

National Collections Annual Maintenance Project 2023

Sector Consultation Business Requirements NCAMP 2023

Version	1.0	
Date	19/10/2022	
Owner	Te Whatu Ora – Health New	
	Zealand	
Status	Final	

1 Table of Contents

	_		_				
		l Collections Annual Maintenance Project 2023	1				
S		Consultation Business Requirements NCAMP 2023	1 2				
1		Table of Contents					
2	Int	roduction	3				
	2.1	Project Background: National Collections Annual Maintenance	3				
	2.2	NCAMP Goals and Objectives	3				
3	Ba	ckground	3				
	3.1	Assumptions	3				
	3.2	Business Rules	4				
	3.3	Relevant Dates	4				
4	ICI	D-10-AM/ACHI/ACS Upgrade to Twelfth Edition	5				
	4.1	Background	5				
	4.2	National Minimum Dataset (NMDS)	5				
	4.3	National Patient Flow (NPF)	5				
	4.4	Programme for the Integration of Mental Health Data (PRIMHD)	6				
	4.5	National Booking Reporting System (NBRS)	6				
5	Na	tional Minimum Dataset (NMDS)	6				
	5.1	AR-DRG Upgrade from v7.0 to v10.0	6				
	5.2	Annual WIESNZ and Cost Weight Changes for 2023/24	7				
6	Na	tional Non-Admitted Patient Collection (NNPAC)	7				
	6.1	Collecting procedures as part of NNPAC minor procedure Purchase Unit Codes	7				
	6.2	National Bowel Screening Programme Events in NNPAC	9				
7	Pro	ogramme for the Integration of Mental Health Data (PRIMHD)	10				
	7.1	Mandatory Family Whānau Involvement reporting	10				
	7.2	New and retiring PRIMHD Activity Type Codes	10				
	7.3	Health of the Nation Outcome Scales for Infants (HoNOSI)	11				
8	Ad	visories	14				
	8.1	National Health Index (NHI)	14				
	8.1	.1 Advisory Change to National Health Index (NHI) Numbering System	14				
	8.1	.2 Advisory Ethnicity Protocols	14				
	8.1	.3 Advisory Gender Code - Another Gender	15				
	8.1	.4 Advisory Iwi Affiliation Protocols	15				
9	Ap	pendix A – NNPAC PUC Minor Procedures Reference Sets	17				
1	-	pendix B – Definitions	24				
1	1 Ap	pendix C – Document Control	26				

2 Introduction

This document provides a vehicle for the discussion of the requests for changes to the National Collections and documents the requirements for the 2023 National Collections Annual Maintenance Project (NCAMP).

All feedback is welcomed and should be directed to ncamp@health.govt.nz

2.1 Project Background: National Collections Annual Maintenance

NCAMP is run annually to perform maintenance on the Te Whatu Ora – Health New Zealand National Collections and to ensure it meets its ongoing statutory obligations. The project will deliver changes to the following National Collections/Systems:

- National Minimum Data Set (NMDS)
- National Non-admitted Patient Collection (NNPAC)
- National Booking Reporting System (NBRS)
- Programme for the Integration of Mental Health Data (PRIMHD)
- New Zealand Cancer Registry (NZCR) (NCR internal process only)
- Mortality System (MORT) (NCR internal process only)
- Private Hospitals (NCR internal process only)

Some NCAMP changes require Districts, Non-Governmental Organisations (NGOs) and private hospitals reporting directly to national collections to implement changes to their Patient Administration Systems (PAS) (sometimes also referred to as Patient Management Systems (PMS).

2.2 NCAMP Goals and Objectives

- To improve data quality to enable National Collections and Reporting (NCR) and Districts to accurately report on the provision and funding of services or treatment.
- To ensure data quality and integrity is maintained to avoid substantial rework by National Collections and Reporting, Districts and NGOs.
- To improve National Collections and Reporting and Districts ability to provide timely, accurate and comparative information. This will assist them to complete functions and meet objectives set out in the Pae Ora (Healthy Futures) Act 2022.
- To enable National Collections and Reporting to meet its obligations of providing high quality data to the Districts, NGOs and other providers, particularly in relation to data processing and reporting, manual data entry, and application of data collection business rules.

3 Background

3.1 Assumptions

BA1. Maintenance items relating to the National Collections that do not impact Districts or NGO processes or systems may potentially be delivered in maintenance releases during the year.

Health New Zealand

BA2. Major increases in capability to the National Collections will be delivered through projects endorsed in the annual expenditure and are subject to business case approval.

3.2 Business Rules

Where relevant, for clarity or additional detail, the business rules will be listed individually with each change. Further detail may be provided in the sector notifications. All rules and requirements etc. are based on the national collections and systems and care should be taken when analysing these taking into account local systems configuration.

3.3 Relevant Dates

- The cut-off date for requests for NCAMP 2023 was 1 August 2022
- The proposed scope for NCAMP 2023 was finalised on 16 September 2022
- Formal change notices will be issued in December after Sector feedback is considered.

4 ICD-10-AM/ACHI/ACS Upgrade to Twelfth Edition

4.1 Background

Since 1 July 2019 District hospitals have been using the Eleventh Edition of *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM), the *Australian Classification of Health Interventions* (ACHI) and the *Australian Coding Standards* (ACS) classification systems to classify diseases, injuries, symptoms, external causes, and procedures on all hospital discharge records.

The same systems have been used by NCR to code causes of death in the Mortality Collection (MORT), private hospital discharge records, and site of cancer in the New Zealand Cancer Registry (NZCR).

The upgrade to ICD-10-AM/ACHI/ACS Twelfth Edition supports the Minister's priorities of chronic diseases, child and youth, primary health and the health of older people by providing codes that are more relevant to current medical and surgical practice and which allow for a greater depth and breadth of clinical data analysis.

Clinical coding is critical for the purposes of collating meaningful statistical health data. At all levels of health care provision, it is important to have accurate data that can be standardised through coding in such a way that clinicians, strategists, researchers, planners, funders and administrators can use the data effectively to gain more accurate insights into the health and wellness needs of all New Zealanders.

ICD-10-AM/ACHI/ACS Twelfth Edition was released by the Commonwealth of Australia for implementation on 1 July 2022. This release included ICD-0-3.2 morphology and all ICD-10 classification changes ratified by the World Health Organization (WHO) up to and including those implemented in 2022.

All hospitals will be required to upgrade to ICD-10-AM/ACHI/ACS Twelfth Edition on 1 July 2023. The complete ICD-10-AM/ACHI Twelfth Edition code table including edits, mapping tables (forward and back) and NBRS preferred codes will be provided to organisations that require these to update patient administration systems (PAS).

To satisfy the licensing agreement with the Commonwealth of Australia, all organisations receiving ICD-10-AM/ACHI Twelfth Edition code and mapping tables will be required to acknowledge the confidentiality of the information. In the case of vendors and non-government organisations, as per the last upgrade, a Non-Disclosure Agreement is required to be signed.

4.2 National Minimum Dataset (NMDS)

Description	From
IDECTINATION	1 10111

From 1 July 2023, Heath Events with an Event End date on or after 1 July 2023 must be submitted using ICD-10-AM/ACHI Twelfth Edition. Where no Event End date exists, the Event Start date is used e.g., for mental health inpatient events (Event type IM).

4.3 National Patient Flow (NPF)

Description

NPF records with a Referral Received Date after 1 July 2023 must be submitted using ICD-10-AM/ACHI Twelfth Edition where ICD-10-AM/ACHI is the clinical coding system in use with one exclusion:

- the Referral Diagnosis data set may be submitted with an earlier ICD-10-AM/ACHI Edition if the diagnosis was made prior to 1 July 2023.

Health New Zealand

The clinical coding system used should be consistent throughout the service sequence for intended procedure.

4.4 Programme for the Integration of Mental Health Data (PRIMHD)

Description ICD-10-AM is used to describe the clinical diagnosis assigned to a patient by a healthcare organisation's team. From 1 July 2023 classification records reported to PRIMHD should be submitted using ICD-10-AM Twelfth Edition. DSM-IV continues to remain a valid clinical code system. Only hospitals are required to submit diagnoses to PRIMHD.

4.5 National Booking Reporting System (NBRS)

Description	NBRS uses ACHI codes to classify the procedure to be performed.
	Booking events submitted into NBRS on or after 1 July 2023 should use ACHI Twelfth Edition, where the CPAC assessment date is on or after 1 July 2023.
	Only ACHI Twelfth Edition will be valid where the booking status is on or after 1 July 2023, and the booking statuses where the clinical code is mandatory.

5 National Minimum Dataset (NMDS)

5.1 AR-DRG Upgrade from v7.0 to v10.0

The Australian Refined Diagnosis Related Groups (AR-DRG) is a patient classification system that provides a clinically meaningful way of relating the types of patients treated in a hospital to the resources required by the hospital.

The National Minimum Dataset (NMDS) uses AR-DRG grouping software as part of the load process into the transactional system. The AR-DRG software creates and populates several fields from the NMDS load data for each record. Assigning a DRG to a health event is a method whereby episodes of care are categorised by both clinical homogeneity and similar hospital resource use. A DRG is allocated to every event record loaded into the NMDS. This allocation is based on several variables relating to the event including diagnoses and procedures that are reported using the clinical coding classification ICD-10-AM/ACHI/ACS.

The 2021 National Costing Collection Pricing Programme (NCCPP) work year should have been a major change year involving the upgrade to the new DRG version, AR-DRG v10. The upgrade to AR-DRG v10 did not occur in FY 2022/23 due to two main reasons:

- 1. many hospitals did not upgrade to the ICD-10-AM/ACHI/ACS Eleventh Edition classification 1 July 2019, which meant the 2019/20 NMDS data was coded in both ICD-10-AM/ACHI Eighth and Eleventh Editions.
- 2. there was a mismatch between the overall costs and expected volumes that arose from COVID-19 lockdown in the fourth quarter of 2019/20. Therefore, the Casemix and Non-Casemix Groups recommendation was not to use the 2019/20 event level cost data.

Health New Zealand

Due to these reasons the decision was made not to upgrade to AR-DRG v10.0 1 July 2022, and to wait for a full year of NMDS data coded in ICD-10-AM/ACHI/ACS Eleventh Edition and cost data.

The 2022 NCCPP work year included the upgrade to AR-DRG v10.0 with a full set of new cost weights (WIESNZ23). AR-DRG v10.0 accepts ICD-10-AM/ACHI Eleventh Edition codes.

Due to the delay in upgrading to AR-DRG v10.0 and the impending upgrade to ICD-10-AM/ACHI/ACS Twelfth Edition, events coded in ICD-10-AM/ACHI Twelfth Edition will have their codes back-mapped to ICD-10-AM/ACHI Eleventh Edition which are then used to derive AR-DRG v10.0.

Please note that the AR-DRG v10.0 upgrade is mandatory for National Collections and Reporting but is optional for hospitals. Where hospitals have their own (local) DRG allocation systems these should be updated.

Where hospitals import the NMDS return cost weight file (.ndw) into their PAS they will need to manage the new DRG version and associated codes.

A new derived NMDS field (ECCS) will be implemented in the warehouse and transactional systems, and the cost weight transactional (WT) record return file (.ndw)

Field Name	Size	Data Type	Format	M/O	Notes
ECCS	5	Char	NN.NN	М	An Episode Clinical Complexity Score (ECCS) is an output from the grouper software and is a value between 0 and 32 with decimals of .5 e.g., 21.5 These scores quantify relative levels of resource ultilisation within each ADRG and are used to split ADRGs into DRGs based on resource homogeneity.

5.2 Annual WIESNZ and Cost Weight Changes for 2023/24

The New Zealand Casemix Framework for Publicly Funded Hospitals (WIESNZ) is a mandatory update for NCAMP each year. The requirements for the Weighted Inlier Equivalent Separation (WIESNZ) and cost weight changes are sourced from the national Cost Weights Working Group as part of the annual National Costing Collection Pricing Programme (NCCPP). WIESNZ is the methodology used to calculate the cost weight value for each event based on the assigned AR-DRG and New Zealand costs, and the assignment of purchase units. The NCCPP this year included the development of WIESNZ23 with AR-DRG v10.

The 2023/24 New Zealand Casemix Framework for Publicly Funded Hospitals (WIESNZ23) document is expected to be available on the NCAMP website in December 2022.

6 National Non-Admitted Patient Collection (NNPAC)

6.1 Collecting procedures as part of NNPAC minor procedure Purchase Unit Codes

Description	Collecting procedures as part of NNPAC minor procedure Purchase Unit Codes	
	Background	

Health New Zealand

Hospitals are encouraged to do more same day surgery in an outpatient environment, which is beneficial for the patient and more efficient for the hospital, however it means that the clinical information about the procedure performed on a healthcare user is not captured when reporting to NNPAC. Collecting clinical information for five minor procedure purchase units will enable the planned care team and hospitals to understand trends, where delivery models have shifted, and accurately price and fund events.

It is not intended for hospitals to change their current reporting for purchase unit codes (PUCs) that are being reported for the specified procedures performed.

If implementing the procedure reporting for the five purchase unit codes changes what purchase unit code is currently reported for specified procedures please contact the planned care team at the Ministry of Health to discuss this with them.

The five PUCs that can have procedures reported against them are:

- 1. S00008 Minor operations
- 2. S25006 ENT minor operations
- 3. S30008 Gynaecology minor procedure high cost
- 4. S40008 Eye procedures
- 5. S60007 Plastic surgery minor procedures

Impact

NNPAC data users are currently unable to identify the procedures that are performed in an outpatient environment for these five generic minor procedure purchase unit codes.

The planned care team do not have a record of the procedures that are being delivered with planned care funding and the funding team is unable to set procedure costs accurately.

Solution

Reporting the procedure performed for the five purchase units will reduce the number of new purchase units required for specific procedures and will allow more accurate costing and counting of the procedures e.g., when NNPAC data is linked to hospital costing data.

The procedures for the five purchase unit codes will be reported using SNOMED CT concept IDs.

The draft procedure reference sets listing the SNOMED CT procedure concepts for each of the five purchase unit codes are provided in Appendix A.

Hospitals will be able to report SNOMED CT procedure concepts using NNPAC file layout v7.0. Minor updates to validation rules are required before this can occur.

	iajout intermiter apacito to ramacitor raiso and required before time can become
#	
BR1.	Add validation rules and error messages for the five purchase unit codes
BR2.	Update validation rules to enable procedures only to be reported
BR3.	All hospitals must move to using file layout version 7.0 from 1 July 2023
BR4.	Retire file layout version 6.0

6.2 National Bowel Screening Programme Events in NNPAC

Description	National Bowel Screening Programme Events in NNPAC
	Background The National Bowel Screening Programme (NBSP) was launched in 2017. A screening colonoscopy or computerised tomography colonography (CTC) is provided for eligible people who have a positive faecal immunochemical test (FIT) as part of the National Bowel Screening Programme. Included in the service delivery is a phone pre-assessment, undertaking the diagnostic procedure, histology and notification of any follow up required.
	Screening colonoscopy or computerised tomography colonography (CT colonoscopy) are generally performed under three hours and should be reported to NNPAC.
	Impact Some hospitals are reporting NBSP events to the NMDS when the total duration of the event is less than three hours. This means there is bowel screening data in both NNPAC and NMDS, which is incorrect.
	To improve data quality, the solution is for all NBSP events to be reported to NNPAC only and for hospitals to end reporting NBSP events to the NMDS.
	National Bowel Screening Programme event records should be reported with the purchaser code 33 (MOH Screening pilot or programme), funding agency code 1236 (Ministry of Health) and purchase unit code MS02007 Colonoscopy - Any health specialty.
	Reporting events Where a patient has a screening colonoscopy performed under NBSP and also has polyps removed (polypectomy) at time of screening, the polypectomy is included as part of the screening event and reported to NNPAC with the purchaser code 33.
	However, a subsequent admission for a colonoscopy as a result of findings during the NBSP screening colonoscopy are to have purchaser code 35 DHB-funded purchaser assigned.
	Where a NBSP patient requires admission as an inpatient directly following the screening colonoscopy procedure the event end type code reported for the NNPAC event must be DF (Discharge due to change in funding). The inpatient admission event should be reported with purchaser code 35 (DHB funded).
	Note: Descriptions and names still refer to Ministry of Health and DHBs, as the descriptions/names have not been updated in tables for the national collections.
#	
BR1.	Add a validation rule in NMDS to reject event records reported with purchaser code PHS 33, funding agency code 1236 and Purchase Unit Code MS02007 Colonoscopy - Any health specialty

7 Programme for the Integration of Mental Health Data (PRIMHD)

7.1 Mandatory Family Whānau Involvement reporting

Background Descriptio NCAMP 2021 included a change that created a new data element within the Activity (AT) Record Code Set to indicate Family/Whānau involvement for community AT records. A Yes/No flag indicates if family/whānau were involved in the activity. The indicator enables a comprehensive record of family/whānau involvement. It simplifies the process of collecting the data and enables the retirement of some existing activity type codes. Refer to the new activity type codes. From 1 July 2023, it is a requirement that this new data element has been implemented. The element will be mandatory, and referrals submitted with activity records without the family/whānau involvement flag will be rejected. Family/Whānau Involvement A code to identify if there was family/whānau involvement with the service user at an activity. See table below: Description Code Valid Code Valid Code Comment from To Yes. 01-07-2023 30-06-2030 Family / Whānau involved 1 Client with family/ whānau Family / Whānau No. 01-07-2023 30-06-2030 not involved 2 Client only # PRIMHD File Specification Section 5.4.5 - AT Record Processing, Error and Warning BR1. Messages RM-P52-28 will have an end date of 30 June 2023: RM-P52-Warning Warning -A Family/whanau Involvement value has not 28 been provided for this activity record. Missing Data PRIMHD File Specification Section 5.4.5 - AT Record Processing, Error and Warning BR2. Messages RM-P52-30 will be effective from 1 July 2023: RM-P52-Error The mandatory data element Family Whanau Error – 30 Missing Involvement has not been supplied in the AT Mandatory record. Note: Effective 1 July 2023 Data

7.2 New and retiring PRIMHD Activity Type Codes

Description	New Activity Codes		
	Background		

	Family/whānau Involvement can occur at any time during the patient journey and measuring the extent and context of these interactions is a key requirement. The availability of this information will support improvement, development and promotion of care and treatment services that engage family/whānau while improving service accountability. Mental health activity is reported to PRIMHD via Activity Record (AT) codes. Currently there are different codes to record if family or whānau are present or not present. Impact Due to the addition of the family/whānau involvement indicator, two current Activity Type codes are no longer valid as they currently ask whether family/whānau are present. These two Activity Type codes are being retired and are to be replaced with one new Activity Type code which combines the descriptions of the retired codes.						
#		,,		, , , , , , , , , , , , , , , , , , , ,			
BR1.		ode valid to date of 3 nānau, tangata whaio			ty Type Code T36 - Contact with		
BR2.	Add an e	error message if a red	cord is repo	rted with Ad	ctivity Type Code T36 from 1 July		
BR3.		ode valid to date of 30 at attendances: family			Type Code T42 - Individual		
BR4.	Add an e	error message if a rec	ord is repor	ted with Ac	tivity Type Code T42 from 1 July		
BR5.		Activity Type Code Te is 1 July 2023:	「53 - Individ	lual treatme	ent attendance. The code valid		
	Code Description Code Valid To From Valid To						
	T53	Individual treatment attendance	01-07-2023	30-06-2030	Assessment, treatment (including support with medication), care planning, review and discharge in conjunction with tangata whaiora/consumer, Family/whānau and/or significant other may or may not be present.		
BR6.	Update HISO PRIMHD Code Set Standard Section 2.4.1.1 Activity Type Codes noting the reason for the retirement of T36 and T42 and replacing these with T53						

7.3 Health of the Nation Outcome Scales for Infants (HoNOSI)

Description	Health of the Nation Outcome Scales for Infants (HoNOSI)				
	Background Currently outcome measurement in mental health services covers all age groups, using the HoNOS family of measures, except for children aged 0-4years. This is a problem because early intervention is an important clinical need for young children and currently there is an inability to ascertain clinical outcomes.				
	The reason this measure has not already been introduced is that in 2008 (when the PRIMHD collection started) there was not a validated or reliable measure for this age group. In the past six years considerable work has gone into developing a psychometrically valid outcome measure for this age group.				

Health New Zealand

Impact

The lack of outcome measurement for children aged 0-4 years (0-47 months) affects the mental health sector's ability to ascertain if early intervention for this group is having the desired effect. The addition of the HoNOSI tool type to PRIMHD will enable capture and visibility of outcomes where services are provided for this age group.

#

BR1. Update the HISO PRIMHD Code Set Standard Section 2.7.1.1 by adding the following Outcome Tool Type and Version:

Code	Description	Measure Type	Code Valid From	Code Valid To	Used for/Comment
I1	HoNOSI	Clinical	01-07- 2023	30-06- 2030	Australian Mental Health Outcomes and Classification network (2020) Health of the Nation Outcomes Scales for Infants (HoNOSI) Field Trial, Australia.

BR2. Update the HISO PRIMHD Code Set Standard Section 2.8.1.1 by adding the following new Outcome Item Codes for HoNOSI:

Measure	Code	Used for/Comment
	01	Problems with disruptive behaviour/irritability/under controlled emotional regulation
	02	Problems with activity levels, joint and/or sustained attention
	03	Non accidental self-injury or lack of self-protective behaviours
	04	Problems with feeding and eating behaviour
	05	Problems with developmental delays
	06	Problems with physical illness or disability
	07	Problems associated with regulation and integration of sensory processing
	08	Problems associated with sleep
HONOSI	09	Problems with emotional and related symptoms or over- controlled emotional regulation
	10	Problems with social reciprocity
	11	Problems with age-appropriate self-care and environmental exploration
	12	Problems with family life and relationships
	13	Problems with attending care, education and socialisation settings
	14	Problems with knowledge or understanding about the nature of the infant's difficulties
	15	Problems with lack of information, understanding about services, or managing the infant's difficulties
	T13	Honosi total (13 item) score

BR3. Update the HISO PRIMHD Code Set Standard Section 2.8.1.2 by modifying Outcome Item Value to include the new highlighted HoNOSI item values:

Health New Zealand

Tool	Code	Description	Code Valid From	Code Valid To	Used for/Comment
HoNOS	0	No problem within the period rated	01-07- 2005	30-06- 2030	
HoNOS65+	1	Sub-threshold problem	01-07- 2005	30-06- 2030	
HoNOSCA	2	Mild but <u>definitely</u> <u>present</u>	01-07- 2005	30-06- 2030	
HoNOSCA	3	Moderately severe	01-07- 2005	30-06- 2030	
HoNOS LD	4	Severe to very severe	01-07- 2005	30-06- 2030	
HoNOS Secure	7	Unable to rate (insufficient information)	01-07- 2005	30-06- 2030	
HonOSI	8	Not applicable (collection not required due to protocol exclusion or not collected for other reasons)	01-07- 2005	30-06- 2030	
	9	Not Stated/Missing	01-07- 2005	30-06- 2030	

BR4.

Update PRIMHD File Specification Section 5.7.3 OT Record Business Rules (Add):

Business Rule Reference	Business Rule Description	Affected Data	Response Message Reference
BR-P81-10	 HoNOSI outcomes must be reported on applicable referrals on or after 1 July 2023. 	Outcome Tool Type Version	

BR5.

Update PRIMHD File Specification Section 5.8.3 OI Record Business Rules (Modify and Add)

Business Rule Reference	Business Rule Description	Affected Data	Response Message Reference	
BR-P91-10	 If the Collection Status in the Outcome Tool record is CS01 and the Outcome Tool Type in the OT Record is one of the following: A1, G1, S1, L1, C1, I1, Z1 the OI record should not contain more than 2 Outcome Item Values of 7 or 9. 	Outcome Item Value	• RM-P92-12	
BR-P91-23	When the Outcome Tool Type and Version is I1 (HoNOSI) the following Outcome Item Codes must be populated: 01, 02, 03, 04, 05, 06, 07, 08, 09, 10, 11, 12, 13, 14, 15.	Outcome Tool Type Outcome Item Code	RM-P92-11 RM-P92-11	

8 Advisories

8.1 National Health Index (NHI)

8.1.1 Advisory Change to National Health Index (NHI) Numbering System

The National Health Index (NHI) has assigned the majority of the currently available NHI numbering range. All existing NHI numbers are forecast to be exhausted sometime after 2025 based on current rates of allocation.

In late 2017, the NHI system was reviewed to establish options as to how to extend the available range of NHI numbers. Due to the impact of such a change and the relationship of the system to HISO 10046 Consumer Health Identity Standard, the Ministry of Health decided to employ a Health Information Standards Organisation (HISO) process to seek public comment – this was undertaken during July-August 2018. In September 2018, a working group (comprising seven representatives covering DHBs, PHOs, large and small vendors, Primary Practice management, Consumers, and the Office of the Privacy Commissioner) reviewed the public comment feedback. The outcome of this review was presented to HISO in November 2018 and to the Ministry's Executive Leadership Team (ELT) in December 2018.

The existing approach provides a unique 7-character number in the format AAANNNC (3 alpha, 3 numeric and one numeric check digit).

The new format is to take the form AAANNAC (3 alpha, 2 numeric, 1 alpha and one alpha check digit). This approach is detailed in the updated HISO standard 10046:2022 Consumer Health Identity Standard. The two formats are to co-exist – 'old' format numbers will not be replaced. https://www.health.govt.nz/publication/hiso-10046-consumer-health-identity-standard

Situation

As the NHI number system is fundamental to health systems generally, it is essential that all system providers and users be given as much time as possible to become aware of and familiar with, the new approach. System vendors will also need significant lead time to adjust their products to handle the change of format and the supporting calculation process for the check digit.

Summary

An update to the existing HISO 10046 Consumer Health Identity Standard (titled HISO 10046:2022 Consumer Health Identity Standard) was published in May 2022. It details the change to the format of NHI numbers. New format NHI numbers are available in the pre-production compliance test environment. Therefore, system vendors can begin testing use of the new format NHIs. All systems should be changed to accommodate the new format by 1 July 2023 to allow a comfortable lead time before the first numbers are issued in the new format.

8.1.2 Advisory Ethnicity Protocols

Provided below is information regarding updates to the Ethnicity Protocols and reporting. The expectation is that District hospitals will be in a position to record ethnicity at level 4 ethnicities from 1 July 2023 or earlier.

Background

The ethnicity protocols have been updated to address the move in the health and disability sector to electronic collection and storage of data. The protocols define appropriate processes for confirmation or correction of ethnicity where existing data is held for a respondent and an appropriate frequency for collecting ethnicity data.

Health New Zealand

They have been updated alongside other key strategic documents. This review allows Te Whatu Ora – Health New Zealand to fully integrate the health and disability sector protocols and the statistical standard. The updated protocols support a transition from the previous minimum requirements of recording up to three ethnicities at level 2 classification to recording up to six ethnicities at level 4 classification. This reflects the requirement for information systems to capture the greater population diversity and improved granularity of information to plan, fund and monitor health services. These changes represent a significant move forward in terms of ethnicity data collection and will make a valuable contribution for health. https://www.health.govt.nz/publication/hiso-100012017-ethnicity-data-protocols

Details of the Proposed Change

GP practices have been using <u>SOAP</u> (Simple Object Access Protocol) based APIs to update level 4 ethnicity codes on NHI since 2017. These services are available to use now. Contact <u>ws_integration@health.govt.nz</u> for further information.

The HL7 v2 NHI services most commonly used by hospitals will be deprecated once NHI FHIR (Fast Healthcare Interoperability Resources) services are available. Hospitals are expected to transition to NHI SOAP or FHIR services to update NHI ethnicity at level 4. As an initial step hospitals may choose to update and store level 4 ethnicities at a local system level. Once hospitals have transitioned to the new NHI services and are updating ethnicity at level 4 there will no longer be a requirement to report ethnicity in any load file to National Collections. The National Collections will use the NHI ethnicity.

User Interfaces should align closely with this example based on the census on-line collection method. http://refraction.nz/eths

8.1.3 Advisory Gender Code - *Another Gender*

Another Gender code 'O' has been added to the list of available gender categories that can be recorded in the NHI effective from 1 July 2020. Hospital PAS systems should be upgraded to support the *Another Gender* code 'O' when interacting with the NHI at the earliest opportunity

For systems that are collecting this new category the following instructions apply to update the NHI:

For SOAP API users

To implement the new code set, update your API requests' Master Code Set version to version 4.0 and the Gender code set to version 1.2 e.g.:

<mes:masterCodeSet>4.0</mes:masterCodeSet> and <pws:gender codeSystem="GENDER"
codeSystemVersion="1.2" value="O"/>

If a request uses Master Code set 3.1 and Gender code set 1.1 then Gender 'O' codes held on the NHI are returned as 'U'.

For HL7 V2 legacy users

When you are ready to send the new 'O' codes to the NHI, notify the HIP product team via the integration@health.govt.nz and they will enable it for your hospital/district interface in UAT for you to complete testing before turning it on in production.

8.1.4 Advisory Iwi Affiliation Protocols

The Government recognises that it has struggled to provide iwi with high-quality information about their people and knows that this needs to change.

To help address this, Te Manatū Hauora and Te Whatu Ora has partnered with other government agencies and Māori data experts from the Data Iwi Leaders Group, to launch <u>Tātai</u> – a data collection tool that will provide iwi with much better health information about their people. This data has been combined with data in the national collections to show the types of insights that may be generated at an iwi level.

Collecting iwi affiliation data is a way to ensure we, as government, are contributing to worthwhile and high-quality datasets about iwi, for iwi.

As critical partners to this data collection, the information that is collected will be combined with wider health sector information, through the NHI, and be shared back to iwi to inform and strengthen their strategies and programmes. The government will also use this data to better understand where Māori are located, and what their needs are in the health system. This data will be a key enabler to support decision making and investment in Māori health.

What is Expected of the Sector:

This initiative is asking all stakeholders across the sector to support the national collection of iwi data through the hosting of posters and brochures in appropriate spaces to create awareness. An engagement plan is underway is distribute materials in the future however you can also contact the project directly to request these materials now at contact@tatai.maori.nz

If health sector organisations are already collecting iwi affiliation data, or intend on collecting this data, please refer to the HISO standards in the first instance. This initiative is working with Te Whatu Ora as to the planned approach for uplift across the sector to align with these standards.

HISO 10094:2022 Māori Descent and Iwi Affiliation Data Protocols | Ministry of Health NZ



9 Appendix A – NNPAC PUC Minor Procedures Reference Sets

Below is the draft reference sets that lists minor procedures including the SNOMED CT concepts to be collected for the five NNPAC Purchase Unit Codes. The minor procedures listed are not exhaustive, additional procedures and/or SNOMED CT concepts not listed can be reported against the five PUCs,

Purchase Unit Code	Purchase Unit Definition
S00008	Minor surgical procedures
Excludes: S70008 TRUS/TPA, S70006 Lithotripsy	
Procedure	SNOMED - NZ Edition v01-04-2022
Carpal tunnel	47534009 Decompression of median nerve (procedure)
Aspiration/drainage/FNA	14766002 Aspiration (procedure)
	122462000 Drainage procedure (procedure)
	48635004 Fine needle biopsy (procedure)
Biopsy - punch	68660007 Punch biopsy (procedure)
Biopsy- temporal artery biopsy	72821000 Biopsy of temporal artery (procedure)
Haemorrhoid injecting/banding	8422009 Destruction of hemorrhoids by sclerotherapy (procedure)
	174359003 Rubber band ligation of hemorrhoid(s) (procedure)
Steroid injection	296778005 Injection of steroid (procedure)
Sclerotherapy	80227005 Injection of sclerosing agent in vein (procedure)
	8422009 Destruction of hemorrhoids by sclerotherapy (procedure)
	1636000 Injection of sclerosing agent in varicose vein (procedure)
Skin procedures - flaps	304039000 Skin flap operation (procedure)
Skin procedures - wide excision	787439005 Wide excision (procedure)
Skin procedures - wedge resection	20418004 Wedge resection (procedure)
Catheter management - insertion, change, removal	45211000 Catheterization (procedure)
	103713001 Replacement of catheter (procedure)
	103715008 Removal of catheter (procedure)
Urodynamics - flow	252895004 Urodynamic studies (procedure)
Fraenuloplasty	176534009 Frenuloplasty of penis (procedure)

Hydrocele management	236347006 Hydrocele operation (procedure)
Wound care	385942004 Wound care management (procedure)
Removal of lipoma	274068006 Excision of lipoma (procedure)
Cryotherapy	26782000 Cryotherapy (procedure)
Fraenotomy (tongue tie procedure)	7001008 Incision of lingual frenum (procedure)
Fraenectomy (tongue tie procedure)	23933004 Excision of lingual frenum (procedure)
Embolisation	122463005 Embolization procedure (procedure)
Varicose veins - sclerotherapy, laser (EVLT)	1636000 Injection of sclerosing agent in varicose vein (procedure)
	448881002 Endovenous laser ablation of varicose vein (procedure)
Interventional radiology	240917005 Interventional radiology (procedure)
Interventional radiology percutaeous biopsies	277591006 Computed tomography guided biopsy (procedure)
	277667006 Ultrasound guided biopsy (procedure)
	430278000 Biopsy using fluoroscopic guidance (procedure)
Interventional radiology Fine need aspiration	442973008 Percutaneous fine needle aspiration biopsy using computed tomography guidance (procedure)
	444945007 Fine needle aspiration using ultrasound guidance (procedure)
	445317004 Fine needle aspiration using fluoroscopic guidance (procedure)
Interventional radiology lumbar punctures	711271003 Lumbar puncture using computed tomography guidance (procedure)
	438348005 Lumbar puncture using fluoroscopic guidance (procedure)
Interventional radiology injections	431864000 Injection using computed tomography guidance (procedure)
	432235002 Injection using ultrasound guidance (procedure)
	431865004 Injection using fluoroscopic guidance (procedure)
Interventional radiology fistuloplasty for dialysis patients	431252000 Percutaneous thrombolysis of dialysis fistula using fluoroscopic guidance (procedure)
	431543008 Percutaneous embolization of dialysis fistula using fluoroscopic guidance (procedure)
	431440009 Fluoroscopic angiography of dialysis fistula using contrast with insertion of stent (procedure)
Interventional radiology nephrostomy	433029000 Nephrostomy using computed tomography guidance (procedure)
	450460004 Nephrostomy using ultrasound guidance (procedure)
	431410007 Nephrostomy using fluoroscopic guidance (procedure)
Interventional radiology embolisation	431611001 Embolization using computed tomography guidance (procedure)

	431805002 Embolization using ultrasound guidance (procedure)
	432691003 Embolization using fluoroscopic guidance with contrast (procedure)
Interventional radiology ablation procedures	430269006 Ablation using computed tomography guidance (procedure)
	430270007 Ablation using ultrasound guidance (procedure)
	702590004 Ablation using fluoroscopic guidance (procedure)

Purchase Unit Code	Purchase Unit Definition
S25006	Cryotherapy, Removal of lesion, Removal of foreign body, Removal of stent, Cautery, Fractured Nose reduction, Biopsy, Excision lesion – LA, Laryngoscopy etc. Excludes removal of lesion, excision of lesion and biopsy under local anaesthetic funded under MS02016.
Procedure	SNOMED - NZ Edition v01-04-2022
Cryotherapy	26782000 Cryotherapy (procedure)
Removal of lesion	35646002 Excision of lesion of skin (procedure)
Removal of foreign body	10849003 Removal of foreign body (procedure)
Removal of stent	103718005 Removal of stent (procedure)
Nasal cautery	307271005 Nasal cautery (procedure)
Fractured nose reduction	302472007 Reduction of fractured nasal bone (procedure)
Biopsy - excision lesion	8889005 Excisional biopsy (procedure)
Removal of sutures	30549001 Removal of suture (procedure)
Aural toilet	66363008 Irrigation of ear (procedure)
Packing of nasal cavity	172819009 Packing of cavity of nose (procedure)
Scopes - nasendoscopy	232517007 Diagnostic nasendoscopy (procedure)
Scope - laryngoscopy	28760000 Laryngoscopy (procedure)
Scope - oesophagoscopy	49230008 Endoscopy of esophagus (procedure)
Videostroboscopy	252572002 Laryngeal stroboscopy (procedure)
	31988001 Flexible fiberoptic laryngoscopy with stroboscopy (procedure)
Tracheostomy tube management	410213006 Tracheostomy care management (procedure)
Steroid injections ENT	296778005 Injection of steroid (procedure)
Myringotomy/myringoplasty	284532000 Myringotomy and insertion of tympanic ventilation tube (procedure)
	396490007 Myringoplasty (procedure)
Removal of salivary stone	708897003 Removal of calculus of salivary gland (procedure)
Cautery	27411008 Cauterization (procedure)
Tonsillectomy/Adenoidectomy	173422009 Tonsillectomy (procedure)
	8913000 Tonsillectomy and adenoidectomy (procedure)
Pinning of ears	50691002 Setback of ear (procedure)
Laser removal of papilloma	303648002 Excision of papilloma (procedure)

Purchase Unit Code	Purchase Unit Definition
S30008	Outpatient procedures where the purpose of the attendance is to receive the procedure and the patient is not admitted. Includes Mirena procedures. Excludes colposcopies and NCSP-20 purchases
Excludes: NCSP-10 procedures, NCSP-20 procedure	es, S30012 Hysteroscopy, S30010 Medical terminations
Procedure	SNOMED - NZ Edition v01-04-2022
Contraceptive device - insertion	169553002 Insertion of subcutaneous contraceptive (procedure)
	65200003 Insertion of intrauterine contraceptive device (procedure)
Contraceptive device - removal	301807007 Removal of subcutaneous contraceptive (procedure)
	68254000 Removal of intrauterine device (procedure)
Contraceptive device - replacement	440668008 Replacement of implantable contraceptive capsule (procedure)
	46706006 Replacement of contraceptive intrauterine device (procedure)
Polyp removal	82035006 Resection of polyp (procedure)
LLETZ loops	176761007 Large loop excision of transformation zone (procedure)
Endometrial ablation	265060005 Endometrial ablation (procedure)
Biopsy pipelle, tissue	134279003 Endometrial sampling using pipelle (procedure)
Cautery of cervix	74580009 Cauterization of lesion of cervix (procedure)
Excision	82035006 Resection of polyp (procedure)
Embolisation	312138002 Embolization of uterine artery (procedure)
	312139005 Percutaneous embolization of uterine artery (procedure)
	432703003 Percutaneous embolization of uterine artery using fluoroscopic guidance with contrast (procedure)
	609150006 Percutaneous embolization of uterine vein using fluoroscopic guidance with contrast (procedure)
	418203004 Fluoroscopic angiography with contrast and embolization of uterine artery (procedure)
	432583003 Embolization of ovarian vein (procedure)
	432108001 Embolization of ovarian vein using fluoroscopic guidance with contrast (procedure)
	434031000 Percutaneous embolization of ovarian vein using fluoroscopic guidance with contrast (procedure)
	709660004 Embolization of artery of pelvis using fluoroscopic guidance with contrast (procedure)
	237018002 Ligation or embolization of pelvic vessels (procedure)

Purchase Unit Code	Purchase Unit Definition
S40008	Outpatient procedures where the purpose of the attendance is to receive the procedure and the patient is not admitted. Excludes laser treatments funded under S40005, and intraocular injection of pharmacological agent funded under S40007.
Excludes: S40007 Ophthalmology (Avastin) injection	S
Procedure	SNOMED - NZ Edition v01-04-2022
Cataract	110473004 Cataract surgery (procedure)
	54885007 Extraction of cataract (procedure)
	385468004 Cataract extraction and insertion of intraocular lens (procedure)
Glaucoma surgery	86077009 Operation for glaucoma (procedure)
Retinal surgery	53696006 Operation on retina (procedure)
	118906003 Procedure on retina (procedure)
Eye muscle surgery	17639001 Operation on extraocular muscle (procedure)
Optical coherence tomography	392010000 Optical coherence tomography (procedure)
Removal of sutures	315602003 Removal of eye suture (procedure)
Ophthalmic angiography (fluorescein/indocyanine)	410442000 Ophthalmic angiography (procedure)
	252823001 Angiography using indocyanine green (procedure)
	410441007 Ophthalmoscopy with medical evaluation, extended, with fluorescein angiography (procedure)
Shave biopsy	72342005 Shave biopsy (procedure)
Meibomian cyst (chalazion) removal	238514005 Chalazion removal (procedure)
	388285000 Incision and curettage of chalazion (procedure)
Eyelid procedure	118912008 Procedure on eyelid (procedure)
Temporal artery biopsy	72821000 Biopsy of temporal artery (procedure)

Purchase Unit Code	Purchase Unit Definition
S60007	Minor procedure conducted under local anaesthetic within an outpatient setting. Outpatient procedure where the purpose of the attendance is to receive the procedure and the patient is not admitted. Excludes removal of lesion, excision of lesion and biopsy under local anaesthetic, which is funded under MS02016.
Excludes: MS02016 Skin lesion procedures	
Procedure	SNOMED - NZ Edition v01-04-2022
Skin graft	304040003 Grafting to skin (procedure)
Debridement	36777000 Debridement (procedure)
Skin procedures - flaps	304039000 Skin flap operation (procedure)
Skin procedures - wide excision	787439005 Wide excision (procedure)
Skin procedures - wedge resection	20418004 Wedge resection (procedure)
Wound management - aspiration/VAC dressings	385942004 Wound care management (procedure)
	3895009 Application of dressing (procedure)
	26906007 Application of dressing, pressure (procedure)
Change of dressings	410330006 Dressing change/wound care case management (procedure)
Release of scar tissue	25521001 Relaxation of scar contracture of skin (procedure)



10 Appendix B – Definitions

Abbreviation	Definition
ACHI	Australian Classification in Health Interventions
API	Application Programme Interface
AR-DRG	Australian Refined Diagnosis Related Groups
COVID	Coronavirus Disease
СТ	Computerised Tomography
СТС	Computerised Tomography Colonography
DHB	District Health Board
DRG	Diagnosis Related Groups
DSM-IV	Diagnostic and Statistical Manual of Mental Disorders – Fourth Edition
ECCS	Episode Clinical Complexity Score
ED	Emergency Department
ELT	Executive Leadership Team
ENT	Ear, Nose, Throat
ESPI	Elective Services Patient Flow Indicators
EVLT	Endovenous Laser Treatment
FHIR	Fast Healthcare Interoperability Resources
FIT	Faecal Immunochemical Test
FNA	Fine Needle Aspiration
FY	Financial Year
GP	General Practitioner
HISO	Health Information Standards Organisation
HL7	Health Level 7
HoNOSI	Health of the Nation Outcomes Scales for Infants
ICD-10-AM	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification
ICD-O	International Statistical Classification of Diseases for Oncology
ID	Identifier
LA	Local Anaesthesia
LLETZ	Large Loop Excision of Transformation Zone
МОН	Ministry of Health
MORT	Mortality Collection
NBSP	National Bowel Screening Programme

Abbreviation	Definition
NCAMP	National Collections Annual Maintenance Programme
NCCPP	National Costing Collection Pricing Programme
NCSP	National Cervical Screening Programme
NCR	National Collections and Reporting
NGO	Non-Government Organisation
NHI	National Health Index
NMDS	National Minimum Data Set
NNPAC	National Non-Admitted Patient Collection
NPF	National Patient Flow
NZ	New Zealand
NZCR	New Zealand Cancer Registry
PAS	Patient Administration System
РНО	Primary Health Organisation
PHS	Principal Health Service
PMS	Patient Management System
PRIMHD	Programme for the Integration of Mental Health Data
PUC	Purchase Unit Code
SNOMED-CT	Systematized Nomenclature of Medicine – Clinical Terms
SOAP	Simple Object Access Protocol
TPA	Transperineal Biopsy of Prostate
TRUS	Transrectal Ultrasound Biopsy of Prostate
VAC	Vacuum
WHO	World Health Organization
WIES	Weighted Inlier Equivalent Separation
WIESNZ	Weighted Inlier Equivalent Separation New Zealand

11 Appendix C – Document Control

Document Details

Project	National Collections Annual Maintenance Project 2023
Team	National Collections & Reporting (NCR)
Document Title	Sector Consultation Business Requirements NCAMP 2023
Author(s)	Te Whatu Ora – Health New Zealand
Version	1.0
Status	Final