

Non-Health Zealand Health and Disability Workers

Influenza Reimbursement Portal
User Guide
April 2025

Introduction

Claims Portal

Health New Zealand | Te Whatu Ora (Health NZ) is accepting claims for non-Health New Zealand health and disability workers influenza vaccinations from 2 April 2024 to 11 October 2024 for up to \$40.25 including GST (\$35 excluding GST) per staff member. New claims after 30 September 2025 will not be considered for reimbursement, please make sure everything is completed prior to this date.

Reimbursement is available for non-Health New Zealand health and disability sector employees, self-employed lead maternity carers, and carers employed under individualised funding arrangements who satisfy all three of the following criteria:

- provide a health and/or disability service
- have direct patient/client contact
- are not eligible for a publicly funded influenza vaccine

The employer is required to register an account on the portal to then create a claim request. Included below are step-by-step instructions to registering an account and lodging a claim.

If you have any questions, email immunisation@tewhatuora.govt.nz

Notes before starting.

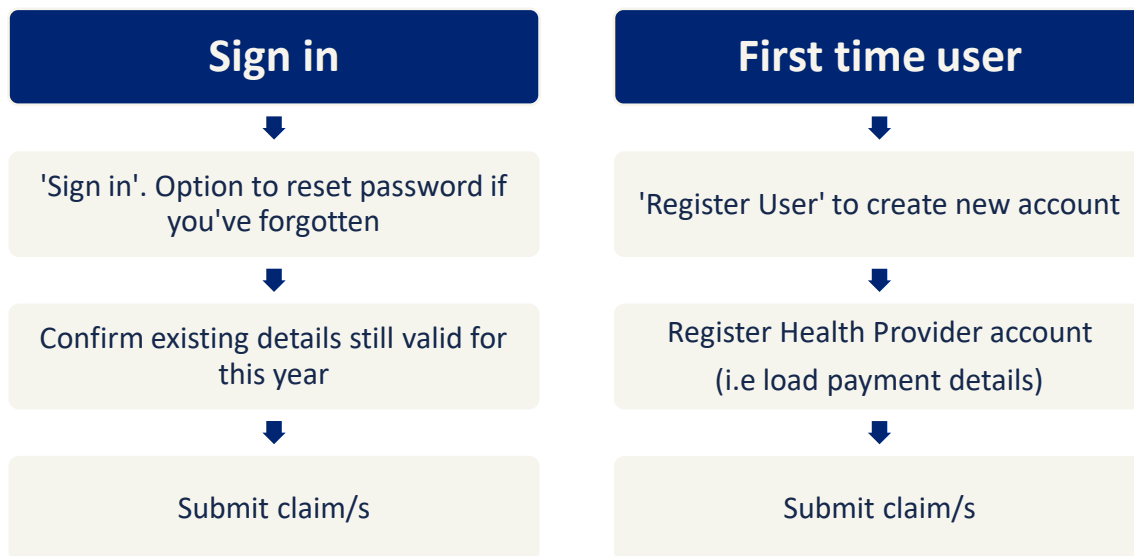
- **Claims can only be made by an employer on behalf of their employees.** Claims cannot be lodged from individual employees on behalf of themselves. **Self-employed workers** who meet the criteria for reimbursement can submit claims on behalf of themselves.
- **Please submit only one claim per employer** – for all your eligible staff. If you have multiple sites, you may either submit as one large claim, or each site can register an account and claim separately.
- Claims cannot be lodged by organisations on behalf of other providers.
- All available influenza vaccine brands in New Zealand (excluding the Pharmac-funded vaccine for eligible populations) are eligible for reimbursement when administered to non-Health New Zealand health and disability workers who are patient-facing and fit the criteria. The specific influenza vaccine brand is the choice of the employer.
- You will need a mobile phone for multi-factor authentication.
- You will not be able to edit your details after they have been entered into the system. Take your time, and ensure your information is entered correctly. Please email any requests for amendments to immunisation@tewhatuora.govt.nz

- **You must supply verification of bank account details in every claim submitted.** This can include a bank statement, deposit slip or a screenshot from online banking (containing the bank logo, account name and number).
- We aim to process reimbursements within two months from receipt of a completed valid claim.

Create a User Account

Entering User Details

To begin your registration, you will first be required to set up a User Account by entering your User Details. Once this account is established and verified, the user will be able to register and link their Health Provider/Employer profile, through which claims can be submitted.



Step 1

Enter <https://healthproviderrequests.powerappsportals.com/SignIn?ReturnUrl=%2F> into your browser. The following page should appear:

Please Register your User Details

Sign in

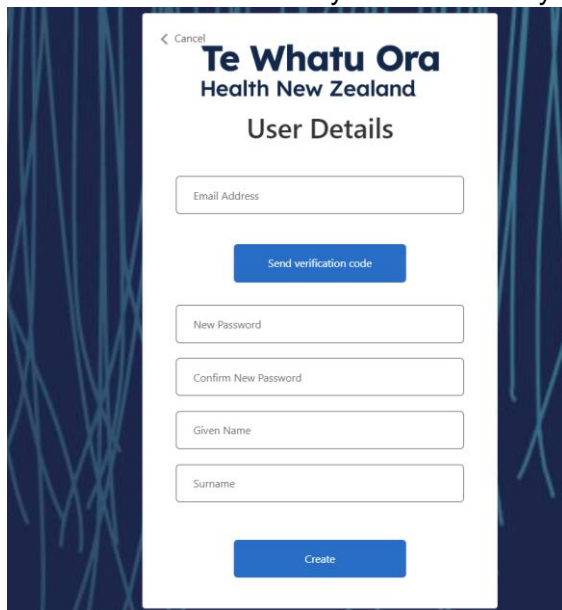
Register User

Step 2

Click on the **'Register User'** button to begin.

Step 3

Enter your email address and click **'send verification code'**. **Check your email inbox** - you will receive an email with your code shortly.



The screenshot shows a mobile-style registration form titled "Te Whatu Ora Health New Zealand User Details". At the top left is a "Cancel" link. The form contains the following fields and buttons:

- Email Address (text input)
- Send verification code (blue button)
- New Password (text input)
- Confirm New Password (text input)
- Given Name (text input)
- Surname (text input)
- Create (blue button)

Step 4

Copy and paste the code from your email and click **'Verify Code'**

User Details

Verification code has been sent to your inbox. Please copy it to the input box below.

influenzaimmunisation@health.govt.nz

370179

Verify code

Send new code

Note: If you try to fill in your details without verifying your account first you will encounter an error.

Step 5

Once verified, proceed to enter your password and given names, then press **'Create'**

Note: The password must be between 8 and 64 characters.

Your password must have **at least 3** of the following:

- lowercase letter
- uppercase letter
- number
- symbol

Step 6

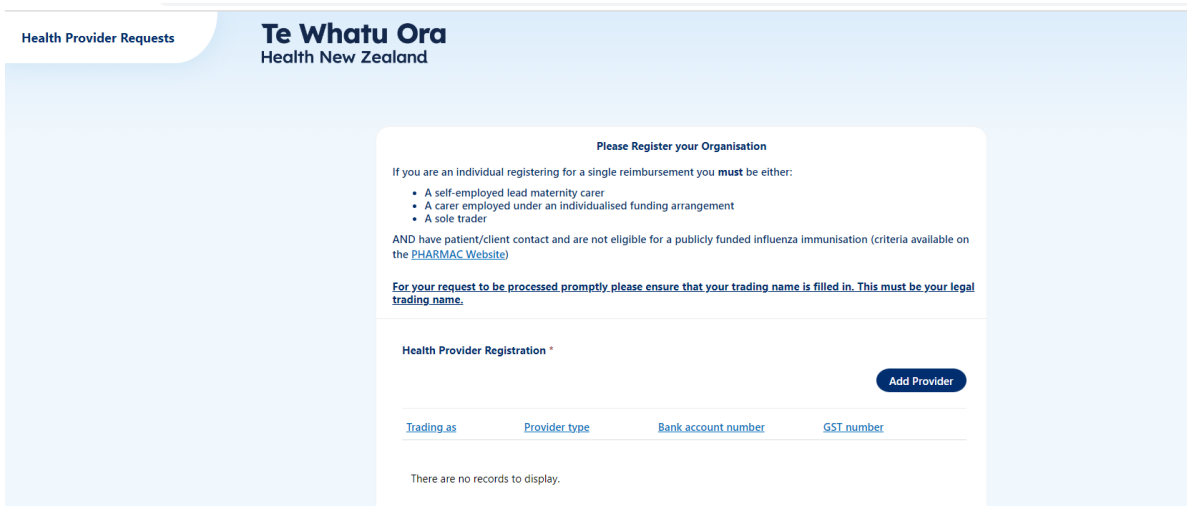
Multi-Factor authentication (MFA) is required to progress. Please make this a phone number that you will have continued access to as MFA will be required on all further sign ins.

Select the correct country code: NZ (+64). Enter your phone number that we can send a code via SMS or phone to authenticate you. Select either 'Send Code' to receive a text/SMS or 'Call Me'. You will then be asked to enter in your verification code.



Step 7

You will arrive at your home screen. This means you have successfully set up your user account. You can log out and return to this point later to register your provider using your sign in details and MFA.



Registering a Health Provider Account

Enter Employer Details

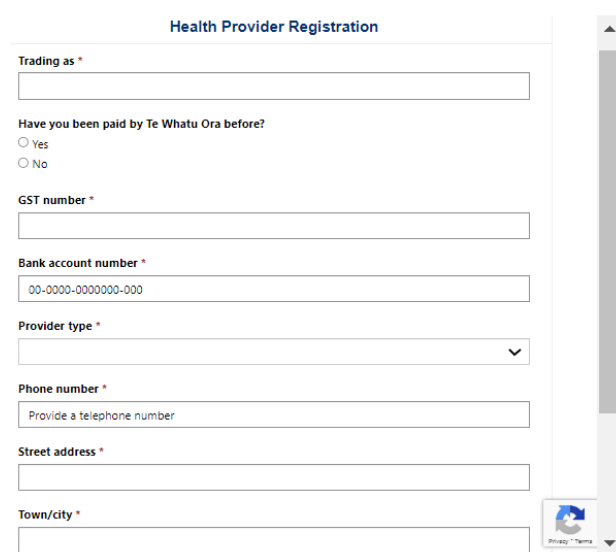
Now that you have created a user account, you can register the Health Provider/Employer who will make the request on behalf of their employees.

Step 1

Click on the 'Add Provider' button to prompt a pop-up to enter your business details.

Note: Take care in entering your details as **you will NOT be able to edit them later**. If you need to amend any details, please email immunisation@tewhatuora.govt.nz with the details of your amendment along with your business name and contact details.

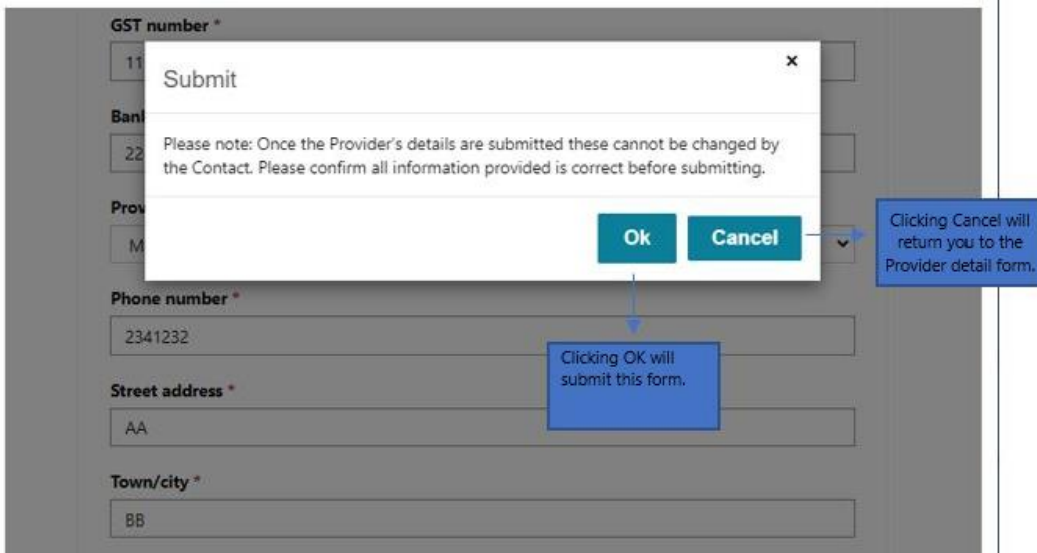
The boxes with red stars denote a compulsory field. Enter your business details and address. Under 'Trading Name', enter your legal trading name in order for your request to be processed promptly.



The screenshot shows a web form titled "Health Provider Registration". The form contains several fields, each with a red asterisk indicating it is compulsory. The fields are: "Trading as *", "Have you been paid by Te Whatu Ora before?" (with radio buttons for "Yes" and "No"), "GST number *", "Bank account number *" (with a pre-filled number "00-0000-00000000-000"), "Provider type *" (a dropdown menu), "Phone number *" (with a placeholder "Provide a telephone number"), "Street address *", and "Town/city *". A vertical scrollbar is visible on the right side of the form, and a "Privacy Terms" link is located at the bottom right.

Step 2

Confirm your organisations details and press 'Submit'. You will be prompted to confirm your details. Please click 'Ok' to verify and submit the form (there can be a small delay while this loads). Or click 'cancel' to return to the form and edit your details.



Step 3

Click **Ok**. Your business details will be submitted and will appear as below:

Health Provider Registration

Add Provider

Trading as ↑	Main Phone	Address 1: City	Primary Contact	Email (Primary Contact)
Ishbel's test site		Wellington	Ishbel Offer	ishbel.offer@tewhatuora.govt.nz

For further assistance please email immunisation@tewhatuora.govt.nz

Next

Step 4

Click on the 'Next' button to proceed to enter a staff Influenza reimbursement claim. You will arrive at the following dashboard. This page has two functions:

1. Serves as the site to submit your staff Influenza claims
2. Provides an overview of the claims that you have submitted.

Please lodge your claim using the Add Request button.

Note:The claim will create a tax invoice on your behalf. When prompted please upload your bank verification details

Request Details

Add Request

<u>Request Number</u>	<u>Number of Vaccinations</u>	<u>Invoice Date</u>	<u>Invoice Number</u>	<u>Customer Total Cost of Claim</u>	
HPR-0000003292	2	02/04/2024	INV-003	\$70.00	▼
HPR-0000003309	0	15/04/2024	TEST INVOICE	\$0.00	▼
HPR-0000004355	10	01/04/2025	CHECKFLU25	\$400.00	▼

For further assistance please email immunisation@tewhatauora.govt.nz

Previous

Log out

Submitting a Claim

Step 1

Click on the 'Add Request' button to prompt a pop-up to enter your Influenza claim details.

Fill out the required fields with your claim details. Note the 'Cost per Vaccine' field will auto-populate based on the mandatory details. If you attempt to claim more than \$40.25 including GST (\$35 excluding GST) per vaccine it will trigger an error message.

Entering your claim details will automatically generate an invoice that will be emailed to you after confirmation of your claim details.

This screenshot shows a web form for entering claim details. At the top, there are two bullet points: 'Please ensure you are claiming for the cost of each vaccination to you, with a maximum of \$40.25 including GST (\$35 excluding GST) per person/employee reimbursed' and 'You must supply verification of bank account details. This can include a bank statement, deposit slip or a screenshot from online banking (containing the bank logo, account name and number)'. Below this are several input fields: 'Invoice date *' with a date picker showing 'DD/MM/YYYY', 'Invoice number *', 'Number of vaccinations *', and 'Total cost of claim *'. There are also radio buttons for 'Cost Includes GST *' with options 'Yes' and 'No', and a label 'Cost per Vaccine (incl GST)'. A 'Privacy - Terms' link is visible in the bottom right corner.

You will also be asked to submit evidence of your nominated bank details. This is required for every claim and must be in one of the accepted formats.

This screenshot shows a form section for bank account verification. It starts with a checkbox: 'I confirm I will maintain, in line with the Privacy Act 2020, a record of the individuals for whom I am making this reimbursement claim against, and that I can provide this to Te Whatu Ora on request. *'. Below this, it asks to 'Please attach evidence of your nominated bank account by supplying **ONE** of the following:'. A list of options is provided: 'Bank verified deposit slip (needs to be a printed copy)', 'Scan of a statement header', and 'Bank letter'. An 'OR' section follows, asking for 'A screen shot from your online banking account showing:' with options: 'The bank name and logo', 'The account holders name', and 'The account number.'. A file upload section shows a 'Choose File' button and 'No file chosen'. A 'Privacy - Terms' link is in the bottom right corner.

Step 2

Click **'Submit'** to complete the request. You will be prompted to confirm your details. Please click **'Ok'** to verify and submit the form (there can be a small delay while this loads). Or click **'cancel'** to return to the form and edit your details. You will then be returned to the overview dashboard view which should now include your newly submitted claim.

You will receive a confirmation email after you have submitted your claim with an automatically generated invoice based on your claim details. Please review this invoice and email us at immunisation@tewhatuora.govt.nz if there are any incorrect details.

Please note we may contact you if we need any further information to accept your claim. We may ask for further proof that eligibility for this reimbursement scheme has been met.

Thank you, you have submitted your staff influenza vaccination reimbursement claim.

We will aim to process your claim within two months from receipt of a valid claim. We will email you if we require more information.

