



Lecture Code : IS09-S2

Session Name : Industry Symposium 9 (Vantive)

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Date & Time, Place : June 13 (Sat) / 11:50-12:30 / Room 3 (GBR 103), 1F

RPM in Taiwan: From Reimbursement to Practice

Tai-Shuan Lai

National Taiwan University Hospital, Taiwan

Taiwan has one of the highest prevalences of end-stage kidney disease worldwide and maintains a highly developed dialysis care system. Despite excellent peritoneal dialysis (PD) outcomes and internationally competitive survival rates, PD utilization in Taiwan has historically remained relatively low. This paradox highlighted the need for systemic reform beyond clinical excellence alone. To address this challenge, Taiwan's National Health Insurance Administration initiated a major reimbursement reform beginning in 2023, aiming to rebalance incentives between hemodialysis and peritoneal dialysis while promoting patient-centered home dialysis care. The policy evolved further in 2025 with the introduction of new reimbursement strategies emphasizing sustainability, digital health integration, assisted PD, and direct support for healthcare teams. A key component of the 2025 reform is the official incorporation of Remote Patient Management (RPM) for automated peritoneal dialysis (APD). Under the new reimbursement framework, cloud-based RPM platforms are reimbursed monthly, encouraging healthcare providers to integrate remote monitoring into routine PD practice. The system enables bidirectional communication between patients and dialysis centers, allowing clinicians to remotely review treatment adherence, ultrafiltration trends, drainage abnormalities, and treatment interruptions in real time. This presentation will review Taiwan's RPM implementation from both policy and practical perspectives. We will discuss the national reimbursement structure, strategic goals of the home dialysis initiative, and real-world clinical experience from National Taiwan University Hospital. Particular emphasis will be placed on workflow redesign and alarm optimization in RPM systems. By applying medical risk management principles and redefining clinically meaningful alert thresholds, our center successfully reduced unnecessary warning events, improved monitoring efficiency, and decreased emergency APD-related telephone consultations. In addition, this talk will demonstrate how RPM has

become integrated into a broader ecosystem of home dialysis care, including shared decision making, assisted PD, rural healthcare support, telemedicine, and aging-in-place strategies. Financial modeling from both rural clinics and large medical centers will also be presented to illustrate how reimbursement reform can transform RPM from a labor-intensive service into a sustainable healthcare model. Finally, we will introduce Taiwan's upcoming 2026–2035 Home Dialysis White Paper, which aims to establish a long-term framework for patient-centered, digitally enabled, and sustainable kidney care. Taiwan's experience may provide useful insights for other Asian countries seeking to expand home dialysis through coordinated reimbursement reform and digital innovation.

Keywords: Peritoneal dialysis, Remote Patient Monitoring, Taiwan experience, Reimbursement