

**SECTION 51 OF THE HEALTH AND  
DISABILITY SERVICES ACT 1993**

**ADVICE NOTICE**

**to**

**ANAESTHETISTS  
CONCERNING PATIENT BENEFITS AND OTHER  
SUBSIDIES**

**TO APPLY FROM 1 May 2000**

**This Notice is issued by the Health Funding Authority.**

## PART A: PURPOSE OF THIS NOTICE

**1. Introduction to Part A****1.1. Arrangements for Anaesthetic Medical Services after 1 May 2000**

- 1.1.1. Since 1 July 1993, the Health Funding Authority has been responsible for subsidising certain health and disability services provided by Anaesthetist Medical Practitioners. The Notice issued to General Practitioners under section 51 of the Health and Disability Services Act 1993 on 1 July 1993 (the original Notice) contained provision for payment to Anaesthetist Medical Practitioners in certain circumstances. The original Notice is to be varied with effect from 1 May 2000 and is no longer appropriate for use by many Anaesthetist Medical practitioners.
- 1.1.2. This Notice now provides for the terms and conditions, that are to apply to all Anaesthetist Medical Practitioners who claim payment pursuant to this Notice. The terms and conditions of this Notice shall apply to all services provided on or after 1 May 2000.
- 1.1.3. As at 1 May 2000 provided none of the disentitling provisions of causes 5.3, 5.4 or 5.5 apply to the applicant Medical Practitioner and the Medical Practitioner held a validly issued General Practitioner Notice (the original Notice) to practise as a medical practitioner providing anaesthetic services prior to 1 May 2000 (and had provided anaesthetic services pursuant to that original Notice and claimed payment in the 6 months immediately prior to 1 May 2000) a Notice will issue automatically to the Medical Practitioner.
- 1.1.4. Claims for payment pursuant to this Notice may only be made in accordance with the terms of this Notice.
- 1.1.5. This Notice does not cover any payments paid to Anaesthetist Medical Practitioners under legislation which was not repealed under the Health Reforms (Transitional Provisions) Act 1993, in particular fees payable under the Mental Health (Compulsory Assessment & Treatment) Act 1992, the Alcoholism and Drug Addiction Act 1966, the Health Act 1956 and regulations made pursuant to those Acts. The fees available under those Acts will continue to be paid in accordance with the provisions of those Acts and associated regulations. This Notice excludes payment for any condition for which cover is available under the Accident Insurance Act 1998.

**2. Payments****2.1. Range of Payments**

The payments available under this Notice as at 1 May 2000 are:

Anaesthetist Medical Services

**2.2. Detailed Terms and Conditions**

- 2.2.1. This Notice consists of two parts. Part A comprises the purpose of the Notice. Part B comprises the detailed terms and conditions covering access to, and administration of, the payments available under this Notice. Both parts are hereby deemed to comprise the terms and conditions under which Anaesthetist Medical Practitioners will receive payment from 1 May 2000.
- 2.2.2. An Anaesthetist Medical Practitioner who accepts payment of any of the payments detailed in Part B of this Notice for services provided on or after 1 May 2000 is deemed to have accepted all the terms and conditions of this Notice.

### 3. Health and Disability Support Initiatives

3.1. The Anaesthetist Medical and the Health Funding Authority agree to discuss, consider in good faith and co-operate during the term of this Notice to improve the delivery of health and disability support services to patients of the Anaesthetist Medical Practitioner. It is agreed that priorities in this respect include:

- improved co-ordination between various primary care providers, and between primary care and secondary care providers;
- improved Maori health status;
- improved analysis and understanding of flow on costs such as pharmaceutical expenditure and laboratory tests by the Health Funding Authority;
- integration and co-ordination with other community based services to achieve better service integration (improved communication, reduce duplication of tests and treatment, better continuity of care).
- such other issues as may be agreed between the Anaesthetist Medical Practitioner and the Health Funding Authority.

3.2. It is agreed that in order to address these priorities some changes in the way the Anaesthetist Medical Practitioner currently operates may be necessary and he or she will negotiate in good faith with the Health Funding Authority such changes as the Health Funding Authority may propose.

### 4. Administration and Claiming

4.1. Administrative procedures for claiming payments are as specified in this Notice.

4.2. Notwithstanding clauses 5, 6 and 7 of Part A changes may be made to the administrative procedures and forms from time to time on reasonable notice by the Health Funding Authority. If any changes of an information nature are required, these will only be made after agreement by the Anaesthetist Medical Practitioner or consultation in accordance with clause 6 of Part A of this Notice.

### 5. Duration of Notice

5.1. Subject to the provisions of this clause this Notice will apply until further notice of either variation or termination, as provided in clause 6.

5.2. The Health Funding Authority may withdraw this Notice after giving 6 months notice to the Anaesthetist Medical Practitioner if it does not intend to continue the operation of this Notice. At the end of that 6 month notice period the Notice will be withdrawn and of no effect for services provided after that six month notice period and no further claims shall be made or paid.

5.3. At the discretion of the Health Funding Authority a Notice may be withdrawn from an Anaesthetist Medical Practitioner if the Anaesthetist Medical Practitioner fails (after a written warning from the Health Funding Authority providing a time period of not less than one month) to rectify the following matter:

- 5.3.1. An Anaesthetist Medical Practitioner's failure to hold a current Annual Practising Certificate.
- 5.4. This Notice shall be deemed to terminate, necessitating an application by that Anaesthetist Medical Practitioner for a new Notice if:
- 5.4.1. An Anaesthetist Medical Practitioner does not hold a current Medical Registration approved by the New Zealand Medical Council, or
- 5.4.2. An Anaesthetist Medical Practitioner does not hold valid and current vocational registration as an Anaesthetist pursuant to the Medical Practitioners Act 1995
- 5.5. This Notice may (at the sole and absolute discretion of the Health Funding Authority) be deemed to be terminated immediately if:
- 5.5.1.1. the Anaesthetist Medical Practitioner is convicted of any dishonesty offence relating to any claim for payment from any party (not limited to the Health Funding Authority or any of its predecessors) for provision of any type of health services whether claimed pursuant to this Notice or otherwise; and/or
- 5.5.1.2. the Anaesthetist Medical Practitioner has been found guilty of conduct unbecoming a medical practitioner, professional misconduct, disgraceful conduct in a professional respect pursuant to the Medical Practitioners Act 1995; and /or
- 5.5.1.3. the Advisory Committee so recommends pursuant to subclause 7.3 of schedule 4 of Part B.
- 5.5.2. Reinstatement of the Notice in these circumstances will be solely at the discretion of the Health Funding Authority and shall not occur unless the Anaesthetist Medical Practitioner can establish that he or she will satisfy the criteria specified in subclause 8 of Part A. The Health Funding Authority may impose any conditions it considers appropriate on any such reinstated Notice.

## 6. Variation of Notice

- 6.1. This Notice may be varied or terminated by the Health Funding Authority on the giving of six months notice to the Anaesthetist Medical Practitioner.

This notice period may be reduced in the event of either of the following circumstances:

- 6.1.1. Where the Anaesthetist Medical Practitioner and the Health Funding Authority agree to do so. In this circumstance any variation which the notice refers to will be specific to the Anaesthetist Medical Practitioner.
- 6.1.2. Where the Health Funding Authority and the NZSA (hereby deemed to be the authorised representative of the Anaesthetist Medical Practitioner) agree to do so if the Health Funding Authority elects to negotiate with the NZSA as the duly authorised representative of all Anaesthetist Medical Practitioners. In this circumstance any variation which the Notice refers to will apply to all Anaesthetist Medical Practitioners claiming pursuant to this Notice.
- 6.2. A proposal to vary this Notice may also be made by the Anaesthetist Medical Practitioner.
- 6.3. An Anaesthetist Medical Practitioner may withdraw from coverage under this Notice at any time by giving not less than 4 weeks notice in writing to the Health Funding Authority. Such notice will terminate the relationship between the Anaesthetist Medical Practitioner and the Health Funding Authority under this Notice from the date specified in such notice and thereafter the Anaesthetist

Medical Practitioner shall not be entitled to claim or receive any of the payments available under this Notice.

- 6.4. Notwithstanding clauses 5, 6.1 to 6.3 and 7, the Health Funding Authority may at any time on the giving of 4 weeks notice implement changes directed by the Government concerning patient benefits, user charges, pharmaceutical and laboratory schedules and any other matters concerning patient entitlements.

## 7. Consultation

- 7.1. Where a variation pursuant to subclause 6.1 is proposed by, or, if made pursuant to subclause 6.2 is generally acceptable to the Health Funding Authority, the Health Funding Authority has complete discretion whether to negotiate directly with individual Anaesthetist Medical Practitioners or whether it will enter a consultation process with the NZSA for a change to the Notice that will be binding on all Anaesthetist Medical Practitioners.

- 7.2. For this purpose, consultation comprises the following:

- Initial comment back on a proposed variation to be forwarded by the NZSA to the Health Funding Authority within 14 days of receipt of the proposed variation.
- An initial meeting between the Health Funding Authority and the NZSA to agree the time frame within which the proposed variation will be discussed. Failing agreement, the time frame will be 12 weeks.
- Within the applicable time frame, the Health Funding Authority and the NZSA will meet and/or exchange draft documents on a priority basis to ensure that the views of the NZSA have been reasonably considered by the Health Funding Authority before the Health Funding Authority makes a decision to issue, modify or reconsider the proposed variation.

- 7.3 Following conclusion of the consultative process, the Health Funding Authority will formally advise the Anaesthetist Medical Practitioner of the effective date of any variation, in accordance with the Notice period in clause 6 above.

## 8. Procedure for application for a Notice

- 8.1. A Medical Practitioner with vocational registration as an Anaesthetist pursuant to the Medical Practitioners Act 1995 a current Medical Registration and Annual Practising Certificate may apply in writing to the Health Funding Authority to be issued with a Notice. The written application shall specify:

8.1.1. Documentation to establish the status of the practitioner as outlined in clause 8.1;

8.1.2. the geographical area in which the Medical Practitioner wishes to provide services (as defined by the Health Funding Authority from time to time); and

8.1.3. If the Health Funding Authority requests, the Anaesthetist Medical Practitioner shall provide details of any other contracts or employment arrangements pursuant to which the Anaesthetist Medical Practitioner may claim payment for provision of anaesthetic services.

- 8.2. The onus is on the applicant Medical Practitioner to satisfy the Health Funding Authority that the following criteria are met. Unless approval is given then no Notice will be issued to the Medical Practitioner and no entitlement to claim payment for services will arise.

### **Criteria**

#### **8.2.1. Applicant characteristics**

The applicant Medical Practitioner may be required to satisfy the Health Funding Authority that the Medical Practitioner maintains standards (including ethical standards) which standards are as follows:

- 8.2.1.1 The Medical Practitioner has acted previously and will continue to act in an honest and trustworthy manner in making any claim for payment from the Health Funding Authority.
- 8.2.1.2 The Medical Practitioner has acted previously and will continue to act in a manner consistent with his or her medical professional ethical standards and aim to provide safe and responsible health care to the patients to whom the Medical Practitioner provides services.
- 8.2.1.3 The Medical Practitioner will maintain an educational / training /competence level in accordance with parts II, V, VI, and VII of the Medical Practitioners Act 1995 and will provide services that meet the quality standards and/ or systems promulgated by the Royal Australasian College of Anaesthetists or other appropriate professional body.
- 8.3. If the Medical Practitioner is not satisfied with a decision of the Health Funding Authority pursuant to clause 8 of Part A he or she may refer the matter to the Advisory Committee for consideration pursuant to clause 11 of Schedule 4 Part B of this Notice. The Health Funding Authority shall issue forms to be used for this referral process from time to time.

**ADVICE NOTICE: SECTION 51 OF THE  
HEALTH AND DISABILITY SERVICES ACT  
1993**

**PART B**

**Terms and Conditions of Section 51 Part Payment for  
Services Provided by Anaesthetist Medical Practitioners on or  
after 1 May 2000**

**Index**  
**Introduction**

<b>Schedule 1</b>	<b>Definition of Terms:</b> Defines all terms used in this Notice.
<b>Schedule 2</b> with Appendix 1	<b>Anaesthetist Medical Services:</b> Describes services covered by this Notice, and fees payable.
<b>Schedule 3</b> with Appendices I to II	<b>Pharmaceutical Services:</b> Describes pharmaceutical services provided by medical practitioners and prescribing conditions.
<b>Schedule 4</b>	<b>Administrative Provisions:</b> Describes required administrative procedures including registration, record keeping and termination of payments.
<b>Schedule 5</b>	<b>Eligibility criteria</b>
<b>Schedule 6</b>	<b>Business Rules</b> And forms for claiming

## Introduction to Part B

1. If there is any inconsistency between Parts A and B of this Notice, the provisions of Part B will prevail.

### Other Legislation

2. All legislation and regulations applicable to Anaesthetist Medical Practitioners practising in New Zealand will continue to apply in addition to the terms and conditions detailed in this Notice, including, but not exclusively so:
  - Medical Practitioners Act 1995
  - Medicines Act 1981
  - Misuse of Drugs Act 1975
  - Mental Health (Compulsory Assessment and Treatment) Act 1992
  - Alcohol & Drug Addiction Act 1966
  - Infectious Diseases Order 1986
  - Venereal Diseases Regulations 1982
  - Privacy Act 1993 and the Health Information Privacy Code 1994
  - Health and Disability Commissioner Act 1994 and any codes issued under that Act
  - Health Act 1956
  - Accident Insurance Act 1998

### Other Contractual Arrangements

3. Where Anaesthetist Medical Practitioners, either individually, or jointly or collectively with any other person or persons, have entered into a separate contractual arrangement with the Health Funding Authority or any other party for the provision of any anaesthetist or pharmaceutical services in consideration of any payment then none of the payments detailed in this Notice for services that are covered by such contract shall be payable to those Anaesthetist Medical Practitioners unless otherwise specified in that contract and approved by the Health Funding Authority.
4. If an Anaesthetist Medical Practitioner, who is party to a contract of the type referred to in clause 3 above, also receives any of the payments detailed in the Schedules to this Notice, for services not covered by these contracts then that Anaesthetist Medical Practitioner will be bound by the terms and conditions of this Notice so far as it applies to the particular payments the Anaesthetist Medical Practitioner so receives.

### Pharmaceutical Services

5. This Notice covers only those limited pharmaceutical services provided by Anaesthetist Medical Practitioners under normal practice conditions using supplies obtained on orders as defined in schedule 1. It specifically excludes Anaesthetist Medical Practitioners who also supply pharmaceutical requirements to their patients and claim payment directly for those requirements. Those Anaesthetist Medical Practitioners are covered by separate Notice arrangements.

### Health and Disability Services Act 1993 Section 25 and Section 52

6. This Notice must be read in conjunction with and is subject to the regulations or directions issued pursuant to S25 and S52 of the Health and Disability Services Act 1993 in respect of:

- 6.1. Residency;
- 6.2. Eligibility of persons receiving medical services for which payments under this Notice are payable;
- 6.3. Conditions for the use of entitlement cards, including the Community Services Card and High Use Health Card;
- 6.4. Conditions for the use of the Pharmaceutical Benefit Card.

Goods and Services Tax (GST)

7. All payments quoted in the schedules to this Notice are stated inclusive of GST at the applicable rates.

**SCHEDULE 1****DEFINITION OF TERMS**

For the purposes of this Notice the following terms are defined as:

**“Advisory Committee”** means the Medical Practitioners Advisory Committee established under clause 11 of Schedule 4 of this Notice.

**“Anaesthetic Medical Services”** means proper and necessary anaesthetic medical services which consist of

- the administration of the anaesthetic by an anaesthetist (following a specific request for this service from a medical practitioner who referred the patient), and
- the examination of a Patient by an anaesthetist before an operation, (this attendance may be initiated by the Anaesthetist Medical Practitioner once the Anaesthetist Medical Practitioner has received a referral to administer an anaesthetic and it may be initiated without a specific request for the anaesthetists’ opinion on the condition of the Patient from the medical practitioner who referred the patient to the anaesthetist).

Anaesthetic Medical Services does not include

- (a) Medical services provided by the Anaesthetist Medical Practitioner when the Anaesthetist Medical Practitioner is working (either part-time or full time, on call or in usual working hours) for a hospital or any other agency that has received funding from the Health Funding Authority to provide anaesthetic medical services;
- (b) Medical services afforded in relation to maternity services as defined from time to time by the Advice Notice to Maternity Practitioners;
- (c) Specialist Medical Services being medical services (excluding anaesthetic medical services) that involve the application of special skill and experience of a degree or kind that General Practitioners as a class cannot reasonably be expected to possess and as otherwise defined from time to time in the Advice Notice to Specialist Medical Practitioners;
- (d) General Medical Services being those services defined from time to time in the Advice Notice to General Practitioners;
- (e) Performance of laboratory diagnostic services and/ or diagnostic imaging services
- (f) Medical services not provided by the Anaesthetist Medical Practitioner in person;
- (g) Medical services which consist of the administration of a vaccine;
- (h) Medical services where only the provision of a prescription is provided;
- (i) Medical services where there is more than one claim for payment in respect of a single attendance on a patient;
- (j) Such services as may be determined by the Health Funding Authority, after reference to the Advisory Committee and notice to Anaesthetist Medical Practitioners, not to be Anaesthetic Medical Services for the purposes of this Notice, either absolutely or in special circumstances as defined by the Health Funding Authority;
- (k) Medical services provided by any medical practitioner to his or her dependants or his or her partner or the dependants of his or her partner or to other persons from whom or in respect of whom he or she is not entitled to recover any fees;
- (l) Medical services provided by any medical practitioner under any agreement made by him or her with a friendly society or branch registered under the Friendly Societies and Credit Unions 1982;
- (m) Accident services for which payment will be made pursuant to the Accident Insurance Act 1998.

**“Anaesthetist Medical Practitioner”** means a Medical Practitioner registered as an anaesthetist pursuant to the Medical Practitioners Act 1995 and issued with a Current Notice.

**“Board of the Health Funding Authority”** means the appointed board of the Health Funding Authority or its delegate appointed pursuant to the Health and Disability Services Act 1993.

“**Business Rules**” means the business rules attached as Schedule 6.

“**Child**” means an unmarried person under the age of 18 years, other than a person who is -

- (a) Aged 16 years or 17 years; and
- (b) Financially independent.

“**Claim**” means for manual claiming a summary plus supporting schedules submitted by a Anaesthetist Medical Practitioner seeking payment for services provided by that Anaesthetist Medical Practitioner pursuant to this Notice.

“**Current Notice**” means a Notice that is issued by the Health Funding Authority to an Anaesthetist Medical Practitioner until such Notice is terminated or withdrawn pursuant to the terms of this Notice.

“**Daily Record**” means that every Anaesthetist Medical Practitioner who provides services for which payment is claimed under this Notice shall keep a permanent, comprehensive, continuous/ chronological, readily accessible and legible daily record in respect of every service claimed which shall include the following”

- the name and usual place of residence of the patient;
- the place where the services were provided
- the date on which the services were provided;
- a record of the clinical history of the patient and of the treatment given or services rendered;
- the pharmaceuticals prescribed;
- the laboratory services authorised.

“**Dependent Child**” in relation to any person means a child whose care is primarily the responsibility of that person, and who:

- (a) Is being maintained as a member of that person’s family; and
- (b) Is financially dependent on that person; and
- (c) Is not a child in respect of whom payments are being made under section 363 of the Children, Young Persons, and Their Families Act 1989.

“**Diagnostic Imaging Services**” means those services which include:

- (a) Use of ultrasound diagnostic apparatus;
- (b) Use of X-ray diagnostic apparatus;
- (c) Use of apparatus for Scintigraphy;
- (d) Use of Magnetic Resonance Imaging Apparatus;
- (e) Supply and administration of any drugs or other substances incidental to the use of such apparatus;
- (f) Provision of medical services incidental to the use of such apparatus, except medical services of a kind that are not ordinarily performed by radiologists as such (whether in any particular case such services are performed by the radiologist or by any other medical practitioner);
- (g) Provision of any other incidental services for the use of such apparatus;

**but specifically excludes** diagnostic imaging services provided for:

- (a) Dental purposes;
- (b) The purposes of life insurance, superannuation, or any other similar purpose; but this shall not exclude services in relation to certificates given for the purposes of benefits under Part 1 of the Social Security Act 1964 or in relation to certificates for sickness benefits from a friendly society;
- (c) Visas;
- (d) Emigration permits;
- (e) The sole or primary purpose of obtaining a certificate, for production to some other person, relating to the condition of health of the person in respect of whom the services are provided;

- (f) The sole or primary purpose of ascertaining, at the request of any employer or proposed employer or person having the control or supervision of the person in respect of whom the services were provided, the condition of health of that person, if that person is not known or suspected by any medical practitioner to be suffering from disease or illness; but this paragraph shall not exclude any service provided immediately before entering employment, if in either case Health Funding Authority is of the opinion that the provision of the service would be in the interest of the public health or Regional Health Authority has given written permission for the approval of the provision of diagnostic imaging services for any group of persons on the application of any employer or person having the control or supervision of those persons, or on the recommendation of any medical practitioner being an officer of Health Funding Authority;
- (g) The purposes of the Customs and Excise Act 1996 or the Misuse of Drugs Act 1975;
- (h) The purpose of accident services for which any part of the payment will be made pursuant to the Accident Insurance Act 1998.

**“Disciplinary Committee”** means the Medical Practitioners Disciplinary Tribunal and/or Complaints Assessment Committee established under Part VIII of the Medical Practitioners Act 1995.

**“Eligible Persons”** means those persons meeting the eligibility criteria specified in Schedule 5 of this Notice.:

**(Note: this definition may be amended from time to time pursuant to S25 of the Health and Disability Services Act 1993)**

**“Financially Independent”** in relation to a person, means:

- (a) In full employment as defined in section 3(1) of the Part I of the Social Security Act 1964; or
- (b) In receipt of a basic grant or an independent circumstances grant under the Student Allowances Regulations 1998; or
- (c) In receipt of payment under a Government assisted scheme which the Director-General of Social Welfare considers analogous to a benefit; or
- (d) In receipt of a benefit under Part I of the Social Security Act 1964.

**“Hospital and Health Service”** means Hospital and Health Service as defined by the Health and Disability Services Act 1993

**“Health Benefits Limited”** means the office located at 172 Hereford Street, Christchurch or any other such office and /or agent as may be designated by the Health Funding Authority from time to time.

**“Health Funding Authority”** means the Health Funding Authority established under section 32 of the Health and Disability Services Act 1993 and includes the predecessors to the Health Funding Authority, being the Transitional Health Authority and the four Regional Health Authorities and any successor.

**“Laboratory Diagnostic Services”** includes:

- (a) Supply of all materials or substances required for the purpose of providing laboratory diagnostic services;
- (b) Provision of medical services incidental to any laboratory diagnostic service, except medical services of a kind that are not ordinarily performed by pathologists as such (whether in any particular case the services are performed by the pathologist or by any other registered medical practitioner);
- (c) Provision of any other incidental services for the purposes of laboratory diagnostic services;

**but specifically excludes:**

- (a) Examination of specimens for public health purposes (i.e. non-personal specimens, including foods, milk samples, water samples, and rats and such other specimens as the Minister may from time to time declare by notice in the *Gazette* to be specimens for public health purposes),

unless the necessary laboratory diagnostic services are not available from a licenced hospital laboratory operated by the Hospital and Health Service;

- (b) Post-mortem examinations;
- (c) Laboratory diagnostic services for dental purposes except in consultation with a medical practitioner;
- (d) The preparation of sera and vaccines;
- (e) Laboratory diagnostic services rendered in respect of an in-patient of any hospital or other institution under the control of the Hospital and Health Service except as specifically agreed by the Health Funding Authority;
- (f) Laboratory diagnostic services rendered for the sole or primary purpose of obtaining a certificate, for producing to some other person, relating to the condition of health of the person in respect of whom the services was rendered;
- (g) Laboratory diagnostic services rendered for the purposes of life insurance, superannuation, or other similar benefits, unless the services are rendered in respect of certificates given for the purposes of receiving:
  - (i) Benefits under Part 1 of the Social Security Act 1964; or
  - (ii) Sickness benefits from a friendly society;
- (h) Laboratory diagnostic services rendered for the purposes of obtaining:
  - (i) Immigration permits;
  - (ii) Visas issued in New Zealand.

**"Medical Practitioner"** means a medical practitioner registered under the Medical Practitioners Act 1995 holding current medical registration approved by the New Zealand Medical Council.

**"Medical Officer of the Health Funding Authority"** means a medical practitioner appointed by the Health Funding Authority from time to time to that position.

**"Minister"** means the Minister of Health.

**"NHI"** means the National Health Index.

**"NHI Number"** means the unique person identifier number allocated by the New Zealand Health Information Service (NZHIS).

**"NZSA"** means the New Zealand Society of Anaesthetists

**"Order"** means a document signed by a medical practitioner and submitted to either a retail pharmacy (Practitioner Supply Order) or a pharmaceutical wholesaler (Wholesale Supply Order) for the supply of pharmaceutical requirements to that medical practitioner in accordance with the provisions of the Drug Tariff 1993.

**"PAN"** means the practice authority number issued to a practice by the Health Funding Authority or its agent.

**"Patient"** means any eligible person, as defined in this schedule, who attends a Anaesthetist Medical Practitioner for an Anaesthetic Medical Service consultation or provision of any other service available pursuant to this Notice.

**"Payment Day"** means those days on which Health Benefits Limited routinely makes payment of claims being the Tuesday of every week (or next working day if a public holiday intervenes) or such other day as is advised from time to time.

**"Pharmaceutical Pricing Office"** means Health Benefits Limited or such other agency or office as advised by the Health Funding Authority from time to time.

**"Pharmaceutical Schedule"** means the document of that name issued by the Health Funding Authority from time to time.

“**PIN**” means the practice identification number issued to a practice by the Health Funding Authority.

"**Prescription**" means a document signed by a medical practitioner prescribing pharmaceutical requirements for any person who is entitled to receive pharmaceutical benefits.

“**Protocols**” means the protocols presently issued or that are issued from time to time by Health Benefits Limited to assist in interpretation of the Advice Notice.

"**Specialist**" means,

- (a) A medical practitioner whose name appears in the register of medical practitioners possessing specialist status in accordance with section 39 of the Medical Practitioners Act 1968; or vocational registration pursuant to Part III of the Medical Practitioners Act 1995, or
- (b) A medical practitioner who, immediately before 14 November 1973 was recognised by the Minister as a specialist.

**SCHEDULE 2****ANAESTHETIC MEDICAL SERVICES**1. Fees for Anaesthetic Medical Services

- 1.1 Subject to the provisions of this schedule, every Anaesthetist Medical Practitioner with a Current Notice, who provides Anaesthetic Medical Services as part of a Consultation as defined in Schedule 1 of this Notice shall be entitled to claim from the Health Funding Authority the relevant payment as prescribed and defined in Appendix I to this schedule.
- 1.2 Eligibility to claim the payments set out in Appendix I is subject to the provisions of this Notice.
- 1.3 Unless the Health Funding Authority otherwise directs, no payment shall be made by the Health Funding Authority under this clause in respect of medical services provided by any Anaesthetist Medical Practitioner who is for the time being, entitled to any payment for those services under a special arrangement entered into with the Health Funding Authority or any other current contract.
- 1.4 Every payment made by the Health Funding Authority to an Anaesthetist Medical Practitioner under Appendix I of this schedule shall be deemed to have been made on behalf of the patient in respect of whom the payment was made.
- 1.5 Where any Anaesthetist Medical Practitioner is entitled in accordance with this schedule to receive from the Health Funding Authority any amount in respect of any Anaesthetic Medical Services provided or any pharmaceutical requirements supplied or any travelling expenses incurred, that Anaesthetist Medical Practitioner may not demand or accept or be entitled to recover any such amount from the patient or any person responsible for the patient's debts.
- 1.6 If any question arises as to whether any service provided by an Anaesthetist Medical Practitioner is included in the expression "Anaesthetic Medical Services", or as to whether any amount, and if so what amount, is payable by the Health Funding Authority, it shall be decided by the Health Funding Authority after consultation with the Advisory Committee and the Health Funding Authority's decision thereon shall be final and conclusive.

2. Claim for payment of fees

Every claim by a Anaesthetist Medical Practitioner for the payment of any fees under this Notice shall be governed by the terms and conditions of this Notice and as specified in the Business Rules.

3. Turnaround period for claims

Claims will be paid no later than the next payment day following twenty (20) working days from the receipt of valid claims by Health Benefits Limited or as otherwise specified in the Business Rules or agreed in writing by the Health Funding Authority. Payment will be made by way of direct credit.

**SCHEDULE 2****ANAESTHETIC MEDICAL SERVICES****APPENDIX I****SCHEDULE OF FEES FOR ANAESTHETIC MEDICAL SERVICES****For the purposes of this schedule:**

**Community Services Card** means an entitlement card issued to a person eligible for it who is within the definition of a Community Services Card cardholder as defined by the regulations issued pursuant to section 52 of the Health and Disability Services Act 1993.

**High Use Health Card** means a high use health card issued to a person eligible for it.

Payments in respect of Consultations for Anaesthetic Medical Services provided to Eligible Persons are as follows:

	\$ (GST incl) per Eligible person
1. Child, under 6 years of age	32.50
2.	
2.1 Holder of current Community Services Card	15.00
2.2 Dependent child, 6 years of age or over, of holder of a Community Services Card	20.00
3.	
3.1 Holder of a current High Use Health Card who is not a child	15.00
3.2 Holder of a current High Use Health Card who is a child 6 years of age or over	20.00
4. Child who is not within a category specified in clause 1, clause 2 or clause 3 above	15.00

No payment shall be claimed (or made) pursuant to this notice for any Consultation arising from personal injury caused by accident and / or medical misadventure or otherwise entitling a patient to cover pursuant to the Accident Insurance Act 1998.

The maximum that may be claimed by the Anaesthetist Medical Practitioner, for any one eligible patient for any single occasion on which that eligible patient receives the administration of an anaesthetic from that Anaesthetist Medical Practitioner, is two claims as follows:

- One claim for administration of the anaesthetic: and
- One claim for a single pre-operative examination of a patient, provided that examination has been carried out by the Anaesthetist Medical Practitioner. No pre-operative examination may be claimed by the Anaesthetist Medical Practitioner unless the administration of an anaesthetic has subsequently been given by that Anaesthetist Medical Practitioner to the eligible patient.

**SCHEDULE 3****PHARMACEUTICAL SERVICES  
PROVIDED BY OTHER THAN "DISPENSING DOCTORS"**1. General

The Anaesthetist Medical Practitioner is approved, upon registration with the Medical Council of New Zealand as a medical practitioner, to supply pharmaceutical requirements or specified classes of pharmaceutical requirements in accordance with terms and conditions fixed by the Health Funding Authority.

2. Requirements for Prescriptions

2.1 Every prescription issued by a Anaesthetist Medical Practitioner shall include directions as to dosage or as to the manner of use or application, except in cases where any such directions would be obviously unnecessary.

2.2 If any of the pharmaceutical requirements prescribed by any prescription are to be supplied on more occasions than one, written directions to that effect shall be included in or appended to the prescription. If such directions are written by any person other than the Anaesthetist Medical Practitioner they shall be signed or initialled by the Anaesthetist Medical Practitioner.

2.3 Whenever any Anaesthetist Medical Practitioner signs any prescription of any directions thereon, he or she shall add the appropriate date to his or her signature.

2.4 If any prescription fails in any material respect to satisfy the requirements of this clause, it shall not be recognised for the purposes of this Notice except with the approval of the Medical Officer of the Health Funding Authority.

2.5 Every prescription issued by an Anaesthetist Medical Practitioner and every Practitioner supply order or wholesale supply order made by an Anaesthetist Medical Practitioner solely for his or her own supplies, and that part of every bulk supply order from which pharmaceuticals are prescribed for patients use by an Anaesthetist Medical Practitioner shall:-

- (a) contain the New Zealand Medical Council Number (and PAN where applicable) of the individual Anaesthetist Medical Practitioners who personally treated the Patient for whom the pharmaceuticals are prescribed; and
- (b) contain the date prescribed, patient name, NHI where available, patient date of birth (where no NHI), patient gender (where no NHI), patient category, community services card status, high use health card status, name of pharmaceutical and dose, frequency of dose, quantity or total days supply, special instructions if applicable, the Health Funding Authority identifier in those circumstances as subsequently advised to Anaesthetist Medical Practitioners; and
- (c) where more than one pharmaceutical is prescribed for a patient at the same time and the subsidy for one or more of the pharmaceuticals will be paid by a different purchaser then the pharmaceuticals may not be set out on one prescription form. A separate prescription form must be filled out per purchaser; and
- (d) be signed by that individual Anaesthetist Medical Practitioner.

2.6 Every Practitioner supply order or wholesale supply order made by a Anaesthetist Medical Practitioner on behalf of all Anaesthetist Medical Practitioners in a group medical practice shall; -

- (a) contain the New Zealand Medical Council Number of the individual Anaesthetist Medical Practitioners who make use of the pharmaceutical supplies which are ordered; and
- (b) be signed by a Anaesthetist Medical Practitioner on behalf of all of the Anaesthetist Medical Practitioners in the group medical practice.

3. Rights of Review by the Health Funding Authority

- 3.1 If the Board of the Health Funding Authority has reason to believe that any Anaesthetist Medical Practitioner:
- 3.1.1 Has prescribed any pharmaceutical requirements for any person who, when the prescription was given, was not in need of treatment or was not in need of treatment for a condition for which the prescription was given; or
  - 3.1.2 Has prescribed excessive quantities of any pharmaceutical requirements for the use of any person; or
  - 3.1.3 Has prescribed any pharmaceutical requirements for use over an unnecessarily long period; or
  - 3.1.4 Has prescribed excessive quantities of or unnecessarily expensive flavouring agents or vehicles for the administration of any drugs; or
  - 3.1.5 Has been in the habit of prescribing or procuring pursuant to any provision of the Pharmaceutical Schedule, as defined in subclause 4.2 of this schedule, without sufficient reason, pharmaceutical requirements in extraordinarily large or extraordinarily expensive quantities for the treatment of any patient or class of patient under his or her care; or
  - 3.1.6 Has, in comparison with other Anaesthetist Medical Practitioners engaged in similar practice, been in the habit or prescribing unduly large or unduly expensive quantities of any pharmaceutical requirements; or
  - 3.1.7 Has issued prescriptions during any period of 3 months which have, in comparison with the prescriptions issued during the same period by other Anaesthetist Medical Practitioners engaged in similar practice, imposed any undue cost, loss or expense upon the Health Funding Authority; or
  - 3.1.8 Has, by any other practice in relation to prescriptions given by him or her imposed an undue cost, loss or expense upon the Health Funding Authority; or
  - 3.1.9 Has supplied any pharmaceutical requirements contrary to the and/or subclause 4.2.3 of this schedule,
- the Board of the Health Funding Authority may refer the matter as a complaint to the Advisory Committee.
- 3.2 If after any such enquiry, the Advisory Committee or the Disciplinary Committee so recommends, the Board of the Health Funding Authority may require the Anaesthetist Medical Practitioner to pay to the Health Funding Authority an amount not exceeding the estimated amount of the cost, loss or expense imposed on the Health Funding Authority by reason of the practice or matter which was the subject of the complaint plus any costs involved in investigating and hearing the matter. .
- 3.3 If the Advisory Committee or the Disciplinary Committee as appropriate so recommends or if the amount referred to in subclause 3.2 of this clause is not paid within a period specified by the Board of the Health Funding Authority for the purpose, the Board of the Health Funding Authority may cause the amount, or any part of the amount remaining unpaid, as the case may be, to be deducted from payments falling due to be made by the Health Funding Authority to the Anaesthetist Medical Practitioner in respect of current or future claims under this Notice.
- 3.4 Notwithstanding anything in subclause 3.3 of this clause, the amount, or any part of the amount remaining unpaid, as the case may require, may be recovered as a debt due to the Health Funding Authority instead of being recovered in the manner described in that subclause.
- 3.5 The Board of the Health Funding Authority may at any time, taking account the recommendations of the Advisory Committee or the Disciplinary Committee as appropriate, by notice given in such manner as the Board of the Health Funding Authority thinks proper, direct that prescriptions signed by a Anaesthetist Medical Practitioner specified in the notice shall not be recognised for the purposes of this schedule unless they are written out in the handwriting of the Anaesthetist Medical Practitioner concerned and may at any time revoke any such direction.

#### 4. Conditions of Supply

- 4.1 The Health Funding Authority may from time to time issue a Pharmaceutical Schedule. The Pharmaceutical Schedule sets out the terms and conditions under which pharmaceutical requirements are supplied to Anaesthetist Medical Practitioners by the Health Funding Authority using orders as detailed in subclause 4.2 of this schedule. The Pharmaceutical Schedule will be updated on a regular basis, in such a manner as the Health Funding Authority may direct, to incorporate any changes to the terms and conditions or matters included therein.
- 4.2 Without limiting the provisions of the Pharmaceutical Schedule, the following summarises the requirements of the Pharmaceutical Schedule in respect of Anaesthetist Medical Practitioner pharmaceutical services:
- 4.2.1 The Pharmaceutical Schedule provides for the supply to a Anaesthetist Medical Practitioner of pharmaceutical requirements for personal administration to patients, such as
- 4.2.1.1 Injections;
- 4.2.1.2 Medicines for use in emergency, or until a supply can be obtained by the patient in the normal manner.
- 4.2.2 The quantity ordered should be a reasonable supply for not more than one month, with some exceptions in the conditions prevailing within the Anaesthetist Medical Practitioner's place of practice. The Anaesthetist Medical Practitioner may be called upon to justify the quantities ordered.
- 4.2.3 This method of obtaining supplies is not intended to be used as a basis for dispensing medicines. It is intended to provide treatment to patients in an emergency, or to provide immediate treatment before supplies can be obtained in the ordinary way.
- 4.2.4 Supplies may be obtained by completing either a "Practitioners Supply Order", (as contained in Appendix I to this schedule) and submitting it to an approved retail pharmacy or a "Wholesale Supply Order" (as contained in Appendix II to this schedule) and submitting it to a wholesale supplier approved by the Health Funding Authority for the direct supply to Anaesthetist Medical Practitioners of pharmaceutical requirements.
- 4.3 Any pharmaceutical requirement which, under the Pharmaceutical Schedule, is supplied to a Anaesthetist Medical Practitioner free of charge under a practitioner supply order or wholesale supply order must be supplied to any patient, pursuant to the provision of medical services as detailed in this Notice, free of any charge for that pharmaceutical requirement.





## APPENDICE 3

### Special Authority Applications

Special Authority is an application process in which a prescriber requests government subsidy for a particular person.

#### Subsidy

Once approved, the prescriber and the patient are provided a Special Authority number which must appear on the prescription. Specialists who make an application must communicate the valid authority number to the prescriber who will be writing the prescriptions.

The authority number can provide access to subsidy, additional subsidy, or waive certain restrictions otherwise present on the pharmaceutical.

Some approvals are dependent on the availability of funding.

#### Criteria

The criteria for approval of Special Authority applications are included below each pharmaceutical listing. For some Special Authority pharmaceuticals, not all indications listed on the data sheets are subsidised.

Criteria for each Special Authority pharmaceutical are updated regularly, based on the decision criteria of PHARMAC.

The appropriateness of the listing of a pharmaceutical in the Special Authority category will also be regularly reviewed. Applications for inclusion of further pharmaceuticals in the Special Authority category will generally be made by a pharmaceutical supplier.

#### Applications

Special Authority applications are administered by the Health Benefits Centre (Wanganui). All applications should be sent, in writing, to:

Health Benefits Centre, Private Bag 3015, WANGANUI

Fax: (06) 345 1121 or free fax 0800 100 131

For enquiries: phone Myra Murray on (06) 345 3549, or free phone 0800 CHEM NO (0800 243 666).

#### *Each application must include:*

- name and date of birth of the patient (codes for AMIS patients' applications)
- diagnosis and brief clinical details
- name of the medicine required, the *form and strength* of the medicine
- duration of the course of treatment
- alternative therapies that have been tried.

#### *The application must:*

- be signed by the practitioner
- include the practitioner's printed name and address
- show the practitioner's Medical Council registration number
- provide evidence of the criteria as per Special Authority conditions for medicine application.

### Exceptional Circumstances application

The HFA may provide additional assistance for individuals to access Pharmaceuticals where there is no suitable indicated treatment already fully subsidised or purchased by the HFA. It is not intended that Exceptional Circumstances will fund the treatment costs which are included in the contract for service of a health provider.

Funding of drugs through Exceptional Circumstances is only intended to occur on a rare or unusual circumstances. Applications are assessed according to the patient's health needs, the suitability of treatment, cost/benefit and cost-effectiveness of treatment, the patient's income, and the availability of funds to purchase the treatment.

All applications and enquiries should be directed to your regional Exceptional Circumstances Manager situated in each of the regional offices of the HFA.

**SCHEDULE 4****ADMINISTRATIVE PROVISIONS**1. Services to be Provided in New Zealand

No payment shall be made under this Notice in respect of medical services provided to any person or class of person who was not in New Zealand at the time the medical services were provided.

2. Residency Qualifications

Payments under this Notice shall only be paid for medical services provided to eligible persons as defined by schedule 1 of this Notice. It is the responsibility of the Anaesthetist Medical Practitioner to check that a patient is an eligible person at the time that services are provided.

3. Claims for Payments or Allowances and aggregation of Payments to Anaesthetist Medical Practitioners

## 3.1 Every claim for payments or allowances provided in accordance with this Notice shall:-

- a) contain the New Zealand Medical Council Number of the individual Anaesthetist Medical Practitioner who personally provided the services for which the claim is made; and
- b) be signed by that individual Anaesthetist Medical Practitioner.

## 3.2 Any Anaesthetist Medical Practitioner who is entitled to make claims for any payments or allowances payable under this Notice may authorise Health Benefits to:-

- a) aggregate those claims, for the purposes of payment only with the claims of another Anaesthetist Medical Practitioner or other Anaesthetist Medical Practitioners nominated by the Anaesthetist Medical Practitioner; and
- b) to make payments into any bank account nominated by the Anaesthetist Medical Practitioner.

4. Laboratory Testing and Diagnostic Imaging

## 4.1 Every order for a laboratory test issued by an Anaesthetist Medical Practitioner shall:-

- a) contain the New Zealand Medical Council Number (and PAN where applicable) of the individual Anaesthetist Medical Practitioner who personally treated the Patient for whom the laboratory test is ordered;
- b) contain the date of referral, patient name, NHI where available, patient date of birth (if no NHI), patient gender (if no NHI) name of test or test code, and the Health Funding Authority identifier in those circumstances as subsequently advised to the Anaesthetist Medical Practitioner in accordance with the terms of this Notice. and
- c) be signed by that individual Anaesthetist Medical Practitioner.

## 4.2 Every referral order for a diagnostic imaging service issued by a Anaesthetist Medical Practitioner shall:-

- a) contain the New Zealand Medical Council Number of the individual Anaesthetist Medical Practitioner who personally treated the patient for whom the diagnostic imaging service test is ordered; and
- b) be signed by that individual Anaesthetist Medical Practitioner.

5. Certificate of Authentication and Statement in Explanation of Claim
- 5.1 In relation to any claim for payments in accordance with this Notice, the Medical Officer of the Health Funding Authority or any other person authorised for this purpose by the Health Funding Authority:
- 5.1.1 shall require the Anaesthetist Medical Practitioner concerned to sign the required Certificate of Authentication in relation to the Anaesthetic Medical Service provided; and
- 5.1.2 may require the Anaesthetist Medical Practitioner concerned to supply in writing or otherwise, a statement of explanation or substantiation of the claim, or of the reasonableness of the amount of the claim.
- 5.1.3 May require the Anaesthetist Medical Practitioner to provide details of any other contracts or employment arrangements pursuant to which the Anaesthetist Medical Practitioner may claim payment for provision of anaesthetic services.
- 5.2 If the Anaesthetist Medical Practitioner does not sign the required Certificate of Authentication, or refuses to supply any information required by subclause 5.1 of this clause or fails to supply any such information within 21 days after being so required, or supplies an insufficient or unsatisfactory statement, the Board of the Health Funding Authority, after reference to the Advisory Committee may:
- 5.2.1 disallow the claim either wholly or in part; or
- 5.2.2 if the claim or any such claim has been paid, take the necessary steps to recover from the Anaesthetist Medical Practitioner the whole or a specified part of the claim and any associated costs or losses, as a debt due to Health Funding Authority, or set off the whole or any specified part of such claim against any amounts that may thereafter be payable to the Anaesthetist Medical Practitioner in respect of any other claim or claims.
6. Daily Record
- 6.1 Every Anaesthetist Medical Practitioner who provides any Anaesthetic Medical Services for which payment is claimed under this Notice shall keep a comprehensive and readily accessible Daily Record in respect of every patient, which shall include the following:
- 6.1.1 the name and the usual place of residence of the patient;
- 6.1.2 the place where the services were provided;
- 6.1.3 the date on which the services were provided;
- 6.1.4 a record of the clinical history of the patient and of the treatment given or services rendered.
- 6.1.5 the pharmaceuticals prescribed
- 6.1.6 the laboratory services authorised
- 6.2 The Medical Officer of the Health Funding Authority or any medical practitioner authorised by the Health Funding Authority in writing to do so, may inspect the records as detailed in subclause 6.1 kept by an Anaesthetist Medical Practitioner in respect of any enquiry related to payments paid to the Anaesthetist Medical Practitioner or services provided by the Anaesthetist Medical Practitioner or claims made by the Anaesthetist Medical Practitioner pursuant to this Notice at any reasonable time and it shall be the duty of every Anaesthetist Medical Practitioner who provides Anaesthetic Medical Services to answer all enquiries, with respect to those records, made by the Medical Officer of the Health Funding Authority or by any medical practitioner so authorised to inspect the records.
- 6.3 The Board of the Health Funding Authority may, on the recommendation of the Advisory Committee, disallow any claim for payment in accordance with this Notice if any of the records required to be kept pursuant to this clause have not been kept, or if, in the opinion of the Advisory Committee, any records so kept are inadequate.
- 6.4 Every Anaesthetist Medical Practitioner shall, in addition to the records required in subclause 6.1 to 6.3 of this schedule, maintain records of patients seen and payments claimed for each claim made under this Notice, on the forms approved by the Health Funding Authority for the purpose as contained in the appendices to the various schedules of this Notice.

## 7. Complaints

- 7.1 In respect of every Anaesthetist Medical Practitioner who provides any services under this Notice including Anaesthetic Medical Services, the Board of the Health Funding Authority may, for the purpose of preventing abuse against the provisions of this Notice as it applies to claims made under this Notice, refer to the Advisory Committee any of the following matters for enquiry:
- 7.1.1 Any complaint that an Anaesthetist Medical Practitioner is performing an excessive number of consultations to a patient;
  - 7.1.2 Any complaint that an Anaesthetist Medical Practitioner is conducting an unduly large number of consultations on any day or days or during any part of such day or days;
  - 7.1.3 Any complaint that an Anaesthetist Medical Practitioner has been in the habit of providing an unduly large number of daily consultations and/or services, having regard to the facilities used by the Anaesthetist Medical Practitioner in his or her practice and/or place where the services were provided and the Anaesthetist Medical Practitioner's manner of conducting the practice or to either of those things;
  - 7.1.4 Any complaint that an Anaesthetist Medical Practitioner has displayed culpable lack of skill or any negligence or lack of care in the performance of the Anaesthetist Medical Practitioner's duties;
  - 7.1.5 Any complaint that an Anaesthetist Medical Practitioner has obtained or attempted to obtain any fee from the Health Funding Authority in connection with a claim in respect of any medical services that have not been provided or that have been provided otherwise than in accordance with this Notice;
  - 7.1.6 Any other complaint that, in the opinion of the Board of the Health Funding Authority warrants enquiry, in addition to any matters specifically mentioned in any Act or any regulations made pursuant to any Act as referable to the Advisory Committee or the Disciplinary Committee as appropriate.
- 7.2 In respect of any complaint under this clause, instead of, or in addition to, exercising any other powers conferred on the Board of the Health Funding Authority by this Notice, the Board of the Health Funding Authority may, if the Board of the Health Funding Authority thinks fit, and if the Advisory Committee or the Disciplinary Committee as appropriate so recommends, exercise any of the powers conferred by subclauses 5.2.1 and 5.2.2 of this schedule
- 7.3 Notwithstanding the powers conferred by subclauses 5.2.1 and 5.2.2 of this schedule or any notice period specified in this Notice, the Health Funding Authority may, on the recommendation of the Advisory Committee or the Disciplinary Committee as appropriate, terminate this Notice immediately where a serious complaint against the Anaesthetist Medical Practitioner has been proven.

## 8. Excessive Services

- 8.1 Where, in respect of any medical services provided by an Anaesthetist Medical Practitioner, any complaint under subclause 7.1.1, 7.1.2 and / or 7.1.3 of this schedule is referred by the Board of the Health Funding Authority to the Advisory Committee and the Advisory Committee is of the opinion that:
- 8.1.1 the Anaesthetist Medical Practitioner has been in the habit of providing an excessive or unduly large number of consultations or services as specified in subclauses 7.1.1, 7.1.2 and / or 7.1.3; and
  - 8.1.2 an unduly large proportion of the services afforded would not warrant payment of the maximum amount permitted by this Notice.

the Board of the Health Funding Authority, if the Advisory Committee so recommends, may by notice in writing to the Anaesthetist Medical Practitioner direct that as from a specified date the amount paid in respect of each future Anaesthetic Medical Service provided by the Anaesthetist Medical

Practitioner in excess of a number specified in relation to any day or other specified period or number of Consultations to any patient, shall not exceed an amount so specified.

- 8.2 Any Anaesthetist Medical Practitioner to whom a direction has been given pursuant to subclause 8.1 of this clause may apply to the Board of the Health Funding Authority on the expiry of a period of 3 months after the date so specified in the direction for the direction to be revoked.
- 8.3 In any case referred to in subclause 8.2 of this clause the Board of the Health Funding Authority may, at its discretion by notice in writing to the Anaesthetist Medical Practitioner revoke the direction if the Board of the Health Funding Authority is satisfied that such a revocation is warranted, having regard to any improvement in the facilities used by the Anaesthetist Medical Practitioner in his or her practice and in the Anaesthetist Medical Practitioner's manner of conducting the practice or in either of those things, or because the Anaesthetist Medical Practitioner has reduced the number of services provided by him or her to a reasonable number.

#### 9. Certificate of Services Provided

- 9.1 Subject to subclause 9.2 of this clause, the Health Funding Authority may, after consultation with the Advisory Committee or on the recommendation of the Disciplinary Committee, by notice in writing to any Anaesthetist Medical Practitioner, require that Anaesthetist Medical Practitioner to support every claim for payment of payments for medical services by a certificate signed by the patient or by some responsible person acting on behalf of the patient, to the effect that the medical services in respect of which the claim is made have been provided at the time and place specified in the claim.
- 9.2 Where, in the case of any particular patient, the Medical Officer of the Health Funding Authority is satisfied that owing to special circumstances it would not be practicable for a Anaesthetist Medical Practitioner to obtain or supply a certificate referred to in subclause 9.1 of this clause, the Medical Officer of the Health Funding Authority may relieve the Anaesthetist Medical Practitioner by notice in writing from the obligation to supply such a certificate.
- 9.3 The Health Funding Authority may at any time by notice in like manner revoke any requirement made under subclause 9.1 of this clause.

#### 10. Notification of Intention to Provide Services

- 10.1 Any Medical Practitioner who intends to provide services pursuant to this Notice and claim payments from the Health Funding Authority under this Notice may apply to the Health Funding Authority in accordance with this clause and with the provisions of Part A of this Notice. No Medical Practitioner shall be issued with a Notice or be entitled to claim pursuant to a Notice unless a Notice has been issued to that Medical Practitioner pursuant to the procedures outlined in this Notice.
- 10.2 Where the Health Funding Authority determines to issue a Notice to a Anaesthetist Medical Practitioner pursuant to Part A of this Notice the Health Funding Authority will notify the Anaesthetist Medical Practitioner in writing of a PAYEE number which shall be used on all claim forms, and will also inform Health Benefits Limited.

#### 11. Advisory Committees

- 11.1 The Board of the Health Funding Authority may from time to time appoint an Advisory Committee as it considers necessary for the purposes of:
- 11.1.1 advising as to the application of the terms and conditions subject to which any of the payments provided for by this Notice will be made available,
- 11.1.2 hearing any complaints and disputes that may arise in relation to any such payments,
- 11.1.3 making recommendations for any other purpose in connection with this Notice,

- 11.2 A Committee appointed under this clause shall be called the Medical Practitioners Advisory Committee and its members shall be appointed by the Health Funding Authority. A panel of members shall be available for appointment to sit on any particular matter and at any sitting not less than half the members of the Committee (exclusive of the Chairman) shall be appointed to represent members of the medical profession who are currently in practice and who have been nominated by the New Zealand Medical Association as being available for that purpose. Further half of the members appointed directly by the Health Funding Authority shall be or have been members of the medical profession. (“members of the medical profession” for the purposes of this clause for appointment to the Advisory Committee shall include practitioners who hold a current practising certificate or who have been in practice for a continuous period of at least 10 years within the previous 20 years).
- 11.3 The Health Funding Authority shall pay the members of the Advisory Committee remuneration by way of payments, salary or allowances and travelling allowances and expenses as provided by the Fees and Travelling Allowances Act 1951.
- 11.4 Where any complaint or dispute is referred to the Advisory Committee, the Health Funding Authority and the Anaesthetist Medical Practitioner involved shall assist the Advisory Committee in its enquiry and shall make available to the Advisory Committee any document, book, record or other item which is material to the enquiry and which is in the possession, or under the control of such party. Any requirement to make available the clinical records of a patient shall comply with the provisions of the Privacy Act 1993.
- 11.5 Any matter which is referred to the Advisory Committee under this Notice and which, in the opinion of the Advisory Committee, involves or may involve matters of professional misconduct or conduct unbecoming a medical practitioner shall be referred to the Disciplinary Committee for investigation and report.
- 11.6 The Advisory Committee may consider (in accordance with the provisions of this subclause 11.6) a referral from a Medical Practitioner regarding a decision of the Health Funding Authority pursuant to Part A clause 8 if the Health Funding Authority declines to issue a notice to that Medical Practitioner.
- 11.6.1 Following a referral the Advisory Committee may only consider;
- 11.6.1.1 if the Health Funding Authority has followed the procedure set out in this Notice, or
- 11.6.1.2 if any exceptional circumstances, not already considered by the Health Funding Authority, apply that would bring the Medical Practitioner within the criteria set out in clause 8 of Part A of this Notice.
- 11.6.2 The onus to show that the criteria in clause 8 is satisfied remains with the applicant medical Practitioner.
- 11.6.3 The Advisory Committee may request additional information or advice if it considers this appropriate.
- 11.6.4 After considering submissions and information put before it the Advisory Committee may make recommendations to the Health Funding Authority regarding those issues outlined in subclause 11.6.1.
- 11.6.5 The Health Funding Authority may then review the Advisory Committee recommendations and may reconsider its earlier decision. The Health Funding Authority shall then make its decision concerning the application which decision shall be final and binding.

## **SCHEDULE 5**

**ELIGIBILITY CRITERIA****1999 Direction of the Minister of Health Relating to  
Eligibility for Publicly Funded Personal Health and Disability Services  
in New Zealand**

Pursuant to section 25 of the Health and Disability Services Act 1993, the Minister of Health, after consulting as required by that section, hereby gives the following direction to the Health Funding Authority established under section 32 of that Act.

**1. Title and commencement -**

- (1) This direction may be cited as the Health and Disability Services Eligibility Direction 1999.
- (2) This direction shall come into force on the 1st day of July 1999.

**2. Interpretation -**

- (1) In this direction, unless the context otherwise requires -

"AI Act" means the Accident Insurance Act 1998 and includes any regulations made or continued under that Act;

"Community services" means services (other than disability support services) provided in a community setting outside a health care facility;

"Disability services" has the same meaning as in section 2 of the H & DS Act;

"Disability Support Services" include -

- (a) services which provide information on Disability Support Services to people with disabilities and/or their caregivers in a suitable form; and
- (b) needs assessment services; and
- (c) service co-ordination services; and
- (d) personal care services including assistance with daily activities such as dressing, personal hygiene, assistance with eating, supervising medication, seating, positioning and toileting; and
- (e) household management services for people with disabilities including assistance with domestic functions such as meal preparation, cooking, cleaning, laundering and shopping; and
- (f) caregiver support services that provide relief to primary informal care givers; and
- (g) residential care services that provide short and long-term care; and
- (h) rehabilitation and habilitation services; and
- (i) environmental support services which supply people with disabilities with -

- (i) equipment and aids to meet a range of needs including mobility, household management, communication, personal care needs; and
- (ii) consumables related to continence, personal care and mobility;

“Eligibility” means the right to be considered for receipt of publicly funded services, but does not equate to an entitlement to receive those services;

“Eligibility criteria” means the criteria set out in section 5 of this direction, any of which, as a minimum, must be satisfied before any person may receive any publicly funded service purchased by the HFA;

"Funding agreement" means an agreement within the meaning of section 21 of the H & DS Act entered into by the HFA, and for the purposes of clause 5(13), may include a funding agreement entered into under section 361 of the AI Act;

“Guardian” has the same meaning as in section 3 of the Guardianship Act 1968;

"H & DS Act" means the Health and Disability Services Act 1993;

"Health care facility" means a hospital, or other facility for the provision of services operated by a hospital (whether or not located in that hospital);

“HFA” means the Health Funding Authority established by Order-in-Council under section 32 of the H & DS Act;

"Minister" means the Minister of Health;

"New Zealand citizen" means a person who has New Zealand citizenship under the Citizenship Act 1977 or the Citizenship (Western Samoa) Act 1982;

"Ordinarily resident in New Zealand" means an individual who is lawfully present in New Zealand at the time of seeking services and who -

(a) is a New Zealand citizen who, immediately prior to seeking services, has remained in New Zealand for a period that equals or exceeds two years, whether or not that person has been temporarily absent from New Zealand; or

(b) is a New Zealand citizen who -

- (i) has his or her usual place of abode in New Zealand; and
- (ii) can demonstrate an intention, on reasonable grounds, to remain in New Zealand for a period that, together with the time that person has already been in New Zealand immediately prior to seeking the services, equals or exceeds two years; or

(c) holds a residence permit issued under the Immigration Act 1987, and

- (i) holds a current returning resident’s visa issued under the Immigration Act 1987; or
- (ii) immediately prior to seeking services, has remained in New Zealand for a period that equals or exceeds two years; or

(d) is a person exempted, by virtue of being a citizen of the Commonwealth of Australia or by virtue of holding a current resident return visa issued by the Government of Australia, from holding a residence visa issued under the Immigration Act 1987, and can demonstrate an intention, on reasonable grounds, to remain in New Zealand for a period that, together with the time that person

has already been in New Zealand immediately prior to seeking the services, equals or exceeds two years; or

- (e) holds a student permit issued under section 26 of the Immigration Act 1987:
- (i) entitling that person to remain in New Zealand for a period that equals or exceeds two years; or
  - (ii) entitling that person to remain in New Zealand for a period of not less than 12 months, where that individual can demonstrate a reasonable expectation of having a further student permit issued for that period which will (together with the duration of the first permit) allow that person to remain in New Zealand continuously for a period that equals or exceeds two years; or
  - (iii) entitling that person to remain in New Zealand for a specified period of time which, together with the period of time that person has already been lawfully in New Zealand immediately prior to obtaining the permit, equals or exceeds two years, or
- (f) holds a visitor's or work permit issued under section 26 of the Immigration Act 1987:
- (i) entitling that person to remain in New Zealand for a period that equals or exceeds two years; or
  - (ii) entitling that person to remain in New Zealand for a specified period of time which, together with the period of time that person has already been lawfully in New Zealand immediately prior to obtaining the permit, equals or exceeds two years; or
- (g) is an individual under the age of two years who was born in New Zealand and has remained in New Zealand since birth, whether or not that person has been temporarily absent from New Zealand;

"Outpatient services" means personal health services (including treatment, therapy, advice, diagnostic or investigatory procedures or pre-admission assessment) provided in a health care facility to a person who is not admitted to that facility at the time of receiving those services;

"Partner" means -

- (a) where the parties are legally married, either the husband or the wife, as the case requires;
- (b) where the parties (whether of the same or opposite gender) are not legally married but are living together in a relationship in the nature of marriage, either of the parties, as the case requires;

"Personal health services" has the same meaning as in section 2 of the H & DS Act;

"Prison" includes a Gazetted police jail, or corrective training institution;

"Publicly funded services" means personal health and disability services purchased by the HFA using funds provided by the Crown under a funding agreement, and does not include services purchased by the HFA using funds provided by any person or agency other than the Crown, whether or not the purchasing of those services results in a part charge to the person receiving the services;

"Public health acute services" has the same meaning as in section 14(2) of the Accident Insurance Act 1998;

"Services" (except in clause **5(13)**) means personal health services or disability services or both;

(2) Words importing the singular include the plural and vice versa.

### 3. Disputes and payments -

If any question or dispute arises as to whether or not -

- (1) Any person satisfies any of the eligibility criteria for receipt of a service; or
- (2) Any other criteria or any terms or conditions, set out in a funding agreement, for receipt of a service, are satisfied;

that question or dispute shall be determined by the Minister.

#### **4. Amendment, revocation and term of direction -**

- (1) The Minister may from time to time, by notice under section 25 of the H & DS Act, amend or revoke this direction.
- (2) The Health and Disability Services Eligibility Direction 1998 is hereby revoked.
- (3) This direction (together with any amendments to it made under clause (1) of this section), shall remain in force until it is revoked by the Minister.

#### **5. Eligibility Criteria -**

A person shall be eligible for publicly funded services if he or she is in New Zealand at the time of seeking services and -

- (1) Is ordinarily resident in New Zealand; or
- (2) Is a New Zealand citizen who is temporarily resident in New Zealand and who has at some time had his or her usual place of abode in New Zealand for a period that equalled or exceeded two years whether or not that person has been temporarily absent from New Zealand during that period; or
- (3) Is a New Zealand citizen whose usual place of abode is in the Cook Islands, Niue, or Tokelau, and who for the time being is temporarily resident in New Zealand; or
- (4) Has refugee status in New Zealand or is in the process of applying for such status; or
- (5) Is a student receiving funding under the Ministry of Foreign Affairs and Trade Official Development Assistance Programme, or is the partner, or child under the age of 18 years of such student; or
- (6) Is a participant in the Ministry of Education's Foreign Language Teaching Assistantship Scheme; or
- (7) Is -
  - (a) a person having their usual place of abode (other than unlawfully) in a country or territory from time to time specified by the Minister by notice in the Gazette, being a country or territory where in the opinion of the Minister individuals who are citizens of New Zealand or ordinarily resident in New Zealand are or will be, while in that country or territory, eligible for services that substantially correspond to services that the HFA is obliged by its funding agreement to purchase in respect of those individuals; and
  - (b) not of a class of persons specified by the Minister in that notice as being individuals who may not receive services purchased by the HFA; or

- (8) Is a resident of Australia who is in New Zealand on a temporary basis (in respect of services required to be provided for that individual while in New Zealand by the agreement set out in the Schedule to the Health Benefits (Reciprocity with Australia) Act 1986) or any enactment which replaces, amends, supplants, or consolidates that Act; or
- (9) Is recognised by the Government of the United Kingdom as a national, and has his or her usual place of abode in the United Kingdom, and is in New Zealand on a temporary basis (in respect of services required to be provided for that individual while in New Zealand by the agreement set out in the Schedule to the Health Benefits (Reciprocity with the United Kingdom) Act 1982 or any enactment which replaces, amends, supplants, or consolidates that Act; or
- (10) Is a child (who is not otherwise eligible) under the age of 16 years who is lawfully in New Zealand and is for the time being in the care and control of:
- (a) his or her guardian, and his or her guardian meets any of the eligibility criteria specified in clauses 1, 2, or 3; or
  - (b) a person who is in the process of legally adopting that child and that person meets any of the eligibility criteria specified in clauses 1, 2, or 3, or
- (11) Is an individual receiving compulsory services under the Tuberculosis Act 1948, the Health Act 1956, the Alcoholism and Drug Addiction Act 1966, the Mental Health (Compulsory Assessment and Treatment) Act 1992, or any regulations made under such legislation, in respect only of services under those enactments, provided that any such individual may be considered for eligibility for those services only in terms of this clause 11; or
- (12) Is a prison inmate, including an individual on remand in prison custody, in respect only of services not available through the prison health services, provided that any such individual may be considered for eligibility for those services only in terms of this clause 12; or
- (13) (a) is an individual who, in respect of eligibility for public health acute services required by that person for a personal injury for which that person has cover and entitlement<sup>1</sup> to treatment under the AI Act, is seeking services covered by a funding agreement; or
- (b) is an individual who, in respect only of eligibility for disability support services, requires those services for a personal injury for which the person has cover and entitlement<sup>2</sup> under the AI Act, but has been disentitled to any of those services under any of sections 117-123 of the AI Act;
- (c) Notwithstanding clause 6(2), a person who has cover and statutory entitlement in respect of a personal injury under the AI Act is not eligible for publicly funded services in relation to that injury except as provided in this clause 5(13).

## 6. General

- (1) Eligibility according to the eligibility criteria is to be assessed at the time the service is sought.
- (2) A person may, unless otherwise stated, be eligible under one or more of the eligibility criteria.

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<sup>1</sup> “Entitlement” in clause 5(13)(a) means a person who has statutory entitlements in terms of Part I of Schedule 1 to the AI Act, *and* who has not been disentitled under sections 117-123 of the AI Act

<sup>2</sup> “Entitlement” in clause 5(13)(b) means a person who has statutory entitlement to disability support services in terms of Schedule 1 to the AI Act

(3) No payment shall be made by the HFA in respect of the receipt of a service by an eligible person who was not within New Zealand at the time of that receipt, unless such payment is authorised in a funding agreement.

Dated at Wellington this                    day of                    1999

Hon Wyatt Creech  
Minister of Health

**SCHEDULE 6**

**BUSINESS  
RULES**

CLAIM FORMS

- 1 Every claim by an Anaesthetist Medical Practitioner for payment of fees shall be submitted to Health Benefits Limited (or such other agency as the Health Funding Authority shall specify). The claim shall be submitted on the forms approved from time to time by the Health Funding Authority (the “approved forms”) or as otherwise approved by the Health Funding Authority in writing.
- 2 Claims for Anaesthetic Medical Services and any other services payable pursuant to this Notice must be submitted on the approved forms, and any claims submitted on forms that are not current and approved will be rejected.

CLAIM FORMAT

- 3 For all Anaesthetist Medical Practitioners on Current Notices claims may be submitted manually in either of the following formats:
  - 3.1 by hand annotation of the standard claim form, (annexed as schedule 1 of the Business Rules), or
  - 3.2 by computer generated form on forms approved in writing by Health Benefits Limited, and posted / couriered to Health Benefits Limited.

CLAIM COMPLETION

- 4 Claims must be completed accurately and in full and in accordance with all terms and conditions of this Notice.

CLAIM CERTIFICATION

- 5 The claimant Anaesthetist Medical Practitioner shall certify the truth and accuracy of all of the details contained in each claim, that the claim is in accordance with all of the provisions of clause 4 of the Business Rules and all other provisions of this Notice and that the Anaesthetist Medical Practitioner has provided the Anaesthetic Medical Services to the patient in person.
- 6 The certification shall occur by the Anaesthetist Medical Practitioner personally signing the certification on the claim form.

INFORMATION TO BE PROVIDED

- 7 The information specified in schedule 2 of the Business Rules is to be provided in the format outlined therein by the Anaesthetist Medical Practitioner at the time of claiming in support of each claim whether electronic or manual.

REJECTION OF CLAIMS

- 8 Claims will be rejected unpaid and returned to the Anaesthetist Medical Practitioner (where that Anaesthetist Medical Practitioner is identifiable) if:
- 8.1 any claim is not reasonably legible and readable;
  - 8.2 any of the information specified in schedule 2 of the Business Rules is not provided or is incomplete or inaccurate; or
  - 8.3 any aspect of the Notice is not complied with.

RECEIPT OF CLAIMS

- 9 It is the Anaesthetist Medical Practitioner's responsibility to send any claim to Health Benefits Limited or such other place as directed in writing from time to time by the Health Funding Authority. It is the Anaesthetist Medical Practitioner's responsibility to ensure that such claim is physically received by Health Benefits Limited.

SUBMISSION OF CLAIMS

- 10 Every Anaesthetist Medical Practitioner should file a claim for Anaesthetic Medical Services at least monthly but shall not file a claim more frequently than once a week.
- 10.1 a separate claim schedule must be used for each day an Anaesthetic Medical Service is provided to ensure the date on which the service was provided is clearly recorded
  - 10.2 Each claim should include Anaesthetic Medical Services provided within the calendar week (starting Monday and finishing Sunday), or the calendar month (starting with the first day of the month and finishing with the last day of that month).
- 11 Claims must be submitted within six calendar months of the date of service. Any claim not submitted within six calendar months of the date of service shall be rejected unpaid.

NOTIFICATION OF CHANGE OF DETAILS

- 12 The Anaesthetist Medical Practitioner shall be responsible at all times for keeping Health Benefits Limited advised of the Anaesthetist Medical Practitioner's current postal and practice addresses, and any change in Anaesthetist Medical Practitioner surname (to accord with the Medical Council Register details).
- 13 The latest version of these details held on file by Health Benefits Limited shall be deemed to be the correct details. Claims may be rejected if information held on the files of Health Benefits Limited does not match claim details.

- 14 Any new claimant shall apply to Health Benefits Limited and shall be provided with forms for completion and advised of the current procedures for registration for claiming purposes prior to any entitlement to claim arising.

DEFINITIONS

- 15 The definitions provided in schedule 1 of the Advice Notice to Anaesthetist Medical Practitioners shall apply to these Business Rules and any reference to Health Benefits Limited shall include any other agency as the Health Funding Authority shall from time to time advise to Anaesthetist Medical Practitioners.

GOODS AND SERVICES TAX

- 16 All claims made are to be inclusive of Goods and Services Tax component.

**SCHEDULE 1**

APPROVED FORMS FOR  
ANAESTHETIC MEDICAL SERVICES



Anaesthetic Medical Services

**Claim Summary Form**

This form is to accompany any anaesthetic form on which a payment is claimed.

**Details of Claimant**

**Payee Name:**

**NZMC Number:**

**Contract Number:**

**Payee Reference:**

**Payee Number:**

**Details of Claim**

**Number of Forms Attached:**

**Date(s) of Service:**  TO

AMS Schedule Summary	Number	Rate	Amount
Y1		\$32.50	\$
Y3		\$32.50	\$
YZ		\$32.50	\$
J 1		\$20.00	\$
J3		\$15.00	\$
JZ		\$20.00	\$
A1		\$15.00	\$
A3		\$00.00	\$
AZ		\$15.00	\$

**Total of Claim**  \$

**Certification**

In signing below, I certify that the details provided in the summary form and in the claim schedule are in all respects true and accurate and in accordance with the Advice Notice.

\_\_\_\_\_  
Signature \_\_\_\_\_  
Date

Anaesthetic Services **Claim** 41 **Details**



<b>Practitioner Name:</b>			
<b>NZMC No:</b>		<b>Contract No:</b>	
<b>Payee No:</b>		<b>Claim Date:</b>	/ /
<b>Claim Reference No:</b>			

	Date of Service	Patient NHI	Address	Assessment	Administration	Patient Type	Claim Amt \$
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							

**Certification**

In signing below, I certify that the details provided in the summary form and in the claim schedule are in all respects true and accurate and in accordance with the Advice Notice.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date