



THE SOCIAL SECURITY (MEDICAL FEES) REGULATIONS 1986

PAUL REEVES, Governor-General

ORDER IN COUNCIL

At Wellington this 29th day of September 1986

Present:

HIS EXCELLENCY THE GOVERNOR-GENERAL IN COUNCIL

PURSUANT to sections 95 (as substituted by section 21 of the Social Security Amendment Act 1986), 123, and 132 of the Social Security Act 1964, His Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, hereby makes the following regulations.

ANALYSIS

1. Title, commencement, and application
2. Interpretation

PART I

GENERAL MEDICAL SERVICES

3. Fees for general medical services
4. Fees for general medical services provided for certain specified beneficiaries
5. Fees for general medical services provided for certain children
6. Fees for general medical services provided on public holidays and at night

7. Additional fees for general medical services involving attendance of medical practitioner for more than 30 minutes
8. General provision in respect of deceased patients and patients rejecting services
9. Services declared not to be general medical services
10. Travelling fees
11. Rural practice bonuses
12. Immunisation fee

PART II

SPECIALIST MEDICAL SERVICES

13. Fees for specialist medical services

PART III	18. Complaints to Disciplinary Committee
GENERAL	19. Excessive daily services
14. Particulars of claim for fees	20. Certificate of services provided
15. Duty of patients to supply any information requested	21. Time limit for claim of fees
16. Statement in explanation of claim	22. Revocations
17. Daily record	23. Saving and transitional provisions Schedules

REGULATIONS

1. Title, commencement, and application—(1) These regulations may be cited as the Social Security (Medical Fees) Regulations 1986.

(2) These regulations shall come into force on the 1st day of October 1986, and shall apply to medical services provided on or after that date.

2. Interpretation—In these regulations, unless the context otherwise requires,—

“The Act” means the Social Security Act 1964:

“Director-General” means the Director-General of Health appointed under section 5 of the Health Act 1956:

“Public holiday” means Christmas Day, Boxing Day, New Year’s Day, the 2nd day of January, Good Friday, Easter Monday, Anzac Day, the Sovereign’s Birthday, Labour Day, Waitangi Day, and the holiday observed in the locality concerned as Anniversary Day; and includes, when any of those holidays (other than Anzac Day or Waitangi Day) that can fall on a Saturday or Sunday so falls, the day that is observed in the locality concerned as a substituted public holiday; and also includes, when Boxing Day falls on a Monday, the day following Boxing Day and the 3rd day of January.

PART I

GENERAL MEDICAL SERVICES

3. Fees for general medical services—Subject to the provisions of this Part and Part III of these regulations, every medical practitioner who provides any general medical services for any patient shall be entitled to receive from the Department, for every occasion on which any such services are provided, the relevant fee as specified in Part I of the First Schedule to these regulations.

4. Fees for general medical services provided for certain specified beneficiaries—Notwithstanding anything in regulation 3 of these regulations, but subject to the provisions of this Part and Part III of these regulations, if a medical practitioner provides any general medical services for a patient who—

- (a) Has attained the age of 65 years; or
- (b) Is a beneficiary within the meaning of Part I of the Act, other than a child in respect of whom a family benefit is being paid; or
- (c) Is a person in receipt of an economic pension, a pension as the wife of a member of the forces, an allowance as a veteran or the wife or widow of a veteran, a war service pension as a serviceman or the wife or widow of a serviceman, or a war orphan’s pension, under the War Pensions Act 1954; or

- (d) Is the wife of any such beneficiary or person; or
- (e) Has satisfied the Social Security Commission that he or she—
 - (i) Is in receipt of a benefit, pension, or periodical allowance, granted elsewhere than in New Zealand, in respect of which a benefit under Part I of the Act has been or would be reduced, refused, or terminated under section 70 of the Act; and
 - (ii) Would not, by reason of his or her income, be wholly disqualified from receiving a benefit under Part I of the Act, if he or she were otherwise entitled to such a benefit; or
- (f) Is the wife of a person referred to in paragraph (e) of this regulation; or
- (g) Is a person who is shown to the satisfaction of the Director-General, on the application of the medical practitioner attending that patient, supported by such particulars and information as the Director-General may require, to be suffering for the time being from a condition that necessitates frequent attention by the medical practitioner over a prolonged period, and in relation to whom it would, in the opinion of the Director-General, be unreasonable, because of that condition, to restrict the amount of the benefit payable to the amount referred to in regulation 3 of these regulations; or
- (h) Is a member of a class of persons to which the provisions of this regulation have been declared to apply by the Minister by notice in the *Gazette*,—

the medical practitioner shall be entitled to receive from the Department, for every occasion on which such services are provided, instead of the fee referred to in regulation 3 of these regulations, the relevant fee as specified in Part II of the First Schedule to these regulations.

5. Fees for general medical services provided for certain children—Notwithstanding anything in regulations 3 and 4 of these regulations, but subject to the provisions of this Part and Part III of these regulations, if a medical practitioner provides any general medical services for a patient who is—

- (a) A child in respect of whom a family benefit is being paid; or
- (b) A child in respect of whom a family benefit would be paid under Part I of the Act if the Social Security Commission were satisfied that the child would be likely to remain permanently in New Zealand,—

the medical practitioner shall be entitled to receive from the Department, for every occasion on which such services are provided, instead of the fee referred to in regulation 3 of these regulations, the relevant fee as specified in Part III of the First Schedule to these regulations.

6. Fees for general medical services provided on public holidays and at night—Notwithstanding anything in regulations 3 to 5 of these regulations, but subject to the other provisions of this Part and Part III of these regulations, in respect of every occasion on which a medical practitioner provides any general medical services for any patient—

- (a) On a Saturday or Sunday or public holiday, in response to an urgent request received by the medical practitioner on the same day; or

- (b) Between the hours of 6 p.m. and 8 a.m., in response to an urgent request received by the medical practitioner between those hours,—

there shall be payable by the Department to the medical practitioner the relevant fee as specified in Part IV of the First Schedule to these regulations.

7. Additional fees for general medical services involving attendance of medical practitioner for more than 30 minutes—The Director-General may, if satisfied that on any occasion on which general medical services were provided by a medical practitioner the examination and treatment of the patient necessitated the attendance of the medical practitioner for a continuous period of more than 30 minutes, approve a claim for the payment of an amount calculated in accordance with the rate specified in Part V of the First Schedule to these regulations, in addition to any other claim for payment under these regulations.

8. General provision in respect of deceased patients and patients rejecting services—Where a medical practitioner in response to a call attends any person elsewhere than at the surgery or place of residence of the medical practitioner and that person has died before the arrival of the medical practitioner or rejects the services of the medical practitioner, then, for the purposes of this regulation and regulation 10 of these regulations, that person shall be deemed to be a patient of the medical practitioner and the medical practitioner shall be deemed to have provided general medical services for that person.

9. Services declared not to be general medical services—The following medical services are declared not to be general medical services for the purposes of these regulations or Part II of the Act:

- (a) Medical services involved in any medical examination of which the sole or primary purpose is the obtaining of a medical certificate (for production to some other person) as to the condition of health of the person examined, other than medical services in relation to certificates given for the purpose of benefits under Part I of the Act, or in relation to certificates for “sickness benefits” from a friendly society:
- (b) Medical services involved in, or incidental to, the extraction of teeth by a medical practitioner:
- (c) Medical services provided in respect of any injury or disease in respect of which the patient is not entitled to any benefit under Part II of the Act by virtue of section 92 of the Act:
- (d) Medical services in respect of which fees are payable under the Social Security (Laboratory Diagnostic Services) Regulations 1981*:
- (e) Medical services in respect of which fees are payable under the Social Security (Diagnostic Imaging Services) Regulations 1985†:
- (f) Medical services provided by means of advice given by telephone, telegram, or letter, except in circumstances specifically approved by the Director-General for the purposes of this regulation:
- (g) Medical services not provided by a medical practitioner in person:

*S.R. 1981/327
 †S.R. 1985/46

- (h) Medical services provided, otherwise than in an emergency, in any factory or shop (within the meaning given to those terms by the Factories and Commercial Premises Act 1981) to a person employed in that factory or shop and provided pursuant to an arrangement made by or on behalf of the medical practitioner with the employer of the person in receipt of those services or the agent of the employer.

10. Travelling fees—(1) Subject to the provisions of this Part and Part III of these regulations, where any medical practitioner provides any general medical services—

(a) Outside any borough; or

(b) Within a borough other than a borough in which the surgery or place of residence of the medical practitioner is situated,—

that medical practitioner shall be entitled to receive from the Department travelling fees in accordance with this regulation.

(2) Where the Minister is satisfied that any district or part of a district, by virtue of its urban character or for any other material reason, is an area in respect of which travelling fees should not be payable under this regulation, the Minister may, by notice in the *Gazette*, declare the district or any part of it to be a borough for the purposes of this regulation.

(3) Where the Minister is satisfied that any borough or part of a borough, by virtue of its large area or its rural character or for any other material reason, is an area in respect of which travelling fees should be payable under this regulation to any medical practitioner who provides any general medical services within the borough but elsewhere than at the medical practitioner's surgery or place of residence, the Minister may, by notice in the *Gazette*, declare the borough or any part of it to be an area in respect of which such travelling fees shall be payable for services so provided, subject to such limitations and conditions as are specified in the notice.

(4) Every declaration made under subclause (2) or subclause (3) of this regulation shall have effect according to its tenor, and may at any time in like manner be revoked in whole or in part or amended.

(5) Subject to the provisions of this Part of these regulations, travelling fees shall be computed in respect of every journey made by the medical practitioner to any place or places for the purpose of providing the services, and shall be computed at the rate of 18 cents for every kilometre or part of a kilometre of the distance necessarily travelled by the medical practitioner in going from his or her surgery or place of residence to that place or those places and in returning to his or her surgery or place of residence.

(6) The Director-General may, in any case where the Director-General is satisfied that—

(a) By reason of the nature or condition of any road over which, in the opinion of the Director-General, it was necessary or expedient for the medical practitioner to travel to provide the general medical services; or

(b) By reason of the nature of the mode of transport that, in the opinion of the Director-General, it was reasonable to use,—

any travelling fees computed in accordance with subclause (5) of this regulation are inadequate, increase the travelling fees to such extent as the Director-General considers necessary to make them adequate.

(7) The Director-General may disallow any claim for travelling fees in whole or in part where, in the opinion of the Director-General, arrangements could conveniently have been made that would have avoided the necessity of making the visit or visits in respect of which the claim is made or would have reduced the amount of the claim.

(8) Where, in accordance with subclause (7) of this regulation, the Director-General has disallowed in whole or in part a claim for travelling fees on either ground specified in that subclause, the medical practitioner shall be entitled to recover the amount so disallowed from the patient or from any person responsible for the debts of the patient.

11. Rural practice bonuses—(1) In this regulation “rural area” means any of the areas specified in Part I of the Second Schedule to these regulations.

(2) Subject to the provisions of this Part and Part III of these regulations, in addition to any fee payable by the Department under any of regulations 3 to 10 of these regulations, there shall be payable by the Department to every medical practitioner residing and practising in a rural area the relevant additional amount as specified in Part II of the Second Schedule to these regulations.

(3) The Minister may, in the Minister’s discretion, apply the provisions of subclause (2) of this regulation to any medical practitioner practising but not residing in a rural area, if the Minister considers that the medical practitioner’s practice is wholly or mainly carried out in the rural area, and may at any time determine that that subclause shall no longer apply to any medical practitioner to whom it has been so applied.

(4) Every decision of the Minister made under subclause (3) of this regulation shall take effect on such date as the Minister determines, which may be a date before or after or the same as the date on which the decision is made.

(5) Where the Minister has, under subclause (3) of this regulation, applied subclause (2) of this regulation to any medical practitioner, the said subclause (2) shall apply only in respect of general medical services provided on and after the date on which the application of that subclause to that medical practitioner took effect.

(6) Where the Minister has determined under subclause (3) of this regulation that subclause (2) of this regulation shall no longer apply to any medical practitioner, the said subclause (2) shall apply in respect of general medical services provided before the date on which that subclause ceased to apply to the medical practitioner, but not in respect of any general medical services provided on or after that date.

12. Immunisation fee—(1) If, in the course of an immunisation programme approved by the Department, vaccine supplied by the Department is administered to a person under 16 years of age, or if, in the course of a programme of immunisation against rubella approved by the Department, vaccine supplied by the Department is administered to a female person of child-bearing age, by a medical practitioner, or by a registered nurse acting under the direction of a medical practitioner, the medical practitioner shall be entitled to receive from the Department, in lieu of any other fee that the medical practitioner might otherwise be entitled to receive under these regulations, in respect of each occasion on

which the patient attends for the administration of any such vaccine or vaccines, the fee specified in the Third Schedule to these regulations.

(2) Subject to subclause (3) of this regulation, no medical practitioner or registered nurse shall demand or accept or be entitled to recover from the patient or any other person any fee in respect of services for which a fee is payable by the Department under this regulation.

(3) Nothing in subclause (2) of this regulation shall affect the rights of a medical practitioner in relation to any other service, notwithstanding that that other service was rendered on the same occasion as that on which the vaccine was administered.

(4) Nothing in regulations 3 to 11 of these regulations shall apply in relation to any service to which subclause (1) of this regulation applies.

PART II

SPECIALIST MEDICAL SERVICES

13. Fees for specialist medical services—Subject to section 94 of the Act and to Part III of these regulations, every specialist who provides any specialist medical services for a patient shall be entitled to receive from the Department, for every occasion on which any such services are provided, the relevant fee as specified in the Fourth Schedule to these regulations.

PART III

GENERAL

14. Particulars of claim for fees—Every claim by a medical practitioner for payment of fees under these regulations shall be made on an appropriate form provided by the Department for the purpose, or in a manner approved by the Director-General for the purpose.

15. Duty of patients to supply any information requested—(1) Every patient or, as the case may be, every person acting on behalf of or in respect of a patient, shall supply without unreasonable delay any information reasonably required of the patient by or in the name of the Director-General in relation to any claim for the payment of fees made by a medical practitioner.

(2) Every person who wilfully or unreasonably fails to comply with subclause (1) of this regulation commits an offence.

16. Statement in explanation of claim—(1) In relation to any claim for payment of any fees in accordance with these regulations, the Director-General may require the medical practitioner concerned to supply in writing or otherwise a statement in explanation or substantiation of the claim or of the reasonableness of the amount of the claim.

(2) If the medical practitioner refuses to supply any information required by subclause (1) of this regulation to be supplied by that medical practitioner, or fails to supply any such information within 21 days after being so required, or supplies an insufficient or unsatisfactory statement, the Director-General shall refer the matter to the Minister; and in any such case the Minister, after reference to the appropriate committee appointed under section 121 of the Act, may—

(a) Direct that the claim or any such claim be disallowed either wholly or in part; or

- (b) If the claim or any such claim has been paid, authorise the Director-General to take the necessary steps to recover from the medical practitioner the whole or a specified part of the claim, as a debt due to the Crown, or direct that the whole or any specified part of the amount of such claim be set off against any amounts that may thereafter be payable to the medical practitioner in respect of any other claim or claims.

(3) Notwithstanding anything to the contrary in subclauses (1) and (2) of this regulation, the Minister, without complying with all or any of the requirements of those subclauses, may, if the Minister thinks fit, refer the matter in the first instance or at any subsequent stage as a complaint to the Disciplinary Committee for inquiry under section 45 of the Medical Practitioners Act 1968 and, if the Disciplinary Committee so recommends, the Minister may exercise any of the powers conferred by paragraphs (a) and (b) of subclause (2) of this regulation.

17. Daily record—(1) Every medical practitioner who provides any general medical services or specialist medical services shall keep a comprehensive and readily accessible daily record in respect of every patient, in which shall be entered the following:

- (a) The name and the usual place of residence of the patient:
- (b) The place where the services were provided (if different from the usual place of residence of the patient):
- (c) The date on which the services were provided:
- (d) A record of the clinical history of the patient and of the treatment given or services rendered.

(2) The Medical Officer of Health or any medical practitioner authorised by the Director-General in writing to do so may inspect the records kept by a medical practitioner pursuant to this regulation at any reasonable time; and it shall be the duty of every medical practitioner who provides any general medical services or specialist medical services to answer all inquiries with respect to those records made by the Medical Officer of Health or by any medical practitioner so authorised to inspect the records.

(3) The Minister may, on the recommendation of the Disciplinary Committee, disallow any claim for payment of any fee in accordance with these regulations if any of the records required to be kept pursuant to this regulation have not been kept or if, in the opinion of the Disciplinary Committee, any records so kept are inadequate.

18. Complaints to Disciplinary Committee—(1) In respect of every medical practitioner who provides any general medical services or specialist medical services, the Minister may, for the purpose of preventing abuse against the provisions of these regulations, refer to the Disciplinary Committee any of the following matters for inquiry:

- (a) Any complaint that a medical practitioner is performing an excessive number of visits to a patient:
- (b) Any complaint that a medical practitioner is conducting an unduly large number of consultations on any day or days:
- (c) Any complaint that a medical practitioner has been in the habit of providing an unduly large number of daily services, having regard to the facilities used by the medical practitioner in his or

her practice and the medical practitioner's manner of conducting the practice or to either of those things:

- (d) Any complaint that a medical practitioner has displayed culpable lack of skill or any negligence or lack of care in the performance of the medical practitioner's duties:
- (e) Any complaint that a medical practitioner has obtained or attempted to obtain any fee from the Department in connection with a claim in respect of any general medical services or specialist medical services that have not been provided or that have been provided otherwise than in accordance with these regulations:
- (f) Any other complaint that, in the opinion of the Minister, warrants inquiry, in addition to any matters specifically mentioned in any Act or any regulations made pursuant to any Act as referable to the Disciplinary Committee.

(2) In respect of any complaint under this regulation, instead of, or in addition to, exercising any other powers conferred on the Minister by these regulations, the Minister may, if the Minister thinks fit, and if the Disciplinary Committee so recommends, exercise any of the powers conferred by paragraphs (a) and (b) of regulation 16 (2) of these regulations.

19. Excessive daily services—(1) Where, in respect of any general medical services or specialist medical services provided by a medical practitioner, any complaint under regulation 18 (1)(c) of these regulations is referred by the Minister to the Disciplinary Committee, and the Committee is of the opinion that—

- (a) The medical practitioner has been in the habit of providing an unduly large number of daily services, having regard to the facilities used by the medical practitioner in his or her practice and the medical practitioner's manner of conducting the practice or to either of those things; and
- (b) An unduly large proportion of the services afforded would not warrant payment of the maximum amount permitted by these regulations,—

the Minister, if the Disciplinary Committee so recommends, may by notice in writing to the medical practitioner direct that as from a specified date the amount paid in respect of each future general medical service or specialist medical service (as the case may be) provided by the medical practitioner in respect of each such service in excess of a number specified in the notice in relation to any day or other specified period, shall not exceed an amount so specified.

(2) Any medical practitioner to whom a direction has been given pursuant to subclause (1) of this regulation may apply to the Minister on the expiry of a period of 3 months after the date so specified in the direction for the direction to be revoked.

(3) In any case referred to in subclause (2) of this regulation, the Minister may revoke the direction, by notice in writing to the medical practitioner, if the Minister is satisfied that such revocation is warranted, having regard to any improvement in the facilities used by the medical practitioner in his or her practice and in the medical practitioner's manner of conducting the practice or in either of those things, or because the medical practitioner has reduced the services provided by him or her to a reasonable daily number.

(4) Nothing in subclause (1) of this regulation shall apply to travelling fees.

20. Certificate of services provided—(1) Subject to subclause (2) of this regulation, the Minister may at any time, after consultation with the appropriate committee appointed by the Minister pursuant to section 121 of the Act, or on the recommendation of the Disciplinary Committee, and by notice in writing to any medical practitioner, require that medical practitioner to support every claim for payment of fees for medical services by a certificate signed by the patient or by some responsible person acting on behalf of the patient, to the effect that the medical services in respect of which the claim is made have been provided at the time and place specified in the claim.

(2) Where, in the case of any particular patient, the Medical Officer of Health is satisfied that owing to special circumstances it would not be practicable for a medical practitioner to obtain or supply a certificate referred to in subclause (1) of this regulation, the Medical Officer of Health may relieve the medical practitioner by notice in writing from the obligation to supply such a certificate.

(3) The Minister may at any time by notice in like manner revoke any requirement made under subclause (1) of this regulation.

21. Time limit for claim of fees—(1) Every claim by a medical practitioner for the payment of any fees under these regulations shall be forwarded to the Department within 2 months after the date on which the medical services to which the claim relates were provided.

(2) If any claim for the payment of fees is not made within the time specified in this regulation, the Director-General may reduce the claim by way of penalty by an amount not exceeding 25 percent of the amount claimed.

22. Revocations—The regulations, notices, and orders set out in the Fifth Schedule to these regulations are hereby revoked.

23. Saving and transitional provisions—(1) Notwithstanding the revocation of the regulations, notices, and orders referred to in the Fifth Schedule to these regulations by regulation 22 of these regulations, the provisions of those regulations, notices, and orders shall continue to apply in respect of any medical services provided by a medical practitioner before the 1st day of October 1986.

(2) All matters and proceedings commenced under the regulations, notices, and orders revoked by regulation 22 of these regulations, and pending or in progress at the commencement of these regulations, may be continued and completed under these regulations.

SCHEDULES

FIRST SCHEDULE

Regs. 3, 4, 5, 6, and 7

GENERAL MEDICAL SERVICES

PART I

FEE PAYABLE IN RESPECT OF GENERAL MEDICAL SERVICES

\$

- 1. For services provided at the medical practitioner's surgery or place of residence Not exceeding 1.35
- 2. For services provided within a borough elsewhere than at the medical practitioner's surgery or place of residence, where that surgery or place of residence is situated within the borough .. Not exceeding 1.35
- 3. For services provided in any other case .. Not exceeding 1.35

PART II

FEE PAYABLE IN RESPECT OF GENERAL MEDICAL SERVICES PROVIDED FOR CERTAIN BENEFICIARIES

\$

- 1. For services provided at the medical practitioner's surgery or place of residence Not exceeding 3.30
- 2. For services provided elsewhere .. Not exceeding 4.40

PART III

FEE PAYABLE IN RESPECT OF GENERAL MEDICAL SERVICES PROVIDED FOR CERTAIN CHILDREN

\$

- 1. For services provided at the medical practitioner's surgery or place of residence Not exceeding 11.20
- 2. For services provided elsewhere .. Not exceeding 13.65

PART IV

FEE PAYABLE IN RESPECT OF GENERAL MEDICAL SERVICES PROVIDED ON PUBLIC HOLIDAYS AND AT NIGHT

\$

- 1. For services provided for any person to whom regulation 3 of these regulations applies:
 - (a) Urgent consultation at the medical practitioner's surgery or place of residence .. 3.30
 - (b) Urgent visit to the patient .. 4.40
- 2. For services provided for any person to whom regulation 4 of these regulations applies:

FIRST SCHEDULE—*continued*

GENERAL MEDICAL SERVICES—*continued*

	\$
(a) Urgent consultation at the medical practitioner's surgery or place of residence	6.55
(b) Urgent visit to the patient	7.65
3. For services provided for any child to whom regulation 5 of these regulations applies:	
(a) Urgent consultation at the medical practitioner's surgery or place of residence	15.30
(b) Urgent visit to the patient	17.75

PART V

ADDITIONAL FEES PAYABLE IN RESPECT OF ATTENDANCES OF MEDICAL PRACTITIONER EXCEEDING 30 MINUTES

	\$
For every 15 minutes or part thereof in excess of 30 minutes	0.80

Reg. 11

SECOND SCHEDULE

RURAL PRACTICE BONUSES

PART I

The Health Districts referred to in this Part of this Schedule are the Health Districts named and described in the Health Districts Order 1982.

The Area Health Districts referred to in this Part of this Schedule are the Area Health Districts established under section 5 of the Area Health Boards Act 1983.

1. All those parts of the Northland Area Health District not comprised in the City of Whangarei.
2. All those parts of the Takapuna Health District not comprised in the Boroughs of Devonport, Glen Eden, Henderson, New Lynn, or Northcote, or the Cities of Birkenhead, East Coast Bays, Takapuna, or Waitemata.
3. All those parts of the Auckland Health District not comprised in the Boroughs of Ellerslie, Mount Eden, Mount Roskill, Mount Wellington, Newmarket, Onehunga, or One Tree Hill, or the Cities of Auckland or Mount Albert.
4. All those parts of the South Auckland Health District not comprised in the Boroughs of Howick, Otahuhu, or Pukekohe, or the Cities of Manukau, Papakura, or Papatoetoe.
5. All those parts of the Hamilton Health District not comprised in the Boroughs of Cambridge, Huntly, Te Awamutu, or Tokoroa, or the City of Hamilton, or the urban division of the District of Thames-Coromandel.

SECOND SCHEDULE—*continued*RURAL PRACTICE BONUSES—*continued*

6. All those parts of the Rotorua Health District not comprised in the Boroughs of Mount Maunganui or Taupo, or the City of Tauranga, or the urban division of the District of Rotorua, or the Whakatane Riding of the District of Whakatane.
7. All those parts of the Gisborne Health District not comprised in the City of Gisborne.
8. All those parts of the New Plymouth Health District not comprised in the Borough of Stratford, or the City of New Plymouth, or the Hawera ward of the District of Hawera, or the community of Oakura in the District of North Taranaki.
9. All those parts of the Napier Health District not comprised in the Borough of Havelock North, or the Cities of Hastings or Napier.
10. All those parts of the Wanganui Area Health District not comprised in the City of Wanganui, or the community of Otamatea in the County of Waitotara, or the community of Putiki in the County of Wanganui.
11. All those parts of the Palmerston North Health District not comprised in the Boroughs of Dannevirke, Feilding, or Levin, or the City of Palmerston North.
12. All those parts of the Hutt Health District not comprised in the Boroughs of Eastbourne, Kapiti, Masterton, or Petone, or the Cities of Lower Hutt or Upper Hutt, or the communities of Heretaunga-Pinehaven or Wainuiomata.
13. All those parts of the Nelson Area Health District not comprised in the Borough of Richmond or the City of Nelson.
14. All those parts of the Greymouth Health District not comprised in the Borough of Greymouth or the community of Karoro in the Grey County.
15. All those parts of the Christchurch Health District not comprised in the Boroughs of Riccarton or Blenheim, or the City of Christchurch, or the Counties of Heathcote or Paparua, or the District of Waimairi.
16. All those parts of the Timaru Health District not comprised in the Boroughs of Ashburton or Oamaru or the City of Timaru.
17. All those parts of the Dunedin Health District not comprised in the Boroughs of Green Island, Mosgiel, Port Chalmers, or St Kilda, or the City of Dunedin, or the communities of Brighton, Fairfield, or Waldronville in the County of Silverpeaks.
18. All those parts of the Invercargill Health District not comprised in the Borough of Gore or the City of Invercargill.

PART II

RATE OF RURAL PRACTICE BONUS

1. Ten percent of any fee payable under regulation 3 or regulation 4 or regulation 5 or regulation 6 or regulation 7 of these regulations.
2. Twenty-five percent of any fee payable under regulation 10 of these regulations.

Reg. 12

THIRD SCHEDULE
IMMUNISATION FEE

	\$
In respect of each occasion on which a patient attends for the administration of a vaccine	7.65

Reg. 13

FOURTH SCHEDULE
FEES FOR SPECIALIST MEDICAL SERVICES

PART I

FEES PAYABLE IN RESPECT OF REFERRED PATIENTS

	\$
1. In respect of the first occasion on which the services were provided to a patient in respect of any medical condition—	
(a) Where the services (other than an electrocardiogram only) were provided by a neurologist, neurosurgeon, paediatrician, psychiatrist, radiotherapist, or specialist physician	22.00
(b) Where the services were provided by any type of specialist other than a type referred to in paragraph (a) of this clause for a child in respect of whom a family benefit is being paid or would be paid if the Social Security Commission were satisfied that the child would be likely to remain permanently in New Zealand	11.00
(c) Where the services were provided by any type of specialist other than a type referred to in paragraph (a) of this clause for any person other than a child referred to in paragraph (b) of this clause	5.45
(d) Where the services consisted of an electrocardiogram only and were provided by a specialist of a type referred to in paragraph (a) of this clause for a child referred to in paragraph (b) of this clause ..	11.00
(e) Where the services consisted of an electrocardiogram only and were provided by a specialist of a type referred to in paragraph (a) of this clause for any person other than a child referred to in paragraph (b) of this clause	5.45

FOURTH SCHEDULE—*continued*
FEES FOR SPECIALIST MEDICAL SERVICES—*continued*

	\$
2. In respect of each subsequent occasion on which the services were provided to the patient in respect of the medical condition—	
(a) For a child referred to in paragraph (b) of clause 1 of this Part of this Schedule	5.20
(b) For a patient referred to in regulation 4 of these regulations	3.30
(c) For a person other than a child referred to in paragraph (a) of this clause or a patient referred to in paragraph (b) of this clause	1.35

PART II

FEES PAYABLE IN RESPECT OF PATIENTS OTHER THAN REFERRED PATIENTS

	\$
1. In respect of services provided for a child in respect of whom a family benefit is being paid or would be paid if the Social Security Commission were satisfied that the child would be likely to remain permanently in New Zealand	5.20
2. In respect of services provided for a patient referred to in regulation 4 of these regulations	3.30
3. In respect of services provided for any person other than a child referred to in clause 1 or a patient referred to in clause 2 of this Part of this Schedule	1.35

Reg. 22

FIFTH SCHEDULE
REGULATIONS, NOTICES, AND ORDERS REVOKED

Title	Statutory Regulations Serial Number
The Social Security (General Medical Services) Regulations 1950	1950/139
The Social Security (General Medical Services) Regulations 1950, Amendment No. 1 ..	1958/20
The Social Security (General Medical Services) Regulations 1950, Amendment No. 2 ..	1963/227
The Social Security (General Medical Services) Regulations 1950, Amendment No. 3 ..	1965/45
The Social Security (Rural Area) Notice 1969 ..	1969/235
The Social Security (Rural Area) Notice 1969, Amendment No. 1	1969/251
The Social Security (Rural Area) Notice 1969, Amendment No. 2	1970/227
The Social Security (Rural Area) Notice 1969, Amendment No. 3	1971/274
The Social Security (Rural Area) Notice 1969, Amendment No. 4	1979/51
The Social Security (Travelling Fees) Order 1978 ..	1978/51
The Social Security (Immunisation Benefit) Order 1985	1985/195

P. G. MILLEN,
Clerk of the Executive Council.

EXPLANATORY NOTE

This note is not part of the regulations, but is intended to indicate their general effect.

These regulations, which come into force on 1 October 1986, re-enact in a consolidated and amended form the following provisions:

- (a) Sections 93, 93A, 94, 94A, 97, and 97A of the Social Security Act 1964, as repealed by section 21 of the Social Security Amendment Act 1986;
- (b) The Social Security (General Medical Services) Regulations 1950;
- (c) The Social Security (Rural Area) Notice 1969;
- (d) The Social Security (Travelling Fees) Order 1978;
- (e) The Social Security (Immunisation Benefit) Order 1985.

The rates of the fees provided by those provisions have also been increased.

The principal regulations are as follows:

Regulation 3 provides that every medical practitioner who provides any general medical services for any patient shall be entitled to receive from the Department of Health, for every occasion on which any such services are provided, the relevant fee as specified in Part I of the First Schedule to the regulations.

Regulation 4 provides a rate of fees higher than that provided by *regulation 3* where the medical practitioner performs general medical services for certain categories of patients. These categories are the same as those contained in section 93 (1A) of the Social Security Act 1964 before its repeal.

Regulation 5 provides a rate of fees higher than that provided by *regulation 3* where the medical practitioner performs general medical services for certain children. This provision is similar to that contained in section 93 (1B) of the Social Security Act 1964 before its repeal.

Regulation 6 provides a rate of fees higher than that provided by *regulation 3* where the medical practitioner provides general medical services on public holidays and at night in response to an urgent request. This provision is similar to that contained in section 93A of the Social Security Act 1964 before its repeal.

Regulation 7 provides a formula by which the fees prescribed for general medical services can be increased if the examination and treatment of the patient necessitated the attendance of the medical practitioner for a continuous period of more than 30 minutes. This provision is similar to that contained in regulation 6 of the Social Security (General Medical Services) Regulations 1950.

Regulation 8 provides that where a patient dies before the arrival of a medical practitioner or rejects the services of a medical practitioner, that medical practitioner will still be deemed to have provided general medical services to that person if the medical practitioner has attended that person elsewhere than at the medical practitioner's surgery or place of residence. This provision re-enacts section 93 (2) of the Social Security Act 1964.

Regulation 9 declares that certain categories of medical services are not general medical services for the purposes of these regulations or Part II of the Social Security Act 1964. These categories are similar to those contained in regulation 4 (2) of the Social Security (General Medical Services) Regulations 1950.

Regulation 10 consolidates the various provisions that provide for travelling allowances for medical practitioners. It provides, in essence, that a medical practitioner who provides any medical services,—

- (a) Outside any borough; or
- (b) Within a borough other than the borough in which the surgery or place of residence of the medical practitioner is situated,—

will be entitled to claim a travelling fee computed at a rate of 18 cents for every kilometre or part of a kilometre necessarily travelled by the medical practitioner in going to and from his or her surgery or place of residence and the patient. The Minister of Health may declare any district to be a borough if the Minister considers that a travelling allowance should not be paid for services within the district by reason of the urban character of the district or any other material reason. The Minister of Health may also declare any borough to be an area in respect of which travelling fees are payable for general medical services provided within that borough if the Minister considers such a step desirable in view of the large area or rural character of the borough, or any other material reason. Provision is also made for the increase of any travelling fees where the Director-General of Health is satisfied that the fees are inadequate having regard to the nature or condition of any roads or the nature of the mode of transport reasonably used by the medical practitioner.

Regulation 10 is based on the following provisions:

- (a) Section 94 of the Social Security Act 1964;
- (b) Regulation 11 of the Social Security (General Medical Services) Regulations 1950.

Regulation 11 provides for rural practice bonuses, primarily where a medical practitioner resides and practises in a rural area. This provision is based on section 94A of the Social Security Act 1964 and the Social Security (Rural Area) Notice 1969.

Regulation 12 provides that if, in the course of an immunisation programme approved by the Department of Health, vaccine is administered to certain categories of persons, the medical practitioner shall be entitled to a specified immunisation fee in lieu of any other fee to which that practitioner might otherwise have been entitled under these regulations. This provision is based on section 97A of the Social Security Act 1964.

Regulation 13 provides that every medical practitioner who provides any specialist medical services for any patient under section 94 of the Act shall be entitled to receive from the Department of Health the relevant fee as specified in the Fourth Schedule to these regulations.

The remaining regulations are of a procedural nature only, and are based on the Social Security (General Medical Services) Regulations 1950.

Issued under the authority of the Regulations Act 1936.

Date of notification in *Gazette*: 30 September 1986.

These regulations are administered in the Department of Health.