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MATERNITY SERVICES

NOTICE PURSUANT TO SECTION 88 OF THE NEW ZEALAND PUBLIC HEALTH AND DISABILITY ACT 2000

THIS NOTICE IS ISSUED BY THE CROWN AND IS EFFECTIVE FROM 1 JULY 2002

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PART A APPLICATION & TERM OF NOTICE

1.0 PURPOSE

- 1.1 This is a Notice under section 88 of the New Zealand Public Health and Disability Act 2000 ("the Act"). This Notice sets out the terms and conditions for the provision of Maternity Services.
- 1.2 This Notice replaces earlier arrangements by means of which primary maternity practitioners received payment for their services. The purpose of this Notice is to introduce nationally consistent terms and conditions for primary maternity care in New Zealand. This clause is included in fulfillment of section 89(5) of the Act.

2.0 AUTHORISATION

- 2.1 A practitioner or an Organisation must receive authorisation in writing in order to claim payment under this Notice. The Ministry of Health will grant an authorisation, subject to satisfactory completion of the application form in Appendix VII, and subject to such reasonable conditions it requires. An authorisation continues until it is terminated in accordance with clause A4.4 or A4.5.
- 2.2 An Organisation must complete a separate application form for each employee or affiliated member who wishes to be an Authorised Practitioner. A practitioner who wishes to claim both via an Organisation and in an individual capacity must submit separate application forms and the Ministry of Health will issue separate contract numbers for each application.
- 2.3 When providing any Maternity Services, an Authorised Practitioner or Organisation who accepts any payment under this Notice is deemed by section 88 of the Act to be bound by the terms and conditions of this Notice.
- 2.4 The Ministry of Health will only exempt an Authorised Practitioner or an Organisation from a term and condition of this Notice where the exemption is necessary to resolve a regional problem in women being able to access Maternity Services. Where this happens, the exemption will be recorded in writing as a variation to the authorisation.
- 2.5 Authorised Practitioners are also Authorised Orderers for the purposes of ordering laboratory tests.

3.0 DURATION OF NOTICE

- 3.1 This Notice will apply from 1 July 2002 and thereafter until further notice from the Ministry of Health.

4.0 VARIATION OR TERMINATION OF NOTICE

- 4.1 This Notice may be varied or terminated by the Ministry of Health using the following process:
 - (a) The Ministry of Health will notify the New Zealand Medical Association and New Zealand College of Midwives in writing of a proposal to vary or terminate the Notice. The Ministry of Health will also inform all those who have a legitimate interest in the proposal, such as organisations recognised by the Ministry of Health as representing maternity consumers and the professional colleges of Authorised Practitioners.
 - (b) An initial meeting or teleconference will be held between the Ministry of Health, the New Zealand College of Midwives and the New Zealand Medical Association to

agree the timeframe and discuss the process for consultation on the proposed change. Failing agreement, the timeframe will be twelve weeks.

- (c) Within the applicable timeframe, the Ministry of Health will hold meetings with the New Zealand College of Midwives and the New Zealand Medical Association to take their views into account when the Ministry of Health makes a decision on the proposed change.
 - (d) Following this consultation, if the Ministry of Health decides to issue a variation or terminate the Notice, all Authorised Practitioners will receive one month's notice of the change.
- 4.2 A proposal to vary this Notice may also be made by the New Zealand College of Midwives and/or the New Zealand Medical Association where the proposal involves substantive changes to the Notice. The consultation process in clause A4.1 will apply.
- 4.3 An Authorised Practitioner may withdraw from coverage under this Notice at any time by giving the Ministry of Health not less than four weeks written notification. Such notification will terminate the relationship under this Notice between the Authorised Practitioner and the Ministry of Health and thereafter the Authorised Practitioner shall not be entitled to claim for any services under this Notice. Termination will not affect the rights of the Ministry of Health, where there has been a prior breach of this Notice by the Authorised Practitioner, or the rights of the Authorised Practitioner, where payment is outstanding.
- 4.4 The Ministry of Health may terminate or vary an authorisation of an Authorised Practitioner or Organisation where:
- (a) the Authorised Practitioner or Organisation has breached the terms of this Notice and has not remedied the breach after being given reasonable opportunity by the Ministry of Health to do so; or
 - (b) in the opinion of the Ministry of Health, the conduct of the Authorised Practitioner or Organisation demonstrates an inability or unwillingness to meet the terms and conditions of the Notice or of that Authorised Practitioner's or Organisation's authorisation.

In such situations, the Ministry of Health will notify the Authorised Practitioner or Organisation in writing of its intention to terminate or vary the authorisation and will provide written reasons for such action. The Authorised Practitioner or Organisation will have twenty working days from receipt of such notification to rectify any problems that may exist or to demonstrate to the Ministry of Health that such problems do not exist. If at the end of the twenty working day period, the Ministry of Health is not satisfied with the response from the Authorised Practitioner or Organisation, then it may give final notice of twenty working days of termination or variation of the authorisation.

- 4.5 Despite clause A4.4, the Ministry of Health may terminate an authorisation immediately when:
- (a) the Authorised Practitioner does not meet the definition of an Authorised Practitioner contained in Part B of this Notice; or
 - (b) the Authorised Practitioner has not claimed payment under this Notice for a period of three years or more.

PART B DEFINITION OF TERMS

Where a word commences with a capital in this Notice, it indicates that the word is defined in this section.

For the purposes of this Notice:

“Access Agreement” means the agreement as per Appendix II, outlining the terms by which an Authorised Practitioner may access a Maternity Facility (or Birthing Unit) for the purpose of providing Labour & Birth and Inpatient Postnatal Care to the Authorised Practitioner’s maternity clients.

“Additional Home Visits” means the fee and payment rule relating to additional Home Visits during the Services Following Birth Module as per clause D3.4.5 of this Notice.

“Amniocentesis” means a foetal diagnostic procedure to determine foetal normality by aspiration of amniotic fluid through the mother’s abdomen.

“Anaesthetist” means an Authorised Practitioner who is vocationally registered as an Anaesthetist in the register of medical practitioners maintained by the Medical Council of New Zealand and who holds a current annual practising certificate issued by that Council.

“Artificial Feeding” means the baby has had no breast-milk in the past 48 hours but has had alternative liquid such as infant formula with or without solid food in the past 48 hours.

“Assessment Prior to Termination of Pregnancy” means a Single Service Episode as described in clause C5.1 of this Notice.

“Authorised Orderer” means a General Practitioner, Specialist or Midwife for whom the Ministry of Health has given written notification to a provider of laboratory diagnostic services as being able to order a range of tests. The range of tests able to be ordered by any class of Authorised Orderer will be specified in the notification by the Ministry of Health. The Ministry of Health may amend the range of tests after consultation with the Authorised Practitioner’s professional organisation.

“Authorised Practitioner” means an Anaesthetist, General Practitioner, Midwife, Obstetrician, Paediatrician or Radiologist who has completed the Ministry of Health’s application form for authorisation of practitioner and has received written authorisation from the Ministry of Health to provide Maternity Services. An Authorised Practitioner includes both practitioners working in their individual capacity and practitioners who are employed by or affiliated to an Organisation.

“Away from her Usual Place of Residence” means a woman has stayed for one night or more in a location which is at least one hour by normal road transport from her usual place of residence. Normal road transport means transport by car or similar motorised vehicle and in accordance with times determined by the Ministry of Health. Usual place of residence means the place where the woman usually resides.

“Back-up to a Lead Maternity Carer” means an Authorised Practitioner who has a formal agreement with the Lead Maternity Carer to provide Maternity Services to women registered with the Lead Maternity Carer when the Lead Maternity Carer is not available to provide these services.

“BFHI” means the Baby Friendly Hospital Initiative launched by the World Health Organisation and UNICEF in 1992 and adapted for New Zealand by the New Zealand Breastfeeding Authority in 1999.

“Birth” means a delivery of a baby (or babies for a multiple birth) after a minimum of 20 weeks 0 days gestation and/or with a birth weight over 400 grams.

“Birthing Unit” means a facility which has a contract for Labour & Birth but not for Inpatient Postnatal Care. As at 1 July 2002, the designated Birthing Units are situated in Wellsford, Murupara, Raetihi, Marton and Otaki.

“Care Plan” means the process by which the Lead Maternity Carer and the woman develop a plan of care for the woman and her baby and the documentation of this plan throughout the individual clinical notes pertaining to this woman.

“Chorionic Villous Sampling” means a foetal diagnostic procedure, which is the aspiration of a sample of chorionic (placental) tissue for biochemical and chromosomal analysis.

“Claim(s)” means forwarding a request for payment for a Single Service Episode or Module to Health Benefits. It does not include a change of Registration.

“District Health Board” means an organisation established as a District Health Board by or under section 19 of the New Zealand Public Health and Disability Act 2000.

“Eligible Person” means a person who is eligible to receive publicly funded health services in New Zealand as defined in a direction issued by the Minister of Health under section 32 of the New Zealand Public Health and Disability Act 2000. Guidelines on eligibility are available from the Ministry of Health (0800 367 8473 or www.moh.govt.nz).

“Established Labour” means the period from when labour is estimated to have commenced as measured by duration, frequency and strength of each contraction.

“Exclusive Breastfeeding” means that, the infant has never, to the mother’s knowledge, had any water, formula or other liquid or solid food. Only breast-milk, from the breast or expressed, and prescribed medicines, defined as per the Medicines Act 1981, have been given to the baby from Birth.

“Expected Date of Delivery (EDD)” means the estimated date (or actual date) of delivery of the baby.

“Foetal Blood Sampling” means a foetal diagnosis procedure where foetal blood is obtained directly from the umbilical cord performed after 17 weeks of pregnancy.

“First Birth” means that a woman has not previously experienced a Birth.

“First Consultation” means a consultation with an Obstetrician or Paediatrician where there has been no previous Maternity Service provided to the same woman by the same Specialist involving the same medical problem.

“First Trimester” means the period from the LMP Date until the end of the fourteenth week of pregnancy (1-12 weeks after conception).

“Fully Breastfeeding” means the infant has taken breast-milk only, no other liquids or solids except a minimal amount of water or prescribed medicines, in the previous 48 hours.

“General Practitioner” means an Authorised Practitioner who is registered as a General Practitioner in the register of medical practitioners maintained by the Medical Council of New Zealand and who holds a current annual practising certificate issued by that Council.

“Gravida” means the total number of pregnancies the woman has experienced including the current one. For example, a woman who has had one prior pregnancy, and is currently pregnant, is designated ‘Gravida 2’.

“GST” means Good and Services Tax payable under the Good and Services Tax Act 1985.

“Health Benefits” is the section of the Ministry of Health responsible for processing and payment of Claims.

“Homebirth” means:

- (a) a Birth that takes place in a person’s home and not in a Maternity Facility or Birthing Unit; or
- (b) a Birth where management of the labour commences at home and there is a documented plan to birth at home.

“Home Visit(s)” means a domiciliary consultation between the woman/baby and the Authorised Practitioner at the home where the woman/baby is domiciled (or at a Maternity Facility where the woman has been discharged as an Inpatient but the baby remains as an Inpatient).

“Hospital Midwifery Services” means midwifery services provided by a Maternity Facility to allow a General Practitioner or Obstetrician Lead Maternity Carer to fulfill the Lead Maternity Care obligations.

“Inpatient” means that the woman/baby receives Maternity Services in an inpatient setting, being either admitted to a Maternity Facility or a Birthing Unit or having received a consultation in a Maternity Facility of more than 3 hours duration.

“Inpatient Postnatal Care” means the twenty-four hour care a woman and baby receives if the woman remains in the Maternity Facility for twelve hours or more after the Birth.

“Labour & Birth” means the period from the onset of Established Labour until two hours after delivery of the placenta.

“LMP (Last Menstrual Period) Date” means the first estimated or actual date of the beginning of the woman’s last menstrual period.

“Lead Maternity Care” means the Modules, as specified in clause C4 of this Notice, provided by a Lead Maternity Carer.

“Lead Maternity Carer (LMC)” means an Authorised Practitioner who is a General Practitioner with a Diploma in Obstetrics (or equivalent, as determined by the New Zealand College of General Practitioners), a Midwife or an Obstetrician who has been selected by the woman to provide her Lead Maternity Care as described in clauses C3 & C4.

“Maternity Facility” means a facility that provides both labour & birth services and Inpatient Postnatal Care, as described in the relevant service specification issued by the Ministry of Health.

“Maternity Services” means any of the services described in Part C of this Notice.

“Midwife” means an Authorised Practitioner who is a Midwife whose name is included in the register maintained by the Nursing Council of New Zealand (or its successor) and who holds a current annual practising certificate issued by that Council.

“Module(s)” means a group of services for a phase of care as described in clause C4 of this Notice for which, in normal circumstances, a single fee is payable to a Lead Maternity Carer.

“Neonatal Homecare” means care for babies who have additional needs following discharge from Specialist Neonate services, as described in the relevant service specification issued by the Ministry of Health.

“NHI (National Health Index)” means the unique person identifier number allocated by the New Zealand Health Information Service.

“Obstetrician” means an Authorised Practitioner who is vocationally registered as an Obstetrician in the register of medical practitioners maintained by the Medical Council of New Zealand and who holds a current annual practising certificate issued by that Council.

“Organisation” means a legal entity that either employs or has affiliated members who are Authorised Practitioners and includes the provider arm of District Health Boards.

“Paediatrician” means an Authorised Practitioner who is vocationally registered as a Paediatrician in the register of medical practitioners maintained by the Medical Council of New Zealand and who holds a current annual practising certificate issued by that Council.

“Parity” means the number of times a woman has borne children counting multiple births as one and including stillbirths.

“Partial Breastfeeding” means the infant has taken some breast-milk and some infant formula or other solid food in the past 48 hours.

“Pregnancy Care” means a Single Service Episode as described in clause C5.2 of this Notice.

“Pregnancy & Parenting Education” means an antenatal course provided to a group of women as described in the relevant service specification issued by the Ministry of Health.

“Professional Review Process” means participation in a process that is recognised by either the Nursing Council of New Zealand (or its successor), or by the relevant medical college, as providing an assessment of the Authorised Practitioner’s practice and outcomes, including the level of consumer satisfaction.

“Radiologist” means an Authorised Practitioner who is vocationally registered as a Radiologist in the register of medical practitioners maintained by the Medical Council of New Zealand and who holds a current annual practising certificate issued by that Council.

“Referral Guidelines” means the Guidelines for Consultation with Obstetric and Related Specialist Medical Services which identify clinical reasons for consultation with a specialist and which are included in the Notice as Appendix I.

“Registration” is the process by which a woman selects her Lead Maternity Carer, the documentation recording this selection, and the forwarding of this information to Health Benefits.

“Rural Travel” means the fees and payment rule relating to Home Visits during the Services Following Birth Module, as described in clauses D1.1.12, D3.4.4 and Appendix VI.

“Secondary Maternity” means the provision of comprehensive specialist services, as described in the relevant service specification issued by the Ministry of Health. The service is provided during the antenatal, labour & birth and postnatal periods for women and babies who experience complications and who, in reference to the Referral Guidelines, have a clinical need for referral to specialist services for either consultation or transfer on a planned or emergency basis.

“Second Trimester” means the period of pregnancy from the beginning of the 15th week until the end of the 28th week after the LMP date (13-27 weeks after conception).

“Services Following Birth” means the period from two hours after the delivery of the placenta until four to six weeks after the Birth.

“Single Service Episode” means Maternity Services that involve the provision of a single item of service, as described in clause C5.0 of this Notice.

“Specialist” means an Authorised Practitioner who is an Anaesthetist, Obstetrician, Paediatrician or Radiologist.

“Specialist Neonate” means specialist care for neonates who are born with additional needs or develop additional needs prior to discharge, as described in the relevant service specification issued by the Ministry of Health.

“Stillbirth” means a Birth where the baby shows no signs of life.

“Subsequent Birth” means that a woman has previously experienced a Birth (excluding a Vaginal Birth after Caesarean Section).

“Subsequent Consultation” means a consultation with an Obstetrician or Paediatrician where there has been a previous Maternity Service provided by the same Specialist to the same woman involving the same medical problem or involving a medical problem that was detected at the time of any previous Maternity Service provided by the same Specialist.

“Third Trimester” means the period of pregnancy from the beginning of the twenty-ninth (29th) week from the LMP date until Established Labour.

“Urgent Out of Hours Pregnancy Care” means a Single Service Episode as described in clause C5.3 of this Notice.

“Vaginal Birth after Caesarean Section (VBAC)” means a vaginal Birth for a woman who has had a previous Birth(s) by caesarean section and who has not has a previous vaginal Birth.

“Well Child Provider” means a health care provider who provides health education and support for babies and children as described in the Well Child Tamariki Ora National Schedule.

PART C SERVICE SPECIFICATIONS & QUALITY REQUIREMENTS

This section describes the services that an Authorised Practitioner must provide in order to be entitled to claim payments under this Notice. These service specifications are a summary of services to be provided and do not replace professional standards for best clinical practice.

1.0 VISION

Each woman, and her whanau and family, will have every opportunity to have a fulfilling outcome to her pregnancy and childbirth, through the provision of services that are safe and based on partnership, information and choice. Pregnancy and childbirth are a normal life-stage for most women, with appropriate additional care available to those women who require it. A Lead Maternity Carer chosen by the woman with responsibility for assessment of her needs, planning her care with her and the care of her baby and being responsible for ensuring provision of Maternity Services, is the cornerstone of maternity care in New Zealand.

2.0 GENERAL QUALITY REQUIREMENTS

These general quality requirements apply to all services in this Notice:

- 2.1 Services to Maori will be provided in a way that is consistent with the Treaty of Waitangi, recognising the status of Maori as tangata whenua. This includes providing opportunities for whanau participation in the provision of care and encouraging opportunities for Maori participation in the delivery of Maternity Services.
- 2.2 Maternity Services will be provided in a manner appropriate to the culture of each individual woman and her family and whanau.
- 2.3 All women will be provided with appropriate information on the Maternity Services that they are entitled to receive and their options.
- 2.4 The relationship of the Authorised Practitioner with the woman will be based on informed consent.
- 2.5 The dignity of the woman will be respected.
- 2.6 All Lead Maternity Carers and Specialists will participate in a Professional Review Process.

3.0 OBLIGATIONS OF THE LEAD MATERNITY CARER

- 3.1 The Lead Maternity Carer will take responsibility for the care provided to the woman throughout her pregnancy and postpartum period including the management of Labour & Birth. It is expected that, from the time of Registration, all Modules of Lead Maternity Care will be the responsibility of one Lead Maternity Carer who has been chosen by the woman in order to achieve continuity of caregiver.
- 3.2 The Lead Maternity Carer is required to make every effort to attend as necessary during labour and to attend each Birth. In the occasional circumstances where it is not possible to attend the Birth due to, for example, holidays or the requirement to be with another woman in labour, the Lead Maternity Carer will make appropriate other arrangements.
- 3.3 The Lead Maternity Carer will be available twenty-four hours, seven day per week to provide phone advice to the woman and attendance if required for urgent problems, either personally or by the Back-up to the Lead Maternity Carer.
- 3.4 Subject to the consent of the woman and clauses C3.1 and C3.2, aspects of a Module may be subcontracted to another Authorised Practitioner. Responsibility for meeting the requirements of the Module remain with the Lead Maternity Carer. The respective responsibilities of the Lead Maternity Carer and any other Authorised Practitioner will be clearly documented in the Care Plan.

- 3.5 The Lead Maternity Carer must have an Access Agreement with any Maternity Facility that s/he wishes to utilise. The Access Agreement to be used by all Lead Maternity Carers and Maternity Facilities is included in the Notice as Appendix II.
- 3.6 The Lead Maternity Carer is required to make every effort to attend a woman within, on average, twenty minutes of the woman's arrival at the Maternity Facility or Birthing Unit where she will give birth.
- 3.7 The Lead Maternity Carer, when caring for a woman in a Maternity Facility, will support the Maternity Facility in implementing the Baby Friendly Hospital Initiative (BFHI).
- 3.8 The Lead Maternity Carer will exercise wise clinical judgment about the services s/he provides, taking into account the limits of her or his own competency and the Referral Guidelines. Where a consultation occurs with a Specialist, any decision regarding ongoing clinical roles and responsibilities will be documented and will involve a three way process between the Specialist, the Lead Maternity Carer and the woman concerned. The outcome for the health of the woman and baby will be the paramount consideration.
- 3.9 Where responsibility for the woman's care transfers to Secondary Maternity after Established Labour, the Lead Maternity Carer will continue to be available to support the woman (except where this is unreasonable because of a lengthy labour or because the Lead Maternity Carer has accompanied the woman by air/road ambulance and the Lead Maternity Carer needs to return on this ambulance).
- 3.10 Where there is a transfer of care to either the Secondary Maternity or Specialist Neonate service, clinical responsibility for the woman/baby transfers to the Secondary Maternity or Specialist Neonate service until such time as there is a transfer of care back to the Lead Maternity Carer. Any transfer of care will be documented in the clinical notes.

4.0 SERVICE SPECIFICATIONS FOR LEAD MATERNITY CARE MODULES

4.1 Registration

The Lead Maternity Carer will provide all of the following services where a payment for this service is claimed:

- (a) inform the woman regarding:
 - ? the role of the Lead Maternity Carer, confirming that the Lead Maternity Carer will meet the quality requirements in clause C3 of this Notice
 - ? the contact details of the Lead Maternity Carer
 - ? the standards of care to be expected
 - ? the availability of Pregnancy and Parenting Education
 - ? the availability of Paid Parental Leave, where applicable;
- (b) conduct a comprehensive pregnancy assessment of the woman including a physical examination, an assessment of her general health, family and obstetric history;
- (c) commence and document a Care Plan to be used and updated throughout all Modules covering, as a minimum, the items listed in Appendix III; and
- (d) arrange for the woman to hold a copy of her Care Plan and her clinical notes (or, if the woman prefers, to be given a copy of her clinical notes following the completion of each Module).

See clause D3.1 for the payment rules applicable to this service.

4.2 Second Trimester

The Lead Maternity Carer will provide all of the following services where a payment for this service is claimed:

- (a) monitor progress of pregnancy for the woman and baby including early detection and management of any problems;
- (b) update the Care Plan;
- (c) provide appropriate one to one education;
- (d) book in to an appropriate Maternity Facility or Birthing Unit (unless a Homebirth is planned); and
- (e) where a General Practitioner or Obstetrician Lead Maternity Carer plans to use Hospital Midwifery Services, make a prior agreement with a Maternity Facility on the use of its Hospital Midwifery Services.

See clause D3.2 for the payment rules applicable to this service.

4.3 Third Trimester

In addition to the requirements for the Second Trimester in clause C4.2, the Lead Maternity Carer will organise appropriate arrangements for care during labour & birth and following birth including, where possible, organising for the woman to meet any other Authorised Practitioners who are likely to be involved in her care.

See clause D3.2 for the payment rules applicable to this service.

4.4 Labour & Birth

4.4.1 The Lead Maternity Carer will be responsible for ensuring that all of the following services are provided (subject to clause C3.9) where a payment for this service is claimed:

- (a) all primary care from the time of Established Labour including initial assessment of the woman at her home or at a Maternity Facility and regular monitoring of the progress of the woman and baby;
- (b) management of the Birth; and
- (c) all primary care until two hours after delivery of the placenta, including updating the Care Plan, suturing of the perineum (if required), initial examination and identification of the baby at birth, initiation of breast feeding (or feeding), care of the placenta and attending to any legislative requirements regarding birth notification by health professionals.

4.4.2 For a Homebirth, in addition to clause C4.4.1, the Lead Maternity Carer will:

- (a) arrange for a second Authorised Practitioner to be available to attend the Birth; and
- (b) maintain equipment (including neonatal resuscitation equipment), provide the delivery pack and consumable supplies.

4.4.3 For a Birthing Unit, in addition to clause C4.4.1, the Lead Maternity Carer will:

- (d) arrange for a second Authorised Practitioner to be available to attend the Birth; and
- (e) ensure an Authorised Practitioner remains with the woman until she is discharged.

4.4.4 A General Practitioner or Obstetrician Lead Maternity Carer who uses Hospital Midwifery Services in order to provide the full service required during Labour & Birth will:

- (a) ensure the respective responsibilities of the Lead Maternity Carer and the Hospital Midwifery Services are clearly documented in the Care Plan with a

copy of the Care Plan provided to the Hospital Midwifery Service and the woman;

- (b) monitor progress of labour and be available to attend as soon as required at any time during the labour; and
- (c) attend the Birth and the delivery of the placenta.

See clause D3.3 for the payment rules applicable to this service.

4.5 Services Following Birth

The Lead Maternity Carer will be responsible for ensuring that all of the following services are provided for both the mother and baby (subject to clause D3.4.6) where a payment for this service is claimed:

4.5.1 Visits to assess and care for the mother and baby in a Maternity Facility and at home until four to six weeks after the Birth, including:

- (a) a detailed clinical examination of the baby within the first twenty-four hours of Birth;
- (b) a daily visit while the woman is receiving Inpatient Postnatal Care, unless agreed otherwise with the woman and the Maternity Facility;
- (c) a total of between five and ten Home Visits by a Midwife (and more if clinically needed);
- (d) a minimum of seven postnatal visits as an aggregate of 4.5.1(b) and 4.5.1(c);
- (e) one Home Visit within twenty-four hours of discharge;
- (f) a detailed clinical examination of the baby within seven days of Birth;
- (g) a detailed clinical examination of the baby prior to transfer to the Well Child Provider; and
- (h) a postnatal examination of the mother at a clinically appropriate time and prior to discharge from Lead Maternity Care services.

4.5.2 Review and update the Care Plan and document progress, care given and outcomes, ensuring that the Maternity Facility has a copy of this Care Plan where the woman is receiving Inpatient Postnatal Care.

The care will include:

- (a) assistance with and advice about breastfeeding and the nutritional needs of the woman and baby;
- (b) assessment for risk of postnatal depression and/or family violence, with appropriate advice and referral;
- (c) provision of Ministry of Health information on immunisation;
- (d) provision of or access to services, as outlined in the Well Child Tamariki Ora National Schedule;
- (e) advice regarding contraception; and
- (f) parenting advice and education.

4.5.3 Where a Birth has occurred in a Maternity Facility, the Lead Maternity Carer, in discussion with the woman and the Maternity Facility, will determine when the woman is clinically ready for discharge.

4.5.4 A transfer from the Lead Maternity Carer to the Well Child Provider will take place at a date agreed by the woman, normally between four and six weeks from Birth.

The Lead Maternity Carer will provide a written referral to the Well Child Provider, as per Appendix IV, prior to discharge from the Lead Maternity Carer, or at four weeks, whichever is the earlier. Where the baby has unusually high needs, the Lead Maternity Carer may request that the Well Child Provider become involved as early as two weeks from Birth to provide concurrent and coordinated care with the Lead Maternity Carer.

- 4.5.5 The Lead Maternity Carer will notify the General Practitioner, where identified by the woman, prior to discharge from the Lead Maternity Carer, as per Appendix IV.
- 4.5.6 When a General Practitioner or Obstetrician Lead Maternity Carer uses Hospital Midwifery Services, the Lead Maternity Carer will:
- (a) make a prior agreement with the Maternity Facility on the use of the Hospital Midwifery Services;
 - (b) ensure the respective responsibilities of the Lead Maternity Carer and the Hospital Midwifery Services are clearly documented in the Care Plan with a copy of the Care Plan provided to the Hospital Midwifery Service and the woman; and
 - (c) be available to provide consultation and treatment on request.

See clause D3.4 for the payment rules applicable to this service.

5.0 SERVICE SPECIFICATIONS FOR SINGLE SERVICE EPISODES

5.1 Assessment Prior to Termination of Pregnancy

A General Practitioner, Midwife or Obstetrician will provide the following service where a payment for this service is claimed:

- (a) assessment, care and advice provided prior to termination of pregnancy;
- (b) referral for diagnostic tests, if necessary; and
- (c) referral for termination of pregnancy.

See clause D4.1 for the payment rules applicable to this service.

5.2 Pregnancy Care

A General Practitioner, Midwife or Obstetrician will provide one of the following services where a payment for this service is claimed:

- (a) confirmation of pregnancy (if required), pregnancy care and advice including advising a woman of her options for choosing a Lead Maternity Carer and ensuring that she has a copy of the Ministry of Health's consumer information on Maternity Services;
- (b) ongoing care in the period following an Assessment Prior to Termination of Pregnancy and prior to the termination of pregnancy occurring; or
- (c) care following a termination of pregnancy or miscarriage.

See clause D4.2 for the payment rules applicable to this service.

5.3 Urgent Out of Hours Pregnancy Care

A General Practitioner, Midwife or Obstetrician will provide the following services where a payment for this service is claimed:

- (a) pregnancy care and advice in response to an urgent request received between the hours of 6pm and 8am on weekdays or at all times on Saturday, Sunday and public holidays where the nature of the request is urgent (not the service ultimately provided);

- (b) emergency referral to a Specialist, if necessary; and
- (c) provision of information to the Lead Maternity Carer on the care provided.

See clause D4.2 for the payment rules applicable to this service.

5.4 Threatened Miscarriage Service

A General Practitioner, Midwife or Obstetrician will provide the following services where there is a real and imminent risk of miscarriage and where a payment for this service is claimed:

- (a) all appropriate assessment and care of a woman experiencing a threatened miscarriage; and
- (b) referral for diagnostic tests, if necessary.

See clause D4.2 for the payment rules applicable to this service.

5.5 Miscarriage Service

A General Practitioner, Midwife or Obstetrician will provide the following services where a payment for this service is claimed:

- (a) all appropriate assessment and care for a woman experiencing a miscarriage; and
- (b) referral for diagnostic tests, if necessary.

See clause D4.2 for the payment rules applicable to this service.

5.6 Exceptional Circumstances

A General Practitioner or Midwife will provide one of the following services where a payment for this service is claimed:

- (a) provide the woman with support and continuity of care during the Labour & Birth, including attendance at the Birth where:
 - ? clinical responsibility for the woman is transferred to Secondary Maternity forty-eight or fewer hours prior to Established Labour (or prior to Birth where there is no labour), and
 - ? it was anticipated that clinical responsibility for the Labour & Birth would remain with the Lead Maternity Carer but circumstances change, giving no opportunity for a planned transfer, and
 - ? the General Practitioner or Midwife providing this service is the Lead Maternity Carer ((not the Back-up to the Lead Maternity Carer or the Hospital Midwifery Service or another subcontracted provider);
- (b) provide urgent care and treatment in a rural or remote rural domicile (as defined in Appendix VI) where the services of an Obstetrician or Paediatrician are needed but are not available and the Lead Maternity Carer requires assistance from another Authorised Practitioner who has additional maternity skills; or
- (c) accompany the woman in an air/road ambulance from a rural or remote rural domicile area (as defined in Appendix VI) where the Authorised Practitioner is otherwise ineligible to be paid the Labour & Birth Module.

See clause D4.4 for the payment rules applicable to this service.

5.7 Postnatal Consultation by Non-Lead Maternity Carer

A General Practitioner or Midwife will provide the following services where a payment for this service is claimed:

- (a) appropriate assessment, care and treatment for a woman and/or baby who present to an Authorised Practitioner (other than the Lead Maternity Carer or the Back-up to the Lead Maternity Carer) for care during the four-week period following Birth; and
- (b) provision of information to the Lead Maternity Carer on the care provided.

See clause D4.5 for the payment rules applicable to this service.

5.8 Ultrasound Scans

5.8.1 A Radiologist or Obstetrician with a Diploma of Diagnostic Ultrasound (or equivalent as determined by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists) will provide the following services where a payment for this service is claimed:

- (a) conduct an ultrasound scan according to quality standards, such as those of the Australasian Society of Ultrasound in Medicine;
- (b) be physically present at the location where the examination is being performed or, when using teleradiology, be available to review the transmitted diagnostic images prior to the woman's departure from the place where the scan is conducted, thereby being available to tailor the radiological examination to the clinical situation;
- (c) obtain a permanent visual record of the scan and provide the referring Authorised Practitioner with a written interpretation of the scan in a timely manner; and
- (d) for a nuchal translucency scan, inform the woman as to whether the practitioner performing or supervising the scan has obtained appropriate accreditation.

5.8.2 Subject to clause C5.8.1(b), all or part of an ultrasound examination may be performed by a Medical Radiation Technologist registered in ultrasound imaging with the Medical Radiation Technologists Board (or by a holder of a current exemptions certificate issued by the Board).

5.8.3 The Ministry of Health will only give an exemption to clause C5.8.1(b) following consultation with the Royal Australian & New Zealand College of Radiologists and where clause A2.4 applies.

See clause D4.6 for the payment rules applicable to this service.

5.9 Consulting Obstetrician Services

An Obstetrician will provide the following services where a payment for this service is claimed:

- (a) advice, care and treatment to a woman;
- (b) referral to other services, if clinically warranted; and
- (c) forwarding documentation to the Lead Maternity Carer detailing advice and treatment given or recommended.

See clause D4.8 for the payment rules applicable to this service.

5.10 Obstetrician - Effecting Delivery

An Obstetrician will provide the following services where a payment for this service is claimed:

- (a) attendance & active participation at the delivery; and
- (b) documentation in the clinical notes of the care provided.

See clause D4.7 for the payment rules applicable to this service.

5.11 Anaesthetist Services

An Anaesthetist will provide the following services where a payment for this service is claimed:

- (a) the provision of anaesthetic services for pain management during Labour & Birth; and
- (b) documentation in the clinical notes of the care provided.

See clause D4.9 for the payment rules applicable to this service.

5.12 Paediatrician Services

A Paediatrician will provide the following services where a payment for this service is claimed:

- (a) advice, care and treatment provided to a woman, foetus, baby or babies; and
- (b) forwarding documentation to the Lead Maternity Carer of advice and treatment given or recommended.

See clause D4.10 for the payment rules applicable to this service.

PART D PRICES & PAYMENT RULES**1.0 PRICES**

1.1 Lead Maternity Care	\$ (GST incl)
1.1.1 Registration	75.00
1.1.2 Second Trimester	90.00
1.1.3 Third Trimester	220.00
1.1.4 Labour & Birth	
(a) First Birth	950.00
(b) VBAC	950.00
(c) Subsequent Birth	750.00
1.1.5 Labour & Birth where a General Practitioner or Obstetrician has used Hospital Midwifery Services	
(a) First Birth	450.00
(b) VBAC	450.00
(c) Subsequent Birth	350.00
1.1.6 Labour & Birth - Hospital Midwifery Services	
(a) First Birth	500.00
(b) VBAC	500.00
(c) Subsequent Birth	400.00
1.1.7 Homebirth Supplies and Services	400.00
1.1.8 Birthing Unit Services	250.00
1.1.9 Services Following Birth	
(a) Received Inpatient Postnatal Care	400.00
(b) No Inpatient Postnatal Care	500.00
1.1.10 Services Following Birth where a General Practitioner or Obstetrician has used Hospital Midwifery Services	
(a) Received Inpatient Postnatal Care	80.00
(b) No Inpatient Postnatal Care	110.00
1.1.11 Services Following Birth - Hospital Midwifery Services	
(a) Received Inpatient Postnatal	320.00
(b) No Inpatient Postnatal Care	390.00
1.1.12 Rural travel	
a) Semi Rural	150.00
(b) Rural	200.00
(c) Remote Rural	350.00
1.1.13 Additional Home Visits	125.00

1.2 Single Service Episodes	\$
1.2.1 Assessment Prior to Termination of Pregnancy	50.00
1.2.2 Pregnancy Care	32.50
1.2.3 Urgent Out of Hours Pregnancy Care	45.00
1.2.4 Threatened Miscarriage Service	45.00
1.2.5 Miscarriage Service	50.00
1.2.6 Exceptional Circumstances	300.00
1.2.7 Postnatal Consultation by Non-Lead Maternity Carer	32.50
1.2.8 Ultrasound Scans	80.00
1.2.9 Consulting Obstetrician Services	
(a) First Consultation	86.00
(b) Subsequent Consultation	43.00
1.2.10 Obstetrician – Effecting Birth	425.00
1.2.11 Anaesthetist Services	260.00
1.2.12 Paediatrician Services	
(a) First Consultation	100.00
(b) Subsequent Consultation	43.00
(c) Attendance at Delivery	165.00

1.3 Goods and Services Tax

The payments in this Notice are inclusive of Goods and Services Tax (GST) at a rate of 12.5%.

2.0 GENERAL LIMITS ON CLAIMING

2.1 Eligible Persons

- 2.1.1 Payment is limited to Maternity Services provided in New Zealand to an Eligible Person.
- 2.1.2 Where a baby is an Eligible Person and the mother is not an Eligible Person, a full Claim can be made for the Labour & Birth and Services Following Birth Modules. In this instance, there will be no payment for the Registration, although the Registration must be completed prior to any Claim for the Labour & Birth and Services Following Birth Modules.

2.2 Eligible Services

- 2.2.1 Maternity Services covers conditions that are due to pregnancy, delivery, miscarriage or termination or, for the baby, are directly related to being newborn. An Authorised Practitioner may claim under this Notice for Maternity Services, as described in Part C of this Notice.
- 2.2.2 This Notice does not cover the following services:
 - (a) subject to clause D2.2.1, a consultation by a General Practitioner for any medical condition, including medical conditions exacerbated by pregnancy, except where the consultation is included within Lead Maternity Care;
 - (b) a clinical examination of the baby by the General Practitioner at 5-8 weeks where this is not the final discharge check by the Lead Maternity Carer;
 - (c) a negative pregnancy test;

- (d) the following surgical procedures:
 - caesarean section
 - dilation & curettage
 - circumcision
 - termination of pregnancy;
- (e) radiological imaging other than ultrasound;
- (f) any service given more than six weeks after the Birth;
- (g) any service given more than two weeks after a miscarriage or termination of pregnancy;
- (h) Maternity Facility or Birthing Unit services;
- (i) Secondary Maternity services, including ultrasound scans for Inpatients and all midwifery services for elective caesarean sections;
- (j) Specialist Neonate and Neonatal Homecare services;
- (k) administration of BCG vaccine;
- (l) where the circumstances described in clause D4.2.2 do not apply, a consultation in the Second Trimester or Third Trimester with a non-Lead Maternity Carer General Practitioner for the purpose of a second opinion where, prior to the commencement of the consultation, the woman is informed that the consultation will be provided outside of the publicly funded maternity system and she is informed of her alternative options within the publicly funded maternity system; or
- (m) ultrasound scans where:
 - there is no clinical reason for the ultrasound scan (as listed in Appendix V); or
 - the woman is in the Second Trimester or Third Trimester and the referrer is neither the Lead Maternity Carer or an Obstetrician and no emergency circumstances are identified and, prior to the commencement of the consultation, the woman is informed that the consultation will be provided outside of the publicly funded maternity system.

2.2.3 The Lead Maternity Carer is not financially responsible for the following services:

- (a) Specialist referrals, except where the referral is to a Specialist in the same specialty as the referring practitioner;
- (b) any laboratory tests;
- (c) any pharmaceuticals and blood products prescribed or administered by the Lead Maternity Carer, including anti-D and other immunoglobulins;
- (d) ambulance services;
- (e) ultrasound services;
- (f) a Maternity Service provided by an Authorised Practitioner where the Lead Maternity Carer has not referred the woman to this Authorised Practitioner; and
- (g) translation services.

2.3 Authorised Practitioners Providing Similar Services

- 2.3.1** An Authorised Practitioner is not entitled to receive any payment under this Notice for Maternity Services where the Authorised Practitioner is entitled to receive payment for similar services, either directly or indirectly, under any other arrangement with the Ministry of Health.

- 2.3.2 Where the Authorised Practitioner is an employee of the provider arm of a District Health Board, s/he is not entitled to claim payments under this Notice when the service for which s/he is claiming forms part of the duties for which s/he is employed.
- 2.3.3 For the purposes of audit, an Authorised Practitioner employed by the provider arm of a District Health Board must keep a record of the hours of employment (including on-call hours).

2.4 Payments by Women

- 2.4.1 An Authorised Practitioner who is a General Practitioner or Midwife shall not charge any woman for any Maternity Services, except as described in clause D2.2.2(l). This prohibition on charging includes any request for payment that occurs immediately prior to, or following the provision of Maternity Services, and in relation to which no services have been performed at the time of the request.
- 2.4.2 A Specialist may charge a woman for Maternity Services where:
- (a) the Specialist has informed the woman prior to providing the Maternity Service that a payment will be charged and that this payment is an additional payment over and above what the Specialist is paid under the Notice; and
 - (b) the Specialist gives the woman the option of finding alternative specialist services.
- 2.4.3 The Lead Maternity Carer will inform the woman, prior to making a referral to a Specialist, that:
- (a) the woman is entitled to receive Secondary Maternity services and that Secondary Maternity services includes specialist consultations; and
 - (b) Secondary Maternity services are available at no cost to the woman whereas a referral to a Specialist claiming under this Notice may result in a charge to the woman.

3.0 PAYMENT RULES FOR LEAD MATERNITY CARE

Payment for a Module of Lead Maternity Care may only be claimed by a General Practitioner, Midwife or Obstetrician who meets the requirements of clause C3 and C4 of this Notice. There can be no Claim under clause D3 where a woman has transferred to Secondary Maternity for an entire Module.

3.1 Registration

- 3.1.1 Only one Registration payment will be made per woman per pregnancy.
- 3.1.2 Registration can only occur in the Second Trimester or Third Trimester. Preparation of the woman's Care Plan must have commenced before the Registration payment is claimed.
- 3.1.3 Only the Registration may be claimed if a Single Service Episode is provided during the same attendance as the Registration.
- 3.1.4 Where the woman is already registered and a new Registration is received by Health Benefits, then the Registration will be changed to the new Lead Maternity Carer. There will be no payment on this change in Registration (unless, in the opinion of the Ministry of Health, the conduct of the first Lead Maternity Carer demonstrates an unwillingness or inability to meet the obligations of clause C3 of

this Notice in which case the first Registration fee will be reversed and the subsequent Registration regarded as the first Registration).

- 3.1.5 A change of Registration is not to be completed when clinical responsibility for the woman transfers to Secondary Maternity.

See clause C4.1 for the service specification applying to these payment rules.

3.2 Second Trimester and Third Trimester

- 3.2.1 Trimester dates will be based upon the first Expected Date of Delivery supplied by an Authorised Practitioner, even though the Expected Date of Delivery may be updated during the pregnancy.
- 3.2.2 Where a woman changes her Lead Maternity Carer during the first ten days of the Second Trimester or during the first ten days of the Third Trimester, the new Lead Maternity Carer is deemed to be the Lead Maternity Carer for the entire Trimester. In these circumstances, the previous Lead Maternity Carer may not make a Claim for this Module.
- 3.2.3 Where a woman changes her Lead Maternity Carer on or after the eleventh day of the Second Trimester or on or after the eleventh day of the Third Trimester, the Lead Maternity Carer first registered will receive 40% of the Module fee. The Lead Maternity Carer registered at the end of the trimester will receive 60% of the Module fee.
- 3.2.4 Where a woman first registers with a Lead Maternity Carer prior to or during the twenty-first week of pregnancy, the Lead Maternity Carer may claim the full Second Trimester fee. Where a woman first registers with a Lead Maternity Carer after the twenty-first week of pregnancy, the Lead Maternity Carer may claim 50% of the Second Trimester fee.
- 3.2.5 If a woman changes her Lead Maternity Carer at any time during the last ten days of the Second Trimester, the change is deemed to have occurred from the beginning of the Third Trimester and the new Lead Maternity Carer may not claim any payment for the Second Trimester.
- 3.2.6 The Lead Maternity Carer may claim the full Third Trimester payment where a woman first registers with a Lead Maternity Carer during the Third Trimester.

See clause C4.2 & C4.3 for the service specification applying to these payment rules.

3.3 Labour & Birth

- 3.3.1 Only one Labour & Birth fee is payable for a Birth (including a multiple birth). The payment to be claimed depends on whether the Birth is a First Birth, VBAC or Subsequent Birth.
- 3.3.2 If the Lead Maternity Carer did not attend the Birth, this must be documented on the claim form.
- 3.3.3 Where a Lead Maternity Carer utilises Hospital Midwifery Services, Health Benefits will pay the Hospital Midwifery Services directly and the Lead Maternity Carer will claim the fee for where a General Practitioner or Obstetrician has used Hospital Midwifery Services.
- 3.3.4 Subject to C3.9, the Lead Maternity Carer can claim the Labour & Birth fee where the Lead Maternity Carer anticipates that clinical responsibility for the Labour & Birth will remain with the Lead Maternity Carer and circumstances change and clinical responsibility transfers after Established Labour to Secondary Maternity.
- 3.3.5 The payment for Homebirth Supplies & Services may only be claimed once where a Homebirth has occurred.
- 3.3.6 The payment for Birthing Unit Services may only be claimed once where the Birth occurs in a Birthing Unit.

See clause C4.4 for the service specification applying to these payment rules.

3.4 Services Following Birth

- 3.4.1 The Module identified as 'Inpatient Postnatal Care' may be claimed where the woman receives Inpatient Postnatal Care. The Module identified as 'No Inpatient Postnatal Care' may be claimed where the woman does not receive Inpatient Postnatal Care.
- 3.4.2 Where a Lead Maternity Carer utilises Hospital Midwifery Services, Health Benefits will pay the Hospital Midwifery Services directly and the Lead Maternity Carer will claim the fee payable for where a General Practitioner or Obstetrician has used Hospital Midwifery Services.
- 3.4.3 Where a woman changes her Lead Maternity Carer during the first five days following the Birth, the new Lead Maternity Carer is deemed to be the Lead Maternity Carer for Services Following Birth and the previous Lead Maternity Carer cannot claim payment for Services Following Birth. Where a woman changes her Lead Maternity Carer on or after the sixth day after the Birth, the first Lead Maternity Carer will receive 50% of the Services Following Birth fee while the new Lead Maternity Carer will receive 50% of the fee.
- 3.4.4 The payment for Rural Travel may be claimed by the Lead Maternity Carer (or the Hospital Midwifery Service if the Lead Maternity Carer uses Hospital Midwifery Services) where the woman's Usual Place of Residence is in a domicile identified as semi rural, rural or remote rural as listed in Appendix VI. The semi rural, rural and remote rural fees are separate fees and not cumulative.
- 3.4.5 The payment for Additional Home Visits may be claimed once where the Lead Maternity Carer (or the Hospital Midwifery Service if the Lead Maternity Carer uses Hospital Midwifery Services) has provided twelve or more Home Visits.
- 3.4.6 Only one payment for Services Following Birth and one payment for Rural Travel will be paid per woman, except where the mother and baby have different residential addresses. Where two fees for Services Following Birth and Rural Travel are sought, details of the circumstances must be provided with the Claim. The birth mother's NHI is to be provided with the baby's Claim (or, if the birth mother's NHI is unknown, the adopting or foster mother's NHI).

See clause C4.5 for the service specification applying to these payment rules.

4.0 PAYMENT RULES FOR SINGLE SERVICE EPISODES

4.1 Assessment Prior to Termination of Pregnancy

This payment may only be claimed once per woman per pregnancy and may only be claimed by an Authorised Practitioner who is not the Lead Maternity Carer.

See clause C5.1 for the service specification to which these payment rules apply.

4.2 Pregnancy Care and Urgent Out of Hours Pregnancy Care

- 4.2.1 These payments may be claimed during the First Trimester.
- 4.2.2 These payments may only be claimed in the Second and Third Trimester by an Authorised Practitioner other than the Lead Maternity Carer where the Authorised Practitioner documents that:
- (a) the woman is Away From Her Usual Place of Residence and the Lead Maternity Carer cannot reasonably have been expected to provide the service; or
 - (b) the woman is registered with a Lead Maternity Carer and the following circumstances exist:
 - the woman requires Maternity Services in emergency circumstances; and

- the Authorised Practitioner claiming the payment has made reasonable efforts to contact the Lead Maternity Carer prior to the care being given; and
 - the Lead Maternity Carer is not available within the timeframe necessary to provide the treatment and this is stated on the Claim form; or
- (c) the woman is not registered with a Lead Maternity Carer and a reason for the woman not being registered is provided and the Ministry of Health considers this reason to be satisfactory.
- 4.2.3 These payments cannot be claimed for services provided on the same day as an Assessment Prior to Termination of Pregnancy, except where a different Authorised Practitioner has claimed the Assessment Prior to Termination of Pregnancy.
- 4.2.4 These payments may be claimed for services provided within fourteen days of a miscarriage or termination of pregnancy occurring.

See clauses C5.2 & C5.3 for the service specification to which these payment rules apply.

4.3 Threatened Miscarriage Service and Miscarriage Service

- 4.3.1 A payment for Threatened Miscarriage Service may be claimed more than once in any pregnancy.
- 4.3.2 A payment for Miscarriage Service may only be claimed once per pregnancy.

See clauses C5.4 & C5.5 for the service specification applying to these payment rules.

4.4 Exceptional Circumstances

- 4.4.1 There may be more than one Claim for this fee per woman per date of service.
- 4.4.2 Where there are other exceptional circumstances, an Authorised Practitioner may make written application to the Ministry of Health for a discretionary decision on payment.

See clause C5.6 for the service specification to which these payment rules apply.

4.5 Postnatal Consultation by Non-Lead Maternity Carer

A General Practitioner or Midwife who is not the woman's Lead Maternity Carer can claim for one consultation per woman in the period up to four weeks after Birth where the Lead Maternity Carer (or Back-up to Lead Maternity Carer) is not available or not able to provide the care required.

See clause C5.7 for the service specification to which these payment rules apply.

4.6 Ultrasound Scans

- 4.6.1 This payment may only be claimed where:
- (a) there is a written referral, signed by an Authorised Practitioner, for an ultrasound scan specifying a clinical reason for the referral that is in accordance with Appendix V;
 - (b) when the woman is in the Second Trimester or Third Trimester, the referral is from the Lead Maternity Carer or an Obstetrician (other than the Authorised Practitioner who provides the ultrasound scan), except in emergency circumstances. Emergency circumstances are limited to occasions where an ultrasound scan is required on the same day as the

referral and neither the Lead Maternity Carer nor Secondary Maternity is available in the necessary timeframe; and

- (c) there is only one Claim for an ultrasound scan per woman per date of service.
- 4.6.2 Where an Authorised Practitioner is acting as a Back-up to a Lead Maternity Carer, the referral should be identified as being signed by the Back-up to the Lead Maternity Carer on behalf of the Lead Maternity Carer.
- 4.6.3 A Claim for a Subsequent Consultation requires a new referral form from the Lead Maternity Carer or Obstetrician (other than the Authorised Practitioner who provides the ultrasound scan).
- 4.6.4 Where the Ministry of Health wishes to enter into a regional budgetholding or other funding arrangement for this service, the Ministry of Health will consult with all Authorised Practitioners in the applicable region. Following the consultation, the Ministry of Health will give Radiologists in the applicable region at least three months' written notice of any restriction on claiming this fee.

See clause C5.8 for the service specification to which these payment rules apply.

4.7 Consulting Obstetrician Services

- 4.7.1 This payment may only be claimed where:
 - (a) there is a written referral from the Lead Maternity Carer (other than an Obstetrician and other than an Authorised Practitioner employed or subcontracted by the provider arm of a District Health Board) and this referral specifies a clinical reason for the referral that is in accordance with the Referral Guidelines;
 - (b) the Obstetrician has met the requirements of clauses D2.3.3 and D2.4.2;
 - (c) the Obstetrician attends the woman in person;
 - (d) the Obstetrician is not the Lead Maternity Carer; and
 - (e) there is only one Claim per Consulting Obstetrician Services (either First Consultation or Subsequent Consultation) per woman per date of service.
- 4.7.2 Payment will be made according to whether it is a First Consultation or a Subsequent Consultation. A Claim for a Subsequent Consultation requires a new referral from the Lead Maternity Carer.
- 4.7.3 Where the Ministry of Health wishes to enter into a regional budgetholding or other funding arrangement for this service, the Ministry of Health will consult with all Authorised Practitioners in the applicable region. Following the consultation, the Ministry of Health will give Obstetricians in the applicable region at least one month's written notice of any restriction on claiming this fee.

See clause C5.9 for the service specification to which these payment rules apply.

4.8 Obstetrician – Effecting Delivery

- 4.8.1 This payment may only be claimed where:
 - (a) there is a written referral from the Lead Maternity Carer (other than an Obstetrician and other than an Authorised Practitioner employed or subcontracted by the provider arm of a District Health Board) and this referral specifies a clinical reason for the referral that is in accordance with the Referral Guidelines;
 - (b) the Obstetrician has met the requirements of clauses D2.3.3 and D2.4.2;
 - (c) the Obstetrician is not the Lead Maternity Carer;

- (d) there has been no other Claim for Obstetrician – Effecting Delivery per woman per pregnancy;
 - (e) there has been no Claim for Consulting Obstetrician Services after the beginning of the second stage of this labour; and
 - (f) the Obstetrician is present at the Birth.
- 4.8.2 Where the Ministry of Health wishes to enter into a regional budgetholding or other funding arrangement for this service, the Ministry of Health will consult with all Authorised Practitioners in the applicable region. Following the consultation, the Ministry of Health will give Obstetricians in the applicable region at least one month's written notice of any restriction on claiming this fee.

See clause C5.10 for the service specification to which these payment rules apply.

4.9 Anaesthetist Services

- 4.9.1 This payment may only be claimed where:
- (a) there is a written referral from the Lead Maternity Carer or the Back-up to the Lead Maternity Carer (other than an Authorised Practitioner employed or subcontracted by the provider arm of a District Health Board);
 - (b) the Anaesthetist has met the requirements of clauses D2.3.3 and D2.4.2; and
 - (c) there is only one Claim per Anaesthetist Services per woman per pregnancy.
- 4.9.2 Where a Ministry of Health wishes to enter into a regional budgetholding or other funding arrangement for this service, the Ministry of Health will consult with all Authorised Practitioners in the applicable region. Following the consultation, the Ministry of Health will give Anaesthetists in the applicable region at least one month's written notice of any restriction on claiming this fee.

See clause C5.11 for the service specification to which these payment rules apply.

4.10 Paediatrician Services

- 4.10.1 This payment may only be claimed where:
- (a) there is a written referral in accordance with the Referral Guidelines from the Lead Maternity Carer (other than an Authorised Practitioner employed or subcontracted by the provider arm of a District Health Board);
 - (b) the Paediatrician has met the requirements of clauses D2.3.3 and D2.4.2;
 - (c) the Paediatrician attends in person; and
 - (d) there is only one Claim for Paediatrician Services (either First Consultation or Subsequent Consultation or Attendance at Delivery) per woman/baby per date of service.
- 4.10.2 Payment will be made according to whether it is a First Consultation or a Subsequent Consultation or Attendance at Delivery. A Claim for a Subsequent Consultation requires a new referral from the Lead Maternity Carer.
- 4.10.3 Where the Ministry of Health wishes to enter into a regional budgetholding or other funding arrangement for this service, the Ministry of Health will consult with all Authorised Practitioners in the applicable region. Following the consultation, the Ministry of Health will give Paediatricians in the applicable region at least one month's written notice of any restriction on claiming this fee.

See clause C5.12 for the service specification to which these payment rules apply.

5.0 PROCESSING OF CLAIMS

5.1 Identification of pregnancy

The NHI number and Expected Date of Delivery will be used to uniquely identify the woman and her pregnancy and must be supplied with each Claim.

5.2 Claiming process

5.2.1 Authorised Practitioners can obtain advice on claiming from Health Benefits.

5.2.2 A Claim must be completed accurately, legibly and in full.

5.2.3 The Authorised Practitioner or Organisation making the Claim must sign each Claim. Where a Claim is submitted electronically, the Authorised Practitioner or Organisation must sign and retain a copy of the Claim.

5.2.4 The woman receiving the service must also sign the Registration form (except where a Claim for Registration needs to be re-submitted in which case it is sufficient to have a photocopy of the original Claim containing the woman's signature).

5.2.5 An incomplete or illegible Claim will not be deemed to have been received by Health Benefits and shall be returned to the claimant within five working days, where the claimant is identifiable.

5.2.6 Every Claim must be in the format given in Appendix VII, or such other format as is approved by the Ministry of Health from time to time.

5.2.7 An Authorised Practitioner may nominate an Organisation(s) to receive payments under this Notice for that Authorised Practitioner's services. The Ministry of Health will provide the Authorised Practitioner with the payee number of the Organisation(s).

5.2.8 Where the Ministry of Health determines that an Authorised Practitioner or Organisation has been overpaid or that an Authorised Practitioner or Organisation was not entitled to a payment, the Ministry of Health may deduct any over payment from any subsequent payment payable to the Authorised Practitioner or Organisation. Prior to making any deduction, the Ministry of Health will advise the Authorised Practitioner or Organisation giving the reason(s) for the deduction and giving the Authorised Practitioner or Organisation sufficient time to appeal against the deduction prior to it occurring.

5.2.9 Subject to clause D3.1.4, D5.2.5 and D5.2.10, in the event that two or more Claims are submitted for the same service, only the first Claim to be received shall be paid.

5.2.10 The Authorised Practitioner or Organisation can appeal against any partial payment, nonpayment or repayment by writing to the Ministry of Health with details of the complaint.

5.3 Timing of Claims

5.3.1 A Claim may only be made on completion of services. This includes the completion of a Module.

5.3.2 A Claim will be paid within twenty-two working days from the receipt of a valid Claim by Health Benefits. Payment will be made by way of direct credit.

5.3.3 Registration or a change of Registration must be received by Health Benefits no more than twenty working days after the date of Registration. Any other Claim for any Maternity Service other than Registration must be received by Health Benefits within six months of this service being completed.

5.3.4 Where a Claim for any Maternity Service provided under this Notice is received six months after the service has been completed, there will be a 10% fee deduction.

This rule will apply unless, in its sole discretion, the Ministry of Health considers there were circumstances beyond the control of the Authorised Practitioner that prevented the Claim being submitted any earlier.

- 5.3.5 Where a Claim has to be returned to the Authorised Practitioner or Organisation for correction of claiming details in accordance with clause D5.2.5, the timeframe in clause D5.3.3 will be applied from the date the Claim was initially received by Health Benefits.

6.0 RECORD KEEPING

- 6.1 Where the Authorised Practitioner claims any Maternity Services, s/he shall ensure a comprehensive, legible and readily accessible record is kept for every woman and baby, which shall include the following:
- (a) the date and time on which the service was provided;
 - (b) the place where the service was provided;
 - (c) the name, birth date and usual place of residence of the woman and baby;
 - (d) the NHI number of the woman and baby;
 - (e) a record of the clinical history of the woman and baby, services rendered, type and amount of pharmaceuticals prescribed, type and number of any laboratory diagnostic services requested;
 - (f) details of any Specialist referrals made or received; and
 - (g) any other information required as detailed on the claim forms in Appendix VII.
- 6.2 The Authorised Practitioner will keep all records required by this Notice for a period of at least ten years or as provided in the Health (Retention of Health Information) Regulations 1996.

7.0 AUDIT

- 7.1 The Ministry of Health will conduct audits of Authorised Practitioners in accordance with the protocols agreed between the Ministry of Health and either the New Zealand College of Midwives or the New Zealand Medical Association.
- 7.2 The Ministry of Health's right to audit under this clause continues after this Notice ends but only to the extent that it is relevant to the period during which the Notice was in force.
- 7.3 Where there is audit evidence of partial service delivery, the Ministry of Health may obtain a partial repayment of the service fee.

PART E TRANSITIONAL ARRANGEMENTS

The previous Maternity Notice was effective from 1 March 1998 having been originally issued as a Notice under section 51 of the Health & Disability Services Act 1993 and then continued as a Notice under section 88 of the New Zealand Public Health & Disability Act 2000 by section 112(3) of this Act. The transition to this Notice from the Section 88 Maternity Notice (1998) will be achieved as follows:

- 1.0 All women receiving Maternity Services for the first time for a Module or who are in their First Trimester as at 1 July 2002 will receive their care under the terms of this Notice.
- 2.0 All women who are part way through a Module at 1 July 2002 will continue to receive their care under the Section 88 Maternity Notice (1998) for the remainder of that Module only.
- 3.0 When women begin a new Module on or after 1 July 2002, they will receive their care under this Notice.
- 4.0 The Section 88 Maternity Notice (1998) will terminate on 31 October 2002.
- 5.0 All Authorised Practitioners who were authorised to claim under the Section 88 Maternity Notice (1998) as at 30 June 2002 and who have made a Claim for Maternity Services on or after 1 July 1999 are automatically authorised to claim under this Notice.

APPENDIX I

GUIDELINES FOR CONSULTATION WITH OBSTETRIC AND RELATED SPECIALIST MEDICAL SERVICES

1.0 PURPOSE OF GUIDELINES

This document provides guidelines for best practice based on expert opinion and available evidence. It is the intention that the guidelines be used to facilitate consultation and integration of care, giving confidence to providers, women and their families.

For the purpose of these guidelines, referral to specialist services includes both referral to Secondary Maternity or to a specialist, as defined in this Notice.

It is intended that these guidelines should be reviewed at two yearly intervals.

2.0 CIRCUMSTANCES WHERE GUIDELINES MAY BE VARIED

The guidelines acknowledge that General Practitioners, General Practitioner Obstetricians and Midwives have a different range of skills. The guidelines are not intended to restrict good clinical practice. There may be some flexibility in the use of these guidelines:

- (a) The practitioner needs to make clinical judgements depending on each situation and some situations may require a course of action which differs from these guidelines. The practitioner will need to be able to justify her/his actions should s/he be required to do so by their professional body.

It is expected that the principles of informed consent will be followed with regard to these guidelines. If a woman elects not to follow the recommended course of action it is expected that the practitioner will take appropriate actions such as seeking advice, documenting discussions and exercising wise judgement as to the ongoing provision of care.

- (b) It is also recognised that there may be some circumstances where the requirement to recommend consultation places an unnecessary restriction on experienced practitioners, particularly where there is no immediate access to specialist services. The individual practitioner can come to an appropriate arrangement with the specialist.

It is agreed that, in accordance with good professional practice, a practitioner must record in the notes the reasons for the variation from the guidelines.

3.0 TIMING OF REFERRALS

Referral to a specialist should occur in a timely manner.

The gestational age is defined as the number of completed weeks, as determined by the LMP, ultrasound estimation or clinical assessment. For example, a baby is 24 weeks from 24 weeks 0 days until 24 weeks 6 days.

4.0 REFERRAL PROCESS

Referral for most of the criteria will be to an Obstetrician and, for those listed under Services Following Birth, to a Paediatrician. However, in some instances, particularly those criteria involving associated medical conditions, a referral to another Specialist such as a Physician, Anaesthetist, Surgeon, Paediatrician, Infectious Diseases Specialist or Psychiatrist, may also be appropriate or be more appropriate. For some situations a multidisciplinary team will be necessary. Many of the criteria under Labour and Birth Services will require both Obstetrician and Paediatrician.

It is recognised that referral to a woman's usual General Practitioner may be appropriate in some circumstances. However these guidelines refer specifically to Specialists.

There are some particular circumstances, for example twins, where clinically the specialist needs to be responsible for care but the ongoing involvement of the primary practitioner is very important.

5.0 LEVELS OF REFERRAL

These guidelines define three levels of referral and consequent action:

Level 1

The Lead Maternity Carer may recommend to the woman (or parents in the case of the baby) that a consultation with a specialist is warranted given that her pregnancy, labour, birth or puerperium (or the baby) is or may be affected by the condition. *Where a consultation occurs, the decision regarding ongoing clinical roles/responsibilities must involve a three way discussion between the specialist, the Lead Maternity Carer and the woman concerned. This should include discussion on any need for and timing of specialist review.* The specialist will not automatically assume responsibility for ongoing care. This will depend on the clinical situation and the wishes of the individual woman.

Level 2

The Lead Maternity Carer must recommend to the woman (or parents in the case of the baby) that a consultation with a specialist is warranted given that her pregnancy, labour, birth or puerperium (or the baby) is or may be affected by the condition. *Where a consultation occurs, the decision regarding ongoing clinical roles/responsibilities must involve a three way discussion between the specialist, the Lead Maternity Carer and the woman concerned. This should include discussion on any need for and timing of specialist review.* The specialist will not automatically assume responsibility for ongoing care. This will depend on the clinical situation and the wishes of the individual woman.

Level 3

The Lead Maternity Carer must recommend to the woman (or parents in the case of the baby) that the responsibility for her care be transferred to a specialist given that her pregnancy, labour, birth or puerperium (or the baby) is or may be affected by the condition. *The decision regarding ongoing clinical roles/responsibilities must involve a three way discussion between the specialist, the Lead Maternity Carer and the woman concerned. In most circumstances the specialist will assume ongoing responsibility and the role of the primary practitioner will be agreed between those involved. This should include discussion about timing of transfer back to the primary practitioner.*

CODE	CONDITION	DESCRIPTION	
MEDICAL CONDITIONS			
Anaesthetics			
1001	Anaesthetic difficulties	Previous failure or complication (e.g. difficult intubation, failed epidural)	2
1002	Malignant hyperpyrexia or neuromuscular disease		3
Autoimmune / Rheumatology			
1003	SLE	Active, major organ involvement, on medication	3
1004		Inactive, no renal involvement, no hypertension, or only skin / joint problems	2
1005	Primary antiphospholipid syndrome	On warfarin, previous obstetric complications or maternal thrombosis	3
1006		No previous obstetric complications or maternal thrombosis	2
Cardiac			
1007	Arrhythmia		2
1008	Cardiac valve disease	Mitral / aortic regurgitation	2
1009		Mitral / aortic stenosis	3
1010		Other	2
1011	Cardiac valve replacement		3
1012	Cardiomyopathy		3
1013	Congenital cardiac disease		2
1014	Hypertension	Mild, 140-150/90-100, not on medication	2
1015		Moderate to severe, on medication	3
1016	Ischaemic heart disease		3
1017	Pulmonary hypertension		3
1018	Palpitations	Recurrent, persistent or associated with other symptoms	2
Endocrine			
1019	Diabetes	Pre-existing (insulin dependent or non insulin dependent)	3
1020		Gestational, well controlled on diet	2
1021		Gestational, requiring insulin	3
1022	Thyroid disease		2
1023	Hypopituitarism		2
1024	Prolactinoma		2
Gastroenterology			
1025	Cholelithiasis		2
1026	Cholestasis of pregnancy		3
1027	Inflammatory bowel disease	Active, on medication	3
1028		Inactive	2
1029	Hepatitis	Acute /chronic	2
1030		Chronic active	3
1031	Oesophageal varices		3
Genetic			
1032	Any condition		2
1033	Marfans		3
Haematological			
1034	Anaemia	Hb < 90 g/l, not responding to treatment	2
1035	Haemolytic anaemia		3
1036	Bleeding disorders	Including Von Willebrands	2
1037	Thalassaemia		2
1038	Thrombocytopaenia		2
1039	Sickle cell disease		3
1040	Thromboembolism	E.g. previous DVT, PE	3
1041	Thrombophilia		3
Infectious Diseases			
1042	CMV / toxoplasmosis	Acute	3
1043	Group B strep		1
1044	HIV positive		3
1045	Listeriosis	Acute	3
1046	Rubella		2
1047	Syphilis		2
1048	Tuberculosis		2
1049	Varicella	Acute or contact	2

CODE	CONDITION	DESCRIPTION	
Neurological			
1050	AV malformation, CVA, TIAs		3
1051	Epilepsy	Controlled	2
1052		Poor control or multiple medications	3
1053	Multiple sclerosis		2
1054	Myasthenia gravis		3
1055	Spinal cord lesion		3
1056	Muscular Dystrophy or Myotonic Dystrophy		3
1057	Psychiatric		
1058	Alcohol or drug dependency		2
1059	On medication or unstable condition		2
1060	Psychiatric condition		1
Renal Disease			
1061	Glomerulonephritis		3
1062	Proteinuria	Chronic	2
1063	Pylonephritis		2
1064	Renal failure		3
1065	Renal abnormality or vesico-ureteric reflux		2
Respiratory Disease			
1066	Asthma	Mild	1
1067		Moderate (i.e. oral steroids on two occasions in the last year & maintenance therapy)	2
1068		Severe (i.e. hospitalisation in the last 2 years, any previous admission to intensive care unit, FEV ₁ <70% predicted in absence of acute attack, requiring bronchodilator therapy daily, requiring > 1200 mcg budisonide or equivalent inhaled steroids)	3
1069	Other significant disease		2
PREVIOUS GYNAECOLOGICAL CONDITIONS OR SURGERY			
2001	Cervical surgery including cone biopsy, laser excision or LLETZ	Without subsequent vaginal birth	2
2002		With subsequent vaginal birth	1
2003	Congenital abnormalities of the uterus	Without previous normal pregnancy outcome	2
2004		With previous normal pregnancy outcome	1
2005	Infertility	Clomiphene pregnancy or AIH	1
2006		IVF or GIFT	2
2007	Previous uterine surgery	Myomectomy	2
2008		Previous uterine perforation	2
2009	Prolapse	Previous surgery	2
2010	Vaginal Abnormality	E.g. Septum	2
PREVIOUS OBSTETRIC HISTORY			
3001	Previous placental abruption		2
3002	Autoimmune (foetal) thrombocytopaenia		3
3003	Caesarean section		2
3004	Cervical Incompetence		3
3005	Trophoblastic disease	Hydatidiform mole or vesicular mole, without subsequent normal pregnancy	2
3006		With subsequent normal pregnancy	1
3007	Hypertensive disease	Pre-eclampsia	1
3008		Pre-eclampsia with significant IUGR, requiring delivery < 34 weeks or with multi-organ involvement	2
3009	Infant large for gestational age	> 4500g	1
3010	Intra-uterine growth restriction (IUGR)	Birth weight < 5 th percentile	2
3011	Manual removal	With clinically adherent placenta	2
3012	Perinatal death		2
3013	Postpartum haemorrhage	1000 mls, > 1000 mls	2
3014	Preterm birth	< 35 weeks	2
3015	Recurrent miscarriage	3 or more	2
3016	Shoulder dystocia		2
3017	Termination of pregnancy	3 or more	2
CURRENT PREGNANCY			
4001	Acute abdominal pain		2
4002	Abdominal trauma		2
4003	Abnormal CTG	Refer RANZCOG guidelines	2
4004	Antepartum haemorrhage		2

CODE	CONDITION	DESCRIPTION	
4005	Blood group antibodies		2
4006	Eclampsia		3
4007	Foetal abnormality		2
4008	Gestational proteinuria	> 0.3g / 24 hours	2
4009	Gestational hypertension		2
4010	Intrauterine death		3
4011	IUGR / SGA	AC < 5 th percentile, normal liquor	2
4012		AC < 5 th percentile, reduced liquor or abnormal umbilical doppler	3
4013	Large for dates	Uterine size > 4 weeks greater than expected, abdominal circumference or estimated foetal weight > 90 th percentile	2
4014	Low maternal weight	BMI < 17	1
4015	Malignancy		3
4016	Malpresentation	> 36 weeks; breech, transverse, oblique or unstable lie	2
4017	Morbid obesity		3
4018	Multiple pregnancy	Twins or higher order multiples	3
4019	Oligohydramnios	Pool depth < 2 cms on scan	2
4020	Placenta praevia	At or > 32 weeks	3
4021	Polyhydramnios	Scan pools > 10 cms	3
4022	Pre-eclampsia	BP > 140/90 (or rise of > 30/15) and any of; 1. Proteinuria > 0.3g / 24 hours 2. Platelets < 150 x 10 ⁹ /l 3. Abnormal renal or liver function 4. Imminent eclampsia / eclampsia	3
4023	Premature rupture of membranes	< 37 weeks and not in labour	2
4024	Prolonged pregnancy	41 weeks, > 41 weeks - assessment, discussion & plan	2
4025	Premature labour	34-36 weeks	2
4026		< 34 weeks	3
4027	Prelabour rupture of membranes at term	Assessment, discussion & plan	2
4028	Reduced foetal movements		1
4029	Herpes genitalis	Active lesions	2
4030	Uncertain dates at term by best estimate		2
4031	Uterine fibroids		2
4032	Urinary Tract Infection (UTI)	Recurrent	2
LABOUR & BIRTH - FIRST & SECOND STAGE			
5001	Amniotic fluid embolism		3
5002	Anhydramnios		3
5003	Cerebral anoxia / cardiac arrest		3
5004	Complications of anaesthetic		3
5005	Complications of other analgesia or sedation		2
5006	Compound presentation		3
5007	Cord prolapse or presentation		3
5008	Deep transverse arrest		3
5009	Epidural		2
5010	Failed instrumental vaginal delivery		3
5011	Foetal heart rate abnormalities		2
5012	Hypertonic uterus		2
5013	Induction of labour		2
5014	Instrumental vaginal delivery	Low (+2 or lower; head easily visible)	2
5015		Head not easily visible, 0 or +1	3
5016	Intrapartum haemorrhage		3
5017	Maternal tachycardia	Sustained	2
5018	Meconium liquor	Moderate or thick	2
5019	Obstetric shock		3
5020	Obstructed labour		3
5021	Prolonged first stage of labour	Nullipara – poor progress after ARM and syntocinon infusion	2
5022		Multipara – poor progress after ARM	2
5023	Prolonged second stage of labour	> 2 hours nullipara or > 1 hour multipara with no progress	2
5024	Pyrexia in labour	> 38 degrees with or without foetal tachycardia	2
5025	Shoulder dystocia		2
LABOUR & BIRTH - THIRD STAGE			
6001	3 rd & 4 th degree lacerations		3
6002	Cervical laceration		3
6003	Post partum haemorrhage (PPH)	> 600 mls with ongoing bleeding	2
6004	Retained Placenta		2
6005	Shock		3
6006	Vaginal laceration	Complex	2

CODE	CONDITION	DESCRIPTION	
6007	Vulval and perineal haematoma		3
SERVICES FOLLOWING BIRTH – MOTHER			
7001	Breast abscess	Not settling with antibiotics	2
7002	Neonatal death		2
7003	Post delivery neurological deficit		2
7004	Postnatal depression	Not psychotic	2
7005		Psychotic	3
7006	Puerperal sepsis	Temp > 37.6, maternal tachycardia	3
7007	Pyrexia of unknown origin	With rigors or shock	2
7008	Secondary PPH		2
SERVICES FOLLOWING BIRTH - BABY			
General			
8001	Abnormal neonatal examination	Minor abnormalities not specified elsewhere	2
8002	Foetal ultrasound abnormality	Any	2
8003	Malformations	Congenital anomalies that may require early treatment	2
Cardiovascular			
8004		Heart murmur no symptoms	2
8005		Heart murmur with symptoms	3
8006		Persistent or recurrent cyanosis	3
CNS			
8007		Microcephaly – head circumference (HC) < 3rd %	2
8008		Convulsions or unresponsiveness	3
8009		Irritability	2
8010		Limpness, lethargy, hypotonia,	2
8011		Severe depression (e.g. apgar 6 or less at 5 minutes with little improvement by 10 minutes)	3
8012		Less severe depression than above Required active resuscitation	2
Growth and Feeding			
8013	Feeding	Poor suck or feeding not related to gestation	2
8014		Dehydration or > 10% weight loss since birth	2
8015		Persistent vomiting without blood or bile	2
8016	Intra-uterine growth restriction	Birthweight < 5th % or asymmetric growth,	2
8017	Low birth weight	Birth weight 2000 - 2500g	2
8018		Birth weight < 2000g	3
8019	Poor weight gain	Birth weight not regained by 14 days	2
8020	Postmaturity	With evidence of growth retardation	2
8021	Preterm	Gestation 35-36 weeks	2
8022		Gestation < 35 weeks	3
Gastrointestinal			
8023		Unable to pass a gastric tube in a mucousy baby	3
8024		Abdominal distension or mass	2
8025		Persistent or bile stained vomiting or fresh blood in stools	3
8026		No passage of meconium by 24 to 36 hours	2
8027		Inguinal hernia	2
Genitourinary			
8028		Failure to pass urine in any 24 to 36 hour period	2
8029		Hypospadias or foreskin abnormality	2
8030		Undescended testes	2
Haematology			
8031		Evidence of a bleeding tendency: haematemesis, melena, haematuria, purpura, generalised petechiae	3
8032		Haemorrhage from cord or other site	3
8033		Maternal isoimmunisation: rhesus or other antibodies. Refer prior to delivery	3
8034		Maternal thrombocytopenia	2
Infection			
8035	Risk factor for sepsis - membrane rupture > 24 hours	Baby well, mother may have received perinatal antibiotics Screening of baby recommended	2
8036	Maternal chorio-amnionitis: foetal tachycardia, maternal pyrexia, offensive liquor	Baby apparently well or unwell	3
8037	Temperature instability	Temp < 36.0 C or > 37.5 C confirmed within one hour following appropriate management	2
Jaundice			
8038		Any in first 24 hours	3

CODE	CONDITION	DESCRIPTION	
8039		Bilirubin > 250 micromol/l in first 48 hours	2
8040		Bilirubin > 300 micromol/l at any time	2
8041		Late jaundice: visible or > 150 micromol/l from 2 weeks in term infant and 3 weeks in preterm infant.	2
8042		Significant jaundice in previous infant	2
Maternal Factors			
8043	Infant of a mother with a history of substance or alcohol abuse	E.g. methadone, marijuana, alcohol, codeine, valium	2
8044	Infant of diabetic mother	With any abnormal findings e.g. hypoglycaemia, poor feeding, macrosomic	3
8045	Infant of diabetic mother	Apparently normal infant	2
8046	Intrauterine infection	Toxoplasmosis, rubella, CMV, other. Referral before delivery often appropriate	2
8047	Maternal request	Anxiety regarding normality	2
8048	Maternal medication with risk to baby:	E.g. carbimazole, antipsychotics, antidepressants, anticonvulsants	2
8049	Maternal/family history with risk factors for baby	E.g. vesico-ureteric reflux, congenital heart disease, deafness, Graves disease, syphilis, severe handicap in parent, bipolar disease, schizophrenia, other psychiatric condition	2
8050	Miscellaneous	Previous neonatal death, SIDS, congenital abnormality	2
Orthopaedics			
8051	Hips	Unstable hips, breech delivery, family history of dislocated hips	2
8052	Feet	Talipes equinovarus or significant positional foot deformity	2
Respiratory			
8053		Any cyanosis, persistent grunting, pallor	2
8054		Apnoea	3
8055		Tachypnoea with respiratory rate greater than 60/min and respiratory distress	3
8056		Stridor, nasal obstruction, or respiratory symptoms not specified elsewhere	2

APPENDIX II ACCESS AGREEMENT

APPLICATION FOR ACCESS TO [NAME OF MATERNITY FACILITY OR FACILITIES]

Full name:

Address:

Contact details: home phone, work phone, pager, cellphone, facsimile, email

Professional qualification(s):

Do you currently work for [name of Maternity Facility]? Yes / No

Name and address of two referees who can verify the identity of the applicant:

Attach a copy of your New Zealand Practising Certificate plus confirmation of your indemnity protection.

The information provided on this document is collected for the purpose of issuing and maintaining an Access Agreement and will not be used for any other purpose. You, as the applicant, confirm that all information provided is true and correct and that you agree to be bound by the terms and conditions of access for [name of Maternity Facility], a copy of which is attached.

Applicant's signature

Date:

Signed for and on behalf of [name of facility provider]

Position:

Date:

Status of Application: Approved / Declined

STANDARD TERMS AND CONDITIONS OF ACCESS TO A MATERNITY FACILITY OR BIRTHING UNIT

1.0 PURPOSE

The applicant ["the Practitioner"] is an Authorised Practitioner as defined by the Maternity Notice (2002) issued pursuant to Section 88 of the New Zealand Public Health and Disability Act 2000. The Practitioner has requested that [name of facility provider] ["the Maternity Facility"] grant the Practitioner access to the following facilities for the purpose of providing Labour & Birth and Inpatient Postnatal Care to the Practitioner's maternity clients.

[Name of facility/facilities]

This Access Agreement provides the Practitioner with access to the services that are specified in the Maternity Facility service specification issued by the Ministry of Health on the terms and conditions set out in the following clauses.

2.0 OBLIGATIONS OF BOTH PARTIES

2.1 Cultural safety

- i) Services to Maori will be provided in a way that is consistent with the Treaty of Waitangi, recognising the status of Maori as tangata whenua and the status of Maori women within the context of their cultural values, beliefs and practices.
- ii) Maternity services will be provided in a manner that recognises cultural differences and is sensitive to the cultural traditions, protocols and customs of the woman.

2.2 Referral Guidelines

Both parties will take into account the Referral Guidelines.

2.3 Relationship between the Maternity Facility and the Practitioner

The relationship between the Maternity Facility and the Practitioner gives the Practitioner access to the Maternity Facility upon these terms and conditions and is not to be construed as one of employment or a contract for service by the Practitioner. The Maternity Facility shall not inquire into or specify matters relating to the operation or administration of the Practitioner's practice.

2.4 Policies & procedures

All relevant administrative policies of the Maternity Facility are to be available to the Practitioner in the facility. Any clinical policies will be developed and agreed by both the Maternity Facility and the Practitioner (or by a representative of the Practitioner's professional organisation).

2.5 Complaints management

2.5.1 Where a woman has identified an issue as a complaint, the party receiving the complaint will advise the woman of the appropriate avenues for complaint.

2.5.2 If both parties to this Access Agreement share responsibility for the service complained about then, with the consent of the woman, the party who receives the complaint shall discuss the issue with the other party.

2.6 Dispute management

2.6.1 If any issue arises between the Practitioner and the Maternity Facility in relation to interpretation, obligation or compliance by either party to the terms of this Access Agreement, the Practitioner and the Maternity Facility shall use their best endeavours to settle the dispute by agreement. Any review of any issue needs to apply a process that is mutually agreed by both parties.

2.6.2 The relevant professional organisation should be considered as a resource in preventing or managing any dispute.

2.7 Suspension

2.7.1 The General Manager of the Maternity Facility shall have the right and complete discretion to immediately suspend access by the Practitioner to the Maternity Facility in the event of a serious complaint being made of gross misconduct, negligence, or a substantial or repeated breach of this Agreement.

2.7.2 Within 48 hours of the suspension, the Maternity Facility will provide the Practitioner with written reasons for the suspension.

2.7.3 Management of the suspension is then to follow clause 2.6 of this Access Agreement.

3.0 OBLIGATIONS OF THE PRACTITIONER**3.1 Professional responsibilities**

The Practitioner accepts that s/he is fully accountable for his/her own professional practice. The Practitioner will participate in a Professional Review Process. The Practitioner will explain to the woman the relationship between the self-employed Practitioner and the Maternity Facility.

3.2 Compliance with Statutes and Regulations

The Practitioner undertakes and agrees to comply with all relevant statutes and regulations on the provision of healthcare.

3.3 Qualifications

3.3.1 The Practitioner shall at all times maintain the following qualifications:

- (a) be vocationally registered as an Obstetrician in the register of medical practitioners maintained by the Medical Council of New Zealand and hold a current annual practising certificate issued by that Council;
- (b) be vocationally registered as a General Practitioner in the register of medical practitioners maintained by the Medical Council of New Zealand and hold a current annual practising certificate issued by that Council and have a Diploma in Obstetrics (or equivalent, as determined by the New Zealand College of General Practitioners); or
- (c) be a Midwife whose name is included in the register maintained by the Nursing Council of New Zealand and hold a current annual practising certificate issued by that Council.

3.3.2 The Practitioner will inform the Maternity Facility of any change in his/her practising status or any conditions attached to his/her practising certificate.

3.4 Indemnity Protection

The Practitioner shall maintain appropriate professional indemnity protection at all times during the term of this agreement.

3.5 Students

The Practitioner shall be responsible for any student accompanying the Practitioner, in conjunction with the School of Midwifery or the School of Medicine.

3.6 Availability

The Practitioner shall provide 24-hour availability if acting as a Lead Maternity Carer or have arranged availability of another Practitioner who has a current Access Agreement with the Maternity Facility.

3.7 Administrative Requirements

The Practitioner will meet any reasonable administrative requirements of the Maternity Facility to the extent necessary to enable the Maternity Facility to run an efficient and co-ordinated service.

3.8 Contact Details

The Practitioner shall notify the Maternity Facility of any changes in contact details.

4.0 OBLIGATIONS OF THE MATERNITY FACILITY**4.1 Orientation**

The Maternity Facility shall provide the Practitioner with an orientation to its facility at a time mutually agreeable to both parties.

4.2 Education Forums

The Maternity Facility will enable the Practitioner to have access to educational forums held by the Maternity Facility.

4.3 Administrative Requirements

The Maternity Facility shall facilitate the Practitioner's compliance with any administrative requirements.

4.4 Availability of Facilities

The Maternity Facility shall ensure that reasonable notice is given prior to any reduction in or cessation of facility services.

5.0 ENTIRE AGREEMENT

These terms and conditions form the entire agreement between the Maternity Facility and the Practitioner.

6.0 TERM

6.1 This agreement is continuous, subject to an annual sighting of the Practitioner's current practising certificate and indemnity protection.

6.2 The Practitioner may terminate this agreement by giving notice to the Maternity Facility.

<p style="text-align: center;">APPENDIX III ITEMS TO BE COVERED IN CARE PLAN</p>

The Care Plan means the process by which the Lead Maternity Carer and the woman develop a plan of care for the woman and her baby and the documentation of this plan in the clinical notes. The Lead Maternity Carer will commence and document a Care Plan covering, as a minimum, the following items:

- (a) schedule and location of visits for pregnancy care;
- (b) how continuity of care will be achieved;
- (c) how to access the Lead Maternity Carer in urgent situations;
- (d) cultural safety requirements;
- (e) education plan during pregnancy and following birth;
- (f) referral to other midwifery, medical, social and diagnostic services;
- (g) smoking cessation options;
- (h) screening for infectious diseases;
- (i) assessment of risk of family violence;
- (j) location of birth and other services including booking in to facility or arrangements for home birth;
- (k) presence of others at birth;
- (l) birth environment and position for birthing;
- (m) options and preference for monitoring, intervention, and treatments;
- (n) handling of placenta;
- (o) breastfeeding or other feeding requirements;
- (p) likely stay in the Maternity Facility and planning for going home;
- (q) requirements for postnatal care;
- (r) risk of postnatal depression and support options;
- (s) advice regarding contraception and sexuality; and
- (t) referral to Well Child Provider and the timing for this.

APPENDIX IV

Referral to Well Child Provider and notification to GP

This form is to be sent to both the Well Child Provider and the GP in order to fulfil clauses C4.5.4 & C4.5.5

Mother

Family name:

Given names:

Birth Date: NHI number:

Address:

.....

.....

.....

Daytime phone: Alternative Contact:

Parity:

Baby

Family name:

Given names:

Birth Date: NHI number: Gender: Male ☐ Female ☐**Baby Summary**

Gestation: Weeks

Significant birth/postnatal event(s) (e.g. apgar score, birth weight):

Vitamin K ☐ Guthrie test ☐

Feeding at time of referral to Well Child Provider

Exclusive Breastfeeding ☐ Fully Breastfeeding ☐Partial Breastfeeding ☐ Artificial feeding ☐

Comment:

Summary of ongoing needs identified at time of referral (e.g. referral to Family Start, Multiple Birth Society):

Date referral/notification sent to Well Child Provider and GP:

Planned date of discharge from LMC:

Name of LMC:

LMC Contact details:

APPENDIX V INDICATIONS FOR ULTRASOUND SCANNING

The following list identifies clinical indications for ultrasound in pregnancy. The listed conditions should not be considered as mandatory indications.

The code corresponding to the relevant indication should be stated on both the referral and the claim form together with the trimester (e.g. MF3 for multiple pregnancy third trimester).

“MU” (Miscellaneous Ultrasound) should only be used following discussion with an Obstetrician or Radiologist.

Code	Clinical Indication	Comment
TA	Threatened abortion	Scan at time of bleeding. Serial scans may be necessary if bleeding persists.
RA	Recurrent abortion (>2 previous spontaneous abortions)	Scan only if clinically indicated.
EP	Suspected ectopic pregnancy	e.g. Previous tubal surgery, PID or ectopic. Suggestive symptoms (e.g. abdominal pain).
OS	Pregnancy following ovarian stimulation	
PM	Pelvic mass in pregnancy	Any palpable abnormality in early pregnancy.
CI	Evaluation of cervical incompetence	With history of prior mid-trimester abortion, previous terminations or clinical suspicion.
UD	Uterus not equal to dates	If discrepancy greater than 4 weeks.
HG	Hyperemesis gravidarum	Of sufficient severity to warrant clinical concern.
BA	Prior to booking CVS or amniocentesis	If any doubt about dates.
HR	Very high risk pregnancy	Severe rhesus disease, diabetes, previous IUGR, previous premature labour, hypertension, known uterine anomaly.
FA	Previous foetal abnormality	1. Dates vital: e.g. microcephaly, dwarfism. 2. Diagnosable and recurrent: e.g. neural tube defect (Best done 10 - 12 weeks).
CT	Consideration of termination	
NT	Early evaluation for chromosomal abnormality	e.g. Nuchal thickness assessment at 11- 14 weeks.
AN	Anatomy	To assess foetal anatomy, firmly establish dates and placental position. Exclude multiple gestation. Should ideally be performed at 18 - 20 weeks.
AF	Anatomy follow-up	To reassess an abnormality seen or suspected on an earlier scan. Includes foetal echocardiography.
MF	Multiple pregnancy	Consider repeat scans at around 26 and 34 weeks. More often in the case of monochorionic twins at risk of twin-twin transfusion or other clinical concern.
PI	Previous IUGR or stillbirth	Scan before time of previous problem or at 32-34 weeks.

GR	Suspected IUGR	If no clinical or objective growth of the foetus over a four week period or a significant decrease in liquor.
MG	Monitor growth	To monitor the progress of a foetus where IUGR or macrosomia has been diagnosed or suspected on a previous scan.
PO	Clinical polyhydramnios	Fundal height >4cm above mean for dates or clinical suspicion of increased liquor.
PL	Check placenta	
MI	Maternal illness	Moderate/severe hypertension, pre-eclampsia or toxæmia. Significant renal disease, diabetes, cardiac disease, asthma etc.
AH	Antepartum haemorrhage	May need serial scans due to risk of preterm labour and IUGR.
AP	Abdominal pain	Where significant complication of pregnancy is suspected (e.g. abruption).
SR	Spontaneous rupture of membranes	May need serial scans to assess liquor volume and foetal growth and well-being.
MP	Malpresentation	After 36 weeks.
BR	Planned trial of breech delivery	To assess foetal size and position.
FC	Suspected foetal compromise	Significant reduction of foetal movements. Biophysical Profile may be appropriate. Prolonged/post-term pregnancy.
FD	Suspected intrauterine foetal death	
MU	Miscellaneous ultrasound	For a clinically indicated scan not conforming to any of the above, but necessary after discussion with the Specialist and annotated accordingly. May include foetal echocardiography (e.g. if family history).
PP	Maternal postpartum	e.g. Suspected retained products, postpartum haemorrhage, pelvic haematoma.
NU	Neonatal postpartum	To assess an abnormality diagnosed during the pregnancy e.g. dilated renal tract, mass, cyst etc.

APPENDIX VI RURAL TRAVEL

The prices and payment rules for Rural Travel are stated in clauses D1.1.12 and D3.4.4.

Domicile codes are based on area unit boundaries as described in Statistics New Zealand maps.

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
500100	Awanui	1	Far North District	Northland		✓	
500202	Mangonui East	2	Far North District	Northland			✓
500203	Taipa Bay-Mangonui	3	Far North District	Northland			✓
500204	Mangonui West	4	Far North District	Northland			✓
500205	Ahipara	5	Far North District	Northland			✓
500206	North Cape	6	Far North District	Northland			✓
500207	Houhora	7	Far North District	Northland			✓
500208	Motutangi-Kareponia	8	Far North District	Northland			✓
500301	Kaitaia West	9	Far North District	Northland		✓	
500302	Kaitaia East	10	Far North District	Northland		✓	
500401	Kaeo	11	Far North District	Northland			✓
500402	Mangapa-Matauri Bay	12	Far North District	Northland			✓
500500	Kohukohu	13	Far North District	Northland			✓
500600	Rawene	14	Far North District	Northland			✓
500700	Omapere and Opononi	15	Far North District	Northland			✓
500801	Hokianga North	16	Far North District	Northland			✓
500802	Hokianga South	17	Far North District	Northland			✓
501000	Russell	19	Far North District	Northland		✓	
501100	Paihia	20	Far North District	Northland		✓	
501200	Haruru Falls	21	Far North District	Northland		✓	
501300	East Opuā	22	Far North District	Northland		✓	
501400	Kawakawa	23	Far North District	Northland		✓	
501500	Moerewa	24	Far North District	Northland		✓	
501631	Okaihau	27	Far North District	Northland		✓	
501632	Ohaeawai	28	Far North District	Northland		✓	
501633	Waihou Valley-Hupara	29	Far North District	Northland			✓
501634	Ngapuhi-Kaikou	30	Far North District	Northland			✓
501700	Kaikohe	31	Far North District	Northland		✓	
501802	Opouteke-Tanekaha	32	Whangarei District	Northland		✓	
501805	Bream Head	33	Whangarei District	Northland		✓	
501806	Marsden Point-Ruakaka	34	Whangarei District	Northland		✓	
501807	Ngunguru	35	Whangarei District	Northland		✓	
501809	Wharekohe-Oakleigh	37	Whangarei District	Northland		✓	
501810	Maungatāpere	38	Whangarei District	Northland		✓	
501811	Waiotira-Springfield	39	Whangarei District	Northland		✓	
501812	Waipu	40	Whangarei District	Northland		✓	
502001	Springs Flat	41	Whangarei District	Northland	✓		
502002	Three Mile Bush	42	Whangarei District	Northland	✓		
502003	Te Hihi	43	Whangarei District	Northland	✓		
502005	Otaika-Portland	45	Whangarei District	Northland	✓		
504100	Onerahi	68	Whangarei District	Northland	✓		

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
504300	Hikurangi	69	Whangarei District	Northland	✓		
504400	Te Kopuru	70	Kaipara District	Northland		✓	
504501	Kaipara Coastal	71	Kaipara District	Northland			✓
504502	Maungaru	72	Kaipara District	Northland		✓	
504600	Dargaville	73	Kaipara District	Northland		✓	
504800	Ruawai	75	Kaipara District	Northland			✓
504900	Kaiwaka	76	Kaipara District	Northland		✓	
505020	Mangawhai	78	Kaipara District	Northland		✓	
505300	Wellsford	79	Rodney District	Auckland		✓	
505400	Leigh	80	Rodney District	Auckland		✓	
505500	Warkworth	81	Rodney District	Auckland		✓	
505700	Waipareira West	83	Rodney District	Auckland	✓		
505802	Red Beach	85	Rodney District	Auckland	✓		
505901	Stanmore Bay	86	Rodney District	Auckland	✓		
505902	Manly	87	Rodney District	Auckland	✓		
505903	Army Bay	88	Rodney District	Auckland		✓	
506000	Silverdale South	89	Rodney District	Auckland	✓		
506200	Silverdale North	90	Rodney District	Auckland	✓		
506300	Dairy Flat-Redvale	91	Rodney District	Auckland	✓		
506400	Paremoremo West	92	Rodney District	Auckland	✓		
506613	Tauhoa-Puhoi	94	Rodney District	Auckland		✓	
506614	Tahekeroa	95	Rodney District	Auckland		✓	
506620	Kawau	96	Rodney District	Auckland			✓
506631	Snells Beach	97	Rodney District	Auckland		✓	
506632	Algies Bay-Mahurangi	98	Rodney District	Auckland		✓	
506641	Parakai	99	Rodney District	Auckland		✓	
500900	Kerikeri	100	Far North District	Northland		✓	
501611	Waitangi-Te Tii	101	Far North District	Northland		✓	
501612	West Opuā	102	Far North District	Northland		✓	
501613	Bay of Islands	103	Far North District	Northland		✓	
501620	Pokere-Waihaha	105	Far North District	Northland			✓
501813	Whangaruru Harbour	106	Whangarei District	Northland			✓
501814	Punaruku-Kiripaka	107	Whangarei District	Northland		✓	
502004	Abbey Caves	108	Whangarei District	Northland	✓		
504000	Sherwood Rise	109	Whangarei District	Northland	✓		
504700	Maungaturoto	110	Kaipara District	Northland		✓	
505010	Rehia-Oneriri	111	Kaipara District	Northland			✓
505600	Kumeu	112	Rodney District	Auckland	✓		
505803	Waiwera	113	Rodney District	Auckland	✓		
505804	Hatfields Beach	114	Rodney District	Auckland	✓		
505805	Orewa	115	Rodney District	Auckland	✓		
506615	Cape Rodney	116	Rodney District	Auckland		✓	
506616	Matheson Bay	117	Rodney District	Auckland		✓	
506642	South Head	200	Rodney District	Auckland		✓	
506651	Muriwai Beach	202	Rodney District	Auckland		✓	
506652	Rewiti	203	Rodney District	Auckland		✓	
506653	Riverhead	204	Rodney District	Auckland		✓	
509000	Paremoremo East	238	North Shore City	Auckland	✓		

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
512801	Laingholm	277	Waitakere City	Auckland	✓		
512802	Armour Bay	278	Waitakere City	Auckland	✓		
512902	Otimai	280	Waitakere City	Auckland	✓		
513020	Opanuku	282	Waitakere City	Auckland	✓		
513100	Swanson	283	Waitakere City	Auckland	✓		
513701	Taupaki	299	Rodney District	Auckland	✓		
506643	Kaukapakapa	300	Rodney District	Auckland		✓	
506800	Helensville	301	Rodney District	Auckland		✓	
513702	Waitakere	400	Waitakere City	Auckland	✓		
513800	Karekare	401	Waitakere City	Auckland		✓	
520801	Waiheke Island	497	Auckland City	Auckland			✓
520802	Bays-Waiheke Island	498					✓
520900	Islands-Motutapu, Rangitoto, Rakino	499	Auckland City	Auckland			✓
521000	Great Barrier Island	600	Auckland City	Auckland			✓
521111	Paerata-Cape Hill	601	Franklin District	Auckland		✓	
521112	Eden Road-Hill Top	602	Franklin District	Auckland		✓	
521113	Buckland	603	Franklin District	Auckland		✓	
521114	Redoubt	604	Franklin District	Auckland		✓	
521115	Opuawhanga	605	Franklin District	Auckland		✓	
521121	Patumahoe	606	Franklin District	Auckland		✓	
521122	Kingseat	607	Franklin District	Auckland		✓	
521131	Pokeno	608	Franklin District	Auckland		✓	
521132	Hunua	609	Franklin District	Auckland		✓	
521133	Mangatawhiri	610	Franklin District	Auckland			✓
521151	Awhitu	611	Franklin District	Auckland			✓
521152	Glenbrook	612	Franklin District	Auckland		✓	
521153	Otaua	613	Franklin District	Auckland		✓	
521160	Bombay	614	Franklin District	Auckland		✓	
521201	Hingaia	615	Papakura District	Auckland	✓		
521202	Whangapouri Creek	616	Franklin District	Auckland	✓		
521203	Bremner	617	Papakura District	Auckland	✓		
521301	Drury	618	Papakura District	Auckland	✓		
521302	Runciman	619	Franklin District	Auckland	✓		
523202	Turanga	652	Manukau City	Auckland	✓		
523300	Beachlands-Maraetai	653	Manukau City	Auckland	✓		
525200	Clevedon	698	Manukau City	Auckland		✓	
525910	Pukekohe North	809	Franklin District	Auckland		✓	
525921	Pukekohe West	810	Franklin District	Auckland		✓	
525922	Bledisloe Park	811	Franklin District	Auckland		✓	
526101	Waiuku	812	Franklin District	Auckland		✓	
526102	South Waiuku	813	Franklin District	Auckland		✓	
526200	Tuakau	814	Franklin District	Auckland		✓	
526400	Rotowaro	815	Waikato District	Waikato		✓	
526500	Raglan	816	Waikato District	Waikato		✓	
526601	Glen Massey	817	Waikato District	Waikato		✓	
526602	Te Uku	818	Waikato District	Waikato			✓
526603	Te Pahu	819	Waipa District	Waikato		✓	
526701	Onewhero	820	Franklin District	Auckland			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
526702	Te Akau	821	Waikato District	Waikato			✓
526900	Te Kauwhata	822	Waikato District	Waikato		✓	
527111	Whitikahu	826	Waikato District	Waikato		✓	
527112	Taupiri Community	827	Waikato District	Waikato	✓		
527121	Eureka	828	Waikato District	Waikato	✓		
527122	Gordonton	829	Waikato District	Waikato	✓		
527123	Kainui	830	Waikato District	Waikato	✓		
527131	Tamahere-Tauwhare	831	Waikato District	Waikato	✓		
527132	Hautapu	832	Waipa District	Waikato	✓		
527210	Waerenga	833	Waikato District	Waikato		✓	
527221	Maramarua	834	Waikato District	Waikato			✓
527222	Meremere	835	Waikato District	Waikato		✓	
527401	Huntly West	836	Waikato District	Waikato		✓	
527402	Huntly East	837	Waikato District	Waikato		✓	
527501	Cambridge North	838	Waipa District	Waikato	✓		
527502	Cambridge West	839	Waipa District	Waikato	✓		
527503	Cambridge Central	840	Waipa District	Waikato	✓		
527504	Leamington West	841	Waipa District	Waikato	✓		
527505	Leamington East	842	Waipa District	Waikato	✓		
527600	Ohaupo	843	Waipa District	Waikato	✓		
527700	Kihikihi	844	Waipa District	Waikato	✓		
527912	Te Kowhai	848	Waikato District	Waikato	✓		
527913	Whatawhata	849	Waikato District	Waikato	✓		
527914	Ngahinapouri	850	Waipa District	Waikato	✓		
527921	Te Rore	852	Waipa District	Waikato		✓	
527922	Pirongia	853	Waipa District	Waikato		✓	
527923	Pokuru	854	Waipa District	Waikato		✓	
527924	Lake Ngaroto	855	Waipa District	Waikato	✓		
527925	Tokanui	856	Waipa District	Waikato	✓		
527931	Pukerimu	857	Waipa District	Waikato	✓		
527932	Kaipaki	858	Waipa District	Waikato	✓		
527934	Rotoorangi	859	Waipa District	Waikato		✓	
527935	Te Rahu	860	Waipa District	Waikato	✓		
527936	Kihikihi Flat	861	Waipa District	Waikato	✓		
527937	Allen Road	862	Waipa District	Waikato	✓		
528000	Rotongata	863	Waipa District	Waikato		✓	
528200	Ngaruawahia	864	Waikato District	Waikato	✓		
531001	Te Awamutu West	899	Waipa District	Waikato	✓		
531002	Te Awamutu Central	1000	Waipa District	Waikato	✓		
531003	Te Awamutu East	1001	Waipa District	Waikato	✓		
531004	Te Awamutu South	1002	Waipa District	Waikato	✓		
531100	Kawhia Community	1003	Otorohanga District	Waikato			✓
531200	Otorohanga	1004	Otorohanga District	Waikato		✓	
531301	Ngutunui	1005	Otorohanga District	Waikato		✓	
531500	Piopia Community	1007	Waitomo District	Waikato			✓
531600	Taharoa	1008	Waitomo District	Waikato			✓
531710	Mahoenui	1009	Waitomo District	Waikato			✓
531720	Marokopa	1010	Waitomo District	Waikato			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
531731	Waipa Valley	1011	Waitomo District	Waikato			✓
531732	Tiroa	1012	Waitomo District	Waikato			✓
531800	Mokauiti	1013	Waitomo District	Waikato			✓
532000	Te Kuiti	1014	Waitomo District	Waikato		✓	
532200	Omori	1015	Taupo District	Bay of Plenty			✓
532300	Owhango	1016	Ruapehu District	Waikato			✓
532400	Ohura	1017	Ruapehu District	Waikato			✓
532501	Ngapuke	1018	Ruapehu District	Waikato			✓
532502	Kuratau	1019	Taupo District	Bay of Plenty			✓
532601	Raurimu	1020	Ruapehu District	Waikato			✓
532602	National Park	1021	Ruapehu District	Waikato			✓
532700	Otangiwai-Heao	1022	Ruapehu District	Waikato			✓
532901	Tarrangower	1023	Ruapehu District	Waikato			✓
532902	Taumarunui Central	1024	Ruapehu District	Waikato			✓
532903	Sunshine-Hospital Hill	1025	Ruapehu District	Waikato			✓
532904	Manunui	1026	Ruapehu District	Waikato			✓
533000	Whitianga	1027	Thames-Coromandel District	Waikato			✓
533100	Coromandel	1028	Thames-Coromandel District	Waikato			✓
533200	Te Rerenga	1029	Thames-Coromandel District	Waikato			✓
533300	Whangamata	1030	Thames-Coromandel District	Waikato		✓	
533400	Tairua	1031	Thames-Coromandel District	Waikato			✓
533501	Moanataiari	1032	Thames-Coromandel District	Waikato		✓	
533502	Parawai	1033	Thames-Coromandel District	Waikato		✓	
533602	Pauanui Beach	1034	Thames-Coromandel District	Waikato		✓	
533603	Hikuai	1035	Thames-Coromandel District	Waikato			✓
533604	Te Puru-Thornton Bay	1036	Thames-Coromandel District	Waikato		✓	
533800	Ngatea	1037	Hauraki District	Waikato		✓	
533901	Hauraki Plains	1038	Hauraki District	Waikato		✓	
533902	Turua	1039	Hauraki District	Waikato		✓	
533903	Kerepehi	1040	Hauraki District	Waikato		✓	
534100	Waihi Beach	1041	Western Bay of Plenty District	Bay of Plenty		✓	
534300	Paeroa	1043	Hauraki District	Waikato		✓	
534602	Waitoa	1047	Matamata-Piako District	Waikato		✓	
535000	Waharoa	1050	Matamata-Piako District	Waikato		✓	
535100	Tirau	1051	South Waikato District	Waikato		✓	
535211	Mangakaretu	1052	South Waikato District	Waikato		✓	
535212	Kinleith	1053	South Waikato District	Waikato		✓	
535220	Okauia	1054	Matamata-Piako District	Waikato		✓	
535231	Te Poi	1055	Matamata-Piako District	Waikato		✓	
535232	Tapapa	1056	South Waikato District	Waikato			✓
535241	Karapiro	1057	Waipa District	Waikato		✓	
535242	Hinuera	1058	Matamata-Piako District	Waikato		✓	
535250	Arapuni	1059	South Waikato District	Waikato			✓
535261	Lichfield	1060	South Waikato District	Waikato			✓
535262	Wawa	1061	South Waikato District	Waikato			✓
535310	Paraonui	1062	South Waikato District	Waikato		✓	
535320	Parkdale	1063	South Waikato District	Waikato		✓	
535330	Matarawa	1064	South Waikato District	Waikato		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
535340	Stanley Park	1065	South Waikato District	Waikato		✓	
535350	Tokoroa Central	1066	South Waikato District	Waikato		✓	
535360	Aotea	1067	South Waikato District	Waikato		✓	
535370	Strathmore	1068	South Waikato District	Waikato		✓	
535380	Amisfield	1069	South Waikato District	Waikato		✓	
535500	Matamata	1070	Matamata-Piako District	Waikato		✓	
535600	Putaruru	1071	South Waikato District	Waikato		✓	
535700	Athenree	1072	Western Bay of Plenty District	Bay of Plenty		✓	
535800	Katikati Community	1073	Western Bay of Plenty District	Bay of Plenty		✓	
535900	Maketu Community	1074	Western Bay of Plenty District	Bay of Plenty		✓	
536000	Omokoroa Community	1075	Western Bay of Plenty District	Bay of Plenty	✓		
536200	Papamoa Beach East	1076	Tauranga District	Bay of Plenty	✓		
536400	Island View-Pios Beach	1077	Western Bay of Plenty District	Bay of Plenty		✓	
536503	Te Puna	1079	Western Bay of Plenty District	Bay of Plenty	✓		
536611	Matakana Island	1084	Western Bay of Plenty District	Bay of Plenty		✓	
536613	Inlet-Tauranga Harbour North	1086	Western Bay of Plenty District	Bay of Plenty		✓	
536620	Minden	1087	Western Bay of Plenty District	Bay of Plenty		✓	
536630	Kaimai	1088	Western Bay of Plenty District	Bay of Plenty		✓	
536641	Ohauiti-Ngapeke	1089	Western Bay of Plenty District	Bay of Plenty	✓		
536642	Upper Papamoa	1090	Western Bay of Plenty District	Bay of Plenty		✓	
536651	Paengaroa	1091	Western Bay of Plenty District	Bay of Plenty		✓	
531303	Te Kawa	1100	Otorohanga District	Waikato		✓	
531304	Maihihi	1101	Otorohanga District	Waikato			✓
534200	Golden Cross	1102	Hauraki District	Waikato		✓	
534400	Waihi	1103	Hauraki District	Waikato		✓	
534500	Tahuroa	1104	Matamata-Piako District	Waikato		✓	
534601	Ngarua	1105	Matamata-Piako District	Waikato		✓	
534800	Te Aroha	1106	Matamata-Piako District	Waikato		✓	
534900	Morrinsville	1107	Matamata-Piako District	Waikato		✓	
536512	Kairua	1112	Tauranga District	Bay of Plenty	✓		
536514	Bethlehem	1114	Tauranga District	Bay of Plenty	✓		
536614	Tahawai	1115	Western Bay of Plenty District	Bay of Plenty		✓	
536615	Aongatete	1116	Western Bay of Plenty District	Bay of Plenty		✓	
536653	Rangiora	1117	Western Bay of Plenty District	Bay of Plenty		✓	
536654	Pongakawa	1118	Western Bay of Plenty District	Bay of Plenty		✓	
537600	Greerton	1205	Tauranga District	Bay of Plenty	✓		
538501	Te Puke West	1215	Western Bay of Plenty District	Bay of Plenty		✓	
538502	Te Puke East	1216	Western Bay of Plenty District	Bay of Plenty		✓	
538601	Ngongotaha North	1217	Rotorua District	Bay of Plenty	✓		
538742	Owhata East	1222	Rotorua District	Bay of Plenty	✓		
538810	Hamurana	1223	Rotorua District	Bay of Plenty		✓	
538820	Tikitere	1224	Rotorua District	Bay of Plenty		✓	
538831	Kaingaroa Forest	1225	Rotorua District	Bay of Plenty			✓
538842	Reporoa	1228	Rotorua District	Bay of Plenty		✓	
538850	Ngakuru	1229	Rotorua District	Bay of Plenty		✓	
538861	Arahiwi	1230	Rotorua District	Bay of Plenty		✓	
538863	Waiwhero	1231	Rotorua District	Bay of Plenty		✓	
538864	Mamaku	1232	Rotorua District	Bay of Plenty		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
540900	Mangakino	1254	Taupo District	Bay of Plenty			✓
541000	Turangi	1255	Taupo District	Bay of Plenty			✓
541311	Acacia Bay	1256	Taupo District	Bay of Plenty		✓	
541312	Wairakei-Aratiatia	1257	Taupo District	Bay of Plenty		✓	
541313	Maunganamu	1258	Taupo District	Bay of Plenty		✓	
541314	Rangatira	1259	Taupo District	Bay of Plenty		✓	
541315	Taupo East	1260	Taupo District	Bay of Plenty		✓	
541316	Wharewaka	1261	Taupo District	Bay of Plenty		✓	
541320	Marotiri	1262	Taupo District	Bay of Plenty			✓
541331	Oruanui	1263	Taupo District	Bay of Plenty		✓	
541342	Rangitaiki	1264	Taupo District	Bay of Plenty			✓
541343	Iwitahi	1265	Taupo District	Bay of Plenty			✓
541501	Rangipo	1266	Taupo District	Bay of Plenty			✓
541502	Te More	1267	Taupo District	Bay of Plenty			✓
541503	Taharua	1268	Taupo District	Bay of Plenty			✓
541710	Nukuhau	1269	Taupo District	Bay of Plenty		✓	
541720	Central Taupo	1270	Taupo District	Bay of Plenty		✓	
541730	Tauhara	1271	Taupo District	Bay of Plenty		✓	
541740	Hilltop	1272	Taupo District	Bay of Plenty		✓	
541750	Waipahihi	1273	Taupo District	Bay of Plenty		✓	
541760	Richmond Heights	1274	Taupo District	Bay of Plenty		✓	
542000	Matata	1276	Whakatane District	Bay of Plenty		✓	
542100	Taneatua Community	1277	Whakatane District	Bay of Plenty		✓	
542200	Edgecumbe Community	1278	Whakatane District	Bay of Plenty		✓	
542300	Te Teko	1279	Whakatane District	Bay of Plenty		✓	
542511	Orini	1285	Whakatane District	Bay of Plenty	✓		
542520	Poroporo	1287	Whakatane District	Bay of Plenty	✓		
542530	Otakiri	1288	Whakatane District	Bay of Plenty		✓	
542540	Rotoma	1289	Whakatane District	Bay of Plenty		✓	
542550	Matahina-Minginui	1290	Whakatane District	Bay of Plenty			✓
542561	Waimana	1291	Whakatane District	Bay of Plenty		✓	
542562	Urewera	1292	Whakatane District	Bay of Plenty			✓
542600	Kawerau	1293	Kawerau District	Bay of Plenty		✓	
542700	Murupara	1294	Whakatane District	Bay of Plenty			✓
542901	Te Kaha	1296	Opotiki District	Bay of Plenty			✓
542903	Cape Runaway	1298	Opotiki District	Bay of Plenty			✓
542904	Oponae	1299	Opotiki District	Bay of Plenty			✓
538602	Ngongotaha South	1304	Rotorua District	Bay of Plenty	✓		
538732	Lynmore	1308	Rotorua District	Bay of Plenty	✓		
538832	Tarawera	1309	Rotorua District	Bay of Plenty		✓	
538841	Golden Springs	1310	Rotorua District	Bay of Plenty		✓	
541900	Ohope	1312	Whakatane District	Bay of Plenty	✓		
542513	Port Ohope	1314	Whakatane District	Bay of Plenty	✓		
542514	Maratotara	1315	Whakatane District	Bay of Plenty	✓		
542800	Opotiki	1316	Opotiki District	Bay of Plenty		✓	
542905	Ohiwa Harbour	1317	Opotiki District	Bay of Plenty		✓	
542906	Waiotahi	1318	Opotiki District	Bay of Plenty		✓	
543301	East Cape	1400	Gisborne District	Tairāwhiti/Hawkes Bay			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
543302	Ruatoria	1401	Gisborne District	Tairawhiti/Hawkes Bay			✓
543303	Tokomaru Bay	1402	Gisborne District	Tairawhiti/Hawkes Bay			✓
543601	Tarndale-Rakauroa	1403	Gisborne District	Tairawhiti/Hawkes Bay			✓
543602	Te Karaka	1404	Gisborne District	Tairawhiti/Hawkes Bay		✓	
543800	Patutahi	1405	Gisborne District	Tairawhiti/Hawkes Bay		✓	
543901	Makaraka	1406	Gisborne District	Tairawhiti/Hawkes Bay	✓		
543902	Matokitoki	1407	Gisborne District	Tairawhiti/Hawkes Bay	✓		
543903	Wainui	1408	Gisborne District	Tairawhiti/Hawkes Bay	✓		
544001	Wharekaka	1409	Gisborne District	Tairawhiti/Hawkes Bay			✓
544002	Tiniroto	1410	Gisborne District	Tairawhiti/Hawkes Bay			✓
544003	Manutuke	1411	Gisborne District	Tairawhiti/Hawkes Bay		✓	
544004	Tolaga Bay	1412	Gisborne District	Tairawhiti/Hawkes Bay			✓
545201	Tuai	1422	Wairoa District	Tairawhiti/Hawkes Bay			✓
545202	Frasertown	1423	Wairoa District	Tairawhiti/Hawkes Bay			✓
545203	Maungataniwha	1424	Wairoa District	Tairawhiti/Hawkes Bay			✓
545204	Ruakituri-Moreere	1425	Wairoa District	Tairawhiti/Hawkes Bay			✓
545301	Raupunga	1426	Wairoa District	Tairawhiti/Hawkes Bay			✓
545302	Whakaki	1427	Wairoa District	Tairawhiti/Hawkes Bay			✓
545303	Nuhaka	1428	Wairoa District	Tairawhiti/Hawkes Bay			✓
545304	Mahia	1429	Wairoa District	Tairawhiti/Hawkes Bay			✓
545500	Wairoa	1430	Wairoa District	Tairawhiti/Hawkes Bay			✓
545611	Bay View	1431	Napier City	Tairawhiti/Hawkes Bay	✓		
545621	Poraiti	1432	Napier City	Tairawhiti/Hawkes Bay	✓		
545631	Meeanee	1433	Napier City	Tairawhiti/Hawkes Bay	✓		
545632	Awatoto	1434	Napier City	Tairawhiti/Hawkes Bay	✓		
545740	Haumoana	1439	Hastings District	Tairawhiti/Hawkes Bay	✓		
545811	Tangoio	1443	Hastings District	Tairawhiti/Hawkes Bay		✓	
545812	Eskdale	1444	Hastings District	Tairawhiti/Hawkes Bay	✓		
545821	Sherenden-Puketapu	1445	Hastings District	Tairawhiti/Hawkes Bay		✓	
545822	Omahu	1446	Hastings District	Tairawhiti/Hawkes Bay	✓		
545831	Waiohiki	1447	Hastings District	Tairawhiti/Hawkes Bay	✓		
545832	Pakowhai	1448	Hastings District	Tairawhiti/Hawkes Bay	✓		
545841	Maraekakaho	1449	Hastings District	Tairawhiti/Hawkes Bay		✓	
545842	Bridge Pa	1450	Hastings District	Tairawhiti/Hawkes Bay	✓		
545851	Poukawa	1451	Hastings District	Tairawhiti/Hawkes Bay		✓	
545852	Pakipaki	1452	Hastings District	Tairawhiti/Hawkes Bay	✓		
545860	Waimarama	1453	Hastings District	Tairawhiti/Hawkes Bay		✓	
545911	Tutira	1454	Hastings District	Tairawhiti/Hawkes Bay			✓
545912	Puketitiri	1455	Hastings District	Tairawhiti/Hawkes Bay			✓
545913	Whanawhana	1456	Hastings District	Tairawhiti/Hawkes Bay			✓
546100	Westshore	1457	Napier City	Tairawhiti/Hawkes Bay	✓		
546200	Ahuriri	1458	Napier City	Tairawhiti/Hawkes Bay	✓		
546300	Onekawa Central	1459	Napier City	Tairawhiti/Hawkes Bay	✓		
546400	Onekawa West	1460	Napier City	Tairawhiti/Hawkes Bay	✓		
546500	Onekawa South	1461	Napier City	Tairawhiti/Hawkes Bay	✓		
546600	Marewa	1462	Napier City	Tairawhiti/Hawkes Bay	✓		
546700	Maraenui	1463	Napier City	Tairawhiti/Hawkes Bay	✓		
546801	Hospital Hill	1464	Napier City	Tairawhiti/Hawkes Bay	✓		

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
546802	Bluff Hill	1465	Napier City	Tairāwhiti/Hawkes Bay	✓		
546901	Nelson Park	1466	Napier City	Tairāwhiti/Hawkes Bay	✓		
546902	McLean Park	1467	Napier City	Tairāwhiti/Hawkes Bay	✓		
547001	Tamatea North	1468	Napier City	Tairāwhiti/Hawkes Bay	✓		
547002	Tamatea South	1469	Napier City	Tairāwhiti/Hawkes Bay	✓		
547100	Greenmeadows	1470	Napier City	Tairāwhiti/Hawkes Bay	✓		
547200	Taradale North	1471	Napier City	Tairāwhiti/Hawkes Bay	✓		
547300	Taradale South	1472	Napier City	Tairāwhiti/Hawkes Bay	✓		
547400	Pirimai	1473	Napier City	Tairāwhiti/Hawkes Bay		✓	
548820	Iona	1488	Hastings District	Tairāwhiti/Hawkes Bay	✓		
549000	Takapau	1490	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay		✓	
549100	Waipawa	1491	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay		✓	
549200	Tikokino	1492	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay		✓	
549400	Otane	1493	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay		✓	
549601	Porangahau	1495	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay			✓
549901	Owahanga	1498	Taranaki District	Wanganui/Manawatu			✓
549902	Rara	1499	Taranaki District	Wanganui/Manawatu			✓
548830	Te Mata	1503	Hastings District	Tairāwhiti/Hawkes Bay	✓		
549500	Waipukurau	1504	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay		✓	
549602	Elsthorpe-Flemington	1505	Central Hawke's Bay District	Tairāwhiti/Hawkes Bay			✓
549800	Norsewood-Herbertville	1506	Taranaki District	Wanganui/Manawatu			✓
550101	Dannevirke West	1600	Taranaki District	Wanganui/Manawatu		✓	
550102	Dannevirke East	1601	Taranaki District	Wanganui/Manawatu		✓	
550200	Papatawa	1602	Taranaki District	Wanganui/Manawatu		✓	
550500	Woodville	1603	Taranaki District	Wanganui/Manawatu		✓	
550600	Urenui	1604	New Plymouth District	Taranaki		✓	
550700	Okoki-Okau	1605	New Plymouth District	Taranaki			✓
550800	Oakura	1606	New Plymouth District	Taranaki		✓	
551013	Bowden	1610	New Plymouth District	Taranaki	✓		
551014	Mangaoraka	1611	New Plymouth District	Taranaki	✓		
551030	Omata	1616	New Plymouth District	Taranaki		✓	
551111	Lepperton	1617	New Plymouth District	Taranaki		✓	
551112	Kaitake	1618	New Plymouth District	Taranaki		✓	
551120	Okato	1619	New Plymouth District	Taranaki		✓	
551301	Waitara West	1620	New Plymouth District	Taranaki		✓	
551302	Waitara East	1621	New Plymouth District	Taranaki		✓	
552701	Egmont Village	1637	New Plymouth District	Taranaki		✓	
552702	Kaimata	1638	New Plymouth District	Taranaki		✓	
552800	Inglewood	1639	New Plymouth District	Taranaki		✓	
552900	Midhurst	1640	Stratford District	Taranaki		✓	
553001	Whangamomona	1641	Stratford District	Taranaki			✓
553002	Douglas	1642	Stratford District	Taranaki			✓
553003	Toko	1643	Stratford District	Taranaki		✓	
553004	Pembroke	1644	Stratford District	Taranaki		✓	
553101	Stratford West	1645	Stratford District	Taranaki		✓	
553102	Stratford East	1646	Stratford District	Taranaki		✓	
553200	Opunake	1647	South Taranaki District	Taranaki			✓
553301	Rahotu	1648	South Taranaki District	Taranaki			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
553302	Kahui	1649	South Taranaki District	Taranaki			✓
553400	Kaponga	1650	South Taranaki District	Taranaki		✓	
553500	Mangatoki-Moeroa	1651	South Taranaki District	Taranaki		✓	
553601	Eltham	1652	South Taranaki District	Taranaki		✓	
553700	Kapuni	1653	South Taranaki District	Taranaki		✓	
553800	Manaia	1654	South Taranaki District	Taranaki		✓	
553900	Normanby	1655	South Taranaki District	Taranaki		✓	
554120	Ohangai	1661	South Taranaki District	Taranaki		✓	
554130	Okaiawa	1662	South Taranaki District	Taranaki		✓	
554300	Waitotara	1663	South Taranaki District	Taranaki		✓	
554400	Whenuakura	1664	South Taranaki District	Taranaki			✓
554500	Makakaho	1665	South Taranaki District	Taranaki			✓
554700	Patea	1666	South Taranaki District	Taranaki		✓	
554800	Waverley	1667	South Taranaki District	Taranaki		✓	
554900	Tangiwai	1668	Ruaapehu District	Waikato			✓
555000	Ohakune	1669	Ruaapehu District	Waikato			✓
555100	Raetihi	1670	Ruaapehu District	Waikato			✓
555300	Blueskin	1672	Wanganui District	Wanganui/Manawatu	✓		
555400	Maxwell	1673	Wanganui District	Wanganui/Manawatu			✓
555700	Castlecliff North	1674	Wanganui District	Wanganui/Manawatu	✓		
555800	Castlecliff South	1675	Wanganui District	Wanganui/Manawatu	✓		
558200	Marybank-Gordon Park	1698	Wanganui District	Wanganui/Manawatu	✓		
558300	Fordell-Kakatahi	1699	Wanganui District	Wanganui/Manawatu			✓
554010	Hawera North	1700	South Taranaki District	Taranaki		✓	
554020	Hawera South	1701	South Taranaki District	Taranaki		✓	
554111	Ohawe Beach	1702	South Taranaki District	Taranaki		✓	
554113	Tawhiti	1703	South Taranaki District	Taranaki		✓	
554114	Waingongoro	1704	South Taranaki District	Taranaki		✓	
554115	Hawera West	1705	South Taranaki District	Taranaki		✓	
558500	Waiouru	1800	Ruaapehu District	Waikato			✓
558600	Mangaweka	1801	Rangitikei District	Wanganui/Manawatu			✓
558700	Hunterville	1802	Rangitikei District	Wanganui/Manawatu		✓	
558800	Ratana Community	1803	Rangitikei District	Wanganui/Manawatu		✓	
558900	Bulls	1804	Rangitikei District	Wanganui/Manawatu		✓	
559000	Ngamatea	1805	Rangitikei District	Wanganui/Manawatu			✓
559210	Moawhango	1806	Rangitikei District	Wanganui/Manawatu			✓
559220	Pohomui-Porewa	1807	Rangitikei District	Wanganui/Manawatu			✓
559240	Koitiata	1809	Rangitikei District	Wanganui/Manawatu		✓	
559400	Taihape	1810	Rangitikei District	Wanganui/Manawatu		✓	
559700	Kiwitea	1812	Manawatu District	Wanganui/Manawatu			✓
560000	Pohangina	1813	Manawatu District	Wanganui/Manawatu			✓
560200	Ashhurst	1814	Palmerston North City	Wanganui/Manawatu	✓		
560301	Stoney Creek	1815	Manawatu District	Wanganui/Manawatu	✓		
560302	Whakarongo	1816	Palmerston North City	Wanganui/Manawatu	✓		
560411	Oroua Bridge	1817	Manawatu District	Wanganui/Manawatu		✓	
560412	Maewa	1818	Manawatu District	Wanganui/Manawatu		✓	
560421	Halcombe	1819	Manawatu District	Wanganui/Manawatu		✓	
560422	Tokorangi-Hiwinui	1820	Manawatu District	Wanganui/Manawatu		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
560710	Feilding North	1821	Manawatu District	Wanganui/Manawatu		✓	
560720	Feilding West	1822	Manawatu District	Wanganui/Manawatu		✓	
560730	Feilding Central	1823	Manawatu District	Wanganui/Manawatu		✓	
560740	Feilding East	1824	Manawatu District	Wanganui/Manawatu		✓	
560900	Sanson	1825	Manawatu District	Wanganui/Manawatu		✓	
561000	Rongotea	1826	Manawatu District	Wanganui/Manawatu		✓	
561100	Tangimoana	1827	Manawatu District	Wanganui/Manawatu		✓	
561200	Himatangi Beach	1828	Manawatu District	Wanganui/Manawatu		✓	
561300	Foxton Beach	1829	Horowhenua District	Wanganui/Manawatu		✓	
561410	Rakiraki	1830	Manawatu District	Wanganui/Manawatu		✓	
561421	Ohakea	1831	Manawatu District	Wanganui/Manawatu		✓	
561422	Oroua Downs-Waitohi	1832	Manawatu District	Wanganui/Manawatu		✓	
561811	Kairanga	1835	Manawatu District	Wanganui/Manawatu	✓		
561812	Longburn	1836	Manawatu District	Wanganui/Manawatu	✓		
561813	Massey University	1837	Palmerston North City	Wanganui/Manawatu	✓		
561820	Linton Military Camp	1838	Palmerston North City	Wanganui/Manawatu	✓		
561901	Kauwhata	1839	Manawatu District	Wanganui/Manawatu		✓	
561902	Turitea	1840	Palmerston North City	Wanganui/Manawatu		✓	
563300	Aokautere	1859	Palmerston North City	Wanganui/Manawatu	✓		
563500	Shannon	1860	Horowhenua District	Wanganui/Manawatu		✓	
563600	Waitarere	1861	Horowhenua District	Wanganui/Manawatu		✓	
563701	Waikanae Beach	1862	Kapiti Coast District	Wellington		✓	
563702	Waikanae Central	1863	Kapiti Coast District	Wellington		✓	
563703	Waikanae East	1864	Kapiti Coast District	Wellington		✓	
563801	Tokomaru	1865	Horowhenua District	Wanganui/Manawatu		✓	
563802	Opiki	1866	Horowhenua District	Wanganui/Manawatu		✓	
563920	Kaitawa	1867	Kapiti Coast District	Wellington		✓	
564011	Lake Horowhenua	1868	Horowhenua District	Wanganui/Manawatu		✓	
564012	Waiopahu	1869	Horowhenua District	Wanganui/Manawatu		✓	
564013	Kohitere	1870	Horowhenua District	Wanganui/Manawatu		✓	
564021	Mangaore-Manakau	1871	Horowhenua District	Wanganui/Manawatu		✓	
564022	Otaki Forks	1872	Kapiti Coast District	Wellington		✓	
564023	Te Horo	1873	Kapiti Coast District	Wellington		✓	
564210	Levin North	1874	Horowhenua District	Wanganui/Manawatu		✓	
564220	Levin West	1875	Horowhenua District	Wanganui/Manawatu		✓	
564231	Playford Park	1876	Horowhenua District	Wanganui/Manawatu		✓	
564232	Levin South	1877	Horowhenua District	Wanganui/Manawatu		✓	
564240	Levin East	1878	Horowhenua District	Wanganui/Manawatu		✓	
564400	Otaki	1879	Kapiti Coast District	Wellington		✓	
564510	Heretaunga Park	1880	Upper Hutt City	Wellington	✓		
564520	Trentham South	1881	Upper Hutt City	Wellington	✓		
564530	Pinehaven	1882	Upper Hutt City	Wellington	✓		
564600	Nabhra	1883	Upper Hutt City	Wellington		✓	
564800	Glendale	1884	Lower Hutt City	Wellington	✓		
565000	Fernlea	1886	Lower Hutt City	Wellington	✓		
565200	Homedale West	1888	Lower Hutt City	Wellington	✓		
565300	Homedale East	1889	Lower Hutt City	Wellington	✓		
565400	Pencarrow	1890	Lower Hutt City	Wellington		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
565601	Pauatahanui	1891	Porirua City	Wellington	✓		
565602	Endeavour	1892	Porirua City	Wellington	✓		
565603	Resolution	1893	Porirua City	Wellington	✓		
565700	Paekakariki Hill	1895	Porirua City	Wellington		✓	
565901	Paraparaumu Beach North	1896	Kapiti Coast District	Wellington		✓	
565902	Otaihanga	1897	Kapiti Coast District	Wellington		✓	
565903	Paraparaumu Beach South	1898	Kapiti Coast District	Wellington		✓	
566000	Paraparaumu Central	1899	Kapiti Coast District	Wellington		✓	
559230	Lake Alice	1900	Rangitikei District	Wanganui/Manawatu		✓	
559500	Marton	1901	Rangitikei District	Wanganui/Manawatu		✓	
561500	Moutoa	1902	Horowhenua District	Wanganui/Manawatu		✓	
561700	Foxton	1903	Horowhenua District	Wanganui/Manawatu		✓	
566101	Raumati Beach	2000	Kapiti Coast District	Wellington		✓	
566102	Raumati South	2001	Kapiti Coast District	Wellington		✓	
566200	Paekakariki	2002	Kapiti Coast District	Wellington		✓	
566301	Kapiti Island	2003	Kapiti Coast District	Wellington			✓
566302	Maungakotukutuku	2004	Kapiti Coast District	Wellington		✓	
566500	Te Marua	2005	Upper Hutt City	Wellington	✓		
566610	Akatarawa	2006	Upper Hutt City	Wellington	✓		
566700	Maoribank	2008	Upper Hutt City	Wellington	✓		
567901	Cloustonville	2020	Upper Hutt City	Wellington		✓	
567902	Mangaroa	2021	Upper Hutt City	Wellington		✓	
568101	Tawhai	2022	Lower Hutt City	Wellington	✓		
568104	Manuka	2025	Lower Hutt City	Wellington	✓		
568302	Naenae North	2029	Lower Hutt City	Wellington	✓		
569400	Belmont	2046	Lower Hutt City	Wellington	✓		
569500	Kelson	2047	Lower Hutt City	Wellington	✓		
569600	Haywards-Manor Park	2048	Lower Hutt City	Wellington	✓		
570300	Eastbourne	2053	Lower Hutt City	Wellington	✓		
571800	Pukerua Bay	2067	Porirua City	Wellington	✓		
572300	Mana Island	2072	Porirua City	Wellington			✓
571900	Plimmerton	2103	Porirua City	Wellington	✓		
573521	Grenada	2108	Wellington City	Wellington	✓		
578100	Eketahuna	2233	Taranua District	Wanganui/Manawatu		✓	
578200	Nireaha-Tiraumea	2234	Taranua District	Wanganui/Manawatu			✓
578301	Homebush-Te Ore Ore	2235	Masterton District	Wellington	✓		
578302	Opaki	2236	Masterton District	Wellington	✓		
578401	Kopuaranga	2237	Masterton District	Wellington		✓	
578402	Whareama	2238	Masterton District	Wellington			✓
579400	Waingawa	2247	Carterton District	Wellington		✓	
579501	Mt Holdsworth	2248	Carterton District	Wellington		✓	
579502	Te Wharau	2249	Carterton District	Wellington			✓
579700	Carterton	2250	Carterton District	Wellington		✓	
579801	Kahutara	2251	South Wairarapa District	Wellington		✓	
579802	Tuturumuri	2252	South Wairarapa District	Wellington			✓
579900	Greytown	2253	South Wairarapa District	Wellington		✓	
580000	Featherston	2254	South Wairarapa District	Wellington		✓	
580100	Martinborough	2255	South Wairarapa District	Wellington		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
580200	Havelock	2256	Marlborough District	Nelson - Marlborough		✓	
580300	Renwick	2257	Marlborough District	Nelson - Marlborough	✓		
580410	Woodbourne	2258	Marlborough District	Nelson - Marlborough	✓		
580420	Omaka	2259	Marlborough District	Nelson - Marlborough	✓		
580430	Spring Creek-Riverlands	2260	Marlborough District	Nelson - Marlborough	✓		
580442	Waikawa	2261	Marlborough District	Nelson - Marlborough		✓	
580444	Wairau	2263	Marlborough District	Nelson - Marlborough		✓	
580600	Severn	2264	Marlborough District	Nelson - Marlborough			✓
580801	Ward	2265	Marlborough District	Nelson - Marlborough			✓
580802	Seddon	2266	Marlborough District	Nelson - Marlborough		✓	
580900	Lake Tennyson	2267	Hurunui District	Canterbury/West Coast			✓
581260	Witherlea	2274	Marlborough District	Nelson - Marlborough	✓		
581400	Kaikoura	2275	Kaikoura District	Canterbury/West Coast			✓
581500	Clarence	2276	Kaikoura District	Canterbury/West Coast			✓
581601	Golden Bay	2277	Tasman District	Nelson - Marlborough			✓
581602	Takaka	2278	Tasman District	Nelson - Marlborough			✓
581713	Glenduan	2279	Nelson City	Nelson - Marlborough	✓		
581717	Aniseed Hill	2283	Tasman District	Nelson - Marlborough	✓		
581811	Richmond Hill	2285	Tasman District	Nelson - Marlborough		✓	
581812	Whangamoa	2286	Nelson City	Nelson - Marlborough		✓	
581822	Brightwater	2287	Tasman District	Nelson - Marlborough		✓	
581823	Wakefield	2288	Tasman District	Nelson - Marlborough		✓	
581841	Golden Downs	2292	Tasman District	Nelson - Marlborough			✓
581842	Lake Rotoroa	2293	Tasman District	Nelson - Marlborough			✓
581843	Murchison	2294	Tasman District	Nelson - Marlborough			✓
581844	Tapawera	2295	Tasman District	Nelson - Marlborough			✓
581850	Riwaka	2296	Tasman District	Nelson - Marlborough		✓	
582000	Clifton	2297	Nelson City	Nelson - Marlborough	✓		
577700	Makara-Ohariu	2302	Wellington City	Wellington		✓	
577900	Mangatainoka	2303	Tararua District	Wanganui/Manawatu			✓
578000	Pahiatua	2304	Tararua District	Wanganui/Manawatu		✓	
580445	Marine	2305	Marlborough District	Nelson - Marlborough			✓
580446	Marlborough Sounds Terrestrial	2306	Marlborough District	Nelson - Marlborough			✓
581100	Picton	2307	Marlborough District	Nelson - Marlborough		✓	
581721	Saxton Island	2308	Nelson City	Nelson - Marlborough	✓		
581724	Bests Island	2311	Tasman District	Nelson - Marlborough	✓		
581725	Bells Island	2312	Tasman District	Nelson - Marlborough	✓		
581726	Ranzau	2313	Tasman District	Nelson - Marlborough	✓		
581825	Mapua	2314	Tasman District	Nelson - Marlborough		✓	
581831	Inlet-Motueka	2315	Tasman District	Nelson - Marlborough		✓	
581832	Kaiteriteri	2316	Tasman District	Nelson - Marlborough		✓	
581833	Motueka Outer	2317	Tasman District	Nelson - Marlborough		✓	
581834	Rabbit Island	2318	Tasman District	Nelson - Marlborough		✓	
581835	Waimea Inlet West	2319	Tasman District	Nelson - Marlborough		✓	
581836	Wai-iti	2320	Tasman District	Nelson - Marlborough		✓	
582100	Atawhai	2321	Nelson City	Nelson - Marlborough	✓		
584402	Karamea	2424	Buller District	Canterbury/West Coast			✓
584403	Hector-Ngakawau	2425	Buller District	Canterbury/West Coast			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
584404	Granity	2426	Buller District	Canterbury/West Coast			✓
584500	Westport	2427	Buller District	Canterbury/West Coast			✓
584600	Reefton	2428	Buller District	Canterbury/West Coast			✓
584700	Inangahua	2429	Buller District	Canterbury/West Coast			✓
584911	Kaiata	2431	Grey District	Canterbury/West Coast	✓		
584912	South Beach-Cameron	2432	Grey District	Canterbury/West Coast	✓		
584922	Blackball	2433	Grey District	Canterbury/West Coast		✓	
584923	Point Elizabeth	2434	Grey District	Canterbury/West Coast		✓	
584924	Moana	2435	Grey District	Canterbury/West Coast			✓
584930	Dobson	2436	Grey District	Canterbury/West Coast		✓	
585000	Runanga-Rapahoe	2437	Grey District	Canterbury/West Coast	✓		
585304	Haast	2442	Westland District	Canterbury/West Coast			✓
585305	Otira	2443	Westland District	Canterbury/West Coast			✓
585306	Kumara	2444	Westland District	Canterbury/West Coast		✓	
585307	Kaniere	2445	Westland District	Canterbury/West Coast		✓	
585308	Kowhitirangi	2446	Westland District	Canterbury/West Coast			✓
585309	Ross	2447	Westland District	Canterbury/West Coast			✓
585310	Whataroa	2448	Westland District	Canterbury/West Coast			✓
585311	Harihari	2449	Westland District	Canterbury/West Coast			✓
585312	Franz Josef	2450	Westland District	Canterbury/West Coast			✓
585313	Fox Glacier	2451	Westland District	Canterbury/West Coast			✓
585400	Hokitika	2452	Westland District	Canterbury/West Coast		✓	
585502	Hanmer Springs	2453	Hurunui District	Canterbury/West Coast			✓
585503	Amuri	2454	Hurunui District	Canterbury/West Coast			✓
585504	Culverden	2455	Hurunui District	Canterbury/West Coast			✓
585601	Parnassus	2456	Hurunui District	Canterbury/West Coast			✓
585602	Cheviot	2457	Hurunui District	Canterbury/West Coast			✓
585700	Hurunui	2458	Hurunui District	Canterbury/West Coast			✓
585802	Amberley	2459	Hurunui District	Canterbury/West Coast		✓	
585803	Leithfield	2460	Hurunui District	Canterbury/West Coast		✓	
585805	Sefton	2462	Waimakariri District	Canterbury/West Coast		✓	
586001	Camside	2463	Waimakariri District	Canterbury/West Coast	✓		
586002	Pines-Kairaki Beach	2464	Waimakariri District	Canterbury/West Coast	✓		
586112	Waikuku	2465	Waimakariri District	Canterbury/West Coast		✓	
586114	Cust	2467	Waimakariri District	Canterbury/West Coast		✓	
586120	Woodend	2468	Waimakariri District	Canterbury/West Coast		✓	
586303	Rangiora East	2471	Waimakariri District	Canterbury/West Coast		✓	
586304	Southbrook	2472	Waimakariri District	Canterbury/West Coast		✓	
586401	Kaiapoi North	2473	Waimakariri District	Canterbury/West Coast	✓		
586402	Kaiapoi South	2474	Waimakariri District	Canterbury/West Coast	✓		
586501	Clarkville	2475	Waimakariri District	Canterbury/West Coast	✓		
586502	Kaiapoi West	2476	Waimakariri District	Canterbury/West Coast	✓		
586801	Ashley Gorge	2478	Waimakariri District	Canterbury/West Coast		✓	
586802	Oxford	2479	Waimakariri District	Canterbury/West Coast		✓	
586900	Darfield	2480	Selwyn District	Canterbury/West Coast		✓	
587010	Kirwee	2481	Selwyn District	Canterbury/West Coast		✓	
587020	Burnham Military Camp	2482	Selwyn District	Canterbury/West Coast		✓	
587100	Malvern	2483	Selwyn District	Canterbury/West Coast			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
587820	Templeton	2492	Christchurch City	Canterbury/West Coast	✓		
587841	Prebbleton	2494	Selwyn District	Canterbury/West Coast	✓		
587902	McLeans Island	2498	Christchurch City	Canterbury/West Coast	✓		
584301	Motueka West	2502	Tasman District	Nelson - Marlborough		✓	
584303	Motueka East	2503	Tasman District	Nelson - Marlborough		✓	
584304	Moutere Inlet	2504	Tasman District	Nelson - Marlborough		✓	
584305	Jackett Island	2505	Tasman District	Nelson - Marlborough		✓	
584405	Orowaiti	2506	Buller District	Canterbury/West Coast			✓
584406	Buller	2507	Buller District	Canterbury/West Coast			✓
585806	Okuku	2508	Waimakariri District	Canterbury/West Coast		✓	
585807	Loburn	2509	Waimakariri District	Canterbury/West Coast		✓	
585808	Ashley	2510	Waimakariri District	Canterbury/West Coast		✓	
586115	Mairaki	2511	Waimakariri District	Canterbury/West Coast		✓	
586116	Fernside	2512	Waimakariri District	Canterbury/West Coast		✓	
586117	Tuahiwi	2513	Waimakariri District	Canterbury/West Coast		✓	
586118	Coldstream	2514	Waimakariri District	Canterbury/West Coast		✓	
586301	Rangiora North	2515	Waimakariri District	Canterbury/West Coast		✓	
586302	Rangiora West	2516	Waimakariri District	Canterbury/West Coast		✓	
586601	West Eyreton	2517	Waimakariri District	Canterbury/West Coast		✓	
586602	Eyreton	2518	Waimakariri District	Canterbury/West Coast		✓	
587904	West Melton	2600	Selwyn District	Canterbury/West Coast		✓	
587905	Taitapu	2601	Selwyn District	Canterbury/West Coast		✓	
590400	Belfast	2627	Christchurch City	Canterbury/West Coast	✓		
590601	Styx	2629	Christchurch City	Canterbury/West Coast	✓		
596400	Lytelton	2692	Banks Peninsula District	Canterbury/West Coast	✓		
596502	Diamond Harbour	2694	Banks Peninsula District	Canterbury/West Coast		✓	
596600	Port Levy	2695	Banks Peninsula District	Canterbury/West Coast		✓	
596800	Akaroa	2696	Banks Peninsula District	Canterbury/West Coast		✓	
596900	Okains Bay	2697	Banks Peninsula District	Canterbury/West Coast		✓	
	Chatham Islands	2698	Chatham Islands District	Tairāwhiti/Hawkes Bay			✓
597100	Little River	2699	Banks Peninsula District	Canterbury/West Coast		✓	
596503	Governors Bay	2703	Banks Peninsula District	Canterbury/West Coast		✓	
596504	Quail Island	2704	Banks Peninsula District	Canterbury/West Coast	✓		
597200	Lincoln	2800	Selwyn District	Canterbury/West Coast		✓	
597300	Leeston	2801	Selwyn District	Canterbury/West Coast		✓	
597400	Southbridge	2802	Selwyn District	Canterbury/West Coast		✓	
597501	Ellesmere	2803	Selwyn District	Canterbury/West Coast		✓	
597502	Rolleston	2804	Selwyn District	Canterbury/West Coast		✓	
597503	Dunsandel	2805	Selwyn District	Canterbury/West Coast		✓	
597600	Methven Community	2806	Ashburton District	Canterbury/West Coast		✓	
597711	Fairton	2807	Ashburton District	Canterbury/West Coast		✓	
597712	Plains Railway	2808	Ashburton District	Canterbury/West Coast		✓	
597720	Mt Somers	2809	Ashburton District	Canterbury/West Coast			✓
597730	Hinds	2810	Ashburton District	Canterbury/West Coast		✓	
597741	Chertsey	2811	Ashburton District	Canterbury/West Coast		✓	
597742	Rakaia	2812	Ashburton District	Canterbury/West Coast		✓	
597810	Allenton	2813	Ashburton District	Canterbury/West Coast		✓	
597820	Central Ashburton West	2814	Ashburton District	Canterbury/West Coast		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
597830	Netherby	2815	Ashburton District	Canterbury/West Coast		✓	
597840	Central Ashburton East	2816	Ashburton District	Canterbury/West Coast		✓	
597850	Hampstead	2817	Ashburton District	Canterbury/West Coast		✓	
597860	Tinwald	2818	Ashburton District	Canterbury/West Coast		✓	
598000	Winchester	2819	Timaru District	Canterbury/West Coast		✓	
598201	Fairview-Scarborough	2820	Timaru District	Canterbury/West Coast	✓		
598202	Otipua Creek-Washdyke Flat	2821	Timaru District	Canterbury/West Coast	✓		
598311	Ben McLeod	2822	Timaru District	Canterbury/West Coast			✓
598312	Orari	2823	Timaru District	Canterbury/West Coast		✓	
598313	Levels	2824	Timaru District	Canterbury/West Coast		✓	
598314	Parcora	2825	Timaru District	Canterbury/West Coast		✓	
598320	Pleasant Point	2826	Timaru District	Canterbury/West Coast		✓	
598500	Geraldine	2827	Timaru District	Canterbury/West Coast		✓	
598600	Temuka	2828	Timaru District	Canterbury/West Coast		✓	
600100	Twizel Community	2842	Mackenzie District	Canterbury/West Coast			✓
600200	Fairlie	2843	Mackenzie District	Canterbury/West Coast			✓
600312	Mt Cook	2845	Mackenzie District	Canterbury/West Coast			✓
600410	Waihao	2847	Waimate District	Canterbury/West Coast		✓	
600420	St Andrews	2848	Waimate District	Canterbury/West Coast		✓	
600500	Waimate	2849	Waimate District	Canterbury/West Coast		✓	
600600	Weston	2850	Waitaki District	Otago/Southland		✓	
600811	Pukeuri	2851	Waitaki District	Otago/Southland		✓	
600812	Ardgowan	2852	Waitaki District	Otago/Southland		✓	
600813	Cape Wanbrow	2853	Waitaki District	Otago/Southland		✓	
600822	Duntroon	2854	Waitaki District	Otago/Southland		✓	
600824	Kurow	2855	Waitaki District	Otago/Southland			✓
600825	Aviemore	2856	Waitaki District	Otago/Southland			✓
600826	Maheno	2857	Waitaki District	Otago/Southland		✓	
600827	Omarama	2858	Waitaki District	Otago/Southland			✓
600828	Kakanui	2859	Waitaki District	Otago/Southland		✓	
600830	Otematata	2860	Waitaki District	Otago/Southland			✓
600840	Hampden	2861	Waitaki District	Otago/Southland		✓	
601010	Oamaru North	2862	Waitaki District	Otago/Southland		✓	
601020	Orana Park	2863	Waitaki District	Otago/Southland		✓	
601030	Oamaru Central	2864	Waitaki District	Otago/Southland		✓	
601040	Oamaru South	2865	Waitaki District	Otago/Southland		✓	
601200	Palmerston	2866	Waitaki District	Otago/Southland		✓	
601301	Waihemo	2867	Waitaki District	Otago/Southland		✓	
601302	Hyde	2868	Dunedin City	Otago/Southland			✓
601400	Waikouaiti	2869	Dunedin City	Otago/Southland		✓	
601500	Aramoana	2870	Dunedin City	Otago/Southland		✓	
601602	Waitati	2871	Dunedin City	Otago/Southland		✓	
601603	Evansdale	2872	Dunedin City	Otago/Southland		✓	
601604	Karitane	2873	Dunedin City	Otago/Southland		✓	
601605	Warrington	2874	Dunedin City	Otago/Southland		✓	
601700	Nenthorn	2875	Waitaki District	Otago/Southland		✓	
602000	Brighton	2877	Dunedin City	Otago/Southland	✓		
602100	Waldronville	2878	Dunedin City	Otago/Southland	✓		

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
602200	Outram	2879	Dunedin City	Otago/Southland		✓	
602300	Middlemarch	2880	Dunedin City	Otago/Southland			✓
602411	Wyllies Crossing	2881	Dunedin City	Otago/Southland	✓		
602412	Wingatui	2882	Dunedin City	Otago/Southland	✓		
602422	Kaikorai Lagoon	2884	Dunedin City	Otago/Southland	✓		
602500	Momona	2885	Dunedin City	Otago/Southland		✓	
602600	Silverpeaks	2886	Dunedin City	Otago/Southland			✓
600320	Lake Tekapo	2900	Mackenzie District	Canterbury/West Coast			✓
600321	Lake Alexandrina	2901	Mackenzie District	Canterbury/West Coast			✓
600322	Inland Water-Lake Tekapo	2902	Mackenzie District	Canterbury/West Coast			
600323	Mackenzie	2903	Mackenzie District	Canterbury/West Coast			✓
604830	Broad Bay-Portobello	3023	Dunedin City	Otago/Southland	✓		
604901	Taiaroa-Cape Saunders	3024	Dunedin City	Otago/Southland	✓		
604902	Sandymount	3025	Dunedin City	Otago/Southland	✓		
605100	Sawyers Bay	3026	Dunedin City	Otago/Southland	✓		
605200	Port Chalmers	3027	Dunedin City	Otago/Southland	✓		
606100	Mosgiel East	3034	Dunedin City	Otago/Southland	✓		
606210	Mosgiel South	3035	Dunedin City	Otago/Southland	✓		
606220	East Taieri	3036	Dunedin City	Otago/Southland	✓		
606300	Bush Road	3037	Dunedin City	Otago/Southland	✓		
606500	Benhar	3038	Clutha District	Otago/Southland		✓	
606600	Stirling	3039	Clutha District	Otago/Southland		✓	
606700	Bruce	3040	Clutha District	Otago/Southland		✓	
606800	Milton	3041	Clutha District	Otago/Southland		✓	
606900	Kaitangata	3042	Clutha District	Otago/Southland		✓	
607000	Clinton	3043	Clutha District	Otago/Southland			✓
607100	Kaka Point	3044	Clutha District	Otago/Southland		✓	
607200	Owaka	3045	Clutha District	Otago/Southland		✓	
607501	Teviot	3048	Central Otago District	Otago/Southland			✓
607502	Tuapeka	3049	Clutha District	Otago/Southland			✓
607600	Tapanui	3050	Clutha District	Otago/Southland			✓
607700	Lawrence	3051	Clutha District	Otago/Southland			✓
607800	Roxburgh	3052	Central Otago District	Otago/Southland		✓	
607900	Ranfurly	3053	Central Otago District	Otago/Southland			✓
608000	Maniototo	3054	Central Otago District	Otago/Southland			✓
608100	Naseby	3055	Central Otago District	Otago/Southland			✓
608301	Hawea	3056	Queenstown-Lakes District	Otago/Southland			✓
608302	Dunstan	3057	Central Otago District	Otago/Southland			✓
608303	Clyde	3058	Central Otago District	Otago/Southland		✓	
608500	Alexandra	3059	Central Otago District	Otago/Southland		✓	
608600	Cromwell	3060	Central Otago District	Otago/Southland		✓	
608700	Frankton	3061	Queenstown-Lakes District	Otago/Southland		✓	
608800	Wanaka	3062	Queenstown-Lakes District	Otago/Southland			✓
609011	Milford	3063	Southland District	Otago/Southland			✓
609012	Glenorchy	3064	Queenstown-Lakes District	Otago/Southland			✓
609022	Kelvin Heights	3065	Queenstown-Lakes District	Otago/Southland		✓	
609023	Sunshine Bay	3066	Queenstown-Lakes District	Otago/Southland		✓	
609024	Matukituki	3067	Queenstown-Lakes District	Otago/Southland			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
609301	Queenstown Bay	3070	Queenstown-Lakes District	Otago/Southland		✓	
609302	Earnslaw	3071	Queenstown-Lakes District	Otago/Southland		✓	
609400	Balfour Community	3072	Southland District	Otago/Southland			✓
609500	Riversdale Community	3073	Southland District	Otago/Southland		✓	
609600	Lumsden Community	3074	Southland District	Otago/Southland		✓	
609700	Edendale Community	3075	Southland District	Otago/Southland		✓	
609800	Wyndham	3076	Southland District	Otago/Southland		✓	
609911	Makarewa North	3077	Southland District	Otago/Southland		✓	
610010	Charlton	3083	Gore District	Otago/Southland		✓	
610020	Waikaia	3084	Southland District	Otago/Southland			✓
610031	Kaweku	3085	Southland District	Otago/Southland		✓	
610032	Chatton	3086	Gore District	Otago/Southland		✓	
610033	Kaiwera	3087	Gore District	Otago/Southland		✓	
610040	Hokonui	3088	Southland District	Otago/Southland		✓	
610051	Waianiwa	3089	Southland District	Otago/Southland		✓	
610052	Oreti Beach	3090	Invercargill City	Otago/Southland		✓	
610061	Dacre	3091	Southland District	Otago/Southland		✓	
610062	Myross Bush	3092	Invercargill City	Otago/Southland		✓	
610072	Waituna	3094	Southland District	Otago/Southland		✓	
610073	Woodlands	3095	Southland District	Otago/Southland		✓	
610080	Toetoes	3096	Southland District	Otago/Southland			✓
610090	Wallacetown	3097	Southland District	Otago/Southland		✓	
610210	North Gore	3098	Gore District	Otago/Southland		✓	
610220	East Gore	3099	Gore District	Otago/Southland		✓	
604821	Raynbirds Bay	3102	Dunedin City	Otago/Southland	✓		
604822	Macandrew Bay	3103	Dunedin City	Otago/Southland	✓		
607300	Clutha	3104	Clutha District	Otago/Southland			✓
607400	Balclutha	3105	Clutha District	Otago/Southland		✓	
609025	Skippers	3106	Queenstown-Lakes District	Otago/Southland			✓
609200	Arrowtown	3107	Queenstown-Lakes District	Otago/Southland		✓	
610074	Greenhills	3112	Invercargill City	Otago/Southland		✓	
610075	Tiwai Point	3113	Invercargill City	Otago/Southland		✓	
610230	Central Gore	3200	Gore District	Otago/Southland		✓	
610240	West Gore	3201	Gore District	Otago/Southland		✓	
610250	South Gore	3202	Gore District	Otago/Southland		✓	
610400	Mataura	3203	Gore District	Otago/Southland		✓	
610500	Winton	3204	Southland District	Otago/Southland		✓	
612100	Bluff	3223	Invercargill City	Otago/Southland		✓	
612200	Nightcaps	3224	Southland District	Otago/Southland			✓
612300	Ohai	3225	Southland District	Otago/Southland			✓
612400	Te Anau	3226	Southland District	Otago/Southland			✓
612500	Tuatapere	3227	Southland District	Otago/Southland		✓	
612600	Otautau	3228	Southland District	Otago/Southland		✓	
612711	Mararoa River	3229	Southland District	Otago/Southland			✓
612712	Manapouri	3230	Southland District	Otago/Southland			✓
612713	Mossburn	3231	Southland District	Otago/Southland			✓
612720	Wairio	3232	Southland District	Otago/Southland			✓
612730	Te Waewae	3233	Southland District	Otago/Southland			✓

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
612900	Fiordland	3236	Southland District	Otago/Southland			✓
613000	Stewart Island	3237	Southland District	Otago/Southland			✓
614502	Inlet-Hokianga Harbour	3240	Far North District	Northland			✓
614601	Inlet-Rangaunu Harbour	3241	Far North District	Northland			✓
614602	Inlet-Doubtless Bay	3242					✓
614700	Inlet-Whangaroa Harbour	3243	Far North District	Northland			✓
614800	Inlet-Bay of Islands	3244	Far North District	Northland			✓
615100	Inlet-Whangarei District	3245	Whangarei District	Northland		✓	
615302	Inlet-Mangawhai Harbour	3247	Kaipara District	Northland		✓	
615800	Mokohinau Island	3248	Auckland City	Auckland			✓
615900	Little Barrier Island	3249	Auckland City	Auckland			✓
616001	Kaikoura and Rangiahua Islands	3250	Auckland City	Auckland			✓
616002	Inlet-Port Fitzroy	3251					✓
616100	Cape Barrier	3252	Auckland City	Auckland			✓
616200	Rakitu Island	3253	Auckland City	Auckland			✓
616300	Browns Island	3254	Auckland City	Auckland			✓
616400	Aiguilles Island	3255	Auckland City	Auckland			✓
617000	Inlet-Kaipara Harbour North	3256					✓
617102	Inlet-Kaipara River	3258	Rodney District	Auckland		✓	
617601	Inlet-Manakau Harbour	3262				✓	
617800	Inlet-Waiuku river	3265				✓	
618300	Te Motu Island	3267	Otorohanga District	Waikato			✓
618400	Motiti Island	3268					✓
618500	Mayor Island	3269					✓
619000	Inlet-Raglan Harbour	3270	Waikato District	Waikato		✓	
619101	Inlet-Aotea Harbour North	3271	Waikato District	Waikato			✓
619102	Inlets-Otorohanga District	3272	Otorohanga District	Waikato			✓
619201	Inlet-Waitomo District	3273	Waitomo District	Waikato			✓
619301	Inlets-Thames-Coromandel District	3275	Thames-Coromandel District	Waikato			✓
619302	Islands-Thames-Coromandel District	3276	Thames-Coromandel District	Waikato			✓
619303	Bay-Thames Coromandel District	3277					✓
619500	Inlet-Firth of Thames	3279				✓	
619900	White Island	3281					✓
620000	Inland Water-Lake Taupo	3282	Taupo District	Bay of Plenty		✓	
622100	Inlet-Wellington Harbour	3290				✓	
623900	Inlet-Ligar Bay	3296	Tasman District	Nelson - Marlborough			✓
624100	Inlet-Buller River	3297	Buller District	Canterbury/West Coast			✓
612740	Fairfax	3301	Southland District	Otago/Southland		✓	
612801	Riverton East	3302	Southland District	Otago/Southland		✓	
612802	Riverton West	3303	Southland District	Otago/Southland		✓	
617101	Inlet-Kaipara Harbour South	3306				✓	
619701	Moutohora Island	3308					✓
623801	Inlet-Tasman Bay					✓	
623803	Oceanic-Tasman Region	3310	Tasman District	Nelson - Marlborough			✓
625101	Inlet-Port Lyttelton	3314	Banks Peninsula District	Canterbury/West Coast		✓	
625102	Inlet-Banks Peninsula Bays	3400	Banks Peninsula District	Canterbury/West Coast		✓	
625901	Inlet-Dunedin City Bays	3405	Dunedin City	Otago/Southland		✓	
626000	Inlet-Port Oamaru	3407	Waitaki District	Otago/Southland		✓	

Area Unit	Area Unit Description	Domicile	TLA Description	Locality Description	Semi rural	Rural	Remote Rural
626100	Inlet-Milford Sound	3408	Southland District	Otago/Southland			✓
626500	Dog Island	3409	Invercargill City	Otago/Southland			✓
626700	Centre Island	3411	Southland District	Otago/Southland			✓
626802	Inlet-New River Estuary	3413	Invercargill City	Otago/Southland		✓	
626801	Inlet-Bluff Harbour	3500	Invercargill City	Otago/Southland		✓	
627000	Inlet-Jacobs River Estuary	3501	Southland District	Otago/Southland		✓	

Note: Various inlets and islands listed as area units 614502 – 627000 (being domicile codes 3240-3501) are **all** remote rural.

**APPENDIX VII
APPLICATION FORM & CLAIM FORMS**

**APPLICATION FORM FOR
AUTHORISATION TO CLAIM UNDER THE MATERNITY NOTICE**



DETAILS OF AUTHORISED PRACTITIONER

PRACTITIONER ID TYPE ☒ Medical Council of NZ ☒ Nursing Council of NZ

REGISTRATION NUMBER (i.e. MCNZ, NCNZ)

OCCUPATION ☒ Midwife ☒ General Practitioner ☒ General Practitioner (Dip. Obs) ☒ Anaesthetist
☒ Obstetrician ☒ Radiologist ☒ Paediatrician

COPY OF PRACTISING CERTIFICATE ATTACHED ☒

NAME
 Surname or Family Name
 First Name
 Middle Name(s)

ADDRESS
 Principle Practice Address Postal Address
 Building name
 Street Number
 Suburb
 City

CONTACT DETAILS
 Phone Fax Number
 Mobile Pager
 Email

SEX ☒ Female ☒ Male Date of Birth / /

ETHNICITY Completion of this section will assist the monitoring of health trends amongst different ethnic groups. The categories comply with NZHIS standards. Select up to three groups that you identify with.

<input checked="" type="checkbox"/> NZ/European	<input checked="" type="checkbox"/> Samoan	<input checked="" type="checkbox"/> Niuean	<input checked="" type="checkbox"/> Other Pacific	<input checked="" type="checkbox"/> Indian
<input checked="" type="checkbox"/> Other European	<input checked="" type="checkbox"/> Cook Island Maori	<input checked="" type="checkbox"/> Tokelauan	<input checked="" type="checkbox"/> South East Asian	<input checked="" type="checkbox"/> Other Asian
<input checked="" type="checkbox"/> New Zealand Maori	<input checked="" type="checkbox"/> Tongan	<input checked="" type="checkbox"/> Fijian	<input checked="" type="checkbox"/> Chinese	<input checked="" type="checkbox"/> Other

DETAILS OF PAYEE

DIRECT CREDIT DETAILS (Please note that Countrywide Bank Accounts will have an extra digit)

☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒

GST REGISTERED ☒ Yes ☒ No

My GST number is

CLAIMS WILL BE MADE ☒ Manually ☒ Electronically

DETAILS OF ORGANISATION HOLDING AUTHORISATION

NAME OF ORGANISATION (where organisation holds the authorisation)
POSTAL ADDRESS (where different from above)

CERTIFICATION

1. I certify that the above information is true and correct. I am aware the information will be used in a manner consistent with the Health Information Privacy Code 1994.
2. I agree that I will comply with the terms and conditions of the Section 88 Maternity Notice.

Signature of Practitioner

Date

Practitioner to send completed form to the Ministry of Health, Agreement Administration, Private Bag 1942, Dunedin

MINISTRY OF HEALTH TO COMPLETE AND RETURN FORM TO PRACTITIONER**PAYEE NUMBER** ☐ ☐ ☐ ☐ ☐ ☐**AGREEMENT NUMBER** ☐ ☐ ☐ ☐ ☐ ☐ - ☐ ☐

As from ☐ / ☐ / ☐ ☐ ☐ ☐ the practitioner named above is deemed to be an Authorised Practitioner under the Section 88 Maternity Notice.

Date _____

CLAIM FORM FOR SECOND TRIMESTER, THIRD TRIMESTER AND LABOUR AND BIRTH



DETAILS OF LEAD MATERNITY CARER

PRACTITIONER ID TYPE ☒ Medical Council of NZ ☒ Nursing Council of NZ

REGISTRATION NUMBER (i.e. MCNZ, NCNZ)

AGREEMENT NUMBER ☒ ☒ ☒ ☒ - ☒ ☒

PAYEE NUMBER ☒ ☒ ☒ ☒ ☒

DETAILS OF WOMAN

MHI ☒ ☒ ☒ ☒ ☒ ☒ **EDD** ☒ / ☒ / ☒ i.e. month/year **LMP** ☒ / ☒ / ☒ ☒ ☒ ☒ **MATERNAL DEATH** (where applicable) ☒
(Estimated if necessary)

DETAILS OF SERVICE

DATE OF BIRTH Baby 1 ☒ ☒ / ☒ ☒ / ☒ ☒ ☒ Baby 2 (where applicable) ☒ ☒ / ☒ ☒ / ☒ ☒ ☒ ☒

APGAR SCORE ☒ ☒ At 5 Minutes ☒ ☒ At 5 Minutes

CONDITION ☒ Liveborn ☒ Stillborn ☒ Liveborn ☒ Stillborn

BIRTH WEIGHT ☒ ☒ ☒ ☒ gm ☒ ☒ ☒ ☒ gm

MHI OF LIVEBORN BABY ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒ ☒

PLACENTA KEPT BY WOMAN ☒ Yes ☒ No **LMC ATTENDANCE AT BIRTH** ☒ Yes ☒ No

NUMBER OF VISITS RECEIVED IN SECOND TRIMESTER AND THIRD TRIMESTER MODULES ☒ ☒ (Annotate number of Visits)

WOMAN HAS HAD THE FOLLOWING TESTS DURING THIS PREGNANCY

CHORIONIC VILLOUS SAMPLING ☒ Yes ☒ No **FOETAL BLOOD SAMPLING** ☒ Yes ☒ No

AMNIOCENTESIS ☒ Yes ☒ No

DETAILS OF REFERRALS

Date of Referral	Name of Practitioner or Secondary Maternity Service referred to	Specialist Type (e.g. Radiologist)	Reason for Referral (Use Referral Guidelines)
			<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
WOMAN TRANSFERRED TO SECONDARY MATERNITY Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> If yes, Second <input checked="" type="checkbox"/> Third <input checked="" type="checkbox"/> Labour & Birth <input checked="" type="checkbox"/>			Transfer Date <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> / <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

DETAILS OF CLAIM

SECOND TRIMESTER

Date module ended ☒ ☒ / ☒ ☒ / ☒ ☒

Circle applicable one

Full Module / First Partial / Last Partial

\$☒ ☒ ☒ ☒

THIRD TRIMESTER

Date module ended ☒ ☒ / ☒ ☒ / ☒ ☒

Full Module / First Partial / Last Partial

\$☒ ☒ ☒ ☒

LABOUR AND BIRTH

Lead Maternity Care

First Birth / VBAC / Subsequent Birth

\$☒ ☒ ☒ ☒

GP/Obstetrician Lead Maternity Care
(where Hospital Midwifery Services used)
Hospital Midwifery Services

First Birth / VBAC / Subsequent Birth

\$☒ ☒ ☒ ☒

First Birth / VBAC / Subsequent Birth

\$☒ ☒ ☒ ☒

Homebirth Supplies & Services

\$☒ ☒ ☒ ☒

Birth occurred at home

Yes ☒ No ☒

Birth Unit Services

\$☒ ☒ ☒ ☒

Name of Birthing Unit

LESS DISBURSEMENTS TO AUTHORISED PRACTITIONERS

Payee Number of Recipient
☒ ☒ ☒ ☒ ☒ ☒

Payee Name

Amount to pay
\$☒ ☒ ☒ ☒

Payee Number of Recipient
☒ ☒ ☒ ☒ ☒ ☒

Payee Name

Amount to pay
\$☒ ☒ ☒ ☒

TOTAL AMOUNT CLAIMED

(GST Inclusive) \$☒ ☒ ☒ ☒

LESS TOTAL DISBURSEMENTS

(GST inclusive) \$□□□□.□□

AMOUNT PAYABLE

(GST inclusive) \$□□□□.□□

CERTIFICATION

I certify I have provided the above services in accordance with the service specifications in the Section 88 Notice and that the above information is correct.

Name of Lead Maternity Carer (Please print in capital letters)

Signature of Lead Maternity Carer

Date

CLAIM FORM FOR SERVICES FOLLOWING BIRTH



DETAILS OF LEAD MATERNITY CARER AND WOMAN

NHI EDD e.g. month/year

PRACTITIONER ID TYPE

☐ Medical Council of NZ
 ☐ Nursing Council of NZ

REGISTRATION NUMBER

(i.e. MCNZ, NCNZ)

AGREEMENT NUMBER -

PAYEE NUMBER

DETAILS OF BABY(S)

BREASTFEEDING

Baby 1	Infant feeding at 2 weeks	Exclusive <input type="checkbox"/>	Fully <input type="checkbox"/>	Partial <input type="checkbox"/>	Artificial <input type="checkbox"/>
Baby 2 (where applicable)	Infant feeding at 2 weeks	Exclusive <input type="checkbox"/>	Fully <input type="checkbox"/>	Partial <input type="checkbox"/>	Artificial <input type="checkbox"/>
Baby 1	At discharge from LMC	Exclusive <input type="checkbox"/>	Fully <input type="checkbox"/>	Partial <input type="checkbox"/>	Artificial <input type="checkbox"/>
Baby 2 (where applicable)	At discharge from LMC	Exclusive <input type="checkbox"/>	Fully <input type="checkbox"/>	Partial <input type="checkbox"/>	Artificial <input type="checkbox"/>

DATE OF BIRTH

Baby 1 Baby 2 (where applicable)

DATE OF DISCHARGE FROM MATERNITY CARE

Baby 1 Baby 2 (where applicable)

DATE OF NEONATAL DEATH (where applicable)

Baby 1 Baby 2 (where applicable)

BABY(S) ETHNICITY

Completion of this section will assist the monitoring of health trends amongst different ethnic groups. The categories comply with NZHIS standards. Select up to three groups that you identify with.

<input type="checkbox"/> NZ/European	<input type="checkbox"/> Samoan	<input type="checkbox"/> Niuean	<input type="checkbox"/> Other Pacific	<input type="checkbox"/> Indian
<input type="checkbox"/> Other European	<input type="checkbox"/> Cook Island Maori	<input type="checkbox"/> Tokelauan	<input type="checkbox"/> South East Asian	<input type="checkbox"/> Other Asian
<input type="checkbox"/> New Zealand Maori	<input type="checkbox"/> Tongan	<input type="checkbox"/> Fijian	<input type="checkbox"/> Chinese	<input type="checkbox"/> Other

DETAILS OF SERVICE

NUMBER OF MIDWIFERY HOME VISITS RECEIVED BY WOMAN/BABY

 (Annotate number of Visits)

NUMBER OF VISITS DURING INPATIENT POSTNATAL STAY BY LMC OR BACK-UP TO LMC

 (Annotate number of Visits)

REFERRAL TO WELL CHILD PROVIDER

Yes ☐No ☐ [WOMAN DECLINED REFERRAL TO WELL CHILD PROVIDER]

GP NOTIFIED

Yes ☐No ☐ [WOMAN DECLINED NOTIFICATION TO GP]

DETAILS OF REFERRALS

Date of Referral	Name of Practitioner or Secondary Care Service referred to	Specialist Type (e.g. Paediatrician)	Reason for Referral (Use Referral Guidelines)
Mother			
<input type="text"/>			<input type="text"/>
<input type="text"/>			<input type="text"/>
Baby			
<input type="text"/>			<input type="text"/>
<input type="text"/>			<input type="text"/>
WOMAN TRANSFERRED TO SECONDARY MATERNITY		Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, date of transfer <input type="text"/>

DETAILS OF CLAIM

WOMAN RECEIVES INPATIENT CARE

Lead Maternity Care
GP/Obstetrician Lead Maternity Care
(where Hospital Midwifery Services used)

Circle applicable one

Full Module / First Partial / Last Partial

\$

Full Module / First Partial / Last Partial

\$

Hospital Midwifery Services

Full Module / First Partial / Last Partial

\$

WOMAN RECEIVES NO INPATIENT CARE

Lead Maternity Care

Full Module / First Partial / Last Partial

\$

GP/Obstetrician Lead Maternity Care
(where Hospital Midwifery Services used)

Full Module / First Partial / Last Partial

\$

Hospital Midwifery Services

Full Module / First Partial / Last Partial

\$

ADDITIONAL HOME VISITS

\$

RURAL TRAVEL

Semi Rural / Rural / Remote Rural

\$□□□:□□

ADDRESS OF WOMAN**ADDRESS OF BABY** (if different from above)**LESS DISBURSEMENTS TO AUTHORISED PRACTITIONERS**Payee Number of Recipient
□□□□□□□□

Payee Name

Amount to pay
\$□□□.□□Payee Number of Recipient
□□□□□□□□

Payee Name

Amount to pay
\$□□□.□□**TOTAL AMOUNT CLAIMED**

(GST Inclusive) \$□□□□.□□

LESS TOTAL DISBURSEMENTS

(GST Inclusive) \$□□□□.□□

AMOUNT PAYABLE

(GST Inclusive) \$□□□□.□□

CERTIFICATION

I certify that I have provided the above services in accordance with the service specifications in the Section 88 Notice and that the above information is correct.

Name of Lead Maternity Carer (Please print in capital letters)

Signature of Lead Maternity Carer

Date



CLAIM FORM FOR SINGLE SERVICE EPISODES

DETAILS OF SERVICES AND CLAIM

[illegible]**Codes for pregnancy care/urgent out of hours pregnancy care**

1. 1st Trimester
2. 2nd/3rd Trimester - Unregistered Woman
3. 2nd/3rd Trimester - Woman Away From Usual Place of Residence
4. 2nd/3rd Trimester - Medical Emergency, LMC contact attempted, supporting documentation attached
5. Following a Miscarriage/Termination of Pregnancy

Codes for Exceptional Circumstances

6. Transfer to Secondary Maternity 48 hours prior to Established Labour
7. Urgent non-LMC assistance to rural LMC
8. Ambulance transfer

DETAILS OF REFERRALS

[illegible]

DETAILS OF AUTHORISED PRACTITIONER AND CLAIM

PRACTITIONER ID TYPE

- Medical Council of NZ
Nursing Council of NZ

REGISTRATION NUMBER

(i.e. MCNZ, NCNZ)

AGREEMENT NUMBER[illegible]

PAYEE NUMBER

☒☒☒☒☒☒

TOTAL AMOUNT CLAIMED

(GST Inclusive) S\$ 1,000.00

CERTIFICATION

I certify I have provided the above services in accordance with the service specifications in the Section 88 Notice and that the above information is correct.

Name of Authorised Practitioner (Capital letters)

Signature of Authorised Practitioner

Date _____

CLAIM FORM FOR ULTRASOUND CONSULTATION



DETAILS OF AUTHORISED PRACTITIONER

PAYEE NUMBER ☐☐☐☐☐☐☐☐

AGREEMENT NUMBER ☐☐☐☐☐☐☐ - ☐☐

DETAILS OF WOMAN/BABY

NHI ☐☐☐☐☐☐ EDD ☐☐ / ☐☐ i.e. month/year (Not applicable for baby)

LMP ☐☐ / ☐☐ / ☐☐☐☐ Estimated if necessary (Not applicable for baby)

SCAN FOR ☒ Mother ☒ Baby (not foetus)

DETAILS OF REFERRAL

REFERRING PRACTITIONER ID TYPE ☒ Medical Council of NZ ☒ Nursing Council of NZ

REFERRING PRACTITIONER REGISTRATION NUMBER (i.e. MCNZ, NCNZ)

PRINCIPAL REASON FOR REFERRAL ☒☒☒ (use Ultrasound Indications List – e.g. MF3)

DATE OF REFERRAL ☐☐ / ☐☐ / ☐☐☐☐

SECOND / THIRD TRIMESTER ONLY

NAME OF LEAD MATERNITY CARER

NON-LMC REFERRAL AND EMERGENCY CIRCUMSTANCES ☒ Yes ☒ No

DETAILS OF SERVICE AND CLAIM

DATE OF SCAN ☐☐ / ☐☐ / ☐☐☐☐

TOTAL AMOUNT CLAIMED (GST inclusive) \$ ☐☐ : ☐☐☐☐

CERTIFICATION

I certify that I have provided the above services in accordance with the service specifications in the Section 88 Notice and that the above information is correct. The scan has been performed as a result of a referral from the Authorised Practitioner identified in the details of the referral above. I understand that the information will also be used to monitor the quality of patient care, treatment and health statistics in a manner consistent with the Health Information Privacy Code 1994.

Name of Authorised Practitioner (Capital letters please)

Signature of Authorised Practitioner

Date

CLAIM FORM FOR SPECIALIST CONSULTATIONS (Obstetricians, Anaesthetists, Paediatricians)



DETAILS OF AUTHORISED PRACTITIONER

PRACTITIONER ID TYPE ☒ Medical Council of NZ

REGISTRATION NUMBER (i.e. MCNZ)

AGREEMENT NUMBER - PAYEE NUMBER

DETAILS OF WOMAN

MHI EDD / i.e. month/year

DETAILS OF BABY

MHI Date of Birth / /

DETAILS OF REFERRAL

REFERRING LMC PRACTITIONER ID TYPE ☒ Medical Council of NZ ☒ Nursing Council of NZ

REFERRING LMC REGISTRATION NUMBER (i.e. MCNZ, NCNZ)

NAME OF REFERRING LMC

DETAILS OF SPECIALIST CLAIMS

Date of Referral	Date of Service	Principal Reason for Referral (Use Referral Guidelines)	First Consultation (Obstetrician & Paediatrician only)	Subsequent Consultation (Obstetrician & Paediatrician only)	Anaesthetist Services	Specialist Obstetrician - Effecting Birth	Paediatrician Attendance at Delivery	Amount Claimed
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

TOTAL AMOUNT CLAIMED (GST Inclusive) \$

CERTIFICATION

I certify that I have provided the above services in accordance with the service specifications to the Section 88 Notice and that the above information is correct. I understand that the information will also be used to monitor the quality of patient care, treatment and health statistics in a manner consistent with the Health Information Privacy Code 1994.

Name of Authorised Practitioner (Capital letters please)

Signature of Authorised Practitioner

Date