General Practice Information

Online 24/7 Telemedicine Service Launch

Health NZ | Te Whatu Ora is launching an online 24/7 telemedicine service to help improve access to primary medical care for people who are not enrolled, can't get a timely appointment, or need support after hours. Fees will be subsidised for children, young people and people who hold a Community Services Card.

This service complements the Urgent and After-hours Framework by providing 24/7 access to video consultations with registered New Zealand GPs, Nurse Practitioners, and Emergency Medicine doctors. Like other urgent and after-hours services, this is designed to complement, not replace traditional general practice.

The service is one of a range of new investments in primary care, including GP funding uplifts, urgent and after-hours care investments, funding for more nurse practitioners and for the international doctors' pathway into primary care announced earlier this year.

The service will be reviewed after six months to assess its impact, uptake, and alignment with broader primary care goals.

This service is being introduced to improve access to primary medical care

- The service is intended to provide better access immediately for all New Zealanders and to reduce pressure on general practice, urgent care, and emergency departments.
- One in four adults (25.7%) and one in five children (18.5%)¹ have reported that 'time taken to get an appointment was too long' as the reason they didn't see a GP when they needed to.
- 45% of GP clinics are closed to new enrolments or have restrictions in place.
- Over 1 million New Zealanders each year either can't get a GP appointment when they need one or are not enrolled.

¹ New Zealand Health Survey 2023/24

It will also bring quality standards into this emerging private industry

• An estimated 200,000 digital GP consults already happen each year. This service introduces nationally consistent standards for approved providers to meet demand with a national, consistent, and safe approach.

Key features

- People are encouraged to seek care from their usual GP first where available.
- 24/7 video consultations available with NZ registered doctors and nurse practitioners.
- Consult notes will be shared with a patient's usual GP to support continuity of care.
- If a telemedicine provider orders lab tests or other diagnostics, they are required to follow up results directly with the patient – not to hand off to the enrolled GP for follow up.
- The approved providers will have access to existing Shared Electronic Health Records and more comprehensive access is being phased in over time.
- The eight approved online providers funded through this programme are:
 - Bettr Online
 - CareHQ
 - Emergency Consult
 - MedOnline
 - Pocket Lab
 - Practice Plus
 - Tend
 - The Doctors Online.

Fees for these services

- Fees are subsidised for children under 14, young people 14-17, and people who hold a Community Services Card (CSC).
- Maximum fees for CSC holders have been set 50% higher than the maximum GP clinic fees allowable under the PHO agreement to discourage people from using the online service if their regular GP is available, and to encourage enrolment with a GP.

Free visits for under 14s have been maintained, but only for dependents of people with a community services card. Most parents do not have a card and will have to pay \$30 (\$40 overnight and on public holidays).

Age	CSC card holder	CSC card holder overnight/public holidays	Non-CSC card holder	Non-CSC overnight/public holidays
Under 14	Free	Free	Up to \$30	Up to \$40
14 to 17 years old	Up to \$30	Up to \$40	Up to \$55	Up to \$65
18 or older	Up to \$33	Up to \$43	No cap – provider determined	

• The fees for this service are outlined below. Fees will be reviewed as necessary to manage demand.

Financial implications for GP providers

- We want to support you to be available for your regular patients or new enrolees.
- The service is expected to have a positive impact on GP financials:
 - There are no plans for 'clawback' of subsidies from GP capitation as part of this launch
 - If a provider has difficulty meeting demand for appointments and runs a long waiting time for appointments, then the service may draw away some demand allowing a reduced waiting time.
 - Some providers may be freed up to open their books to enrol more people and obtain more capitation income without additional costs
- Simplified example showing positive impact:
 - A practice has 200 enrolled children aged 0-4. The children attend on average 4 times a year, and the provider receives \$500 per child per year in capitation.
 - The children generate 800 visits to the GP, these are free to the patient, so the total GP revenue for the year for this cohort is \$100,000 (\$500 times 200 children).

- The cost of servicing these visits is likely to be around \$110 per visit (doctor time plus nurse, reception, facilities, etc). So the total cost to the provider is \$88,000. Profit is \$12,000.
- If 5% of these visits moved to the online service, then the cost to the GP drops by \$4,400 and capitation revenue stays the same, so total profit increases by \$4,400.
- Telemedicine Providers are required to do their own follow up of any tests, hence we expect clinical administration work to be minor – GP providers should contact Health NZ if they find that approved telemedicine providers are passing follow up on to them.
- Some non-cardholding adults may choose to use the telemedicine service for reasons of convenience – in the same way they use in-person urgent care clinics. This could result in GP providers losing some copayment income (but not losing capitation). However, note that:
 - Health NZ is not subsiding non community services cardholding adults. They are paying full price and choosing a private service.
 - There is no clawback on GP capitation.

What it means for your practice

- Patients will always be encouraged to enrol with a general practice and maintain ongoing care with their usual team.
- You may see patients who have used this service for an urgent issue or when there wasn't availability with your practice. The online provider will send timely consult summaries to your practice.
- You may wish to have a preferred telemedicine provider that your receptionist can refer people to when you have limited appointment availability.

What about the workforce implications?

• We have an overall shortage of GPs and Nurse Practitioners, that is why the Government is investing in training additional doctors and nurses in primary care.

- The shortage is not evenly distributed; the digital service allows demand for appointments in one area to be matched to workforce in a different area – smoothing out demand and supply.
- The digital service also allows people who want to work part time from home or NZ doctors who are overseas to work the hours that suit them. This can bring additional clinicians into the workforce.

Find out more at info.health.nz/onlineGP