



Funding to Māori Health Providers 2016/17 to 2020/21

This report shows information on funding to Māori health providers¹ by the Ministry of Health (the Ministry) and District Health Boards (DHBs) for the period 2016/17 to 2020/21. This report follows on from our report in 2021² on the same topic.

The types of services delivered by Māori providers include health priorities from: child health, oral health, maternity, community health, specialist medicine, mental health, health of older people, and public health. These services can be categorised as health and disability services. Contracts delivered by Māori health providers are services targeted towards Māori, Pacific people and high-needs communities. The data used in this report does not attempt to measure the total spend on health and disability services for Māori, but funding to Māori health providers. This report also does not explain how well health needs are catered for, the quality of health services

provided, or other services used to serve these communities.

The number of Māori health providers is difficult to determine because of acquisitions, mergers, closures, and the use of subsidiaries and trading names. Currently there are around 230 (190 excluding subsidiaries) Māori health providers, about the same as the number reported in 2021.

The Ministry and DHBs are funded through Vote Health³ to commission and deliver a range of health and disability services. The Ministry is funded to commission a range of national services including health workforce training and development, national elective services, and national maternity services. DHBs are required under the New Zealand Public Health and Disability Act 2000 to commission and deliver services and support Māori participation in the delivery of Māori health services⁴.

1 Māori health providers have been identified as those providers who meet the Māori Provider Development Scheme definition: a provider that is owned and governed by Māori and is providing health and disability services primarily but not exclusively for Māori. See www.health.govt.nz/publication/maori-provider-development-scheme-mpds-2019-20-purchasing-intentions for more details.

2 See <https://www.health.govt.nz/publication/funding-maori-health-providers-2015-16-2019-20>

3 See <https://www.treasury.govt.nz/sites/default/files/2021-05/est21-v6-health.pdf>

4 See <https://www.health.govt.nz/nz-health-statistics/access-and-use/legislation>



Funding to Māori health providers and Vote Health 2016/17 to 2020/21 (2017 methodology)

Table 1 shows funding to Māori health providers for health and disability services. This table excludes payments to Māori Primary Health Organisations (PHOs) and Māori general practices (GPs) for capitation type payments⁵, and payments for Hauora Māori Scholarships (2017 to 2021), Māori Provider Development Scheme (MPDS), and COVID-19 payments. These payments are shown in Table 3 later in the report.

The above payments are excluded to present a table comparable to earlier reports. Also, Māori PHO payments are subject to large fluctuations when PHOs merge, are established, cease to trade, and when general practices enter and leave PHOs. Excluding these types of payments allows for a more consistent way of measuring funding.

Table 1: Funding to Māori health providers by the Ministry and DHBs as a percentage of Vote Health, 2016/17 to 2020/21

Funding	Year					Increase	
	16/17 \$m	17/18 \$m	18/19 \$m	19/20 \$m	20/21 \$m	Increase 16/17 to 20/21 (\$m)	Increase 16/17 to 20/21 (%)
Funding to Māori health providers by the Ministry and DHBs	\$286.2	\$302.7	\$317.7	\$346.4	\$365.7	\$79.6	27.8%
Vote Health	\$15,099	\$15,883	\$16,737	\$17,890	\$19,313	\$4,214.0	27.9%
Funding to Māori health providers as a percentage of Vote Health	1.90%	1.91%	1.90%	1.94%	1.89%		

Source: Ministry of Health, Wellington; Health Sector – the Estimates of Appropriations, the Treasury, Wellington

Notes: Only payments for health and disability services are shown.

Due to rounding, individual figures in this table may not add to the stated totals and percentages may appear to differ from those stated.

Table 1 shows that funding to Māori health providers was \$365.7 million in 2020/21, an increase of \$79.6 million or 27.8 percent from 2016/17. This increase, 27.8 percent, is similar to the increase in Vote Health, 27.9 percent, during the same time.

In the 2019/20 year a new Māori health provider was formed. This new provider contributed to the larger increase between 2018/19 and 2019/20, compared to other yearly increases.

Although funding to Māori health providers is increasing, it remains a small part of Vote Health, remaining around 1.9 percent of Vote Health between 2016/17 and 2020/21. Funding did increase temporarily to 1.94 percent in 2019/20 coinciding with the establishment of the new Māori provider.

The amounts shown in Table 1 for 2016/17 to 2019/20 are larger than in last year's report due to newly identified providers being included.

In March 2020, the Ministry of Health implemented a new payments system which records information differently to the previous system. Classification of payments in the new system match very closely to the old system but there are some differences.

Total Non-Departmental Output Expenses from Vote Health is used in this analysis. This excludes World Health Organisation contributions and capital expenditure.

⁵ Larger examples of capitation type payments include: First Contact Services, PHO Projects, Management Fees, Primary Health Care Mental Health initiatives and innovations, Health Promotion, Rural Premium Services, and Very Low Cost Access.



Individual DHB funding to Māori health providers and Crown funding, 2016/17 to 2020/21

Table 2 shows that between 2016/17 and 2020/21, the average increase in funding to Māori health providers by DHBs (29.4 percent) was about the same as the increase in DHBs' crown funding (25.0%). Eight DHBs increased their funding to Māori health providers by more than 30 percent.

Table 2: Individual DHB funding to Māori health providers and increases in DHB Crown funding, 2016/17 to 2020/21

DHB	Individual DHB funding to Māori health providers							Crown funding
	16/17 \$m	17/18 \$m	18/19 \$m	19/20 \$m	20/21 \$m	Increase 16/17 to 20/21 (\$m)	Increase 16/17 to 20/21 (%)	Increase 16/17 to 20/21 (%)
Capital and Coast	\$4.9	\$4.9	\$5.5	\$6.8	\$8.5	\$3.6	72.6%	23.4%
Canterbury	\$6.4	\$6.6	\$7.8	\$8.9	\$9.9	\$3.5	54.2%	23.6%
Counties Manukau	\$12.7	\$17.8	\$19.7	\$18.0	\$19.1	\$6.4	50.4%	23.9%
Lakes	\$8.3	\$8.7	\$9.2	\$9.8	\$12.3	\$3.9	47.5%	27.0%
Hutt Valley	\$3.1	\$3.5	\$3.5	\$3.4	\$4.5	\$1.4	43.9%	21.5%
Northland	\$23.4	\$24.6	\$26.2	\$35.8	\$32.3	\$8.9	37.9%	30.1%
Wairarapa	\$1.3	\$1.2	\$1.2	\$1.3	\$1.7	\$0.5	36.2%	26.6%
Waikato	\$45.8	\$48.3	\$52.1	\$55.5	\$60.8	\$15.0	32.7%	27.9%
Whangānui	\$4.9	\$5.5	\$6.0	\$6.1	\$6.3	\$1.3	26.9%	23.2%
Nelson Marlborough	\$4.1	\$4.5	\$4.6	\$5.0	\$5.1	\$1.1	26.8%	27.5%
Hawkes Bay	\$9.3	\$10.4	\$11.3	\$11.7	\$11.5	\$2.3	24.5%	24.4%
Tairāwhiti	\$10.8	\$13.7	\$13.2	\$12.8	\$13.2	\$2.4	22.6%	23.1%
Bay of Plenty	\$21.2	\$22.0	\$23.5	\$25.0	\$25.9	\$4.7	22.1%	26.9%
MidCentral	\$7.3	\$8.0	\$7.3	\$7.7	\$8.8	\$1.5	21.0%	24.2%
Southern	\$2.5	\$2.7	\$2.7	\$2.7	\$3.0	\$0.5	18.9%	24.9%
Auckland	\$4.1	\$4.1	\$4.3	\$4.3	\$4.5	\$0.4	10.8%	27.5%
Taranaki	\$12.5	\$12.4	\$12.8	\$12.7	\$13.8	\$1.3	10.3%	22.2%
South Canterbury	\$0.8	\$0.8	\$0.8	\$0.9	\$0.8	\$0.1	6.9%	18.9%
West Coast	\$0.8	\$0.8	\$0.8	\$0.8	\$0.8	\$0.0	3.1%	21.1%
Waitemata	\$14.9	\$14.8	\$15.5	\$15.2	\$14.6	-\$0.2	-1.5%	23.4%
DHBs Average percentage increases							29.4%	25.0%

Source: Ministry of Health, Wellington; Health Sector – the Estimates of Appropriations, the Treasury, Wellington

Notes: Only payments for health and disability services are shown.

Due to rounding, individual figures in this table may not add to the stated totals and percentages may appear to differ from those stated.

Please note, these comparisons do not consider the different demographic and economic influences or health needs in each DHB. Also, from the data provided, we are not able to say why DHBs increased or decreased their Māori health provider funding or how much Māori health provider funding should be. The data is, however, one way for us to understand how DHBs are supporting Māori participation in service delivery in line with requirements on DHBs in the New Zealand Public Health and Disability Act 2000.



Other types of funding to Māori health providers and Crown funding, 2016/17 to 2020/21

Of the other types of funding the Ministry also measures:

- payments for MPDS have not changed much
- payments to Māori PHOs and payments for COVID-19 have more than doubled, and
- payments to Māori General Practices (GPs) and Hauora Scholarships have increased.

Table 3 shows that overall, between 2016/17 and 2020/21, funding for other types of payments to Māori health providers has increased by \$120.1 million dollars or 76.4 percent. This is largely because of the increase in Māori PHO payments as a result of the new Māori PHO, and the reinstating of another Māori PHO. This increase, 76.4 percent, is much higher than the increase in Vote Health (27.9 percent) during the same time.

Table 3: Other types of funding to Māori health providers not included in Table 2, as a percentage of Vote Health, 2016/17 to 2020/21

Funding	Year					Increase	
	16/17 \$m	17/18 \$m	18/19 \$m	19/20 \$m	20/21 \$m	16/17 to 20/21 (\$m)	16/17 to 20/21 (%)
Māori Provider Development Scheme	\$6.4	\$6.4	\$6.6	\$6.7	\$6.5	\$0.1	1.0%
Māori PHO payments	\$59.3	\$61.1	\$68.2	\$119.0	\$146.5	\$87.2	147.0%
Māori GP payments (not part of Māori PHOs)	\$12.3	\$12.9	\$14.9	\$16.5	\$17.5	\$5.1	41.7%
Hauora Māori Scholarships (2016 to 2020)	\$1.3	\$1.2	\$1.4	\$1.7	\$1.9	\$0.6	44.6%
Any COVID-19 Payment				\$13.2	\$27.1	\$13.9	104.9%*
Total – Other funding to Māori health providers	\$79.4	\$81.6	\$91.0	\$157.1	\$199.5	\$120.1	76.4%
Vote Health	\$15,099	\$15,883	\$16,737	\$17,890	\$19,313	\$4,214	27.9%
Other funding to Māori health providers as a percentage of Vote Health	0.53%	0.51%	0.54%	0.88%	1.03%		

Source: Ministry of Health, Wellington; Health Sector – the Estimates of Appropriations, the Treasury, Wellington

Notes: Due to rounding, individual figures in this table may not add to the stated totals and percentages may appear to differ from those stated.

* This increase only applies for the 2019/20 to 2020/21 years.



Total funding to Māori health providers and Vote Health, 2015/16 to 2019/20 (2020 methodology)

When other types of funding to Māori health providers is added to Table 1, Table 4 provides a more complete measure of funding to Māori health providers. This more complete measure is subject to large fluctuations in funding particularly because of changes in funding to Māori PHOs. Because of this, Table 1 may be a more consistent way to measure changes in funding to Māori health providers.

Table 4: Total funding to Māori health providers (Tables 1 and 3 combined) as a percentage of Vote Health, 2016/17 to 2020/21

Funding	Year					Increase	
	16/17 \$m	17/18 \$m	18/19 \$m	19/20 \$m	20/21 \$m	16/17 to 20/21 (\$m)	16/17 to 20/21 (%)
Funding to Māori health providers by the Ministry and DHBs (Table 1)	\$286.2	\$302.7	\$317.7	\$346.4	\$365.7	\$79.6	27.8%
Total – Other funding to Māori health providers (Table 3)	\$79.4	\$81.6	\$91.0	\$157.1	\$199.5	\$120.1	76.4%
Total funding to Māori health providers (Tables 2 and 4 combined)	\$365.6	\$384.2	\$408.8	\$503.5	\$565.2	\$199.6	54.6%
Vote Health	\$15,099	\$15,883	\$16,737	\$17,890	\$19,313	\$4,214.0	27.9%
Total funding to Māori health providers as a percentage of Vote Health (2019/20 methodology)	2.4%	2.4%	2.4%	2.8%	2.9%		

Source: Ministry of Health, Wellington; Health Sector – the Estimates of Appropriations, the Treasury, Wellington

Notes: Due to rounding, individual figures in this table may not add to the stated totals and percentages may appear to differ from those stated.

Like in previous reports, Table 4 shows although total funding to Māori health providers is increasing, it remains a small part of Vote Health. Total funding to Māori health providers did increase at a higher rate (54.6 percent) than the increase in Vote Health (27.9 percent) during this time.