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## MATERNITY SERVICES

### NOTICE PURSUANT TO SECTION 88 OF THE NEW ZEALAND PUBLIC HEALTH AND DISABILITY ACT 2000

THIS NOTICE IS ISSUED BY THE CROWN AND IS EFFECTIVE FROM 1 JULY 2007

# Primary Maternity Services Notice 2007

Pursuant to section 88 of the New Zealand Public Health and Disability Act 2000, the Crown issues the following notice.

## 1 Title

- (1) This notice is the Primary Maternity Services Notice 2007.
- (2) In this notice the Maternity Services Notice is called the “principal notice”.

## 2 Commencement

- (1) This notice comes into force on 1 July 2007.
- (2) This notice revokes and replaces in its entirety the Maternity Services notice that came into effect on 1 July 2002 (published as a Supplement to the *New Zealand Gazette*, 24 April 2002, No. 40, page 1101) and the amendment to the notice that came into force on 16 December 2005 (published in the *New Zealand Gazette*, 3 November 2005, No. 183, page 4597).

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**Part A****Information about this notice****A1 Title**

This notice is the Primary Maternity Services Notice 2007.

**A2 Commencement**

This notice comes into force on 1 July 2007.

*Purpose and objectives***A3 Purpose of this notice**

The purpose of this notice is to set out the terms and conditions on which the Crown will make a payment to a maternity provider for providing primary maternity services.

Defined in this notice: maternity provider, primary maternity services

**A4 Objectives of primary maternity services**

The objectives of primary maternity services are to—

- (a) give each woman, her partner, and her whanau or family, every opportunity to have a fulfilling outcome to the woman's pregnancy and childbirth by facilitating the provision of primary maternity services that are safe, informed by evidence and that are based on partnership, information, and choice; and
- (b) recognise that pregnancy and childbirth are a normal life-stage for most women; and
- (c) provide the woman with continuity of care through her LMC who is responsible for assessment of her needs, planning of her care with her and the care of her baby; and
- (d) facilitate the provision of appropriate additional care for those women and babies who need it.

Defined in this notice: LMC, primary maternity services

### *Overview of this notice*

#### **A5 Revocation and transitional provisions**

- (1) This notice revokes and replaces the previous notice.
- (2) The transitional provisions for revoking and replacing the previous notice are set out in this clause.
- (3) On and after the implementation date, this notice applies to persons who are eligible for primary maternity services (whether or not those persons are part way through a module under the previous notice immediately before the implementation date).
- (4) If, immediately before the implementation date, a person who is eligible for primary maternity services is part way through a module under the previous notice, the person will continue to receive their care but it will be for the remainder of the corresponding module in this notice.
- (5) If, before the implementation date, a claim is made, or may be made, in accordance with the previous notice, the previous notice continues to apply to that claim.
- (6) Despite subclause (5), no claim for services provided before the implementation date will be paid if the claim is received after 30 June 2008.
- (7) If, on or after the implementation date, the care of a person who is eligible for primary maternity services is completed under this notice, but the care of that person was started under the previous notice, this notice applies to a claim for the care that has been provided under the previous notice and under this notice.
- (8) An authorisation that was granted to an individual practitioner under the previous notice and that is in effect immediately before the implementation date is to be treated as if it were an authorisation that has been granted under clause CA1(1), and this notice applies to the authorisation.
- (9) In this clause, unless the context otherwise requires,—

**implementation date** means 1 July 2007

**previous notice** means the Maternity Services Notice (which was effective from 1 July 2002) and its amendments.

Defined in this notice: authorisation, claim, module, persons who are eligible for primary maternity services

#### **A6 Definitions and interpretation**

- (1) The definitions and other interpretation provisions for this notice are set out in Part B.
- (2) Some key definitions include the following:
  - (a) the definition of **primary maternity services** (see clause B1):
  - (b) the definition of **persons who are eligible for primary maternity services** (see clause B2):

- (c) the definition of **maternity provider** (see clause B3).

Defined in this notice: maternity provider, persons who are eligible for primary maternity services, primary maternity services

**A7 General requirements for all primary maternity services**

- (1) The general requirements that apply to all primary maternity services are set out in Part C.
- (2) The general requirements cover the following matters:
- (a) authorisations (see subpart CA):
  - (b) the general requirements for providing primary maternity services (see subpart CB):
  - (c) claims (see subpart CC).

Defined in this notice: authorisation, claim, primary maternity services

**A8 Specific requirements for each primary maternity service (including service specifications and payment rules)**

- (1) The specific requirements that apply to each primary maternity service are set out in Part D.
- (2) The specific requirements (which include service specifications and payment rules) cover each of the following primary maternity services:
- (a) lead maternity care (see subpart DA):
  - (b) maternity non-LMC services (see subpart DB):
  - (c) specialist medical maternity services (see subpart DC).

Defined in this notice: lead maternity care, maternity non-LMC services, primary maternity services, specialist medical maternity services

**A9 Fees**

- (1) The fees that may be claimed under this notice are set out in Schedule 1.
- (2) The fees are exclusive of GST.
- (3) Schedule 2 sets out the rural area unit classification, which relates to the fees for rural travel.

Defined in this notice: claim, GST, primary maternity services, rural travel

*Process for amending or revoking notice*

**A10 Process for amending or revoking notice (excluding amendments that consist of only fee increases)**

- (1) This clause applies to a proposal to do any of the following:

- (a) make an amendment to this notice that does not consist of only an increase to a fee in Schedule 1:
  - (b) revoke this notice:
  - (c) issue a replacement notice.
- (2) If this clause applies, the Ministry of Health must notify the following organisations, in writing of a proposal to amend, revoke or replace this notice:
  - (a) the New Zealand College of Midwives:
  - (b) the New Zealand Medical Association:
  - (c) other organisations that are recognised by the Ministry of Health as representing maternity consumers and the professional colleges of practitioners.
- (3) The Ministry of Health will send the proposal to amend, revoke or replace this notice and a proposed timeframe and process for consultation on the proposal to the organisations listed in subclause (2)(a) and (b).
- (4) The organisations listed in subclause (2)(a) and (b) will then have 10 working days to respond to the proposed timeframe for consultation. If there are no objections to the proposal the proposed timeframe for consultation will be used.
- (5) If an objection is received from 1 of the organisations listed in subclause (2)(a) or (b) then—
  - (a) the timeframe for consultation will be 12 weeks, starting from the date the proposal was provided to the organisations listed in subclause (2)(a) and (b); and
  - (b) the process for consultation will, to the extent practicable in the circumstances, include—
    - (i) the giving of adequate and appropriate notice within the 12 week timeframe to those organisations listed in subclause (2)(c) of the proposal to amend the notice;
    - (ii) the provision of a reasonable opportunity for the organisation listed in subclause (2) to make submissions; and
    - (iii) adequate and appropriate consideration of those submissions.
- (6) If, after the process set out in subclauses (2) to (5) is completed, the Ministry of Health decides to proceed with amending or revoking or replacing this notice (as applicable), the Ministry of Health will give every maternity provider 1 month's notice of the implementation of the amendment or the revocation or the replacement (as applicable).
- (7) A failure to comply with this clause does not affect the validity of any amendment to this notice, revocation of this notice, or the issue of a replacement notice (as applicable).

Defined in this notice: maternity provider, practitioner

**A11 Streamlined process for amendments consisting of only fee increases**

- (1) This clause applies to a proposal to make an amendment to this notice that consists of only an increase to a fee in Schedule 1.
- (2) If this clause applies, the Ministry of Health must notify the following organisations, in writing:
  - (a) the New Zealand College of Midwives:
  - (b) the New Zealand Medical Association:
  - (c) other organisations that are recognised by the Ministry of Health as representing maternity consumers and the professional colleges of practitioners.
- (3) The Ministry of Health will notify the organisations listed in subclause (2) at least 4 weeks before notice of the proposed fee increase is published in the *New Zealand Gazette*.
- (4) The Ministry of Health may, but does not need to, consult on a proposed increase to a fee in Schedule 1.
- (5) The Ministry of Health will give every maternity provider 1 month's notice of the implementation of an increase to a fee in Schedule 1.
- (6) A failure to comply with this clause does not affect the validity of any increase to a fee in Schedule 1.

Defined in this notice: maternity provider, practitioner

**A12 Default transitional provisions for amendments consisting of only fee increases**

- (1) This clause applies to an amendment to this notice that consists of only an increase to a fee in Schedule 1, unless the amendment expressly states otherwise.
- (2) An amendment that expressly states that this clause does not apply (whether or not the amendment also includes its own set of transitional provisions) is to be treated as if it consisted of only an increase to a fee in Schedule 1, and, to avoid doubt, the streamlined process set out in clause A11 still applies to the amendment.
- (3) An amendment to which this clause applies must specify a date on which the amendment becomes effective (**implementation date**).
- (4) If the applicable date of service for a payment to a maternity provider occurs before the implementation date, the fees that applied immediately before the implementation date continue to apply.
- (5) If the applicable date of service for a payment to a maternity provider occurs on or after the implementation date, the amended fees specified in the amendment apply.
- (6) In this clause, unless the context otherwise requires,—

**date of service**, in relation to a payment for a complete first and second trimester module, complete third trimester module, complete services following birth module, complete rural travel fee, additional home visits fee

and non-LMC first trimester services fee, is the last date of the period to which the module or fee applies

**date of service**, in relation to a payment of a partial first and second trimester module fee, partial third trimester module fee, partial services following birth module fee and partial rural travel fee, is either—

- (a) for a first partial module fee claim, the date on which the woman changed lead maternity carer on the registration form; or
- (b) for a second partial module fee claim, the last date of the period to which the module applies

**date of service**, in relation to a payment for labour and birth, labour and birth (exceptional circumstances), labour and birth (rural support), homebirth supplies and support, birthing unit support, urgent normal hours pregnancy care, urgent out of hours pregnancy care, non-LMC labour and birth (rural support), urgent postnatal care and specialist services, is the date on which the service was provided to the woman.

Defined in this notice: birthing unit, claim, homebirth supplies services, labour and birth, maternity provider, module, second trimester, specialist, third trimester

## Part B

### Definitions and interpretation

#### B1 Definition of primary maternity services

In this notice, **primary maternity services**—

- (a) means the following services:
  - (i) lead maternity care:
  - (ii) maternity non-LMC services:
  - (iii) specialist medical maternity services; and
- (b) does not include any of the following:
  - (i) a negative pregnancy test:
  - (ii) a consultation by a practitioner for any other medical condition not related to pregnancy, including medical conditions exacerbated by pregnancy except where the service is included in lead maternity care:
  - (iii) a service given more than 6 weeks after the birth:
  - (iv) a service given more than 2 weeks after a miscarriage or termination of pregnancy:
  - (v) caesarean section:
  - (vi) dilation and curettage:
  - (vii) circumcision:
  - (viii) )termination of pregnancy:
  - (ix) radiological imaging other than ultrasound:
  - (x) ultrasound scans not listed in subpart DC:
  - (xi) the following services, as defined in their respective service specifications for these available from the Ministry of Health:
    - (A) maternity facility services:
    - (B) birthing unit facility services:
    - (C) secondary maternity services:
    - (D) tertiary maternity services:
    - (E) specialist neonatal services:
  - (xii) the product cost of any vaccines provided:
  - (xiii) if the circumstances described in the service specification for maternity non-LMC services do not apply, a consultation in the

second trimester or third trimester with a non-LMC general practitioner for the purpose of a second opinion:

- (xiv) other services not specified in this notice.

Defined in this notice: birth, general practitioner, LMC, practitioner, primary maternity services, secondary maternity, second trimester, specialist neonatal services, tertiary maternity, third trimester

## **B2 Definition of persons who are eligible for primary maternity services**

- (1) In this notice, unless the context otherwise requires, **persons who are eligible for primary maternity services—**

(a) means—

- (i) a woman who is an eligible person:  
 (ii) a baby who is an eligible person; and

(b) includes a woman who is not an eligible person but whose baby is an eligible person.

- (2) For the purposes of subclause (1), **eligible person** has the same meaning as the definition of **eligible people** in section 6(1) of the Act.

## **B3 Definition of maternity provider**

In this notice, unless the context otherwise requires, **maternity provider** means an organisation or an individual that provides primary maternity services.

Defined in this notice: primary maternity services

## **B4 Definition of practitioner**

In this notice, unless the context otherwise requires, **practitioner** means a general practitioner, midwife, obstetrician, paediatrician, radiologist or medical radiation technologist who is a maternity provider in his or her own right or is an employee or contractor of a maternity provider and holds a current annual practicing certificate.

Defined in this notice: general practitioner, midwife, maternity provider, obstetrician, paediatrician, radiologist, medical radiation technologist

## **B5 Other definitions**

In this notice, unless the context otherwise requires,—

**access agreement** means the generic agreement for access to maternity facilities and birthing units as set out in Schedule 3

**Act** means the New Zealand Public Health and Disability Act 2000

**additional postnatal visits** means the fee payable to maternity providers if they have provided more than 12 postnatal visits to the mother and baby as a part of services following birth



**amniocentesis** means a foetal diagnostic procedure to determine foetal normality by aspiration of amniotic fluid through the mother's abdomen

**artificial feeding** means the baby has had no breast-milk in the past 48 hours but has had alternative liquid such as infant formula with or without solid food in the past 48 hours

**authorisation** means an authorisation granted by the Ministry of Health under clause CA1

**away from her usual place of residence** means a woman has stayed for 1 night or more in a location which is at least 1 hour by normal road transport from her usual place of residence

**back-up LMC** means a midwife, general practitioner with a Diploma in Obstetrics (or equivalent, as determined by the New Zealand College of General Practitioners), or obstetrician who has a formal relationship with the LMC (for example, they may both be employees of the same maternity provider or the back-up LMC is contracted by the LMC) to provide lead maternity care to women registered with the LMC when the LMC is not available to provide these services

**BFHI** means the baby friendly hospital initiative launched by the World Health Organisation and UNICEF in 1992 and adapted for New Zealand by the New Zealand Breastfeeding Authority in 1999

**birth** means a delivery of a baby (or babies for a multiple birth) after a minimum of 20 weeks 0 days gestation and/or with a birth weight over 400 grams

**birthing unit** means a facility that provides birthing unit services in accordance with the service specification for birthing unit services available from the Ministry of Health

**birthing unit support** mean the payment that maternity providers may claim under this notice if the birth occurs in a birthing unit

**care plan** means the process by which the LMC and the woman develop a plan of care for the woman and her baby and the documentation of this plan throughout the individual clinical notes pertaining to this woman

**caregiver**, in relation to a baby,—

(a) means the person who has the primary responsibility for the day to day care of the baby, other than on a temporary basis; but

(b) does not include the mother of the baby

**chorionic villous sampling** means a foetal diagnostic procedure, which is the aspiration of a sample of chorionic (placental) tissue for biochemical and chromosomal analysis

**claim—**

(a) means a request for payment for primary maternity services that is forwarded to HealthPAC; and

(b) does not include a registration or change of registration

**DHB** has the same meaning as in section 6(1) of the Act

**DHB provider arm** means a provider of health services that is a part of a District Health Board or wholly owned by a District Health Board or Boards

**estimated date of delivery (EDD)** means either the estimated date of delivery of the baby or the actual date of the delivery of the baby

**established labour** means the period from when labour is estimated to have commenced as measured by duration, frequency, and strength of each contraction

**exclusive breastfeeding** means that, to the mother's knowledge,—

- (a) the infant has never had any water, formula or other liquid or solid food; and
- (b) only breast-milk, from the breast or expressed, and prescribed medicines, defined as per the Medicines Act 1981, have been given to the baby from birth

**family planning practitioner** means a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of practice of family planning and reproductive health and holds an annual practicing certificate

**first birth** means that a woman has not previously experienced a birth

**first consultation** means a consultation with an obstetrician for consulting obstetrician services, as per clause DC12, or a paediatrician for consulting paediatrician services, as per clause DC14, if there has been no previous primary maternity services provided to the same woman by the same specialist involving the same medical problem

**first trimester** means the period from the LMP date until the end of the fourteenth week of pregnancy (1-12 weeks after conception)

**foetal blood sampling** means a foetal diagnosis procedure where foetal blood is obtained directly from the umbilical cord performed after 17 weeks of pregnancy

**fully breastfeeding** means the infant has taken breast-milk only, no other liquids or solids except a minimal amount of water or prescribed medicines, in the previous 48 hours

**geographical area**, in relation to a DHB, means the geographical area of the DHB as specified in Schedule 1 of the Act

**general practitioner** means a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of practice of general practice and holds an annual practicing certificate

**gravida** means the total number of pregnancies the woman has experienced including the current one (for example, a woman who has had one prior pregnancy, and is currently pregnant, is designated 'Gravida 2')

**GST** means good and services tax payable under the Good and Services Tax Act 1985

**HealthPAC** means Health Payments Agreements and Compliance, a business unit of the Ministry of Health responsible for processing and payment of claims

**homebirth** means—

- (a) a birth that takes place in a person's home and not in a maternity facility or birthing unit; or
- (b) a birth for which management of the labour commences at home and there is a documented plan to birth at home

**homebirth supplies and support** means the payment that maternity providers may claim for a homebirth

**home visit** means a postnatal domiciliary consultation between the woman and baby and a practitioner at—

- (a) the home where the woman and baby is domiciled; or
- (b) a maternity facility where the woman has been discharged as an inpatient but the baby remains as an inpatient

**hospital midwifery services** means the midwifery component of labour and birth, and postnatal care provided by a DHB employed midwife where the LMC is a general practitioner or obstetrician

**inpatient** means that the woman and/or baby receives maternity services in an inpatient setting, being either admitted to a maternity facility or a birthing unit or having received a consultation in a maternity facility of more than 3 hours duration

**inpatient postnatal care** means the 24 hour care a woman and baby receives if the woman remains in the maternity facility for 12 hours or more after the birth

**labour and birth** means the period from the onset of established labour until 2 hours after delivery of the placenta

**last menstrual period (LMP) date** means the estimated or actual date of the beginning of the woman's last menstrual period

**lead maternity care** means to provide a woman and her baby with continuity of care throughout pregnancy, labour and birth and the postnatal period as described in Subpart DA

**lead maternity carer (LMC)** means a person who—

- (a) is—
  - (i) a general practitioner with a Diploma in Obstetrics (or equivalent, as determined by the New Zealand College of General Practitioners); or
  - (ii) a midwife; or
  - (iii) an obstetrician; and
- (b) is either—
  - (i) a maternity provider in his or her own right; or
  - (ii) an employee or contractor of a maternity provider; and
- (c) has been selected by the woman to provide her lead maternity care

**maternity facility** means a facility that provides maternity facility services in accordance with the service specification for maternity facility services available from the Ministry of Health

**maternity non-LMC services** means the services that are either in addition to lead maternity care or services sought on a casual basis outside lead maternity care as described in Subpart DB

**medical radiation technologist** means a health practitioner who is, or is deemed to be, registered with the Medical Radiation Technologists Board (established by the Health Practitioners Competence Assurance Act 2003) in

the vocational scope of sonographer and holds an annual practicing certificate

**message standard definition** means the current version of the HealthPAC Electronic Claiming: Message Standard Definition applicable to Maternity Providers as approved by the Ministry of Health

**midwife** means a health practitioner who is, or is deemed to be, registered with the Midwifery Council (established by the Health Practitioners Competence Assurance Act 2003) as a practitioner of the profession of midwifery and holds an annual practicing certificate

**miscarriage** means a pregnancy that ends spontaneously before 20 weeks gestation

**module** means the group of services for a phase of pregnancy

**National Health Index (NHI)** means the unique person identifier number allocated by the New Zealand Health Information Service

**National Immunisation Register (NIR)** means the computerised information system that has been developed to hold immunisation details of New Zealand children

**normal road transport** means transport by car or similar motorised vehicle and in accordance with times determined by the Ministry of Health

**obstetrician** means a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of obstetrics and gynaecology and holds an annual practicing certificate

**OMC** means online maternity claiming

**paediatrician** means a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of paediatrics or paediatric surgery and holds an annual practicing certificate

**parity** means the number of times a woman has borne children counting multiple births as one and including stillbirths

**partial breastfeeding** means the infant has taken some breast-milk and some infant formula or other solid food in the past 48 hours

**pregnancy and parenting education** means an antenatal course provided to a group of women as described in the relevant service specification issued by the Ministry of Health

**primary health organisation (PHO)** means a provider contracted by a DHB for the provision of primary health services

**primary health services** means the services specified in the service specifications for essential primary health care services available from the Ministry of Health

**professional review process** means participation in a process that is recognised by the practitioner's relevant professional council or medical college, as providing an assessment of the practitioner's practice and outcomes, including the level of consumer satisfaction

**radiologist** means a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of

diagnostic and interventional radiology and holds an annual practicing certificate

**Referral Guidelines** means the Guidelines for Consultation with Obstetric and Related Specialist Medical Services that identify clinical reasons for consultation with a specialist and that are published by the Ministry of Health from time to time.

**registration** is the process by which a woman selects her LMC, the documentation recording this selection, and the forwarding of this information to HealthPAC. By registering with an LMC the woman is also registering with the maternity provider with which the LMC is affiliated

**rural travel** means the fees payable to maternity providers that provide services following birth to women who are resident in the areas listed in Schedule 2

**scope of practice** has the same meaning as in section 5(1) of the Health Practitioners Competence Assurance Act 2003

**secondary maternity—**

- (a) means the services specified in the service specification for secondary maternity services available from the Ministry of Health; and
- (b) includes ultrasound scans and all midwifery services for elective caesarean sections

**second trimester** means the period of pregnancy from the beginning of the 15th week until the end of the 28th week of pregnancy

**services following birth** means the services provided in the period from two hours after the delivery of the placenta until six weeks after the birth

**specialist** means a practitioner who is an, obstetrician, paediatrician, or radiologist

**specialist medical maternity services** means the non-LMC services provided by obstetricians, paediatricians and radiologists to support primary maternity care as described in Subpart DC

**specialist neonatal services** means the specialist services for neonates who are born with additional needs or develop additional needs prior to discharge as described in the service specification for specialist neonatal inpatient and home care services available from the Ministry of Health

**stillbirth** means a birth where the baby shows no signs of life

**subsequent birth** means that a woman has previously experienced a birth (excluding a vaginal birth after caesarean section)

**subsequent consultation** means a consultation with an obstetrician for consulting obstetrician services, as per clause DC12 or a paediatrician for consulting paediatrician services, as per clause DC14, where there has been a previous primary maternity service provided to the same woman by the same specialist involving the same medical problem or involving a medical problem that was detected at the time of any previous maternity service provided by the same specialist

**tertiary maternity** means the services specified in the service specification for tertiary maternity services available from the Ministry of Health and includes ultrasound scans

**third trimester** means the period of pregnancy from the beginning of the 29th week of pregnancy until established labour

**vaginal birth after caesarean section (VBAC)** means a vaginal birth for a woman who has had a previous birth by caesarean section and who has not had a previous vaginal birth

**usual place of residence** means the place where the woman usually resides

**well child provider** means a health care provider who provides health services for families, babies and children as described in the Well Child Tamariki Ora National Schedule

**working day** means a day of the week other than—

- (a) a Saturday, a Sunday, Waitangi Day, Good Friday, Easter Monday, Anzac Day, the Sovereign's Birthday, and Labour Day; and
- (b) the day observed in the appropriate area as the anniversary of the province of which the area forms a part; and
- (c) a day in the period commencing with 25 December in a year and ending with 2 January in the following year; and
- (d) if 1 January falls on a Friday, the following Monday; and
- (e) if 1 January falls on a Saturday or a Sunday, the following Monday and Tuesday.

## **B6 Meanings of terms and expressions defined in Act**

Any term or expression that is defined in the Act and used, but not defined, in this notice, has the same meaning as in the Act.

## **B7 Parts of speech and grammatical forms**

Grammatical forms of a word that is defined in this notice have corresponding meanings in this notice.

## **B8 Numbers**

Words in the singular include the plural and words in the plural include the singular.

## **B9 Time**

- (1) A period of time described as beginning at, on, or with a specified day, act, or event includes that day or the day of the act or event.
- (2) A period of time described as beginning from or after a specified day, act, or event does not include that day or the day of the act or event.
- (3) A period of time described as ending by, on, at, or with, or as continuing to or until, a specified day, act, or event includes that day or the day of the act or event.
- (4) A period of time described as ending before a specified day, act, or event does not include that day or the day of the act or event.

- (5) A reference to a number of days between 2 events does not include the days on which the events happened.
- (6) A thing that, under this notice, must or may be done on a particular day or within a limited period of time may, if that day or the last day of that period is not a working day, be done on the next working day.

**B10 Interpretational aids: list of defined terms**

- (1) The list of defined terms following a clause is included in this notice only as interpretational aids. If there is conflict between an interpretational aid and a provision of this notice, the provision prevails.
- (2) If a defined term is used in a clause and is not included in the list of defined terms following the clause, the term is nevertheless used in the clause as defined.

## Part C

### General requirements for all primary maternity services

#### Subpart CA—Authorisations

##### CA1 Granting authorisation

- (1) The Ministry of Health may grant an authorisation to a maternity provider if the Ministry of Health is satisfied that—
  - (a) the maternity provider has properly completed the application form; and
  - (b) any reasonable conditions that the Ministry of Health requires for granting the authorisation have been met or will be met.
- (2) An authorisation of a maternity provider applies to the geographical area of a DHB in which the maternity provider will predominantly provide primary maternity services.

Defined in this notice: authorisation, maternity provider

##### CA2 Duration of authorisation

An authorisation continues in effect until it is terminated or lapses under this subpart.

Defined in this notice: authorisation

##### CA3 Withdrawal from providing primary maternity services

- (1) A maternity provider may, at any time, withdraw from providing primary maternity services under this notice by giving the Ministry of Health not less than 4 weeks' written notification.
- (2) Notification under subclause (1) terminates the maternity provider's authorisation and the relationship under this notice between the maternity provider and the Ministry of Health.

Defined in this notice: authorisation, maternity provider, primary maternity services

##### CA4 Exemptions

- (1) The Ministry of Health may exempt a maternity provider from a requirement of this notice, but only if the exemption is necessary to resolve a regional problem in relation to women's access to primary maternity services.
- (2) The exemption will be recorded in writing as if it were a variation to the authorisation of the maternity provider.

Defined in this notice: authorisation, maternity provider, primary maternity services



**CA5 Termination or variation of authorisation by Ministry of Health**

Subject to clause CA6, the Ministry of Health may terminate or vary an authorisation of a maternity provider if—

- (a) the maternity provider, or a practitioner who works for the maternity provider, has not complied with that authorisation or this notice; and
- (b) in the opinion of the Ministry of Health, it is unlikely that the maternity provider or practitioner (as applicable) will comply with that authorisation or this notice.

Defined in this notice: authorisation, maternity provider, practitioner

**CA6 Process for terminating or varying authorisation by Ministry of Health**

- (1) Before the Ministry of Health may terminate or vary an authorisation of a maternity provider under clause CA5, the Ministry of Health must—
  - (a) notify the maternity provider in writing of its intention to terminate or vary the authorisation; and
  - (b) provide written reasons for terminating the authorisation.
- (2) The maternity provider has 20 working days from receipt of the notification to—
  - (a) comply with the authorisation or this notice (as applicable); or
  - (b) satisfy the Ministry of Health that the authorisation or this notice (as applicable) will be complied with.
- (3) If, at the end of the 20 working day period, the Ministry of Health is not satisfied with the response from the maternity provider, it may give final notice of 5 working days of termination or variation of the authorisation.

Defined in this notice: authorisation, maternity provider, working day

**CA7 Lapse of authorisation**

An authorisation of a maternity provider lapses and ceases to have effect if—

- (a) the maternity provider has not made a claim under this notice for a period of 12 months; or
- (b) the maternity provider dies; or
- (c) the maternity provider becomes bankrupt, or goes into liquidation or receivership (as applicable); or
- (d) the maternity provider becomes a mentally disordered person within the meaning of the Mental Health (Compulsory Assessment and Treatment) Act 1992, or becomes a person subject to a property order under the Protection of Personal and Property Rights Act 1988.

Defined in this notice: authorisation, claim, maternity provider

**CA8 Consequences of termination or lapse of authorisation**

- (1) The termination or lapse of a maternity provider's authorisation under this subpart does not affect the rights of—
  - (a) the Ministry of Health in relation to that authorisation or this notice; or
  - (b) the maternity provider in relation to a claim that the maternity provider would have been entitled to make, but for the termination or lapse of the authorisation under this subpart.
- (2) Subject to subclause (1)(b), a maternity provider is not entitled to claim for primary maternity services that have been provided after the relevant authorisation has terminated or lapsed (as applicable).

Defined in this notice: authorisation, claim, maternity provider, primary maternity services

**Subpart CB—General requirements for providing primary maternity services****CB1 Compliance with statutory, regulatory, legal, and professional requirements**

- (1) A maternity provider must ensure that all statutory, regulatory, legal, and professional requirements that apply to primary maternity services provided by them are complied with.
- (2) For the avoidance of doubt, a practitioner who is a maternity provider or who works for a maternity provider must comply with all statutory, regulatory, legal, and professional requirements that apply to the primary maternity services provided by them.
- (3) The requirements referred to in subclauses (1) and (2) include, without limitation, the following:
  - (a) the requirements of the Health Practitioners Competence Assurance Act 2003:
  - (b) the requirements of the applicable Council, including the code of ethics:
  - (c) the standards of the applicable professional college:
  - (d) guidelines or standards relating to maternity or care of the newborn, developed by the Ministry of Health in consultation with maternity and newborn providers, endorsed by the providers professional body, and readily available:
  - (e) the requirements of the Referral Guidelines (including, safe and timely referral and transfer practices):
  - (f) the requirements of the Code of Health and Disability Services Consumers' Rights:
  - (g) the requirements of the Privacy Act 1993 and the Health Information Privacy Code 1994:

- (h) the requirements of the Health (Retention of Health Information) Regulations 1996.

Defined in this notice: maternity provider, practitioner, primary maternity services, Referral Guidelines

## **CB2 Audit**

- (1) For the purposes of this clause, **audit** means an audit, investigation, or review of—
- (a) the performance and quality of primary maternity services in accordance with this notice; and
  - (b) any other matter concerning compliance with any of the obligations of the maternity provider under this notice.
- (2) A maternity provider must provide the Ministry of Health and its authorised agents (**the auditors**) with access on 24 hours' notice (or immediate access if the auditor reasonably suspects fraudulent claiming has occurred) to—
- (a) all records related to the provision of primary maternity services by the maternity provider; and
  - (b) the premises where primary maternity services are provided, other than a woman's or baby's or babies' homes; and
  - (c) the premises where the records are kept.
- (3) For the purposes of carrying out an audit, a maternity provider must allow the auditors to interview—
- (a) any practitioners providing primary maternity services, and
  - (b) any women receiving primary maternity services.
- (4) If the audit identifies an overpayment or evidence of non or partial service delivery, the Ministry of Health may obtain a full or partial repayment of the service fee, either directly or by using its right to set-off in accordance with clause CC9.
- (5) If any protocols have been agreed between the Ministry of Health and the New Zealand College of Midwives or the New Zealand Medical Association, the Ministry of Health will conduct audits of maternity providers in accordance with those protocols.
- (6) The Ministry of Health's right to audit under this clause continues after this notice ends but only to the extent that it is relevant to the period during which this notice was in force.

Defined in this notice: claim, maternity provider, practitioner, primary maternity services

## **CB3 Manner of providing primary maternity services**

A maternity provider must ensure that primary maternity services that are provided by the maternity provider—

- (a) are provided in a safe, timely, equitable, and efficient manner to meet the assessed needs of the person who is eligible for primary maternity services; and
- (b) are provided in a manner which supports and promotes continuity of care; and
- (c) are provided by sufficient numbers of suitably skilled and qualified practitioners; and
- (d) are provided in a manner that is appropriate to the culture of the person who is eligible for primary maternity services (including their family or whanau).

Defined in this notice: maternity provider, person who is eligible for primary maternity services, practitioner, primary maternity services

#### **CB4 Achieving Māori health outcomes and reducing Māori health inequalities**

Primary maternity services will achieve Māori health outcomes and reduce Māori health inequalities by facilitating Māori access to maternity services, ensuring appropriate pathways through those services and that maternity services address the primary maternity needs of Māori.

Defined in this notice: primary maternity services

#### **CB5 Practitioner to have access agreement**

A practitioner that uses a maternity facility or a birthing unit must have an access agreement for the use of that maternity facility or birthing unit (as applicable).

Defined in this notice: access agreement, birthing unit, maternity facility, practitioner

#### **CB6 Relationship to be based on informed consent**

A maternity provider must ensure that the relationship between the maternity provider (including the practitioners who work for them) and a woman is based on informed consent and the dignity of the woman is respected.

Defined in this notice: maternity provider, person who is eligible for primary maternity services, practitioner

#### **CB7 Information about primary maternity services**

- (1) A maternity provider must ensure that every person who is eligible for primary maternity services is given the appropriate information on the primary maternity services that they are entitled to receive (including their options).
- (2) In all cases woman are entitled to an explanation of the costs of all options for maternity care.

Defined in this notice: maternity provider, persons who is eligible for primary maternity services, primary maternity services

**CB8 Maternity provider to advise woman on alternative maternity providers if not providing the primary maternity services**

A maternity provider must advise the woman of alternative maternity providers and, if necessary, formally refer the woman to another maternity provider when they themselves are not providing the primary maternity services.

Defined in this notice: maternity provider, primary maternity services

**CB9 Maternity provider to co-operate with others in order to promote safe and effective primary maternity services**

A maternity provider must maintain a range of linkages with and co-operate with other maternity providers, practitioners, and community agencies to promote safe and effective primary maternity services.

Defined in this notice: maternity provider, primary maternity services

**CB10 Ongoing improvement of quality of primary maternity services**

A maternity provider must have systems and processes for the ongoing improvement of the quality of primary maternity services that they provide.

Defined in this notice: maternity provider, primary maternity services

**CB11 Practitioners to participate in professional review process**

- (1) A maternity provider who is a practitioner must participate in a professional review process.
- (2) A maternity provider must ensure that every practitioner who works for the maternity provider and who provides primary maternity services in that capacity participates in a professional review process.

Defined in this notice: maternity provider, practitioner, primary maternity services, professional review process

**CB12 Maternity provider and their practitioners to co-operate with Perinatal and Maternal Mortality Review Committee**

- (1) A maternity provider must co-operate with the Perinatal and Maternal Mortality Review Committee established under the Act.
- (2) A maternity provider must ensure that every practitioner who works for the maternity provider and who provides primary maternity services in that capacity co-operates with the Perinatal and Maternal Mortality Review Committee.

Defined in this notice: Act, maternity provider, practitioner

**CB13 Practitioners to include the required information on all prescriptions and referrals**

- (1) All prescriptions for pharmaceuticals, referrals for laboratory tests, referrals for ultrasound scans and referrals to specialists issued by practitioners must include the following details:
  - (a) practitioner's details:
    - (i) the practitioner's type (for example, midwife):
    - (ii) the practitioner's council number:
    - (iii) the practitioner's name:
    - (iv) the practitioner's signature:
  - (b) woman and/or baby's details:
    - (i) name and address:
    - (ii) the woman and baby's NHI:
    - (iii) the woman or baby's date of birth where they are under 12 years of age or if no NHI number is available:
    - (iv) the woman or baby's gender if no NHI number is available:
- (2) Prescriptions for pharmaceuticals must also include the appropriate patient category (for pharmaceutical subsidy purposes) and comply with any requirements of the pharmaceutical schedule.
- (3) Referrals for laboratory tests must also include the date of referral and the name of the laboratory test or test code.
- (4) Referrals for ultrasound scans must also include the date of referral and the appropriate clinical indication for ultrasound in pregnancy code, as specified in clause DC10.
- (5) Referrals to specialists (other than for ultrasound scans) must be written in hard copy, only made with the woman's informed consent and include the date of referral and the appropriate referral code, as specified in the referral guidelines.

Defined in this notice: NHI, practitioner, referral guidelines, specialist

## Subpart CC—Claims

**CC1 Basis for claiming under this notice**

A maternity provider may claim under this notice for providing a primary maternity service, but only if—

- (a) the maternity provider holds a current authorisation for providing the primary maternity service; and
- (b) the primary maternity service is provided in New Zealand to a person who is eligible for the primary maternity service; and

- (c) the primary maternity service has been provided in accordance with all the applicable requirements of this notice; and
- (d) the claim is permitted under this notice.

Defined in this notice: authorisation, claim, maternity provider, person who is eligible for primary maternity services, primary maternity services

## **CC2 No claim if claim is covered by another arrangement**

- (1) A maternity provider may not claim under this notice if—
  - (a) the maternity provider, or a practitioner who works for the maternity provider, is entitled to have the claim satisfied (whether directly or indirectly) under any other arrangement with the Ministry of Health or a DHB; or
  - (b) the primary maternity services that relate to the claim have been provided by a practitioner in their capacity as an employee of a DHB.
- (2) For the purposes of audit, a practitioner employed by a DHB must keep a record of the hours of employment (including on-call hours) with the DHB.

Defined in this notice: audit, claim, DHB, maternity provider, practitioner, primary maternity services

## **CC3 Claim to be properly completed**

- (1) A maternity provider must ensure that every claim that the maternity provider makes is properly completed.
- (2) A maternity provider must ensure that the NHI numbers and EDD are supplied with each claim.

Defined in this notice: claim, EDD, maternity provider, NHI

## **CC4 Timing of claims**

- (1) A maternity provider may make a claim only on completion of the primary maternity service (including the completion of a module) for which the claim is made.
- (2) A maternity provider must ensure that HealthPAC receives the maternity provider's claim for a primary maternity service, other than registrations, within 6 months of the service being completed.
- (3) HealthPAC will return an improperly completed claim to the maternity provider concerned within 5 working days, but only if the maternity provider can be identified.

Defined in this notice: claim, HealthPAC, maternity provider, module, primary maternity services, registration, working day

**CC5 Manual claims**

- (1) A maternity provider may make a manual claim by submitting either—
  - (a) a claim on a form approved by the Ministry of Health and available from HealthPAC; or
  - (b) the claim form printed from a practice management system that is in the same format and contains identical information as the claim forms approved by the Ministry of Health.
- (2) A maternity provider who makes a manual claim must sign each claim form submitted.

Defined in this notice: claim, HealthPAC, maternity provider

**CC6 On-line maternity claiming**

- (1) A maternity provider may claim by using the online maternity claiming (OMC) website.
- (2) A maternity provider who intends to claim via the OMC must first have the ability to connect to the HealthLink Network and login to the OMC website.
- (3) If a claim is submitted via the OMC, the maternity provider must print and retain a copy of the maternity claim submission screen as a record of the claim submitted.

Defined in this notice: claim, HealthPAC, maternity provider, OMC

**CC7 Electronic claiming**

- (1) A maternity provider may claim electronically by submitting an electronic claim file to HealthPAC.
- (2) A maternity provider who intends to claim electronically must first have the ability to connect to the HealthLink Network and must submit the file via the Health Intranet.
- (3) The electronic claim file must be in a format set out in the message standard definition.
- (4) The Ministry of Health may, from time to time, update the message standard definition.
- (5) A maternity provider who submits an electronic claim file must—
  - (a) retain a copy of the claim file in a format that allows the claim to be available to the auditors of the Ministry of Health; and
  - (b) retain a record of the date the claim file was submitted and the total amount claimed.

Defined in this notice: claim, EDD, HealthPAC, maternity provider, message standard definition, NHI, working day



**CC8 Payment of claims**

- (1) HealthPAC will pay a claim within 22 working days from the receipt of a valid claim.
- (2) Payment will be made by way of direct credit.
- (3) If a claim has to be returned to the maternity provider for correction of claiming details and a corrected claim has been submitted by the maternity provider, the corrected claim will be paid based on the date of receipt of the corrected claim, not the date of receipt of the initial claim.
- (4) If a claim for a primary maternity service is received more than 6 months after the service has been completed, there will be a 10% fee deduction.
- (5) No claim for primary maternity services will be paid if the claim is received more than 12 months after the service has been completed.
- (6) Subclauses (4) and (5) apply unless, in its sole discretion, the Ministry of Health considers there were circumstances beyond the control of the maternity provider that prevented the claim being submitted any earlier.

Defined in this notice: claim, maternity provider, primary maternity services

**CC9 Set-off**

- (1) If the Ministry of Health determines that a maternity provider has been overpaid or that a maternity provider was not entitled to a payment, or any part of a payment, the Ministry of Health may deduct any over payment from any subsequent payment payable to that maternity provider.
- (2) Before making any deduction, the Ministry of Health will advise the maternity provider of the proposed deduction and give the maternity provider—
  - (a) the reason for the deduction; and
  - (b) enough time to request the Ministry of Health to reconsider the deduction.

Defined in this notice: maternity provider

**CC10 Reconsideration of claim**

A maternity provider may, within 3 months from the date on which they receive advice of the outcome of a claim, request, in writing, that the Ministry of Health reconsider the claim.

Defined in this notice: claim, maternity provider

## Part D

### Specific requirements for each primary maternity service (including service specifications and payment rules)

#### Subpart DA—Lead maternity care

##### *General information about lead maternity care*

#### **DA1 Aim of lead maternity care**

- (1) The aim of lead maternity care is to provide a woman with continuity of care throughout pregnancy, labour and birth, and the postnatal period.
- (2) Lead maternity care is available to women, and their newborn babies.

Defined in this notice: labour and birth, lead maternity care

#### **DA2 Registration**

- (1) In order to receive lead maternity care a woman who is eligible for primary maternity services must register with a LMC of her choice.
- (2) By registering with a LMC, the woman is also registering with a maternity provider.
- (3) Registration may occur at any time from the diagnosis of pregnancy until 6 weeks after birth, but no claim for payment may be made for lead maternity care that is provided before the date of registration.
- (4) The woman and her LMC must properly complete a registration form in the format specified by the Ministry of Health.
- (5) The woman must sign a registration form. Each form must be dated with the date on which the form was signed by the woman (**date of registration**).
- (6) The woman may, at any time, change the LMC with whom she is registered by signing a registration form with the new LMC.
- (7) The woman may be registered with only 1 LMC at a time.
- (8) If a registration form needs to be re-submitted it is sufficient to have a photocopy of the original registration form containing the signature of the woman.
- (9) A maternity provider must submit to HealthPAC the woman's registration or a change of registration no more than 20 working days after the date of registration.

Defined in this notice: claim, HealthPAC, lead maternity care, LMC, maternity provider, working day

**DA3 Charging for lead maternity care**

- (1) Lead maternity care provided by a midwife or general practitioner is to be provided free of charge to persons who are eligible to receive it under this notice.
- (2) A part charge may be charged to persons who are eligible for lead maternity care provided by an obstetrician.

Defined in this notice: general practitioner, lead maternity care, midwife, obstetrician

**DA4 Where lead maternity care may be provided**

Lead maternity care may be provided in a range of places, including the following places:

- (a) a woman's home:
- (b) a baby's home (if it is different from the mother's home):
- (c) the LMC's rooms or practice:
- (d) a maternity facility:
- (e) a birthing unit.

Defined in this notice: birthing unit, labour and birth, lead maternity care, LMC, maternity facility

### *LMCs*

**DA5 Lead maternity carer (LMC)**

- (1) A LMC provides lead maternity care.
- (2) A LMC who cares for a woman in a maternity facility must support the maternity facility in implementing the *Baby Friendly Hospital Initiative* (BFHI).

Defined in this notice: lead maternity care, lead maternity carer (LMC), maternity facility, BFHI

**DA6 General responsibilities of LMCs**

- (1) The LMC is responsible for—
  - (a) assessing the woman's and baby's needs; and
  - (b) planning the woman's care with her and the care of the baby; and
  - (c) the care provided to the woman throughout her pregnancy and postpartum period, including—
    - (i) the management of labour and birth; and
    - (ii) ensuring that all the applicable primary maternity services are provided; and

- (iii) ensuring all the applicable well child Tamariki/Ora services are provided to the baby.
- (2) The LMC or a backup LMC will be available 24 hours a day, 7 days a week to provide phone advice to the woman and community or hospital based assessment for urgent problems, other than acute emergencies.

Defined in this notice: back-up LMC, labour and birth, LMC, primary maternity services

**DA7 Continuity of care**

- (1) From the time of registration of a woman, a LMC is responsible for co-ordinating for the woman all of the modules of lead maternity care in order to achieve continuity of care.
- (2) Subject to subclause (6), if a LMC is unavailable to provide an entire module of lead maternity care because of holiday leave, sick leave, bereavement leave, continuing professional education requirements or other exceptional circumstances, a back-up LMC may provide those services.
- (3) Subject to subclause (6), the LMC for a woman may, with the woman's consent, delegate to another midwife, general practitioner, or obstetrician the provision of part of a module, but not the entire module.
- (4) However, the responsibility for meeting the requirements of the module remain with the LMC.
- (5) The respective responsibilities of the LMC and the practitioner to whom aspects of a module have been delegated will be clearly documented in the care plan.
- (6) Despite subclauses (2) and (3), if, because of exceptional reasons, the LMC is unable to be responsible for the ongoing provision of lead maternity care to a woman, the maternity provider must ensure that the woman is registered with another LMC.
- (7) A LMC is responsible for ensuring that handover to primary care and well child services takes place.

Defined in this notice: back-up LMC, general practitioner, LMC, maternity provider, midwife, obstetrician

**DA8 Transfer of care to secondary maternity services, tertiary maternity services, and specialist neonatal services**

- (1) If there is a transfer of care to secondary maternity services, tertiary maternity services, or specialist neonatal service, clinical responsibility for the woman and baby transfers, until there is a transfer of care back to the LMC.
- (2) Every transfer of care must be documented in the clinical notes, including the date and time of transfer.
- (3) If responsibility for a woman's care transfers to a secondary maternity service or tertiary maternity service after established labour, the woman's LMC may continue to support the woman.

Defined in this notice: established labour, LMC, secondary maternity, tertiary maternity, specialist neonatal services

## *Service linkages*

### **DA9 Service linkages: transfer to well child services**

- (1) A transfer of the care of the baby from the LMC to a well child provider must take place before 6 weeks from birth.
- (2) The LMC must give a written referral to a well child provider that meets the guidelines agreed by the New Zealand College of Midwives and providers of well child services, before the end of the 4<sup>th</sup> week following birth.
- (3) If the baby has unusually high needs, the LMC may request that a well child provider becomes involved as early as 2 weeks from birth to provide concurrent and co-ordinated care with the LMC.

Defined in this notice: birth, LMC, well child provider

### **DA10 Service linkages: transfer to primary health services**

- (1) A transfer of the care of the woman and the baby from the LMC to the woman's primary health services provider must take place before 6 weeks from birth.
- (2) The LMC must give a written referral to the woman's general practitioner that meets the guidelines agreed by the New Zealand College of Midwives and the Royal New Zealand College of General Practitioners, before discharge from lead maternity care.
- (3) If a woman does not have a regular general practitioner, the maternity provider must inform the woman about the primary health services available in the local area.

Defined in this notice: birth, general practitioner, LMC, maternity provider, primary health services

### **DA11 Linkages with other services**

Providers of lead maternity care will also maintain linkages with the following local organisations and providers of health services:

- (a) primary health services:
- (b) maternity facility services:
- (c) secondary maternity services:
- (d) antenatal education services:
- (e) ultrasound scanning services:
- (f) well child services:
- (g) maternity consumer organisations:
- (h) community or maternal mental health teams

Defined in this notice: maternity facility, primary health services, secondary maternity

## *Exclusions*

### **DA12 Exclusions**

Lead maternity care does not include the following:

- (a) maternity facility services:
- (b) birthing unit services:
- (c) secondary maternity services:
- (d) any services provided by a DHB provider arm.

Defined in this notice: birthing unit, DHB provider arm, lead maternity care, maternity facility, secondary maternity

## *Claims*

### **DA13 General requirements for making claims for lead maternity care**

- (1) Payments for lead maternity care may be claimed for services provided in accordance with this subpart.
- (2) A maternity provider who claims a lead maternity care fee must be the maternity provider with whom the woman is registered through the woman's LMC.
- (3) No claims may be made for lead maternity care that has been provided before the date of registration.
- (4) No claims for lead maternity care will be accepted before HealthPAC has received the registration form.
- (5) A maternity provider may make only 1 claim for each lead maternity care fee per woman per pregnancy.
- (6) Claims may be made only once either when—
  - (a) the module or item of service has been completed; or
  - (b) the woman has registered with another maternity provider.
- (7) Trimester dates will be calculated based upon the EDD supplied by a maternity provider with the claim.
- (8) There can be no claim for lead maternity care if a woman has transferred to secondary maternity or tertiary maternity for an entire module.

Defined in this notice: claim, EDD, HealthPAC, LMC, maternity provider, module, secondary maternity, tertiary maternity

## *Reporting requirements*

### **DA14 Purchase units**

- (1) The following purchase units apply to lead maternity care.

Purchase unit ID	Purchase unit short name
WM1007	Maternity LMC Antenatal Services
WM1008	Maternity LMC Labour and Birth Services
WM1009	Maternity LMC Postnatal Services (Services Following Birth)

- (2) Purchase units are defined in the Ministry of Health's data dictionary and correspond to the relevant fees specified in Schedule 1.

Defined in this notice: lead maternity care

### **DA15 Registration information**

A maternity provider must submit the required registration information to HealthPAC within 20 working days of registering the woman in accordance with the registration form, OMC system or message standard definition, approved by the Ministry of Health from time to time.

Defined in this notice: HealthPAC, maternity provider, message standard definition, OMC, registration, working day

### **DA16 Service delivery information**

A maternity provider must submit service delivery information in accordance with the claim forms, OMC system or message standard definition for lead maternity care approved by the Ministry of Health from time to time.

Defined in this notice: claim, maternity provider, message standard definition, OMC

### **DA17 Health status information**

A maternity provider must submit health status information in accordance with the claim forms, OMC system or message standard definition for lead maternity care, approved by the Ministry of Health from time to time, including—

- (a) the woman's height, weight, and smoking status at the time of registration; and
- (b) the baby's breastfeeding status at 2 weeks of age; and
- (c) the woman's smoking status at 2 weeks following birth.

Defined in this notice: birth, claim, lead maternity care, maternity provider, message standard definition, OMC, registration

**DA18 NIR information**

A maternity provider must give the NIR the following information:

- (a) a full and accurate record of birth details to enable valid NIR registration:
- (b) information for the NIR of any vaccination given to the baby.

Defined in this notice: birth, maternity provider, NIR

*Module: First trimester and second trimester*

**DA19 Service specifications for first and second trimester**

- (1) For a woman in the first trimester of pregnancy, the LMC must provide the following services as required:
  - (a) informing the woman regarding—
    - (i) the role of the LMC, which includes confirming that the LMC will meet the requirements in clauses DA5, DA6, DA7; and
    - (ii) the contact details of the LMC and back-up LMC; and
    - (iii) the standards of care to be expected:
  - (b) providing appropriate information and education about screening, and offering referral for the appropriate screening tests that the Ministry of Health may, from time to time, notify maternity providers about:
  - (c) pregnancy care and advice, including—
    - (i) confirmation of pregnancy; and
    - (ii) ensuring that the woman has a copy of the Ministry of Health's consumer information on primary maternity services; and
    - (iii) all appropriate assessment and care of a woman:
  - (d) care and advice if there is a real and imminent risk of miscarriage, the woman is experiencing a miscarriage or a miscarriage has occurred, including—
    - (i) all appropriate assessment and care of a woman; and
    - (ii) referral for diagnostic tests and treatment, if necessary:
  - (e) assessment, care, and advice provided in relation to a termination of pregnancy, including—
    - (i) referral for diagnostic tests, if necessary; and
    - (ii) referral for a termination of pregnancy.
- (2) For a woman in the second trimester of pregnancy, the LMC must provide all of the following services:



- (a) inform the woman regarding—
  - (i) the availability of pregnancy and parenting education; and
  - (ii) the availability of paid parental leave, if applicable; and
  - (iii) if necessary, any of the items of information listed in clause (1)(a) above:
- (b) at the start of the second trimester or at the time of registration—
  - (i) conduct a comprehensive pregnancy assessment of the woman including, an assessment of her general health, family and obstetric history; a physical examination; and
  - (ii) commence and document a care plan to be used and updated throughout all modules including post natal that meets the guidelines agreed with the relevant professional bodies; and
  - (iii) arrange for the woman to hold a copy of her care plan and her clinical notes (or, if the woman prefers, to be given a copy of her clinical notes following the completion of each module):
- (c) throughout the second trimester—
  - (i) monitor progress of pregnancy for the woman and baby, including early detection and management of any problems; and
  - (ii) update the care plan; and
  - (iii) provide appropriate information and education; and
  - (iv) offer referral for the appropriate screening tests that the Ministry of Health may, from time to time, notify maternity providers about:
- (d) book in to an appropriate maternity facility or birthing unit (unless a homebirth is planned):
- (e) if a general practitioner or obstetrician LMC plans to use hospital midwifery services, make a prior agreement with a maternity facility on the use of its hospital midwifery services.

Defined in this notice: back-up LMC, birthing unit, care plan, first trimester, general practitioner, homebirth, hospital midwifery services, LMC, maternity facility, maternity provider, module, obstetrician, pregnancy and parenting education, primary maternity services, second trimester

#### **DA20 Payment rules: First and second trimester**

- (1) In accordance with this clause, the full fee, the first partial fee, or the last partial fee may be claimed, as the case may require.
- (2) A maternity provider may claim only the first partial fee if the woman was registered with the maternity provider, but changed maternity provider before the start of the 18<sup>th</sup> week of pregnancy.

- (3) A maternity provider may claim only the last partial fee if the woman first registered with the maternity provider after the end of the 17<sup>th</sup> week of pregnancy.
- (4) None of these fees may be claimed if the woman was registered with the maternity provider after the end of the 26<sup>th</sup> week of pregnancy.
- (5) If subclauses (2) to (4) do not apply, the maternity provider may claim the full fee.

Defined in this notice: claim, maternity provider

### *Module: Third trimester*

#### **DA21 Service specification: third trimester**

In addition to the requirements set out under the service specifications for the first and second trimester, the LMC must—

- (a) organise appropriate arrangements for care during labour and birth and following birth, including, if possible, organising for the woman to meet any other practitioners who are likely to be involved in her care; and
- (b) discuss and confirm a plan of care for the baby or babies; and
- (c) provide Ministry of Health information on immunisation and the National Immunisation Register (NIR).

Defined in this notice: labour and birth, LMC, module, NIR, practitioner, second trimester, third trimester

#### **DA22 Payment rules: third trimester**

- (1) In accordance with this clause, either the full fee or first partial fee may be claimed, as the case may require.
- (2) None of these fees may be claimed if the woman was registered with the maternity provider, but changed maternity provider before the start of the 31<sup>st</sup> week of pregnancy.
- (3) A maternity provider may claim only the first partial fee if the woman was registered with the maternity provider, but changed maternity provider before the start of the 35<sup>th</sup> week of pregnancy.
- (4) A maternity provider may claim only the last partial fee if the woman first registered with the maternity provider after the end of the 34<sup>th</sup> week of pregnancy.
- (5) If subclauses (2) to (4) do not apply, the maternity provider may claim the full fee.

Defined in this notice: claim, maternity provider, third trimester

*Module: Labour and birth***DA23 Service specification: labour and birth**

- (1) The LMC is responsible for ensuring that all of the following services are provided:
  - (a) all primary maternity services from the time of established labour, including initial assessment of the woman at her home or at a maternity facility and regular monitoring of the progress of the woman and baby;
  - (b) management of the birth;
  - (c) all primary maternity care until 2 hours after delivery of the placenta, including updating the care plan, attending the birth and delivery of the placenta, suturing of the perineum (if required), initial examination and identification of the baby at birth, initiation of breast feeding (or feeding), care of the placenta, and attending to any legislative requirements regarding birth notification by health professionals;
  - (d) the LMC must make every effort to attend, as necessary, during labour and to attend the birth, including making every effort to attend a woman as soon as practicable —
    - (i) after the woman's arrival at the maternity facility or birthing unit where she will give birth; or
    - (ii) when requested by the woman, for a homebirth;
  - (e) if a LMC is unable to attend the birth because of holiday leave, sick leave, bereavement leave, continuing professional education requirements or other exceptional circumstances, the LMC must make appropriate other arrangements with a back-up LMC:
- (2) For a homebirth, in addition to clause (1), the LMC must—
  - (a) arrange for another midwife, general practitioner, or obstetrician to be available to attend the birth; and
  - (b) maintain equipment (including neonatal resuscitation equipment) and provide the delivery pack and consumable supplies; and
  - (c) ensure that a midwife, general practitioner, or obstetrician remains with the woman for at least 2 hours following the birth.
- (3) For a birthing unit, in addition to clause (1), the LMC must—
  - (a) arrange for a midwife, general practitioner, or obstetrician to be available to attend the birth; and
  - (b) ensure that a midwife, general practitioner, or obstetrician remains with the woman until she is discharged.
- (4) A general practitioner or obstetrician LMC who uses hospital midwifery services in order to provide the full service required during labour and birth must—

- (a) ensure that the respective responsibilities of the LMC and the hospital midwifery services are clearly documented in the care plan, and that a copy of the care plan is given to the hospital midwifery services and to the woman; and
- (b) monitor progress of labour; and
- (c) be available to attend as soon as required at any time during the labour; and
- (d) attend the birth and the delivery of the placenta.

Defined in this notice: back-up LMC, birth, birthing unit, care plan, established labour, general practitioner, homebirth, hospital midwifery services, labour and birth, LMC, maternity facility, midwife, obstetrician, primary maternity services

#### **DA24 Payment rules: labour and birth**

- (1) Only 1 labour and birth fee is payable for a birth (including a multiple birth).
- (2) The payment to be claimed depends on whether the birth is a first birth, VBAC, or subsequent birth.
- (3) If an LMC utilises hospital midwifery services the maternity provider must claim the fee that applies if a general practitioner or obstetrician has used hospital midwifery services.
- (4) A maternity provider may claim the labour and birth fee if the LMC anticipates that clinical responsibility for the labour and birth is to remain with the LMC and circumstances change and clinical responsibility transfers after established labour to secondary maternity.
- (5) The payment for homebirth supplies and support may be claimed only once per woman per pregnancy if a homebirth has occurred.
- (6) The payment for birthing unit support may only be claimed once per woman per pregnancy if the birth occurs in a birthing unit.

Defined in this notice: birth, birthing unit, birthing unit support, claim, established labour, first birth, general practitioner, homebirth, homebirth supplies and support, hospital midwifery services, labour and birth, LMC, maternity provider, obstetrician, secondary maternity, subsequent birth, VBAC

#### **DA25 Service specification: labour and birth (exceptional circumstances)**

The LMC or a back-up LMC must provide a woman with continuing support and continuity of care during the labour and birth, including—

- (a) attendance at the birth if clinical responsibility for the woman is transferred to secondary maternity not more than 48 hours before established labour or birth; or
- (b) if there is no labour and it was anticipated that clinical responsibility for the labour and birth would remain with the LMC, but circumstances change, giving no opportunity for a planned transfer; or

- (c) attendance at an elective caesarean section where requested by the woman and where the LMC has provided second and third trimester care; or
- (d) if there are other exceptional circumstances during labour and birth and the maternity provider makes a written application to the Ministry of Health for a discretionary decision on payment and receives approval.

Defined in this notice: back-up LMC, birth, established labour, labour and birth, LMC, maternity provider, practitioner, secondary maternity

**DA26 Payment rules: labour and birth (exceptional circumstances)**

- (1) This fee may be claimed once per woman per pregnancy.
- (2) A maternity provider may not claim this fee if the maternity provider is claiming a labour and birth fee for the same woman for the same pregnancy.
- (3) If a maternity provider has made a written application to the Ministry of Health for a discretionary decision on payment, the Ministry of Health may approve or decline the application at its sole discretion.

Defined in this notice: claim, labour and birth, maternity provider

**DA27 Service specification: labour and birth (rural support)**

A general practitioner or midwife must provide the following services as required to women during labour and birth:

- (a) urgent care and treatment to support a LMC in a rural or remote rural domicile (as defined in Schedule 2) if the services of an obstetrician or paediatrician are needed but are not available and the LMC requires assistance from another practitioner who has additional maternity skills:
- (b) accompany the woman in an air/road ambulance from a rural or remote rural domicile area (as defined in Schedule 2).

Defined in this notice: general practitioner, labour and birth, LMC, midwife, obstetrician, paediatrician, practitioner

**DA28 Payment rules: labour and birth (rural support)**

Notwithstanding clause DA13(5), a maternity provider may claim 1 labour and birth (rural support) fee per woman per day.

Defined in this notice: claim, labour and birth, maternity provider

*Module: Services following birth*

**DA29 Service specification: services following birth**

- (1) A LMC is responsible for ensuring that all of the following services are provided for both the mother and baby:

- (a) reviewing and updating the care plan and document progress, care given and outcomes, and ensuring that the maternity facility has a copy of the care plan if the woman is receiving inpatient postnatal care:
- (b) postnatal visits to assess and care for the mother and baby in a maternity facility and at home until 6 weeks after the birth, including—
  - (i) a daily visit while the woman is receiving inpatient postnatal care, unless otherwise agreed by the woman and the maternity facility; and
  - (ii) between 5 and 10 home visits by a midwife (and more if clinically needed) including 1 home visit within 24 hours of discharge from a maternity facility; and
  - (iii) a minimum of 7 postnatal visits as an aggregate of DA29 (1) (b) (i) and (ii):
- (c) as a part of the visits in clause (b), examinations of the woman and baby including—
  - (i) a detailed clinical examination of the baby within the first 24 hours of birth; and
  - (ii) a detailed clinical examination of the baby within 7 days of birth; and
  - (iii) a detailed clinical examination of the baby as defined by the Well Child Tamariki Ora National Schedule before transfer to a well child provider; and
  - (iv) a postnatal examination of the woman at a clinically appropriate time and before transfer to the woman's primary care provider:
- (d) as a part of the visits in clause (b), the provision of care and advice to the woman, including—
  - (i) assistance with and advice about breastfeeding and the nutritional needs of the woman and baby; and
  - (ii) assessment for risk of postnatal depression and/or family violence, with appropriate advice and referral; and
  - (iii) provide appropriate information and education about screening; and
  - (iv) offer to provide or refer the baby for the appropriate screening tests specified by the Ministry of Health and receive and follow up the results of these tests as necessary:
  - (v) provision of Ministry of Health information on immunisation and the National Immunisation Register (NIR) and provision of any appropriate or scheduled immunisations consented to; and
  - (vi) provision of or access to services, as outlined in the Well Child Tamariki Ora National Schedule; and
  - (vii) advice regarding contraception; and

- (viii) parenting advice and education.
- (2) If a birth has occurred in a maternity facility, the LMC, in discussion with the woman and the maternity facility, must determine when the woman is clinically ready for discharge.
- (3) If a general practitioner or obstetrician LMC uses hospital midwifery services, the LMC must—
- (a) make a prior agreement with the maternity facility on the use of the hospital midwifery services; and
  - (b) ensure that the respective responsibilities of the LMC and the hospital midwifery services are clearly documented in the care plan and that a copy of the care plan is given to the hospital midwifery services and to the woman; and
  - (c) be available to provide consultation and treatment on request.

Defined in this notice: birth, care plan, general practitioner, home visit, hospital midwifery services, inpatient postnatal care, LMC, maternity facility, maternity provider, midwife, NIR, obstetrician, well child provider

#### **DA30 Payment rules: services following birth**

- (1) The fees for inpatient postnatal care may be claimed only if the woman receives inpatient postnatal care.
- (2) The fees for no inpatient postnatal care may be claimed only if the woman does not receive inpatient postnatal care.
- (3) In addition, in accordance with this clause, the full fee, the first partial fee or the last partial fee may be claimed, as the case may require.
- (4) If a LMC uses hospital midwifery services the maternity provider must claim the fee that applies if a general practitioner or obstetrician has used hospital midwifery services.
- (5) A maternity provider may claim only the first partial fee if the woman was registered with the maternity provider, but changed maternity provider during the first, second or third week following birth.
- (6) A maternity provider may claim only the last partial fee if the woman first registered with the maternity provider during the fourth, fifth or sixth week following birth.
- (7) If subclauses (5) and (6) do not apply, the maternity provider may claim the full fee.
- (8) Only 1 payment for services following birth will be paid per woman, per pregnancy except where the mother and baby have different residential addresses. If separate fees for services following birth are sought, details of the circumstances must be provided with the claim. In particular:
  - (a) for the claim for services following birth for the birth mother, the birth mother's NHI and the baby's NHI must be provided on the claim;
  - (b) for the claim for services following birth for the baby and its caregiver, the caregiver's NHI and the baby's NHI must be provided on the claim.

In addition, the caregiver must be registered with the maternity provider.

- (9) The fee for additional postnatal visits may be claimed only once per woman if the LMC has provided 12 or more postnatal visits. This fee may not be claimed by an LMC who has used hospital midwifery services.

Defined in this notice: additional postnatal visits, birth, claim, general practitioner, hospital midwifery services, inpatient postnatal care, LMC, maternity provider, NHI, obstetrician, services following birth

**DA31 Payment rules: services following birth: rural travel**

- (1) Payment for rural travel relates to the provision of services following birth and may be claimed only after the services following birth module is completed.
- (2) A maternity provider may claim payment for rural travel if the woman's usual place of residence is in a domicile identified as semi rural, rural or remote rural as listed in Schedule 2.
- (3) The semi-rural, rural, and remote rural fees are separate fees and not cumulative. In addition, in accordance with this clause, the full fee, the first partial fee or the last partial fee may be claimed, as the case requires.
- (4) A maternity provider may claim only the first partial fee if the woman concerned was registered with the maternity provider, but changed maternity provider during the first, second or third week following birth.
- (5) A maternity provider may claim only the last partial fee if the woman concerned first registered with the maternity provider during the fourth, fifth or sixth week following birth.
- (6) If subclauses (4) and (5) do not apply, a maternity provider may claim the full fee.
- (7) Only 1 payment for rural travel will be paid per woman, per pregnancy except where the mother and baby have different residential addresses. If separate fees for rural travel are sought, details of the circumstances must be provided with the claim. In particular:
- (a) for the claim for rural travel for the birth mother, the birth mother's NHI and the baby(s) NHI must be provided on the claim;
  - (b) for the claim for rural travel for the baby(s) and its caregiver, the caregiver's NHI and the baby's NHI must be provided on the claim. In addition, the caregiver must be registered with the maternity provider.
- (8) A rural travel fee may not be claimed by a LMC who has used hospital midwifery services.

Defined in this notice: birth, caregiver, claim, hospital midwifery services, LMC, maternity provider, module, NHI, rural travel, services following birth, usual place of residence



## Subpart DB—Maternity non-LMC services

### *General information about maternity non-LMC services*

#### **DB1 Aim of maternity non-LMC services**

- (1) The aim of maternity non-LMC services is to support the provision of lead maternity care.
- (2) Maternity non-LMC services are services that are either an addition to lead maternity care or represent services sought on a casual basis outside lead maternity care.
- (3) Maternity non-LMC services do not include specialist medical maternity services (see subpart DC).
- (4) Maternity non-LMC services are available to child-bearing women and their newborn babies.

Defined in this notice: lead maternity care, maternity non-LMC services, specialist medical maternity services

#### **DB2 Charging for maternity non-LMC services**

- (1) Maternity non-LMC services provided by a practitioner who is not an obstetrician must be provided free of charge to persons who are eligible to receive them.
- (2) A part charge may be charged to eligible people for maternity non-LMC services provided by an obstetrician.

Defined in this notice: maternity non-LMC services, obstetrician, practitioner

#### **DB3 Where maternity non-LMC services may be provided**

Maternity non-LMC services may be provided in—

- (a) the woman's home; or
- (b) the baby's home (if it different from the mother's home); or
- (c) the practitioner's rooms or practice.

Defined in this notice: maternity non-LMC services, practitioner

#### **DB4 Practitioners who may not provide maternity non-LMC services**

None of the following practitioners may provide maternity non-LMC services:

- (a) a practitioner who is the woman's LMC:
- (b) an employee [or contractor] of the same maternity provider as the woman's LMC.

Defined in this notice: LMC, maternity non-LMC services, practitioner

**DB5 Service linkages**

Providers of maternity non-LMC services will also maintain linkages with local providers of the following services:

- (a) primary health services:
- (b) lead maternity care:
- (c) secondary maternity services:
- (d) ultrasound scanning services.

Defined in this notice: lead maternity care, maternity non-LMC services, primary health services, secondary maternity

**DB6 Exclusions**

Maternity non-LMC services do not include the following:

- (a) lead maternity care:
- (b) ultrasound scanning:
- (c) any services provided by a DHB provider arm.

Defined in this notice: DHB provider arm, lead maternity care, maternity non-LMC services

**DB7 General requirements for making claims for maternity non-LMC services**

- (1) Payments for maternity non-LMC services may be claimed for services provided in accordance with subpart DB.
- (2) A maternity provider with whom the woman, through her LMC, is registered may not claim maternity non-LMC services.
- (3) Claims may be made only after the item of service has been completed.

Defined in this notice: claim, LMC, maternity non-LMC services, maternity provider

**DB8 Reporting requirements: purchase units**

- (1) The following purchase unit applies to maternity non-LMC services

Purchase unit ID	Purchase unit short name
WM1000	Maternity non-LMC services

- (2) Purchase units are defined in the Ministry of Health data dictionary and correspond to the relevant fees specified in Schedule 1.

Defined in this notice: maternity non-LMC services

**DB9 Reporting requirements: service delivery information**

A maternity provider must submit service delivery information in accordance with the claim forms, OMC system or message standard definition for maternity non-LMC services approved by the Ministry of Health from time to time.

Defined in this notice: claim, maternity provider, maternity non-LMC services, message standard definition, OMC

*Module: Non LMC first trimester***DB10 Service specification: first trimester**

For a woman in the first trimester of pregnancy a general practitioner or midwife, who works for the PHO practice with whom the woman is enrolled for primary health services, must provide the following services as required:

- (a) informing the woman regarding her options for choosing a LMC:
- (b) providing appropriate information and education about screening, and offering referrals to a provider for the appropriate screening tests that the Ministry of Health may, from time to time, notify maternity providers about:
- (c) providing written information including screening test results and relevant health information to the woman and her LMC on the care provided:
- (d) pregnancy care and advice, including—
  - (i) confirmation of pregnancy; and
  - (ii) review of current and past health status; and
  - (iii) health information and education including nutrition, smoking, alcohol and drugs; and
  - (iv) ensuring that the woman has a copy of the Ministry of Health's consumer information on primary maternity services; and
  - (v) all appropriate assessment of a woman including blood pressure and assessment of uterine size:
- (e) care and advice if there is a real and imminent risk of miscarriage, the woman is experiencing a miscarriage or a miscarriage has occurred, including—
  - (i) all appropriate assessment and care of a woman; and
  - (ii) referral for diagnostic tests and treatment, if necessary:
- (f) assessment, care, and advice provided in relation to a termination of pregnancy, including—
  - (i) referral for diagnostic tests, if necessary; and
  - (ii) referral for a termination of pregnancy.

Defined in this notice: first trimester, general practitioner, LMC, maternity provider, midwife, PHO, primary health services, primary maternity services

**DB11 Payment rules: first trimester**

- (1) This fee may not be claimed if the woman was enrolled with the maternity provider, who is a PHO, after the end of the 12<sup>th</sup> week of pregnancy.
- (2) The maternity provider may claim the first trimester services with threatened miscarriage, miscarriage or termination fee if the woman requires services in accordance with clause DB10(e) or (f).
- (3) If subclause (2) does not apply then the maternity provider may claim the first trimester services without threatened miscarriage, miscarriage or termination fee.
- (4) A maternity provider may only claim one non-LMC first trimester services fee per woman per pregnancy.

Defined in this notice: claim, first trimester, maternity provider, miscarriage, PHO

***Module: Urgent pregnancy care (non-LMC maternity care)*****DB12 Service specification: urgent normal hours pregnancy care**

- (1) A general practitioner, midwife, or obstetrician must provide the services listed in clause (2) to a woman who—
  - (a) is in the first, second or third trimester; and
  - (b) presents between the hours of 8am and 6pm on weekdays, excluding public holidays; and
  - (c) has either made an attempt and failed to access:
    - (i) her LMC (where the woman is registered with a LMC); or
    - (ii) her enrolling PHO practice (where the woman is in the first trimester); or
  - (d) is away from her usual place of residence.
- (2) The services that must be provided include—
  - (a) pregnancy care and advice in response to an urgent request received where the nature of the request is urgent (but not necessarily the service ultimately provided); and
  - (b) emergency referral to a specialist if necessary; and
  - (c) if the woman has an LMC, the provision of information to the woman's LMC on the care provided.

Defined in this notice: away from her usual place of residence, first trimester, general practitioner, LMC, maternity provider, midwife, obstetrician, PHO, second trimester, specialist, third trimester, usual place of residence

**DB13 Service specification: urgent out of hours pregnancy care**

- (1) A general practitioner, midwife, or obstetrician must provide the services listed in clause (2) to a woman who—
  - (a) is in the first, second or third trimester; and
  - (b) presents between the hours of 6pm and 8am on weekdays or at all times on Saturday, Sunday, and public holidays; and
  - (c) has either made an attempt and failed to access:
    - (i) her LMC (where the woman is registered with a LMC); or
    - (ii) her enrolling PHO practice (where the woman is in the first trimester); or
  - (d) is away from her usual place of residence.
- (2) The services that must be provided include—
  - (a) pregnancy care and advice in response to an urgent request received where the nature of the request is urgent (but not necessarily the service ultimately provided); and
  - (b) emergency referral to a specialist if necessary; and
  - (c) if the woman has an LMC, the provision of information to the woman's LMC on the care provided.

Defined in this notice: away from her usual place of residence, first trimester, general practitioner, LMC, midwife, obstetrician, PHO, second trimester, specialist, third trimester, usual place of residence

**DB14 Payment rules: urgent pregnancy care**

- (1) A maternity provider may claim only 1 urgent pregnancy care fee per woman per day.
- (2) These fees may not be claimed for services provided to a woman in the first trimester by that woman's enrolling PHO practice.

Defined in this notice: claim, first trimester, maternity provider, PHO

*Module: Non-LMC labour and birth (rural support)***DB15 Service specification: Non-LMC labour and birth (rural support)**

A general practitioner or midwife must provide the following services as required to women during labour and birth:

- (a) urgent care and treatment to support a LMC in a rural or remote rural domicile (as defined in Schedule 2) if the services of an obstetrician or paediatrician are needed but are not available and the LMC requires assistance from another practitioner who has additional maternity skills:

- (b) accompany the woman in an air/road ambulance from a rural or remote rural domicile area (as defined in Schedule 2).

Defined in this notice: general practitioner, labour and birth, LMC, midwife, obstetrician, paediatrician, practitioner

**DB16 Payment rules: labour and birth (rural support)**

A maternity provider may only claim 1 non-LMC labour and birth (rural support) fee per woman per day.

Defined in this notice: claim, labour and birth, maternity provider

*Module: Urgent postnatal care*

**DB17 Service specification: urgent postnatal care**

- (1) A general practitioner, midwife or obstetrician must provide the services listed in clause (2) to postnatal women and their babies who—
- (a) have made an attempt and failed to access their LMC (where the woman is registered with a LMC), or
  - (b) are away from their usual place of residence.
- (2) The services that must be provided include—
- (a) an appropriate assessment, care and treatment for a woman and her baby who present to the practitioner for care during the 6 week period following birth; and
  - (b) provision of information to the LMC on the care provided.

Defined in this notice: birth, general practitioner, LMC, practitioner, midwife, obstetrician, practitioner, usual place of residence

**DB18 Payment rules: urgent postnatal care**

A maternity provider may only claim 1 urgent postnatal care fee for each eligible person per day for who care is provided.

Defined in this notice: claim, maternity provider

## Subpart DC—Specialist medical maternity services

### *General information about specialist medical maternity services*

#### **DC1 Aim of specialist medical maternity services**

- (1) The aim of specialist medical maternity services is for specialists to provide services that support primary maternity care.
- (2) Specialist medical maternity services are available to child-bearing women and their newborn babies.

Defined in this notice: specialist, primary maternity services

#### **DC2 Charging for specialist medical maternity services**

A part charge may be charged for specialist medical maternity services.

Defined in this notice: specialist medical maternity services

#### **DC3 Where specialist medical maternity services may be provided**

Specialist medical maternity services may be provided in the following places, except where these settings are a part of a facility owned or operated by a DHB provider arm:

- (a) the specialist's rooms:
- (b) a maternity facility:
- (c) a birthing unit:
- (d) a woman's or baby's home.

Defined in this notice: birthing unit, DHB provider arm, maternity facility, specialist, specialist medical maternity services

#### **DC4 Referral criteria**

Specialist medical maternity services may only be provided to women and babies on referral from another practitioner or a family planning practitioner if the specialist who provides the specialist medical maternity services is not the practitioner or family planning practitioner making the referral, and—

- (a) for ultrasound scans, there is a written referral signed by a midwife, general practitioner, obstetrician, or family planning practitioner specifying a clinical reason for the referral that is in accordance with clause DC11; or
- (b) for consulting obstetrician services, there is a written referral from a general practitioner or midwife and the referral specifies a clinical reason for the referral that is in accordance with the Referral Guidelines; or
- (c) for consulting paediatrician services, if there is a written referral from the LMC or the back-up LMC and—

- (i) the referral specifies a clinical reason for the referral that is in accordance with referral guidelines; and
- (ii) if a back-up LMC makes a referral, the referral should be identified as being signed by the back-up LMC on behalf of the LMC.

Defined in this notice: back-up LMC, family planning practitioner, general practitioner, LMC, midwife, obstetrician, paediatrician, practitioner, referral guidelines, specialist, specialist medical maternity services

#### **DC5 Quality of service requirements**

- (1) A nuchal translucency ultrasound scan must be undertaken by a practitioner with the appropriate training and access to risk estimation software, and appropriate quality of equipment.
- (2) Practitioners performing or supervising nuchal translucency ultrasound scans must have obtained the appropriate accreditation recognised by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Royal Australian and New Zealand College of Radiologists.

Defined in this notice: maternity provider, practitioner

#### **DC6 Service linkages**

Providers of specialist medical maternity services will also maintain linkages with local providers of the following services:

- (a) primary health services
- (b) lead maternity care
- (c) secondary maternity services

Defined in this notice: lead maternity care, primary health services, secondary maternity, specialist medical maternity services

#### **DC7 Exclusions**

Specialist medical maternity services do not include the following:

- (a) lead maternity care
- (b) ultrasound scanning except for reasons listed in clause DC11(3)
- (c) any services provided by the provider arm of a DHB
- (d) any services provided by a practitioner if—
  - (i) the practitioner is an employee of a DHB provider arm; and
  - (ii) the practitioner provides the maternity service in their capacity as an employee of a DHB provider arm.

Defined in this notice: DHB provider arm, lead maternity care, practitioner, specialist medical maternity services



**DC8 Reporting requirements: purchase units**

- (1) The following purchase units apply to specialist medical maternity services.

Purchase unit ID	Purchase unit short name
WM1005	Maternity radiology specialist consult
WM1002	Maternity obstetrician specialist consult
WM1004	Maternity paediatrician specialist consult

- (2) Purchase units are defined in the Ministry of Health data dictionary and correspond to the relevant fees specified in Schedule 1.

Defined in this notice: specialist medical maternity services

**DC9 Reporting requirements: service delivery information**

A maternity provider must give service delivery information in accordance with the claim forms, OMC system or message standard definition for specialist medical maternity services approved by the Ministry of Health from time to time.

Defined in this notice: claim, maternity provider, message standard definition, OMC, specialist medical maternity services

*Module: Ultrasound scans***DC10 Service specification: ultrasound scan**

A maternity provider who provides an ultrasound scan must provide the following services if a payment for services is claimed:

- (a) conduct an ultrasound scan according to quality standards recognised by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Royal Australian and New Zealand College of Radiologists:
- (b) ensure that a radiologist or an obstetrician with a Diploma of Diagnostic Ultrasound (or equivalent as determined by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists) is available to tailor the radiological examination to the clinical situation by—
  - (i) being physically present at the place where the examination is being performed; or
  - (ii) when using teleradiology, being available to review the transmitted diagnostic images before the woman's departure from the place where the scan is conducted:
- (c) obtain a permanent visual record of the scan:
- (d) provide the referring general practitioner, midwife, obstetrician, or family planning practitioner with a written interpretation of the scan by

a radiologist or an obstetrician with a Diploma of Diagnostic Ultrasound (or equivalent as determined by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists) in a timely manner.

Defined in this notice: claim, family planning practitioner, general practitioner, maternity provider, midwife, obstetrician, radiologist

#### DC11 Payment rules: ultrasound scan

- (1) This fee may be claimed only if an appropriate referral has been received in accordance with clause DC4(a).
- (2) A code corresponding to the relevant indication in subclause (3) must be stated on both the referral form and on the claim.
- (3) The following list identifies the approved clinical indications for ultrasound in pregnancy. The listed conditions are mandatory indications and must be included on the referral form:

Code	Clinical indication	Comment
TA	Threatened abortion	Scan at time of bleeding. Serial scans may be necessary if bleeding persists.
EP	Suspected ectopic pregnancy	e.g. Previous tubal surgery, PID or ectopic. Suggestive symptoms (e.g. abdominal pain).
PM	Pelvic mass in pregnancy	Any palpable abnormality in early pregnancy.
UD	Uterus not equal to dates	If discrepancy > 4 weeks, or discrepancy in amniotic fluid.
BA	Prior to booking CVS or amniocentesis or Nuchal Translucency	When unsure dates.
CT	Consideration of termination	
NT	Dating and early evaluation for chromosomal abnormality	Nuchal translucency assessment at 11-13+6 weeks, assessment for gestational age, diagnosis of multiple pregnancy.
NF	Early evaluation for chromosomal abnormality follow up	In cases where the first scan was technically unsuccessful.
AN	Anatomy	Scan to confirm dates, assess foetal anatomy and placental position. Performed at 18-20 weeks ideally.
AF	Anatomy follow up	In cases where the first scan was technically unsuccessful.
GR	Suspected growth abnormality (IUGR or macrosomia)	Clinical suspicion of abnormal growth of foetus (IUGR or macrosomia) or abnormal volume of amniotic fluid.

Code	Clinical indication	Comment
GF	Suspected growth abnormality (IUGR or macrosomia) follow up	To assess growth trend (2 weeks after GR scan).
PL	Check placenta	To check placental site at around 36 weeks.
AH	Antepartum haemorrhage	Bleeding in pregnancy. If serial scans are required refer to secondary maternity services.
AP	Abdominal pain	Abdominal pain in pregnancy.
MP	Malpresentation	To assess fetal position and size, after 36 weeks.
FC	Suspected foetal compromise	Significant reduction in foetal movements.
FD	Suspected intrauterine foetal death	
PP	Maternal postpartum	For suspected retained products or postpartum bleeding.

- (4) A maternity provider may claim only 1 ultrasound scan fee per woman per date of service.
- (5) A claim for a subsequent scan requires a new referral in accordance with DC4(a).

Defined in this notice: claim, maternity provider

### *Module: Obstetrician services*

#### **DC12 Service specification: obstetrician services**

- (1) An obstetrician will provide the following services if a payment for consulting obstetrician services is claimed:
- advising, caring for, and treating, a woman:
  - referring a woman to other specialist maternity services, if clinically warranted:
  - forwarding to the woman's LMC documentation detailing advice and treatment given or recommended.

Defined in this notice: claim, LMC, obstetrician

#### **DC13 Payment rules: obstetrician services**

- (1) A fee for consulting obstetrician services may be claimed for consulting obstetrician services only if an appropriate referral has been received in accordance with DC4(c).
- (2) A fee for consulting obstetrician services may be claimed only if the obstetrician attends the woman in person.

- (3) Payment of a fee for consulting obstetrician services will be made according to whether it is a first consultation or a subsequent consultation.
- (4) Each claim for either a first consultation or a subsequent consultation requires a separate referral in accordance with clause DC4(c).
- (5) A maternity provider may claim only 1 consulting obstetrician services fee per woman per referral reason per date of service, regardless of whether it is a first consultation or subsequent consultation.

Defined in this notice: claim, first consultation, maternity provider, obstetrician, subsequent consultation

### *Module: Paediatrician services*

#### **DC14 Service specification: paediatrician services**

A paediatrician must provide the following services if a fee for consulting paediatrician services is claimed:

- (a) advising, caring for, and treating a woman, foetus, or baby:
- (b) forwarding documentation to the LMC of the advice and treatment given or recommended.

Defined in this notice: claim, LMC, paediatrician

#### **DC15 Payment rules: paediatrician services**

- (1) A fee for consulting paediatrician services may be claimed only if an appropriate referral has been received in accordance with clause DC4(c).
- (2) A fee for paediatrician services may be claimed only if the paediatrician attends the baby in person.
- (3) Payment of a fee for paediatrician services will be made according to whether it is a first consultation or a subsequent consultation.
- (4) Each claim for either a first consultation or a subsequent consultation requires a separate referral in accordance with clause DC4(c).
- (5) A maternity provider may claim only 1 consulting paediatrician services fee per baby per referral reason per date of service, regardless of whether it is a first consultation or subsequent consultation.

Defined in this notice: claim, first consultation, maternity provider, paediatrician, subsequent consultation

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## Schedule 1

### Fees

<b>1</b>	<b>Maternity LMC Antenatal Services (WM1007)</b>	Fees (GST Excl)
(1)	first and second trimester	
	(a) full fee	\$300.00
	(b) first partial fee	\$175.00
	(c) last partial fee	\$125.00
(2)	third trimester	
	(a) full fee	\$290.00
	(b) first partial fee	\$125.00
	(c) last partial fee	\$165.00
<b>2</b>	<b>Maternity LMC Labour and Birth Services (WM1008)</b>	Fees (GST Excl)
(1)	labour and birth	
	(a) first birth	\$1,090.00
	(b) VBAC	\$1,090.00
	(c) subsequent birth	\$855.00
(2)	labour and birth if a general practitioner or obstetrician has used hospital midwifery services	
	(a) first birth	\$470.00
	(b) VBAC	\$470.00
	(c) subsequent birth	\$360.00
(3)	homebirth supplies and support	\$440.00
(4)	birthing unit support	\$250.00
(5)	labour and birth (exceptional circumstances)	\$310.00
(6)	labour and birth (rural support)	\$500.00

<b>3</b>	<b>Maternity LMC Postnatal Services (WM1009) (Services Following Birth)</b>	Fees (GST Excl)
(1)	services following birth	
	(a) received inpatient postnatal care	
	(i) full fee	\$480.00
	(ii) first partial fee	\$240.00
	(iii) last partial fee	\$240.00
	(b) no inpatient postnatal care	
	(i) full fee	\$540.00
	(ii) first partial fee	\$270.00
	(iii) last partial fee	\$270.00
	(c) additional postnatal visits	\$155.00
(2)	services following birth if a general practitioner or obstetrician has used hospital midwifery services	
	(a) received inpatient postnatal care	
	(i) full fee	\$90.00
	(ii) first partial fee	\$45.00
	(iii) last partial fee	\$45.00
	(b) no inpatient postnatal care	
	(i) full fee	\$120.00
	(ii) first partial fee	\$60.00
	(iii) last partial fee	\$60.00
(3)	rural travel	
	(a) semi rural	
	(i) full fee	\$150.00
	(ii) first partial fee	\$75.00
	(iii) last partial fee	\$75.00
	(b) rural	
	(i) full fee	\$225.00
	(ii) first partial fee	\$112.50
	(iii) last partial fee	\$112.50

(c)	remote rural	
(i)	full fee	\$400.00
(ii)	first partial fee	\$200.00
(iii)	last partial fee	\$200.00
<b>4</b>	<b>Maternity Non-LMC Services (WM1000)</b>	Fees (GST Excl)
(1)	first trimester services	
(a)	without threatened miscarriage, miscarriage or termination	\$110.00
(b)	with threatened miscarriage, miscarriage or termination	\$150.00
(2)	urgent normal hours pregnancy care	\$40.00
(3)	urgent out of hours pregnancy care	\$60.00
(4)	non-LMC labour and birth (rural support)	\$500.00
(5)	urgent postnatal care	\$40.00
<b>5</b>	<b>Maternity radiology specialist consult (WM1005)</b>	Fees (GST Excl)
(1)	ultrasound scans	\$78.00
<b>6</b>	<b>Maternity obstetrician specialist consult (WM1002)</b>	Fees (GST Excl)
(1)	consulting obstetrician services	
(a)	first consultation	\$80.00
(b)	subsequent consultation	\$40.00
<b>7</b>	<b>Maternity paediatrician specialist consult (WM1004)</b>	Fees (GST Excl)
(1)	consulting paediatrician services	
(a)	first consultation	\$90.00
(b)	subsequent consultation	\$40.00

## Schedule 2

### Rural travel

#### 1 General information

- (1) The fees for rural travel are stated in Schedule 2 and payment rules for rural travel are stated in clause DA31.
- (2) The area units contained in clause 2 are based on the census area unit boundaries as set by Statistics New Zealand and as updated by Statistics New Zealand from time to time. Changes are generally only made:
- following an alteration of local authority boundaries; or
  - as part of a general review carried out in the year prior to each census of population and dwellings; or
  - during the fifteen or twenty year review of statistically defined urban areas.
- (3) If an area unit in the following table is deleted by Statistics New Zealand it is deemed to have been deleted from clause 2.
- (4) If a new area unit is created by Statistics New Zealand the Ministry, at its discretion, may decide what rural status to assign to the new area unit, if any.
- (5) If an area unit is not in clause 2 and has a description that includes water (such as inland water, harbour, inlet, etc.) then the maternity provider may apply to the Ministry of Health and the Ministry of Health may decide what rural status to assign to the area unit, if any.

Defined in this notice: maternity provider, rural travel

#### 2 Rural Area Unit Classifications

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural
Auckland DHB	Auckland City	Aiguilles Island	616400			X
		Browns Island	616300			X
		Cape Barrier	616100			X
		Great Barrier Island	521000			X
		Islands-Motutapu, Rangitoto, Rakino	520900			X
		Kaikoura and Rangiahua Islands	616001			X
		Little Barrier Island	615900			X
		Mokohinau Island	615800			X
		Rakitu Island	616200			X
		Waiheke Island	520801			X
Bay of Plenty DHB	Kawerau District	Kawerau	542600		X	
	Opotiki District	Cape Runaway	542903			X
		Oponae	542904			X
		Opotiki	542800		X	
		Te Kaha	542901			X
		Waiotahi	542906		X	



DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		White Island	619900			X	
	Tauranga District	Bethlehem	536514	X			
		Kairua	536512	X			
		Motiti Island	618400			X	
		Motuopae Island	536510			X	
		Papamoa Beach East	536200	X			
	Western Bay of Plenty District	Aongatete	536615			X	
		Athenree	535700			X	
		Island View-Pios Beach	536400			X	
		Kaimai	536630			X	
		Katikati Community	535800			X	
		Maketu Community	535900			X	
		Matakana Island	536611			X	
		Mayor Island	618500				X
		Minden	536620			X	
		Ohauiti-Ngapeke	536641	X			
		Omokoroa Community	536000	X			
		Paengaroa	536651			X	
		Pongakawa	536654			X	
		Rangioru	536653			X	
		Tahawai	536614			X	
		Te Puke East	538502			X	
		Te Puke West	538501			X	
	Te Puna	536503	X				
	Upper Papamoa	536642			X		
	Waihi Beach	534100			X		
	Whakatane District	Allandale-Mokorua	542440	X			
		Coastlands	542421	X			
		Edgecumbe Community	542200			X	
		Maraetotara	542514	X			
		Matahina-Minginui	542550				X
		Matata	542000			X	
		Moutohora Island	619701				X
		Murupara	542700				X
		Ohope	541900	X			
		Orini	542511	X			
		Otakiri	542530			X	
		Poroporo	542520	X			
		Rotoma	542540			X	
		Taneatua Community	542100			X	
		Te Teko	542300			X	
Trident		542430	X				
Urewera		542562				X	
Waimana	542561			X			
Whakatane North	542410	X					
Whakatane West	542422	X					
Canterbury DHB	Ashburton District	Allenton	597810		X		
		Central Ashburton East	597840		X		
		Central Ashburton West	597820		X		
		Chertsey	597741		X		
		Fairton	597711		X		
		Hampstead	597850		X		
		Hinds	597730		X		
		Methven	597600		X		
		Mt Somers	597720			X	
		Netherby	597830		X		
		Plains Railway	597712		X		
		Rakaia	597742		X		
		Tinwald	597860		X		

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural
	Banks Peninsula District	Akaroa	596800		X	
		Diamond Harbour	596502		X	
		Governors Bay	596503		X	
		Little River	597101		X	
		Lyttelton	596400	X		
		Okains Bay	596900		X	
		Port Levy	596600		X	
		Quail Island	596504	X		
	Christchurch City	Belfast	590400	X		
		Mcleans Island	587902	X		
		Styx	590601	X		
		Templeton	587820	X		
	Hurunui District	Amberley	585802		X	
		Amuri	585503			X
		Cheviot	585602			X
		Culverden	585504			X
		Hanmer Springs	585502			X
		Hurunui	585700			X
		Lake Tennyson	580900			X
		Leithfield	585803		X	
		Parnassus	585601			X
	Kaikoura District	Kaikoura Rural	581500			X
		Kaikoura Township	581400			X
	Selwyn District	Burnham Military Camp	587020			X
		Darfield	586900			X
		Dunsandel	597503			X
		Kirwee	587010			X
		Leeston	597300			X
		Lincoln	597200			X
		Malvern	587100			X
		Prebbleton	587841	X		
		Rolleston	597502			X
		Selwyn-Rakaia	597506			X
		Southbridge	597400			X
		Springston	597504			X
		Taitapu	587905			X
		West Melton	587904			X
	Waimakariri District	Ashley	585808			X
		Ashley Gorge	586801			X
		Camside	586001	X		
		Clarkville	586501	X		
		Coldstream	586118			X
		Cust	586114			X
Eyreton		586602			X	
Fernside		586116			X	
Kaiapoi North		586401	X			
Kaiapoi South		586402	X			
Kaiapoi West		586502	X			
Loburn		585807			X	
Mairaki		586115			X	
Okuku		585806			X	
Oxford		586802			X	
Pines-Kairaki Beach		586002	X			
Rangiora East		586303			X	
Rangiora North		586301			X	
Rangiora West		586302			X	
Sefton		585805			X	
Southbrook	586304			X		
Tuahiwi	586117			X		

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Waikuku	586112		X		
		West Eyreton	586601		X		
		Woodend	586120		X		
Capital and Coast DHB	Kapiti Coast District	Kaitawa	563920		X		
		Kapiti Island	566301			X	
		Maungakotukutuku	566302		X		
		Otaihanga	565902		X		
		Paekakariki	566200		X		
		Paraparaumu Beach North	565901		X		
		Paraparaumu Beach South	565903		X		
		Paraparaumu Central	566000		X		
		Raumati Beach	566101		X		
		Raumati South	566102		X		
		Waikanae Beach	563701		X		
		Waikanae East	563703		X		
	Porirua City	Endeavour	565602	X			
		Mana Island	572300			X	
		Paekakariki Hill	565700		X		
		Pauatahanui	565601	X			
		Plimmerton	571900	X			
		Pukerua Bay	571800	X			
		Resolution	565603	X			
	Wellington City	Grenada	573521	X			
		Makara-Ohariu	577700		X		
	Counties Manakau DHB	Areas Outside Territorial Authorities	Hingaia	521201	X		
Franklin District		Awhitu	521151			X	
		Bledisloe Park	525922		X		
		Bombay	521160		X		
		Buckland	521113		X		
		Eden Road-Hill Top	521112		X		
		Glenbrook	521152		X		
		Hunua	521132		X		
		Kingseat	521122		X		
		Mangatawhiri	521133			X	
		Onewhero	526701			X	
		Opuawhanga	521115		X		
		Otaua	521153		X		
		Paerata-Cape Hill	521111		X		
		Patumahoe	521121		X		
		Pokeno	521131		X		
		Pukekohe North	525910		X		
		Pukekohe West	525921		X		
		Redoubt	521114		X		
		Runciman	521302	X			
		South Waiuku	526102		X		
Tuakau		526200		X			
Waiuku		526101		X			
Whangapouri Creek		521202	X				
Manukau City		Beachlands-Maraetai	523300	X			
		Clevedon	525200		X		
		Turanga	523202	X			
Papakura District		Bremner	521203	X			
		Drury	521301	X			
Hawkes Bay DHB		Central Hawke's Bay District	Elsthorpe-Flemington	549602			X
			Otane	549400		X	
			Porangahau	549601			X
			Takapau	549000		X	

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural		
		Tikokino	549200		X			
		Waipawa	549100		X			
		Waipukurau	549500		X			
	Chatham Islands County	Chatham Islands	597000			X		
	Hastings District		Bare Island	620904			X	
			Bridge Pa	545842	X			
			Eskdale	545812	X			
			Haumoana	545740	X			
			Iona	548820	X			
			Maraekakaho	545841		X		
			Omahu	545822	X			
			Pakipaki	545852	X			
			Pakowhai	545832	X			
			Poukawa	545851			X	
			Puketitiri	545912				X
			Sherenden-Puketapu	545821			X	
			Tangoio	545811			X	
			Te Mata	548830	X			
			Tutira	545911				X
			Waimarama	545860			X	
	Waiohiki	545831	X					
	Whanawhana	545913				X		
	Napier City		Ahuriri	546200	X			
			Awatoto	545632	X			
			Bay View	545611	X			
			Bluff Hill	546802	X			
			Greenmeadows	547100	X			
			Hospital Hill	546801	X			
			Maraenui	546700	X			
			Marewa	546600	X			
			Mclean Park	546902	X			
			Meeanee	545631	X			
			Nelson Park	546901	X			
			Onekawa Central	546300	X			
			Onekawa South	546500	X			
			Onekawa West	546400	X			
			Pirimai	547400			X	
			Poraiti	545621	X			
			Tamatea North	547001	X			
			Tamatea South	547002	X			
			Taradale North	547200	X			
	Taradale South	547300	X					
	Westshore	546100	X					
	Wairoa District		Frasertown	545202			X	
			Mahia	545304			X	
			Maungataniwha	545205			X	
			Nuhaka	545303			X	
Raupunga			545301			X		
Ruakituri-Morere			545204			X		
Tuai			545201			X		
Wairoa			545500			X		
Whakaki			545302			X		
Hutt DHB	Lower Hutt City	Belmont	569400	X				
		Eastbourne	570300	X				
		Fernlea	565000	X				
		Glendale	564800	X				
		Haywards-Manor Park	569600	X				

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Homedale East	565300	X			
		Homedale West	565200	X			
		Kelson	569500	X			
		Manuka	568104	X			
		Naenae North	568302	X			
		Pencarrow	565400			X	
		Tawhai	568101	X			
	Upper Hutt City	Akatarawa	566610	X			
		Cloustonville	567901			X	
		Heretaunga Park	564510	X			
		Mangaroa	567902			X	
		Maoribank	566700	X			
		Nabhra	564600			X	
		Pinehaven	564530	X			
		Te Marua	566500	X			
		Trentham South	564520	X			
		Lakes DHB	Rotorua District	Arahiwi	538861		X
Golden Springs	538841				X		
Hamurana	538811				X		
Kaingaroa Forest	538831					X	
Lynmore	538732			X			
Mamaku	538864					X	
Ngakuru	538850					X	
Ngongotaha North	538601			X			
Ngongotaha South	538602			X			
Owhata East	538742			X			
Reporoa	538842					X	
Tarawera	538832					X	
Tikitere	538820					X	
Waiwhero	538863					X	
Taupo District	Acacia Bay		541311			X	
	Central Taupo		541720			X	
	Hilltop		541740			X	
	Iwitahi		541343				X
	Kuratau		532502				X
	Lakewood		541319	X			
	Mangakino		540900				X
	Marotiri		541320				X
	Maunganamu		541313			X	
	Nukuhau		541710			X	
	Omori		532200				X
	Oruanui		541331			X	
	Rangatira		541318	X			
	Rangatira Park		541317	X			
	Rangipo		541501				X
	Rangitaiki		541342				X
	Richmond Heights		541760			X	
	Taharua		541503				X
	Tauhara		541730			X	
	Taupo East		541315			X	
Te More	541502				X		
Turangi	541000				X		
Waipahihi	541750			X			
Wairakei-Aratiatia	541312			X			
Wharewaka	541316			X			
Midcentral DHB	Horowhenua District	Foxton	561700		X		
		Foxton Beach	561300		X		
		Kohitere	564013		X		
		Lake Horowhenua	564011		X		
		Levin East	564240		X		

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural
		Levin North	564210		X	
		Levin South	564232		X	
		Levin West	564220		X	
		Mangaore-Manakau	564021		X	
		Moutoa	561500		X	
		Opiki	563802		X	
		Playford Park	564231		X	
		Shannon	563500		X	
		Tokomaru	563801		X	
		Waiopahu	564012		X	
		Waitarere	563600		X	
		Kapiti Coast District	Otaki	564400		X
	Otaki Forks		564022		X	
	Te Horo		564023		X	
	Manawatu District	Feilding Central	560730		X	
		Feilding East	560740		X	
		Feilding North	560710		X	
		Feilding West	560720		X	
		Halcombe	560421		X	
		Himatangi Beach	561200		X	
		Kairanga	561811	X		
		Kauwhata	561901		X	
		Kiwitea	559700			X
		Longburn	561812	X		
		Maewa	560412		X	
		Ohakea	561421		X	
		Oroua Bridge	560411		X	
		Oroua Downs-Waitohi	561422		X	
		Pohangina	560000			X
		Rakiraki	561410		X	
		Rongotea	561000		X	
		Sanson	560900		X	
	Stoney Creek	560301	X			
	Tangimoana	561100		X		
	Tokorangi-Hiwinui	560422		X		
	Palmerston North City	Aokautere	563300	X		
		Ashhurst	560200	X		
		Linton Military Camp	561820	X		
		Massey University	561813	X		
		Turitea	561902		X	
		Whakarongo	560302	X		
	Tararua District	Dannevirke East	550102		X	
		Dannevirke West	550101		X	
		Eketahuna	578100		X	
		Mangatainoka	577900			X
		Mara	549902			X
		Nireaha-Tiraumea	578200			X
Norsewood-Herbertville		549800			X	
Owahanga		549901			X	
Pahiatua		578000		X		
Papatawa		550200		X		
Woodville		550500		X		
Nelson Marlborough DHB	Marlborough District	Blenheim Central	581230	X		
		Havelock	580200		X	
		Marlborough Sounds Terrestrial	580446			X
		Mayfield	581220	X		
		Omaka	580420	X		
		Picton	581100		X	
		Redwoodtown	581250	X		

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Renwick	580300	X			
		Seddon	580802		X		
		Severn	580600			X	
		Spring Creek-Riverlands	580430	X			
		Springlands	581210	X			
		Waikawa	580442			X	
		Wairau	580444			X	
		Ward	580801				X
		Whitney	581240	X			
		Witherlea	581260	X			
		Woodbourne	580410	X			
	Nelson City	Atawhai	582100	X			
		Clifton	582000	X			
		Glenduan	581713	X			
		Saxton Island	581721	X			
		Whangamoia	581812			X	
	Tasman District	Aniseed Hill	581717	X			
		Bell Island	581725	X			
		Best Island	581724	X			
		Brightwater	581822			X	
		Golden Bay	581601				X
		Golden Downs	581841				X
		Jackett Island	584305			X	
		Kaiteriteri	581832			X	
		Lake Rotoroa	581842				X
		Mapua	581825			X	
		Motueka East	584303			X	
		Motueka Outer	581833			X	
		Motueka West	584301			X	
		Murchison	581843				X
		Rabbit Island	581834			X	
		Ranzau	581726	X			
		Richmond Hill	581811			X	
Riwaka	581850			X			
Takaka	581602				X		
Tapawera	581844				X		
Wai-Iti	581836			X			
Wakefield	581823			X			
Northland DHB	Far North District	Ahipara	500205			X	
		Awanui	500100		X		
		East Opua	501300		X		
		Haruru Falls	501200		X		
		Hokianga North	500801				X
		Hokianga South	500802				X
		Houhora	500207				X
		Kaeo	500401				X
		Kaikohe	501700			X	
		Kaitaia East	500302			X	
		Kaitaia West	500301			X	
		Kawakawa	501400			X	
		Kerikeri	500900			X	
		Kohukohu	500500				X
		Mangapa-Matauri Bay	500402				X
		Mangonui East	500202				X
		Mangonui West	500204				X
		Moerewa	501500			X	
		Motutangi-Kareponia	500208				X
		Ngapuhi-Kaikou	501634				X
North Cape	500206				X		
Ohaeawai	501632			X			

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Okaihau	501631		X		
		Omapere and Opononi	500700			X	
		Paihia	501100		X		
		Pokere-Waihaha	501620			X	
		Rawene	500600			X	
		Russell	501000		X		
		Taipa Bay-Mangonui	500203			X	
		Waihou Valley-Hupara	501633			X	
		Waitangi-Te Tii	501611		X		
		West Opuia	501612		X		
	Kaipara District	Dargaville	504600			X	
		Kaipara Coastal	504501				X
		Kaiwaka	504900			X	
		Mangawhai	505021				X
		Mangawhai Heads	505022				X
		Maungaru	504502			X	
		Maungaturoto	504700			X	
		Rehia-Oneriri	505010				X
		Ruawai	504800				X
		Te Kopuru	504400			X	
	Whangarei District	Abbey Caves	502004	X			
		Bream Head	501805			X	
		Hikurangi	504300	X			
		Marsden Point-Ruakaka	501806			X	
		Maungatapere	501810			X	
		Ngunguru	501807			X	
		Onerahi	504100	X			
		Opouteke-Tanekaha	501802			X	
		Otaika-Portland	502005	X			
		Punaruku-Kiripaka	501814			X	
		Sherwood Rise	504000	X			
		Springs Flat	502001	X			
		Te Hihi	502003	X			
Three Mile Bush	502002	X					
Waiotira-Springfield	501811			X			
Waipu	501812			X			
Wharekohe-Oakleigh	501809			X			
Otago DHB	Central Otago District	Alexandra	608500		X		
		Clyde	608303		X		
		Cromwell	608600		X		
		Dunstan	608302				X
		Maniototo	608000				X
		Naseby	608100				X
		Ranfurly	607900				X
		Roxburgh	607800				X
		Teviot	607501				X
	Clutha District	Balclutha	607400			X	
		Benhar	606500			X	
		Bruce	606700			X	
		Clinton	607000				X
		Clutha	607300				X
		Kaitangata	606900			X	
		Kaka Point	607100			X	
		Lawrence	607700				X
		Milton	606800			X	
		Owaka	607200				X
		Stirling	606600			X	
		Tapanui	607600				X
		Tuapeka	607502				X



DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
	Dunedin City	Aramoana	601500		X		
		Brighton	602000	X			
		Broad Bay-Portobello	604830	X			
		Bush Road	606300	X			
		East Taieri	606220	X			
		Evansdale	601603			X	
		Hyde	601302				X
		Kaikorai Lagoon	602422	X			
		Karitane	601604			X	
		Macandrew Bay	604822	X			
		Middlemarch	602300				X
		Momona	602500			X	
		Mosgiel East	606100	X			
		Mosgiel South	606210	X			
		Outram	602200			X	
		Port Chalmers	605200	X			
		Raynbirds Bay	604821	X			
		Sandymount	604902	X			
		Sawyers Bay	605100	X			
		Silverpeaks	602600				X
	Taiaroa-Cape Saunders	604901	X				
	Waikouaiti	601400			X		
	Waitati	601602			X		
	Waldronville	602100	X				
	Warrington	601605			X		
	Wingatui	602412	X				
	Wyllies Crossing	602411	X				
	Queenstown-Lakes District	Hawea	608304				X
		Matukituki	609029				X
		Wanaka	608800				X
	Waitaki District	Ardgowan	600812			X	
		Aviemore	600831				X
		Cape Wanbrow	600813			X	
		Duntroon	600822			X	
		Hampden	600840			X	
		Kakanui	600828			X	
		Kurow	600824				X
		Maheno	600826			X	
		Nenthorn	601700			X	
		Oamaru Central	601030			X	
		Oamaru North	601010			X	
		Oamaru South	601040			X	
		Omarama	600827				X
		Orana Park	601020			X	
		Otematata	600830				X
		Palmerston	601200				X
		Pukeuri	600811			X	
	Waihemo	601301			X		
	Weston	600600			X		
Southland DHB	Gore District	Central Gore	610230		X		
		Charlton	610010		X		
		Chatton	610032		X		
		East Gore	610220		X		
		Kaiwera	610033		X		
		Mataura	610400		X		
		North Gore	610210		X		
		South Gore	610250		X		
		West Gore	610240		X		
		Invercargill	Bluff	612100		X	

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
	City	Dog Island	626500			X	
		Greenhills	610074		X		
		Myross Bush	610062		X		
		Oreti Beach	610052		X		
		Tiwai Point	610075		X		
	Queenstown-Lakes District	Arrowtown	609200			X	
		Earnslaw	609302			X	
		Frankton	608700			X	
		Glenorchy	609012				X
		Kelvin Heights	609022			X	
		Lake Hayes	609028				X
		Queenstown Bay	609301			X	
		Skippers	609026				X
		Sunshine Bay	609023			X	
	Southland District	Balfour Community	609400				X
		Centre Island	626700				X
		Dacre	610061			X	
		Edendale Community	609700			X	
		Fairfax	612740			X	
		Fiordland	612901				X
		Hokonui	610040			X	
		Kaweku	610031			X	
		Lumsden Community	609600			X	
		Makarewa North	609911			X	
		Manapouri	612712				X
		Mararoa River	612714				X
		Milford	609011				X
		Mossburn	612713				X
		Nightcaps	612200				X
		Ohai	612300				X
		Otautau	612600			X	
		Riversdale Community	609500			X	
		Riverton East	612801			X	
		Riverton West	612802			X	
		Stewart Island	613000				X
Te Anau		612400				X	
Te Waewae		612730				X	
Toetoes		610080				X	
Tuatapere		612500			X		
Waianiwa		610051			X		
Waikaia		610020				X	
Wairio		612720				X	
Waituna	610072			X			
Wallacetown	610090			X			
Winton	610500			X			
Woodlands	610073			X			
Wyndham	609800			X			
South Canterbury DHB	Mackenzie District	Fairlie	600200			X	
		Lake Tekapo	600320			X	
		Mackenzie	600323			X	
		Mt Cook	600312			X	
		Twizel Community	600100			X	
	Timaru District	Ben Mcleod	598311				X
		Fairview-Scarborough	598201	X			
		Fraser Park	599400	X			
		Geraldine	598500		X		
		Gleniti	599300	X			
		Glenwood	599200	X			
		Highfield	599100	X			

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural
		Levels	598313		X	
		Maori Park	599000	X		
		Marchwiell	598900	X		
		Orari	598312		X	
		Otipua Creek-Washdyke Flat	598202	X		
		Pareora	598314		X	
		Parkside	599700	X		
		Pleasant Point	598320		X	
		Redruth	599900	X		
		Seaview	599500	X		
		Temuka	598600		X	
		Timaru Gardens	599800	X		
		Waimataitai	598800	X		
		Washdyke	598700	X		
		Watlington	599600	X		
		Winchester	598000			X
	Waimate District	St Andrews	600420		X	
		Waihao	600410		X	
		Waimate	600500		X	
Tairāwhiti DHB	Gisborne District	East Cape	543301			X
		Makaraka	543901	X		
		Manutuke	544003		X	
		Matokitoki	543902	X		
		Patutahi	543800		X	
		Ruatoria	543302			X
		Tarndale-Rakauroa	543601			X
		Te Karaka	543602		X	
		Tiniroto	544002			X
		Tokomaru Bay	543303			X
		Tolaga Bay	544004			X
		Wainui	543903	X		
Wharekaka	544001			X		
Taranaki DHB	New Plymouth District	Bowden	551013	X		
		Egmont Village	552701		X	
		Inglewood	552800		X	
		Kaimata	552702		X	
		Kaitake	551112		X	
		Lepperton	551111		X	
		Mangaoraka	551014	X		
		Oakura	550800		X	
		Okato	551120		X	
		Okoki-Okau	550700			X
		Omata	551030		X	
		Urenui	550600		X	
		Waitara East	551302		X	
		Waitara West	551301		X	
		South Taranaki District	Eltham	553601		X
	Hawera North		554010		X	
	Hawera South		554020		X	
	Hawera West		554115		X	
	Kahui		553302			X
	Kaponga		553400		X	
	Kapuni		553700		X	
	Makakaho		554500			X
	Manaia		553800		X	
	Mangatoki-Moeroa		553500		X	
	Normanby		553900		X	
	Ohangai		554120		X	
	Ohawe Beach	554111		X		
Okaiawa	554130		X			

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Opunake	553200			X	
		Patea	554700		X		
		Rahotu	553301			X	
		Tawhiti	554113		X		
		Waingongoro	554114		X		
		Waitotara	554300		X		
		Waverley	554800		X		
		Whenuakura	554400			X	
	Stratford District	Douglas	553002				X
		Midhirst	552900		X		
		Pembroke	553004		X		
		Stratford East	553102		X		
		Stratford West	553101		X		
Toko		553003		X			
Whangamomona	553001				X		
Waikato DHB	Hauraki District	Hauraki Plains	533901		X		
		Kerepehi	533903		X		
		Ngatea	533800		X		
		Ohinemuri	534200		X		
		Paeroa	534300		X		
		Turua	533902		X		
		Waihi	534400		X		
	Matamata-Piako District	Hinuera	535242		X		
		Matamata	535500		X		
		Morrinsville East	534902	X			
		Morrinsville West	534901	X			
		Okauia	535220		X		
		Springdale	534603				X
		Tahuroa	534500		X		
		Te Aroha	534800		X		
		Te Poi	535231		X		
		Waharoa	535000		X		
		Waihou-Walton	534604				X
	Waitoa	534602		X			
	Otorohanga District	Kawhia Community	531100				X
		Otorohanga	531200		X		
		Otorohanga Rural East	531304				X
		Otorohanga Rural West	531301		X		
		Te Kawa	531303		X		
	Ruapehu District	Manunui	532904				X
		National Park	532602				X
		Ngapuke	532501				X
		Ohura	532400				X
		Otangiwai-Heao	532700				X
		Owhango	532300				X
		Raurimu	532601				X
		Sunshine-Hospital Hill	532903				X
		Tarrangower	532901				X
		Taumarunui Central	532902				X
	South Waikato District	Amisfield	535380			X	
		Aotea	535360		X		
		Arapuni	535250				X
		Kinleith	535212		X		
		Lichfield	535261				X
		Mangakaretu	535211		X		
		Matarawa	535330		X		
		Paraonui	535310		X		
Parkdale		535320		X			
Putaruru		535600		X			

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Stanley Park	535340		X		
		Strathmore	535370		X		
		Tapapa	535232			X	
		Tirau	535100		X		
		Tokoroa Central	535350		X		
		Wawa	535262			X	
	Thames-Coromandel District	Coromandel	533100				X
		Hikuaui	533603				X
		Islands-Thames-Coromandel District	619302				X
		Moanataiari	533501			X	
		Parawai	533502			X	
		Pauanui Beach	533602			X	
		Tairua	533400				X
		Te Puru-Thornton Bay	533604			X	
		Te Rerenga	533200				X
		Whangamata	533300			X	
	Whitianga	533000				X	
	Waikato District	Eureka	527121	X			
		Gordonton	527122	X			
		Huntly East	527402			X	
		Huntly West	527401			X	
		Kainui	527123	X			
		Maramarua	527221				X
		Meremere	527222			X	
		Ngaruawahia	528200	X			
		Raglan	526500			X	
		Rotowaro	526400			X	
		Tamahere-Tauwhare	527131	X			
		Taupiri Community	527112	X			
		Te Akau	526702				X
		Te Kauwhata	526900			X	
		Te Kowhai	527912	X			
		Te Uku	526602				X
		Waerenga	527210				X
		Waikato Western Hills	526601			X	
	Whatawhata	527913	X				
Whitikahu	527111				X		
Waipa District	Allen Road	527937	X				
	Cambridge Central	527503	X				
	Cambridge North	527501	X				
	Cambridge West	527502	X				
	Hautapu	527132	X				
	Kaipaki	527932	X				
	Karapiro	535241			X		
	Kihikihi	527700	X				
	Kihikihi Flat	527936	X				
	Lake Ngारoto	527924	X				
	Leamington East	527505	X				
	Leamington West	527504	X				
	Ngahinapouri	527914	X				
	Ohaupo	527600	X				
	Pirongia	527922			X		
	Pokuru	527923			X		
	Pukerimu	527931	X				
	Rotongata	528000			X		
	Rotoorang	527934			X		
	Te Awamutu Central	531002	X				
Te Awamutu East	531003	X					
Te Awamutu South	531004	X					
Te Awamutu West	531001	X					

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Te Pahu	526603		X		
		Te Rahu	527935	X			
		Te Rore	527921		X		
		Tokanui	527925	X			
	Waitomo District	Mahoenui	531710				X
		Marokopa	531720				X
		Mokauiti	531800				X
		Piopio	531500				X
		Taharoa	531600				X
		Te Kuiti	532000			X	
		Te Motu Island	618300				X
		Tiroa	531732				X
	Waipa Valley	531731				X	
Wairarapa DHB	Carterton District	Carterton	579700		X		
		Mt Holdsworth	579501		X		
		Te Wharau	579502				X
		Waingawa	579400			X	
	Masterton District	Homebush-Te Ore Ore	578301	X			
		Kopuaranga	578401		X		
		Lansdowne	579200	X			
		Masterton Central	578600	X			
		Masterton East	578800	X			
		Masterton Railway	579100	X			
		Masterton West	578700	X			
		Ngaumutawa	579000	X			
		Opaki-Ferridge	578302	X			
		Solway North	578901	X			
		Solway South	578902	X			
	Whareama	578402				X	
	South Wairarapa District	Featherston	580000			X	
		Greytown	579900			X	
		Kahutara	579803				X
		Martinborough	580100			X	
		Tuturumuri	579802				X
	Waitemata DHB	North Shore City	Paremoremo East	509000	X		
		Rodney District	Algies Bay-Mahurangi	506632		X	
			Cape Rodney	506615		X	
			Dairy Flat-Redvale	506300	X		
			Hatfields Beach	505804	X		
			Helensville	506800			X
Kaukapakapa			506643			X	
Kawau			506620				X
Kumeu			505600	X			
Leigh			505400			X	
Manly			505902	X			
Matheson Bay			506616			X	
Muriwai Beach			506651			X	
Orewa			505805	X			
Parakai			506641			X	
Paremoremo West			506400	X			
Red Beach			505802	X			
Rewiti			506652			X	
Riverhead			506653			X	
Silverdale North			506200	X			
Silverdale South			506000	X			
Snells Beach			506631			X	
South Head			506642			X	
Stanmore Bay			505901	X			

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural	
		Tahekeroa	506614		X		
		Tauhoa-Puhoi	506613		X		
		Taupaki	513701	X			
		Waipareira West	505700	X			
		Waiwera	505803	X			
		Warkworth	505500		X		
		Wellsford	505300		X		
	Waitakere City	Armour Bay	512802	X			
		Karekare	513800		X		
		Laingholm	512801	X			
		Opanuku	513020	X			
		Otimai	512902	X			
		Swanson	513100	X			
		Waitakere	513702	X			
West Coast DHB	Buller District	Buller Coalfields	584409			X	
		Charleston	584411			X	
		Granity	584404			X	
		Hector-Ngakawau	584403			X	
		Inangahua Junction	584412			X	
		Inangahua Valley	584701			X	
		Karamea	584402			X	
		Little Wanganui	584407			X	
		Maruia	584703			X	
		Mawheraiti	584702			X	
		Mokihinui	584408			X	
		Orowaiti	584405			X	
		Reefton	584600			X	
		Westport Rural	584410			X	
	Westport Urban	584500			X		
	Grey District	Ahaura	584938				X
		Arnold Valley	584936				X
		Atarau	584933				X
		Barrytown	584931				X
		Blackball	584922			X	
		Blaketown	585120	X			
		Coal Creek	584932			X	
		Cobden	585110	X			
		Dobson	584930			X	
		Greymouth Central	585130	X			
		Greymouth Rural	584934			X	
		Greymouth South	585140	X			
		Haupiri	584940				X
		Kaiata	584911	X			
		Karoro	584800	X			
		Lake Brunner	584939				X
	Marsden-Hohonu	584935			X		
	Nelson Creek-Ngahere	584937				X	
Point Elizabeth	584923			X			
Runanga-Rapahoe	585000	X					
South Beach-Camerons	584912	X					
Westland District	Bruce Bay-Paringa	585324				X	
	Fox Glacier	585313				X	
	Franz Josef	585312				X	
	Haast	585325				X	
	Harihari	585311				X	
	Hokitika Rural	585317				X	
	Hokitika Urban	585400			X		
	Hokitika Valley	585318				X	
	Kaniere	585307			X		
	Karangarua	585323				X	

DHB	Territorial Authority	Area Unit Description	Area Unit	Semi Rural	Rural	Remote Rural
		Kumara	585306		X	
		Otira	585315			X
		Ross	585309			X
		Taramakau	585314		X	
		Totara River	585319			X
		Waiho	585322			X
		Waimea-Arahura	585316		X	
		Waitaha	585320			X
		Whataroa	585321			X
Whanganui DHB	Rangitikei District	Bulls	558900		X	
		Huntermville	558700		X	
		Koitiata	559240		X	
		Lake Alice	559230		X	
		Mangaweka	558600			X
		Marton	559500		X	
		Moawhango	559210			X
		Ngamatea	559000			X
		Pohonui-Porewa	559220			X
		Ratana Community	558800		X	
	Taihape	559400		X		
	Ruapehu District	Ohakune	555000			X
		Raetihi	555100			X
		Tangiwai	554900			X
		Waiouru	558500			X
	Wanganui District	Blueskin	555300	X		
		Castlecliff North	555700	X		
		Castlecliff South	555800	X		
		Fordell-Kakatahi	558300			X
		Marybank-Gordon Park	558200	X		
		Maxwell	555400			X



### Schedule 3

## Access Agreement

AGREEMENT FOR  
ACCESS TO:

(names of maternity  
facilities and/or  
birthing units)

Practitioner's full  
name:

Address:

Contact details:

(phone, work phone,  
pager, cellphone,  
facsimile, email)

Professional  
qualifications:

Does the practitioner currently work for any of  
the maternity facilities or birthing units listed  
above?

Yes / No

The practitioner must attach to this access agreement:

- (a) the names and addresses of two referees who can verify the identity of the practitioner;
- (b) a copy of their New Zealand practising certificate; and
- (c) confirmation of their indemnity protection

The practitioner confirms that all the information provided above is true and correct and agrees to be bound by the terms and conditions of this access agreement.

Practitioner's signature: \_\_\_\_\_

Date: \_\_\_\_\_

The provider of the maternity facilities and birthing units listed above agrees to be bound by the terms and conditions of this access agreement.

Signed for and on behalf of the provider of the maternity facilities and birthing units listed above:

Provider: \_\_\_\_\_

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

The information provided in this access agreement is collected by the maternity facility for the purpose of issuing and maintaining the agreement, and will not be used for any other purpose.

### Terms and conditions of access to a maternity facility or birthing unit

#### *Purpose of this agreement*

**1 Purpose**

- (1) The practitioner named above is a practitioner as defined by the Primary Maternity Services Notice 2007 issued pursuant to Section 88 of the New Zealand Public Health and Disability Act 2000 (the "Notice"). The practitioner has requested access to the maternity facilities and/or birthing units listed above (the "facility" or "facilities") for the purpose of providing labour and birth and inpatient postnatal care to the practitioner's maternity clients.
- (2) This access agreement provides the practitioner with access to the services of the facilities as specified in the service specifications for Maternity Facility Services and Birthing Unit Services issued by the Ministry of Health, in accordance with the terms and conditions set out in this access agreement.

## *Obligations of both parties*

### **2 Clinical safety**

Primary maternity services will be provided in a clinically safe manner. This means that primary maternity care provided by the practitioner or the facilities must be based on the application of the best available knowledge derived from research and clinical expertise that incorporates the skills and standards of the relevant profession.

### **3 Cultural safety**

Primary maternity services will be provided in a manner that recognises cultural differences and is sensitive to the cultural traditions, protocols and customs of the woman.

### **4 Māori health outcomes**

Primary maternity services are intended to achieve Māori health outcomes and reduce Māori health inequalities by facilitating access to maternity services by Māori, ensuring appropriate pathways through those services and that maternity services address the primary maternity needs of Māori.

### **5 Referral guidelines**

Both parties will take into account the Guidelines for Consultation with Obstetric and Related Specialist Medical Services that identify clinical reasons for consultation with a specialist and that are published by the Ministry of Health from time to time, when providing primary maternity services.

### **6 Policies and procedures**

- (1) All relevant administrative policies of the facilities are to be available to the practitioner in those facilities.
- (2) All clinical policies and procedures of the facilities regarding the provision of primary maternity services will be developed, reviewed or updated by the facilities through the establishment of a working group. The working group will be established by the provider of the facilities from time to time, and will be comprised of representatives of the facility, representatives of the practitioners who have access agreements in respect of the facility, and the professional organisations of those practitioners. All clinical policies and procedures should be evidence based and consistent with any nationally developed guidelines.
- (3) All clinical policies and procedures of the facilities will form the basis of primary maternity care provided in the facilities, and must be available to the practitioner.

### **7 Relationship between the maternity facility or birthing unit and the practitioner**

- (1) The relationship between the facilities and the practitioner gives the practitioner access to the facilities upon these terms and conditions, and is not to be construed as one of employment or a contract for service by the practitioner.

- (2) Subject to its obligations under the Health and Safety in Employment Act 1992, the facilities shall not inquire into or specify matters relating to the operation or administration of the practitioner's practice.

## **8 Complaints management**

- (1) Where a woman makes a complaint about a primary maternity service provided to her in the facilities, the party receiving the complaint will advise the woman of the appropriate avenues for complaint.
- (2) If the practitioner and the facilities both have responsibilities in respect of the service complained about then, with the consent of the woman, the party who receives the complaint shall discuss the issue with the other party.

## **9 Dispute management**

- (1) If any issue arises between the practitioner and the facilities in relation to the interpretation of, obligations under or compliance by either party to the terms of this access agreement, the practitioner and the facilities shall use their best endeavours to settle the dispute by agreement. The management of any dispute must be by a process that is mutually agreed by both parties.
- (2) The relevant professional organisation should be considered as a resource in preventing or managing any dispute.

## **10 Suspension**

- (1) The General Manager of the facilities shall have the right and complete discretion to immediately suspend access by the practitioner to the facility in the event of a serious complaint being made of gross misconduct, negligence, or a substantial or repeated breach of this agreement by the practitioner.
- (2) Within 48 hours of the suspension, the facilities will provide the practitioner with written reasons for the suspension.
- (3) The practitioner and the facilities shall use their best endeavours to manage the suspension by a process that is mutually agreed by both parties. The relevant professional organisation should be considered as a resource in managing the suspension.

### *Obligations of the practitioner*

## **11 Compliance with Statutes and Regulations**

The practitioner undertakes and agrees that all statutory, regulatory, legal, and professional requirements that apply to primary maternity services provided by them are complied with.

## **12 Qualifications**

- (1) The practitioner shall at all times be one of the following:
  - (a) a general practitioner, meaning a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of practice of general practice and holds an annual practicing certificate and a Diploma in Obstetrics (or

equivalent, as determined by the New Zealand College of General Practitioners); or

- (b) a midwife, meaning a health practitioner who is, or is deemed to be, registered with the Midwifery Council (established by the Health Practitioners Competence Assurance Act 2003) as a practitioner of the profession of midwifery and holds an annual practicing certificate; or
  - (c) an obstetrician, meaning a health practitioner who is, or is deemed to be, registered with the Medical Council of New Zealand (established by the Health Practitioners Competence Assurance Act 2003) in the vocational scope of obstetrics and gynaecology and holds an annual practicing certificate.
- (2) The practitioner will inform the facilities of any change in their practising status or any conditions attached to their annual practising certificate.

### **13 Professional responsibilities**

- (1) The practitioner agrees that he or she is fully responsible for his or her own professional practice.
- (2) The practitioner will explain to the woman the relationship between the practitioner and the facility.

### **14 Clinical competencies**

- (1) The practitioner is responsible for having the appropriate clinical competencies if the practitioner provides a woman with any one of the procedures listed below during labour and birth in consultation with a specialist:
  - (a) management of women with epidurals;
  - (b) management of women requiring induction and augmentation;
  - (c) management of women requiring instrumental vaginal deliveries;
  - (d) interpretation of CTGs.
- (2) The practitioner must inform the facilities whether they have the appropriate clinical competencies to provide women in their care with any of the procedures listed in subclause (1) above.

### **15 Participation in protected quality assurance activities**

- (1) The practitioner will participate in quality assurance activities declared by the Ministry of Health to be protected quality assurance activities under section 54 of the Health Practitioners Competence Assurance Act 2003 that are relevant to the provision of primary maternity services in the facilities, including perinatal mortality review meetings where such meetings are protected quality assurance activities.
- (2) A list of all the protected quality assurance activities that are relevant to that facility must be available to the practitioner in the facility.

### **16 Indemnity Protection**

The practitioner shall maintain appropriate professional indemnity protection at all times during the term of this agreement.

**17 Students**

The practitioner shall be responsible for any student accompanying the practitioner in conjunction with a School of Midwifery or a School of Medicine.

**18 Availability**

- (1) The practitioner, or a back-up Lead Maternity Carer, will be available 24 hours a day, 7 days a week to provide community or hospital based assessment for urgent problems, other than acute emergencies, in accordance with clause DA6(2) of the Notice.
- (2) The practitioner must ensure that the back-up Lead Maternity Carer has a current access agreement with the facilities.

**19 Administrative Requirements**

The practitioner will meet any reasonable administrative requirements of the facilities to the extent necessary to enable the facilities to run an efficient and co-ordinated service.

**20 Contact Details**

The practitioner shall notify the facilities of any changes in their contact details.

### *Obligations of the facility*

**21 Health and Safety**

The facilities will comply with their obligations under the Health and Safety in Employment Act 1992, including taking all practicable steps to ensure that no hazard in or arising in the facilities harms a practitioner working on the premises, and warning practitioners of significant hazards in the facilities that would not normally be expected to arise in that type of place or work.

**22 Orientation**

The facility shall provide the practitioner with an orientation to its facility at a time mutually agreeable to both parties.

**23 Education forums**

Where a practitioner provides care that includes any one of the procedures listed below (and in clause 14 of this access agreement), where the facilities provides access to educational courses or forums to its employees, the facilities will make available to the practitioner these updates and refresher courses;

- (a) management of women with epidurals;
- (b) management of women requiring induction and augmentation;
- (c) management of women requiring instrumental vaginal deliveries; or
- (d) interpretation of CTGs.

**24 Administrative requirements**

The facility shall facilitate the practitioner's compliance with any administrative requirements.

**25 Availability of facilities**

The facility shall ensure that reasonable notice is given prior to any reduction or cessation of the facility's services.

*Other terms and conditions***26 Entire agreement**

These terms and conditions form the entire agreement between the Maternity Facility and the Practitioner.

**27 Term**

- (1) This agreement is continuous, subject to an annual sighting of the practitioner's annual practising certificate and indemnity protection.
- (2) The practitioner may terminate this access agreement by giving written notice to the facilities.