# Primary Maternity Services Amendment Notice (No 2) 2017

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

## Notice

**1. Title**—

(1) This notice is the Primary Maternity Services Amendment Notice (No 2) 2017.[[1]](#footnote-1)

(2) This notice amends the Primary Maternity Services Notice 2007[[2]](#footnote-2) (the “Principal Notice”).

**2. Commencement**— This notice comes into force on the day after the date of its notification in the *New Zealand Gazette.*

**3. Amendment to Schedule 1** — The Principal Notice is amended by deleting Schedule 1, and replacing it with the new Schedules 1A and 1B set out in the Schedule to this notice.

**4. Implementation dates**

The implementation date for;

1. Schedule 1A, is 1 July 2016;
2. Schedule 1B, is 1 July 2017.

Dated 2017

Hon Dr JONATHAN COLEMAN

MINISTER OF HEALTH

## Schedule

### Schedule 1A: Fees

|  |  |  |
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|  |  |  |
| **1** | **Maternity LMC Antenatal Services (WM1007)** | **Fees****(GST Excl)** |
| (1) | first and second trimester:(a) full fee (b) first partial fee (c) last partial fee  | 321.50183.50131.00 |
| (2) | third trimester:(a) full fee (b) first partial fee (c) last partial fee  | 310.50131.00173.00 |
| **2** | **Maternity LMC Labour and Birth Services (WM1008)** | **Fees****(GST Excl)** |
| (1) | labour and birth: |  |
|  | (a) first birth | 1168.00 |
|  | (b) VBAC | 1168.00 |
|  | (c) subsequent birth |  916.00 |
| (2) | labour and birth if a general practitioner or obstetrician has used hospital midwifery services: |  |
|  | (a) first birth | 482.00 |
|  | (b) VBAC | 482.00 |
|  | (c) subsequent birth | 369.00 |
| (3) | homebirth supplies and support | 471.50 |
| (4) | birthing unit support | 262.50 |
| (5) | labour and birth (exceptional circumstances) | 326.00 |
| (6) | labour and birth rural support | 536.00 |
| **3** | **Maternity LMC Postnatal Services (WM1009)****(Services Following Birth)** | **Fees****(GST Excl)** |
| (1) | services following birth: |  |
|  | (a) received inpatient postnatal care: |  |
|  |  (i) full fee (ii) first partial fee (iii) last partial fee(b) no inpatient postnatal care: (i) full fee (ii) first partial fee (iii) last partial fee(c) additional postnatal visits | 514.50252.00252.00578.50284.00284.00166.00 |
| (2) | services following birth if a general practitioner or obstetrician has used hospital midwifery services: |  |
|  | (a) received inpatient postnatal care: |  |
|  |  (i) full fee (ii) first partial fee (iii) last partial fee(b) no inpatient postnatal care: (i) full fee (ii) first partial fee (iii) last partial fee |  92.00 46.00 46.00123.00 61.50 61.50 |
| (3) | rural travel: |  |
|  | (a) semi rural: |  |
|  |  (i) full fee | 161.00 |
|  |  (ii) first partial fee |  79.00 |
|  |  (iii) last partial fee |  79.00 |
|  | (b) rural: |  |
|  |  (i) full fee | 241.50 |
|  |  (ii) first partial fee | 118.00 |
|  |  (iii) last partial fee | 118.00 |
|  | (c) remote rural: |  |
|  |  (i) full fee | 428.50 |
|  |  (ii) first partial fee | 210.00 |
|  |  (iii) last partial fee | 210.00 |
| **=4s** | **Maternity Non-LMC Services (WM1000)** | **Fees****(GST Excl)** |
| (1) | first trimester services: |  |
|  | (a) without threatened miscarriage, miscarriage or termination | 113.00 |
|  | (b) with threatened miscarriage, miscarriage or termination | 154.00 |
| (2) | urgent normal hours pregnancy care |  41.00 |
| (3) | urgent out of hours pregnancy care |  61.50 |
| (4) | non-LMC labour and birth | 512.50 |
|  | (rural support) |  |
| (5) | urgent postnatal care |  41.00 |
|  |  |  |
|  |  |  |
| **5** | **Maternity radiology specialist consult (WM1005)** | **Fees****(GST Excl)** |
| (1) | ultrasound scans |  80.00 |
| **6** | **Maternity obstetrician specialist consult (WM1002)** | **Fees****(GST Excl)** |
| (1) | consulting obstetrician services: |  |
|  | (a) first consultation |  82.00 |
|  | (b) subsequent consultation |  41.00 |
| **7** | **Maternity paediatrician specialist consult (WM1004)** | **Fees****(GST Excl)** |
| (1) | consulting paediatrician services: |  |
|  | (a) first consultation |  92.00 |
|  | (b) subsequent consultation |  41.00 |
|  |  |  |

### Schedule 1B: Fees

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| **1** | **Maternity LMC Antenatal Services (WM1007)** | **Fees****(GST Excl)** |
| (1) | first and second trimester:(a) full fee (b) first partial fee (c) last partial fee  | 341.00194.50139.00 |
| (2) | third trimester:(a) full fee (b) first partial fee (c) last partial fee  | 329.00139.00183.50 |
| **2** | **Maternity LMC Labour and Birth Services (WM1008)** | **Fees****(GST Excl)** |
| (1) | labour and birth: |  |
|  | (a) first birth | 1238.00 |
|  | (b) VBAC | 1238.00 |
|  | (c) subsequent birth |  971.00 |
| (2) | labour and birth if a general practitioner or obstetrician has used hospital midwifery services: |  |
|  | (a) first birth | 482.00 |
|  | (b) VBAC | 482.00 |
|  | (c) subsequent birth | 369.00 |
| (3) | homebirth supplies and support | 500.00 |
| (4) | birthing unit support | 278.50 |
| (5) | labour and birth (exceptional circumstances) | 345.50 |
| (6) | labour and birth rural support | 568.00 |
| **3** | **Maternity LMC Postnatal Services (WM1009)****(Services Following Birth)** | **Fees****(GST Excl)** |
| (1) | services following birth: |  |
|  | (a) received inpatient postnatal care: |  |
|  |  (i) full fee (ii) first partial fee (iii) last partial fee(b) no inpatient postnatal care: (i) full fee (ii) first partial fee (iii) last partial fee(c) additional postnatal visits | 545.50267.00267.00613.00301.00301.00176.00 |
| (2) | services following birth if a general practitioner or obstetrician has used hospital midwifery services: |  |
|  | (a) received inpatient postnatal care: |  |
|  |  (i) full fee (ii) first partial fee (iii) last partial fee(b) no inpatient postnatal care: (i) full fee (ii) first partial fee (iii) last partial fee |  92.00 46.00 46.00123.00 61.50 61.50 |
| (3) | rural travel: |  |
|  | (a) semi rural: |  |
|  |  (i) full fee | 170.50 |
|  |  (ii) first partial fee |  83.50 |
|  |  (iii) last partial fee |  83.50 |
|  | (b) rural: |  |
|  |  (i) full fee | 256.00 |
|  |  (ii) first partial fee | 125.00 |
|  |  (iii) last partial fee | 125.00 |
|  | (c) remote rural: |  |
|  |  (i) full fee | 454.00 |
|  |  (ii) first partial fee | 222.50 |
|  |  (iii) last partial fee | 222.50 |
| **4** | **Maternity Non-LMC Services (WM1000)** | **Fees****(GST Excl)** |
| (1) | first trimester services: |  |
|  | (a) without threatened miscarriage, miscarriage or termination | 113.00 |
|  | (b) with threatened miscarriage, miscarriage or termination | 154.00 |
| (2) | urgent normal hours pregnancy care |  41.00 |
| (3) | urgent out of hours pregnancy care |  61.50 |
| (4) | non-LMC labour and birth | 512.50 |
|  | (rural support) |  |
| (5) | urgent postnatal care | 41.00 |
|  |  |  |
|  |  |  |
| **5** | **Maternity radiology specialist consult (WM1005)** | **Fees****(GST Excl)** |
| (1) | ultrasound scans | 80.00 |
| **6** | **Maternity obstetrician specialist consult (WM1002)** | **Fees****(GST Excl)** |
| (1) | consulting obstetrician services: |  |
|  | (a) first consultation | 82.00 |
|  | (b) subsequent consultation | 41.00 |
| **7** | **Maternity paediatrician specialist consult (WM1004)** | **Fees****(GST Excl)** |
| (1) | consulting paediatrician services: |  |
|  | (a) first consultation | 92.00 |
|  | (b) subsequent consultation | 41.00 |
|  |  |  |

1. *New Zealand Gazette*, 27 April 2017, No. 45, page 1973 [↑](#footnote-ref-1)
2. *New Zealand Gazette*, 13 April 2007, No. 41, page 1025 [↑](#footnote-ref-2)