### Voluntary Variation 6.6B to PHO Services Agreement

between

# HEALTH NEW ZEALAND TE WHATU ORA

Contact:

«CONTRACTDEPUTY\_NAME»

and

## «PROVIDER\_NAME» «PROVIDER\_NAME»

«CONTRACT\_DESCRIPTION»

«PROVIDER\_ADDRESS» «PROVIDER\_ADDRESS2» «PROVIDER\_CITY»

Ph: «PROVIDER\_PHONE» Fax: «PROVIDER\_FAX»

Contact:

«PRVDRCONTACT\_NAME»

## **CONTENTS OF THIS VARIATION**

| Α.  | Summary and Commencement  | 1 |
|-----|---|---|
| A1. | Interpretation  | 1 |
| A2. | Commencement Date of Voluntary Variation  | 1 |
| В.  | Changes to the Agreement made by Voluntary Variation  | 3 |
| B1. | Changes to Schedule F1.1 [Payment for First Level Services]   | 3 |
| B2. | Changes to the payment rates in Schedule F1.3 [Payment for Immunisation Services]   | 3 |
| B3. | Changes to Referenced Document entitled "Business Rules: National Enrolment Service:  |   |
|     | Capitation Based Funding"   | 3 |
| B4. | Changes to Referenced Document entitled "Enrolment Requirements for Contracted<br>Providers and Primary Health Organisations" | 3 |
|     |   |   |

## PART A: SUMMARY AND COMMENCEMENT

#### Background

- A. Health New Zealand Te Whatu Ora (Health NZ) and «PROVIDER\_NAME» are parties to a PHO Services Agreement ("Agreement").
- B. In accordance with clause B.25 of the Agreement, Health NZ and the PHO agree to the variations to the Agreement set out in Part B of this variation ("**Variation**").
- C. Additional changes to payment rates have been made by a compulsory variation, in accordance with clause B.24 of the Agreement. Those changes are set out in [variation 6.6A] to the Agreement.

#### A1. Interpretation

- A1.1 In this Variation, unless the context requires otherwise:
  - (a) words and expressions not otherwise defined in this Variation have the meaning given to them in the Agreement; and
  - (b) reference to clauses and schedules are the clauses and schedules of the Agreement.

#### A2. Commencement Date of Voluntary Variation

- A2.1 If Health NZ receives this Variation signed by the PHO:
  - (a) before 5pm on 31st August 2024, Part B will take effect on 1st August 2024;
  - (b) after 31<sup>st</sup> August 2024, Part B will take effect as set out in clause A2.2.
- A2.2 If Health NZ receives this Variation signed by the PHO:
  - (a) before 5pm on the [29<sup>th</sup>] day of any month after August 2024, Part B will take effect on the first day of the next month; or
  - (b) after 5pm on the [29<sup>th</sup>] day of any month after August, Part B will take effect on the first day of the month immediately following the next month.

#### Signatures

For Health NZ:

#### For «Provider\_name\_» «Trading\_As»:

| (signature) | (signature) |
|-------------|-------------|
| Name        | Name        |
| Position    | Position    |
| Date        | Date        |

#### Witnessed by:

#### Witnessed by:

| (signature) | (signature) |
|-------------|-------------|
| Name        | Name        |
| Occupation  | Occupation  |
| Residence   | Residence   |
| Date        | Date        |
|             |             |

## PART B: CHANGES TO THE AGREEMENT

#### B1. Changes to Schedule F1.1 [Payment for First Level Services]

- B1.1 Clause 4(2)(b) of Schedule F1.1 [Deductions to capitation payments for First Level Services] is amended by replacing the reference to "three months" with "twelve months".
- B1.2 Clause 5(2)(a) of Schedule F1.1 [Very low cost access payments] is amended by:
  - (a) inserting at the end of clause 5(2)(a)(iii) the words "who are CSC-holders; and"; and
  - (b) inserting a new clause 5(2)(a)(iv) after clause 5(2)(a)(iii) as follows:

\$29.50 for Enrolled Persons aged 18 years and over who are not CSC-holders."

- B2. Changes to the payment rates in Schedule F1.3 [Payment for Immunisation Services]
- B2.1 Clause 3 of Schedule F1.3 [Fees] is amended by replacing references to \$36.05" in clauses 3(1), 3(3) and 3(4)(a) with "\$41.20".
- B3 Changes to Referenced Document entitled "Business Rules: National Enrolment Service: Capitation Based Funding"
- B3.1 BR# 2.3 of Business Requirement #2: Enrolment [Pre-Enrolment Payments for Newborns] is amended by:
  - (a) replacing all references to "3 months" with "12 months"; and
  - (b) adding the following new bullet to the "Description":

"A Contracted Provider does not need to see a newborn's birth certificate in order to preenrol the newborn as above, or to enrol the newborn"

B3.2 BR# 4.2 of Business Requirement #4: Capitation Based Funding [General Medical Service (GMS) deductions from Capitation Based Funding] is amended by replacing the reference to "three months" with "twelve months".

#### B4 Changes to Referenced Document entitled "Enrolment Requirements for Contracted Providers and Primary Health Organisations"

- B4.1 Section 4.4 (NES Notifications) is amended by replacing the final bullet point with the following:"if, on the first NES Snapshot that occurs after the newborn turns one, a newborn is still recorded as a B code; the newborn's enrolment will expire within NES."
- B4.2 Section 5 (Preliminary Enrolment Process for Newborns) is amended by:
  - (a) adding at the end of the second paragraph the following:

"A Contracted Provider does not need to see a newborn's birth certificate in order to preenrol the newborn as above, or to enrol the newborn"

(b) replacing the final paragraph with the following:

"If, on the first NES Snapshot that occurs after a newborn turns one, the newborn is still recorded as a B code, the newborn's enrolment will expire within NES. All expired enrolments within NES will be excluded for payment purposes."

B4.3 Section 6 (Fee Schedule for Newly Enrolled Patients) is amended by replacing the reference to "three months" with "twelve months" in the final bullet point.