

Information for Private Radiology Providers

Community Referred Radiology (CRR) Programme

The Community Referred Radiology (CRR) Service provides diagnostic imaging services funded by Health New Zealand for individuals referred by community-based practitioners. You may be aware, the National Work Programme for the Government's \$30 million annual investment into the provision of a consistent community referred radiology programme is well underway.

The intent of the programme is to provide better access to diagnostic radiology. Improved access to timely and effective radiology is critical to providing high quality care, reducing waiting times for treatment and improving outcomes. Timely imaging also plays a key role in detecting cancers sooner.

National Primary Care Access Criteria for CRR to be applied from 1st September 2025

To ensure patients of similar clinical need can access imaging in similar timeframes across the country, we have standardised clinical criteria for primary care to directly access radiology. **Available here** [National Community Referral Criteria for Imaging » Radiology](#)

The intent is to ensure consistent clinically appropriate access and effective use of resources. The new *National Primary Care Referral Criteria for Imaging* allows General Practitioners, Urgent Care Doctors, and primary care Nurse Practitioners to refer patients directly for diagnostic ultrasound, CT or x-ray without a hospital specialist assessment or emergency department referral from September 2025.

Imaging references across the Community HealthPathways are currently being updated to align these criteria nationwide. Diagnostic X-ray, ultrasound and CT imaging referral criteria for both adults and children are specified in the new criteria for the following exams:

- Adult CT: Chest Abdomen and Pelvis, Chest, Colonography (or colonoscopy), Head, Intravenous Urogram/ Renal, KUB, Sinus
- Adult Ultrasound: Abdomen, Carotid, DVT, Guided FNA, Musculoskeletal incl. shoulder, Pelvis, Renal, Scrotum, Soft Tissue Lump, Neck/Thyroid
- Adult X-ray: Abdomen, Ankle, Foot, Chest, Elbow, Knee, Pelvis, Hip, Shoulder, Spine, Wrist, Hand
- Paediatric CT: Head
- Paediatric Ultrasound: Abdomen, Hip, Neck / Thyroid, Pelvis, Renal, Scrotum / Testes, Soft Tissue, Spine

- Paediatric X-ray: Abdomen, Chest, Elbow, Feet, Knee, Pelvis / Hip, Shoulder, Spine, Wrist / Hands.

Phased Implementation

To allow local pathways to adjust and progress CRR hub establishment, Health NZ will publish new community referred radiology criteria for:

- X-ray on 1 September 2025 and
- Ultrasound and CT Criteria on 30 September 2025

Regional CRR hubs

Health NZ will establish four regional referral hubs to manage effective use of resources and timely access to radiology services, with hubs fully operationalised over the next year.

Benefits of the national criteria for consistent access to radiology services

We recognise the new national criteria will mean a change to access for many referring primary care practitioners. The aim of the programme is to address the inconsistency of access across regions, so that patients can have fair, equal and timely access to radiology services across the country. There is dedicated resource to support change management, improved data capability, digital interfacing and clinical leadership as well as funding for any additional demand.

How were the criteria developed?

The *National Primary Care Referral Criteria for Imaging* have been developed based on existing evidence-based guidelines relevant to the Health NZ context. Where evidence-based guidelines were lacking, criteria are based on specialist advice and Health NZ-funded resource availability. The new criteria been agreed through consultation with general practitioners, hospital specialists, and radiologists and endorsed by Health NZ's Radiology National Clinical Network and the National Clinical Governance Group (NCGG).

What is the anticipated impact of the changes

The changes will help patients receive more of their care in primary care with fewer visits to hospital and specialist services. Patients, referrers and providers of radiology services will all benefit from CRR access being consistent no matter where they are in NZ.

Given the significant variation in current access across the country, demand impact is nuanced at a local level depending on existing arrangements. The new criteria will likely generate a mixture of new demand as well as a shift in existing demand from hospital to community referred. It will also enable more care to be provided in the community where community-initiated imaging negates the need for an FSA.

What is the role of Private Radiology Providers?

Private radiology will continue to play an important part in community radiology. This may include in some districts imaging that has already been triaged and prioritised and “outsourced”.

We are looking for a partnership with private radiology with the schemes where primary care refers directly to private to ensure appropriate use of radiology in line with the new referral criteria.

Contracts with providers are being updated to reflect the role of providers in only accepting referrals from primary care that align with the national criteria. This will help to support appropriate access and high-quality referrals.

What is not in scope?

Imaging covered by ACC or other funding streams, including under the Primary Maternity Services Notice (2021), is outside the scope of these criteria.

Imaging that is part of screening or surveillance programmes is outside the scope of these criteria.

Subsequent phases will consider direct access for additional modalities and other primary healthcare practitioners for some indications.

Other Work in Progress

In addition to moving to consistent clinically appropriate access for CRR, the investment includes moving toward a single national CRR contract, removing financial and other access barriers for patients. Future procurement of private radiology services will ensure consistent pricing, data collation and reporting arrangements. Effectively there will be a single wait list for all hospital and community referred radiology.

It is planned that all current agreements with third parties and PHOs will be brought in-house from 2026 and that these arrangements will be renewed and included in the Hospital and Specialist Services (HSS) Panel Agreements. Health NZ will begin discussions with existing providers by December 2025.

Key contacts

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