Mauri ora ki a koutou

This is the eleventh in a series of bulletins to inform general practices and PHOs about activities and actions needed post the 1 December 2018 implementation of the new primary care initiatives. You can find more information about these changes including previous bulletins on the Ministry of Health website and in the PHO Services Agreement (version 6).

This bulletin provides information about the National Enrolment Service (NES) and activities to prepare for go-live on 1 April 2019.

CSC opt-in timeframes

The next Entry Date into the CSC scheme will be 1 July 2019 – Deadline to notify the Ministry of Health and your PHO is 14 June 2019. This notification can be done via email.

Please email opt-in information to the following contacts:

Rachael_Bayliss@moh.govt.nz and CBF-CICAdministrator@moh.govt.nz

Capitation Based Funding process once the NES goes live 1 April 2019

From the 1 April NES Start Date, the PHO must advise their DHB and the Ministry no later than 10 business days before the last business day of each month, if there are any changes for practices that could impact CBF payments from May onwards.

The type of changes that could impact on payments are:

- New Practices
- Closed Practices
- Merged Practices
- Changes in Practice HPI_Org_ID
- Changes to funding schemes (VLCA/U14/CSC) or funding status (Access/Interim).

The following activities will need to be undertaken by PHOs and DHBs for the CBF payments made on 15 May 2019.

1. On 28 March 2019 the Ministry emails:
   a. all PHOs a reminder to advise the Ministry and DHB by 12 April 2019 of any practice changes for CBF payments
   b. DHBs the VLCA_U14_CSC template to be completed by 12 April 2019 if there are any changes.
2. On 4 April 2019 the Ministry will email PHOs and DHBs a reminder to complete points 1 (a) and (b) above.

3. By 12 April 2019 DHBs will email all completed VLCA_U14_CSC templates back to the Ministry.

Note: If a practice is changing status from non-VLCA to VLCA, the practice must meet the current eligibility criteria for a VLCA practice and must have approval from their DHB and the Ministry.

Changes to Capitation Based Funding reports

From April 1 the quarterly DHB’s Capitation Summary Report and Capitation Detailed Report will be replaced with the monthly DHB Finance Extracts by PHO and Practices, and DHB Person Extracts.

Other reports will continue in accordance with the Business Requirements documentation approved by the PSAAP Group.

The NES funding switchover

INTRAHEALTH
Profile for Windows was released on 22 March 2019.

The Profile for Mac General Release was released on 28 March 2019

BEST PRACTICE
All practices upgraded on 28 March 2019

MYPRACTICE
All MyPractice sites have been upgraded.

INDICI
The upgrade for all practices was 28 March 2019.

MEDTECH
More than 98 percent of practices upgraded.

Activities to undertake for Medtech switchover

Practices can check the NES Inbox Notifications for exceptions found by the switchover. The pre-built query "Missing NES Enrolment Information" on page 27 in the release notes will identify patients that need to be synchronised with the NES. Any exceptions not resolved before 1 April can be done during April.

Enrolments expiring early

The Medtech switchover process caused a very small number of enrolments to have their expiry dates put back in time. This was fixed last week, but some practices may receive notifications that an enrolment has expired early.
Practices receiving these should enrol the patient again in the NES.

**Newborn enrolment exceptions**

The Medtech CBF switchover may have raised an exception like this for your practice.

1. This is where the baby has been "confirmed enrolled" in the PMS but is still on the NES as Pre-enrolled.
2. Some of these may have an expiry date well over the usual 3 month date from a previous issue, it is important these are fully enrolled in the NES.
3. You can confirm this is the case by using the bottom of the NHI Compare screen, check that the status on the NES is pre-enrol and if it needs to be changed to enrolled in the NES.
4. For these exceptions, to fully enrol the baby click the , go to the compare screen and click

**Unexpected error**

If you have been getting this error when ending an enrolment, the NES enrolment has been ended. You can check with the to confirm the NES enrolment has ended. The PMS will likely be showing that the patient is still enrolled.

We are working hard to get this fixed as soon as possible.

Keep a note of any patients you have had this error with and you will receive instructions on how to get the PMS to show the enrolment has ended when we have found a resolution

**Frequently asked questions**

**Will a missing provider HPI-CPN affect PHO funding?**

No, the patients with missing provider details will still be funded. These details are important if your PHO distributes funding to providers rather than to the practice.

**Will missing geocoding on NHI addresses affect funding?**

Patients with NHI addresses that have not been validated will still be funded but they will be funded at the 0 quintile rate. Geocoding will only affect funding if the meshblock of the person's address is quintile 5.
**What are the processing timeframes for the Medtech CBF Switchover (e.g. how many patients per hour will be processed on average)?**

The switchover runs between the hours of 5pm and 7am. There are 250 patients being processed each 15 minutes, so in an hour, we are expecting to get through around 1000 patients. Based on the number of patients matching the criteria for switchover within the practice database, the switchover duration will vary for every practice.

*Can Medtech continue to be used while the switch over is running?*

Medtech PMS Systems can continue to be used while the switchover is running. All activity is completed using the Medtech Services in the background. There is no impact on the use of the software.

**Further information**

The Ministry of Health will continue to provide online bulletins to DHBs, PHOs and practices as needed. These updates also provide information about NES implementation.

Thank you for your support and hard work to provide people with greater access to primary care.

Ngā mihi nui ki a koutou katoa