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GP funding idea lost in big picture: Sector left in dark over outcome of capitation review



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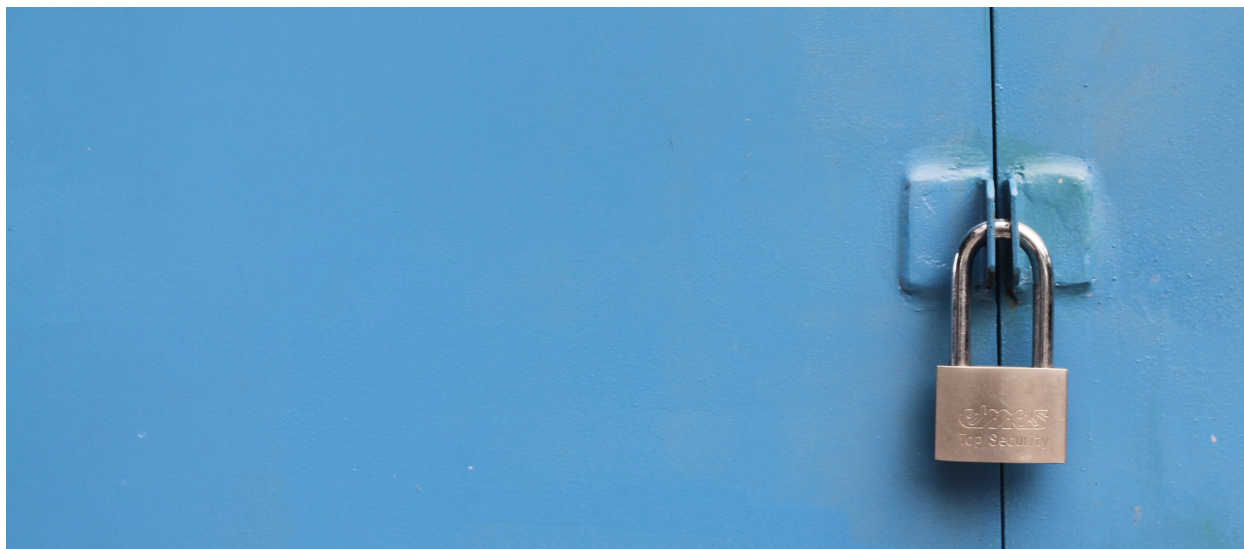
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The report on a review of primary care capitation remains under wraps [Image: Muhammad Zaqy Al Fattah on Unsplash]

Fiona Cassie reports the review of capitation funding appears to have got caught up in discussions about new arrangements for the broader primary and community care sector

Four months into the new health system, the report on a review of primary care capitation remains under wraps.

With no official response to the review paper, GPs who hoped it would prompt an increase to their funding are left up in the air.

Key points

- ◆ The capitation review report undertaken by the health reforms' former Transition Unit is yet to surface.
- ◆ Developing a replacement for the PHO Services Agreement appears to be under way without general practice involvement.
- ◆ Primary care providers and funders haven't met at a PSAAP group meeting since the 1 June rejection of the 3 per cent capitation uplift.

Also frustrating general practice is the work apparently under way on a new primary and community care sector funding agreement. General practice has had scant or no input so far.

The capitation report, produced by the health reforms' former Transition Unit, is understood to have gone some time ago to health minister Andrew Little, Te Whatu Ora and Te Aka Whai Ora, says Jeff Lowe, a member of the report's technical review group.

Dr Lowe, General Practice NZ chair and a Karori specialist GP, says the paper has yet to resurface. Technical group members and others in primary care were looking forward to feedback on the paper's findings: "We would love to see it resurface soon," he says.

Te Whatu Ora board chair Rob Campbell told a post-board meeting media briefing on 31 October that primary care funding was regularly discussed by the board, but no specific decision making paper on the capitation review report had yet been presented to it.

At the briefing, Te Whatu Ora chief executive Fepulea'i Margie Apa emphasised the review report was "inherited" from the Transition Unit. "And in Te Pae Tata Interim New Zealand Health Plan, we have committed to reviewing the funding model in [a] context of how we support localities spreading around the country," Ms Apa said.

Dr Lowe says the report is a technical paper on the capitation formula and the implications of making weighting adjustments for factors like age, ethnicity and rurality. "It makes no recommendations about [the] quantum of investment, that's a political decision".

Auckland specialist GP Daniel Calder, also a technical review group member, agrees and says the review also drew on cost-pressure data gathered in a survey carried out by Sapere.

New Zealand Doctor Rata Aotearoa has asked Te Whatu Ora to clarify what the agency plans to do with the review report and its findings, and queried what timeline and plan there was for consulting on funding models and finalising a replacement for the primary care funding agreement.

There was no response to those and other related funding queries at the time of our print deadline.

Te Whatu Ora's Early Actions programme includes developing a new "national primary and community contract head agreement", covering services like first contact (traditionally for the general practice enrolled patient), clinical pharmacy, vaccination, wellbeing and physiotherapy. It is understood the current PHO Services Agreement model is likely to be rolled over until 30 June 2024, when the localities model and new head agreement are expected to come into effect.

Dr Lowe says he doesn't know where the work on developing the new head agreement is at, or how the capitation review might feed into it. "I've really got no idea."

General Practice Owners Association chief executive Philip Grant says development of the new primary care head agreement, like the capitation review before it, was being done “behind closed doors” without contracted provider involvement.

Mr Grant says GenPro hopes to discuss that work when it meets Mr Little on 10 November, where it will also discuss a proposal for resolving pay parity for nurses.

Dr Calder, speaking as a specialist GP and East Coast Health PHO clinical director, says primary care has been underfunded for a long time and that impacts on the sector’s greater issue – workforce shortages.

“I think it would be good that there was a clear, strong signal of a funding uplift without too much delay.”

He says the pandemic saw general practices receive higher funding streams for COVID-19-related work. This highlighted New Zealand's underfunding of usual primary care compared with similar countries.

Mr Grant, who is also the Contracted Provider Caucus secretary on the PHO Services Agreement Amendment Protocol (PSAAP) group, says the last time contracted providers and funders formally met was 1 June, when general practice leaders rejected the 3 per cent capitation uplift for 2022/23.

The scheduled PSAAP meeting for 7 September was cancelled, as changes to the protocol to reflect Te Whatu Ora now being the funder were still under discussion.

Mr Grant says Te Whatu Ora has indicated it wants potentially to future-proof the protocol to cover the replacement primary care head agreement under development. The caucus has asked for more details and is to meet with Te Whatu Ora this month.

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