from 2009 to 2015 were represented by disability pensions (64 percent of the total cost), followed by disability benefits (21 percent of total indirect cost).

PP061 Direct Cost Of Physiotherapeutic Devices Judicialization In Brazil

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99