

SERVICE SCHEDULE FOR GENERAL PRACTITIONER (GP) REFERRED MAGNETIC RESONANCE IMAGING (MRI)

CONTRACT NO: GPMR###

A. QUICK REFERENCE INFORMATION

1. TERM FOR PROVIDING THE GP REFERRED MRI SERVICE

The Term for the provision of the GP Referred MRI Service is from 1 March 2021 (“Start Date”) until 30 November 2025 (“End Date”) or such earlier date upon which the period is lawfully terminated or cancelled.

ACC may in its sole discretion extend the term of this Service Schedule on no more than two occasions for a period of two years each.

2. PHOS INCLUDED IN THIS SERVICE SCHEDULE (PART B, CLAUSE 5)

Details here.

3. SERVICE ITEMS AND PRICES (PART B, CLAUSE 18)

Table 1 - Service Items and Prices (refer definitions in section 19)

| Service Item Code | Service Item Description | Service Item Definition | Price (excl. GST) | Pricing Unit | Payment schedule (all subject to reports being received in accordance with this Service Schedule) |
|-------------------|-------------------------------|--|-------------------|---------------------------------|--|
| GPMRI_EST | Establishment funding support | Initial (12 month) funding support for the establishment of the GP Referred MRI Service Note: For Lead PHOs already delivering the GPMRI service, this funding is only available for any new PHOs they onboard. | \$0.66 | Per Over 16 Enrolled population | As per approved establishment plan (or onboarding plan in the case of a Lead PHO already delivering the GPMRI service onboarding additional PHOs) (with the first payment on Start Date of Service Schedule, second payment paid on completion of all milestones as per approved establishment plan (to be completed within 12 months) |
| GPR1 | Client MRI Pathway Package | Payment for a Client who has completed the GP Referred MRI pathway. | \$378.69 | Per Client | Invoiced monthly |

| Service Item Code | Service Item Description | Service Item Definition | Price (excl. GST) | Pricing Unit | Payment schedule (all subject to reports being received in accordance with this Service Schedule) |
|--------------------------|--|---|--------------------------|----------------------|--|
| GPMRI_TRAIN1 | Training package Urban – 20 GP / NP training session | In person training for 20 GPs / NPs in an urban location. | \$4,788.55 | Per training session | Invoiced quarterly as per training plan |
| GPMRI_TRAIN2 | Training package Urban – 10 GP / NP training session | In person training for 10 GPs / NPs where there are fewer than 11 GPs / NPs in the surrounding localities. Subject to ACC approval and there being insufficient numbers of GPs / NPs not yet trained to warrant a 20 GP / NP session. | \$2,726.56 | Per training session | Invoiced quarterly as per training plan |
| GPMRI_TRAIN3 | Training Package 10 GP / NP rural training session | In person training for 10 GPs / NPs based in a Rural location | \$3,978.90 | Per training session | Invoiced quarterly as per training plan |
| GPMRI_TRAIN4 | Training Package 5 GP / NP rural training session | In person training for up to 5 GPs / NPs based in a Rural location where there are fewer than 6 GPs / NPs in the surrounding localities. Subject to ACC approval and there being insufficient numbers of GPs / NPs not yet trained to warrant a 10 GP / NP session. | \$2,530.28 | Per training session | Invoiced quarterly as per training plan |
| GPMRI_TRAIN5 | Training package delivered by interactive ¹ virtual technology to group of 5-10 GPs / NPs | Virtual technology training session for those GPs / NPs who may not reasonably be able to access face to face training. Covers training for 5-10 GPs / NPs. | \$1,504.09 | Per training session | Invoiced quarterly as per training plan |

¹ Interactive training should simulate a two-way interaction (as is possible with the in-person training session) to enable GPs / NPs to practice techniques and ask questions of the trainer and clinical lead as appropriate.

| Service Item Code | Service Item Description | Service Item Definition | Price (excl. GST) | Pricing Unit | Payment schedule (all subject to reports being received in accordance with this Service Schedule) |
|-------------------|--|--|-------------------|-------------------|--|
| GPMRI_TTT | Contribution toward Train the Trainer training | A one-off contribution for Train the Trainer training to enable PHOs to expand the number of trainers to deliver GPMRI training. | \$1,066.73 | Once per Lead PHO | Invoiced once as delivered per training plan |
| GPMRI_GOV | Facilitation of Regional Governance Forum | Organisation and facilitation of a Quarterly Regional Governance Forum | \$2,138.79 | Per Forum | Only available to the Forum organiser once delivered in accordance with specifications as per the Regional Steering Group Terms of Reference and invoiced within 3 months of the forum |

Note: The definition of rural vs urban training is based on the distance from the PHO centre (or their registered address) to the training session. Where this distance is greater than 80km, the definition of ‘rural’ training applies. Where this distance is less than 80km, the definition of ‘urban’ training applies. We have included costs to cover travel for the trainer(s) and clinical lead to that location to deliver the training in the rural training session price.

Price Review

ACC will review pricing when, at ACC’s sole discretion, we consider a review necessary. The factors ACC may take into account during a review include, but are not limited to:

- general inflation
- changes in service component costs
- substantial changes in the market

A price review may be triggered by Suppliers or ACC at any stage throughout the Term of the Contract. It is ACC’s sole discretion to determine whether a review is required from the rationale provided for the review. The factors which ACC may consider when reviewing the price are noted above.

If ACC finds that the factors we take into account have not had a significant impact on price, the prices will remain unchanged. ACC may apply any price increase to only some of the service item codes if, in ACC’s sole discretion, it considers that is appropriate.

If ACC provides a price increase, the Supplier must agree any adjustment in writing. The price increase will take effect from a date specified by ACC.

4. RELATIONSHIP MANAGEMENT

Table 2 - Relationship Management

| Level | ACC | Supplier |
|---|----------------------------------|---|
| Client | Recovery Team Member | Individual Staff or Operational Contact |
| Relationship and Performance Management | Engagement & Performance Manager | Operational Contact/Service Manager |
| Service Management | Portfolio Team or Equivalent | Service Manager |

5. ADDRESSES FOR NOTICES (STANDARD TERMS AND CONDITIONS, CLAUSE 23)

NOTICES FOR ACC TO:

ACC Health Procurement (for deliveries)
 Justice Centre
 19 Aitken Street
 Wellington 6011

ACC Health Procurement (for mail)
 P O Box 242
 Wellington 6140
 Marked: "Attention: Procurement Specialist"
 Phone: 0800 400 503
 Email: health.procurement@acc.co.nz

NOTICES FOR SUPPLIER TO:

Supplier Name
 Physical Address (for deliveries)
 Physical Address
 City
 P O Box (for mail)
 City, Postal Code
 Marked: "Attention: First name surname, Position"
 Phone:
 Email:

TABLE OF CONTENTS

| | | |
|-----|--|----|
| 1. | PURPOSE | 6 |
| 2. | SERVICE OBJECTIVES | 6 |
| 3. | SUPPLIER REQUIREMENTS | 6 |
| 4. | SERVICE COMMENCEMENT | 7 |
| 5. | REFERRAL SERVICE LOCATION AND SPECIFIED AREA | 7 |
| 6. | SERVICE REQUIREMENTS..... | 7 |
| 7. | SERVICE QUALITY REQUIREMENTS | 9 |
| 8. | TRAINING..... | 9 |
| 9. | GOVERNANCE..... | 9 |
| 10. | SERVICE EXIT | 10 |
| 11. | EXCLUSIONS..... | 10 |
| 12. | OTHER SUPPLIERS..... | 10 |
| 13. | LINKAGES..... | 10 |
| 14. | REPORTING | 11 |
| 15. | PERFORMANCE REQUIREMENTS | 12 |
| 16. | OPERATIONAL CONTACT..... | 12 |
| 17. | RELATIONSHIP MANAGEMENT | 13 |
| 18. | PAYMENT AND INVOICING..... | 13 |
| 19. | DEFINITIONS AND INTERPRETATION | 13 |
| 20. | GOVERNMENT PROCUREMENT RULES | 14 |
| 21. | APPENDICES | 16 |

B. SERVICE SPECIFICATION FOR GENERAL PRACTITIONER (GP) REFERRED MAGNETIC RESONANCE IMAGING (GPMRI)

1. PURPOSE

1.1. The Service includes:

- 1.1.1. GP or Nurse Practitioner (NP) Referred MRI (GPMRI) for Clients whose knee, lumbar spine, or cervical spine injuries meet the clinical criteria set out in the GPMRI Clinical Pathways (contained within the GPMRI Operational Guidelines), who are trained in accordance with this Service Schedule (“Trained GPs / NPs”);
- 1.1.2. all services provided by the Supplier and trained GPs / NPs working in a general practice which is a member of or affiliated to the Supplier (or a PHO named in Part A, clause 2) in delivering the Service including referral to MRI, follow up by the GP / NP with the Client (including MRI outcome/recommended recovery plan);
- 1.1.3. training of GPs / NPs in the management of specific knee, lumbar spine, or cervical spine injuries and utilisation of the GPMRI Clinical Pathways;
- 1.1.4. establishing processes that will ensure the quality of referrals into the service meet performance requirements; and
- 1.1.5. participation in regional and national governance arrangements, as identified in clause 9.

2. SERVICE OBJECTIVES ACC will measure the success of this service based on the following objectives:

- 2.1.1. GPs / NPs refer eligible Clients who meet the clinical criteria set out in the GPMRI Clinical Pathways contained in the GPMRI Operational Guidelines;
- 2.1.2. increase Clients’ access to assessment against the GPMRI Clinical Pathways from their local GP, NP or practice affiliated to the Supplier or a PHO named in Part A, clause 2;
- 2.1.3. ensure Maori and Pasifika people with appropriate injuries do not face barriers to access GP / NP review and referral to GP / NP referred MRI Services;
- 2.1.4. reduce the time from MRI referral to treatment and return to independence/work for Clients who require specialist care; and
- 2.1.5. ensure timely referral to appropriate care for Clients who require more specialised assessment and treatment.

3. SUPPLIER REQUIREMENTS

3.1. The Supplier must:

- 3.1.1. be a Primary Health Organisation (PHO). A PHO may deliver the service individually or as a lead PHO acting on behalf of the PHOs listed at Part A, clause 2; appoint a GP as a Clinical Lead who will:
 - 3.1.1.1. have oversight of training;
 - 3.1.1.2. have oversight of clinical quality assurance audits; and
 - 3.1.1.3. promote and be an ambassador for the GPMRI Service.

3.2. Only trained GPs / NPs working in a general practice which is a member of or affiliated to the Supplier (or a PHO named in Part A, clause 2) may refer a Client for an MRI.

3.3. Physiotherapists are not currently eligible to provide this service.

- 3.4. A GP Registrar can deliver the service as long as they are trained in GPMRI and work in a practice with an GPMRI trained GP available to oversee their work.
- 3.5. This Service may not be provided by a GP who holds an ACC GP with Special Interest (GPSI) contract. This is because GPSIs can already access MRI services for Clients.
- 3.6. This Service may not be provided by GPs / NPs working under an Urgent Care Clinic contract, unless the service is being delivered under ACC's Cost of Treatment Regulations (CoTR) to an ACC Client who is not enrolled with a PHO.
- 3.7. The PHO should work in partnership with the wider health system to achieve the best outcomes for the Client and provide a seamless continuum of support. This includes developing links and cooperative working arrangements with ACC and other services, including primary care services, specialist health services and voluntary support agencies.

4. SERVICE COMMENCEMENT

4.1. Eligibility for Service

4.1.1. A GPMRI trained GP / NP may refer a Client for MRI if:

- 4.1.1.1. the Client is 16 years or over;
- 4.1.1.2. informed consent has been given for referral, either by a competent Client or by the person who has the legal right to make decisions on the Client's behalf;
- 4.1.1.3. the Client has an injury to the cervical spine, lumbar spine or knee that meets the criteria outlined in the GPMRI Clinical Pathways (contained within the GPMRI Operational Guidelines);
- 4.1.1.4. the Client has been assessed by the trained GP / NP as suitable for referral for MRI; and
- 4.1.1.5. the Date of the Claim Lodgement with ACC is not greater than 6 months.

4.2. You must ensure that all referrals:

- 4.2.1. are sent electronically to ACC's Contracted HTI Suppliers;
- 4.2.2. include the Client's eligibility for the Service set out in clause 4.1.1 and
- 4.2.3. provides information in accordance with the relevant GP Referred MRI Pathway, to support the Client's appropriate referral for MRI.

5. REFERRAL SERVICE LOCATION AND SPECIFIED AREA

5.1. The Service will be provided only for Clients who are either:

- 5.1.1. enrolled in a general practice which is a member of the Supplier or a PHO listed at Part A, Clause 2.
- 5.1.2. not enrolled in a general practice but are receiving treatment from a GP / NP working in an Urgent Care Clinic who is delivering the service under CoTR.

5.2. The referral component of the Service will be provided at the general practices.

6. SERVICE REQUIREMENTS

6.1. Referral System

- 6.1.1. Your electronic referral system must be used by all general practices which are members of the Supplier or a PHO listed at Part A, clause 2.

- 6.1.2. It must also:
 - 6.1.2.1. enable referrals to be sent to all local ACC contracted HTI suppliers to enable Client choice;
 - 6.1.2.2. be able to send referrals electronically to the ACC contracted HTI suppliers via an encrypted electronic referral system;
 - 6.1.2.3. be accessible from within the general practice's Practice Management System (PMS) and be able to store a copy of the referral in the Client record;
 - 6.1.2.4. require the referring GP / NP to confirm that the Client meets the clinical criteria specified within the GPMRI Clinical Pathways, and record the GP's / NP's confirmation;
 - 6.1.2.5. either utilise system logic that connects the referral to the appropriate GPMRI Pathway criteria to ensure that all referrals are confirmed as meeting the criteria by the referring GP / NP prior to being sent to the HTI Supplier; OR
 - 6.1.2.6. provide data that can facilitate manual quality assurance against referral criteria prior to the referral being sent to the MRI Supplier.
 - 6.1.2.7. enable you to collect and report the GP Referred MRI Minimum Data Set (MDS) to ACC; and
 - 6.1.2.8. comply with all current NZ health privacy and data storage requirements.

6.2. Client Pathway Package

- 6.2.1. The Client Pathway Package is an all-inclusive package which comprises:
 - 6.2.1.1. A 'package of services' that will deliver an outcome. Some of these services are provided by the GP / NP (e.g. making referral, following up with Client, capturing outcome information) and some by the PHO (service management, clinical management, infrastructure provision).
 - 6.2.1.2. An extension to the initial consultation is funded within this package to enable an assessment on a Client's presentation with an injury which meets the criteria in clause 4.1. (Note this is additional time over and above the initial consultation, and GP / NP follow-up which are funded under the Cost of Treatment Regulations (COTR) or the Rural General Practice Contract (whichever is applicable) and by any Client co-payment.)
 - 6.2.1.3. After a Client is assessed as eligible for Service, the treating GP / NP must:
 - 6.2.1.3.1. refer the Client for an MRI with the Client's preferred local ACC contracted HTI supplier;
 - 6.2.1.3.2. arrange for a follow-up consultation to discuss and/or communicate the results of the MRI (this may be either in-person, phone-call or through a patient portal) with the Client. Note no Client co-payment can be charged for the follow up consultation as the Client pathway package price includes payment for the follow up consultation;
 - 6.2.1.3.3. where the Client declines or does not present for the follow-up appointment, the Client package payment can still be claimed as long as a GP / NP has reviewed the radiology result and recorded (via outcome reporting) and where possible communicated (via email/a patient portal) what would have been the appropriate recovery plan for the Client; and
 - 6.2.1.3.4. refer the Client to the appropriate rehabilitation or specialist services for further management where required.

7. SERVICE QUALITY REQUIREMENTS

- 7.1. To ensure referrals comply with the eligibility criteria in clause 4.1 you will:
- 7.1.1. ensure 100% of referrals are checked for compliance with the eligibility criteria before they are sent to an ACC contracted HTI supplier (either using system logic or manual audit);
 - 7.1.2. audit the first three referrals from each GP / NP following training in delivering the Service against the eligibility criteria – audit to be completed after the Client Pathway Package has been delivered;
 - 7.1.3. carry out additional audit activities for any GP / NP where there are quality concerns and ensure there is appropriate clinical lead support in these instances;
 - 7.1.4. sample a minimum of 20% of all post MRI referrals, comparing against the eligibility criteria in clause 4.1 - audit to be completed after the Client Pathway Package has been delivered, and
 - 7.1.5. report the results of clinical audits to the quarterly regional steering group at each meeting and to ACC on a quarterly basis as specified in Clause 14.
 - 7.1.5.1. when the audit/check identifies that a referral does not meet the eligibility criteria you will ensure that the referring GP / NP receives appropriate feedback and support from the Clinical Lead.
 - 7.1.5.2. if, on an annual basis, fewer than 85% of all referrals (pre and post MRI) have met quality criteria, you must specify the actions that you will take to address that difference;
 - 7.1.5.3. we may place restrictions on your ability to deliver the Service until we are satisfied that enough quality control mechanisms are in place and/or your training is appropriate to ensure appropriate referrals; and
 - 7.1.6. you must inform ACC via email (primarycare@acc.co.nz) within 5 business days in the event you do not have a Clinical Lead to fulfil the Clinical Lead role (e.g. in the event of resignation and their replacement has not been identified or has not yet started). This requirement does not apply in the case of annual leave, sick leave or other unplanned leave as long as there is another appropriate Clinician available to perform their duties.

8. TRAINING

- 8.1. You must:
- 8.1.1. ensure that all GPs / NPs who deliver the Service have completed an ACC approved training programme, delivered by you in accordance with the standards as agreed with the quarterly regional governance group and detailed in the Operational Guidelines;
 - 8.1.2. deliver training through in person sessions unless the criteria for virtual interactive training in Part A, clause 3 are met;
 - 8.1.3. facilitate virtual interactive training for those GPs / NPs unable to attend in-person sessions; and
 - 8.1.4. ensure all training is delivered by experienced clinicians with oversight from the Clinical Lead.

9. GOVERNANCE

- 9.1. You must attend a quarterly regional governance group which will include representatives from surgery, HTI Supplier, General Practice, other Suppliers and ACC that will maintain oversight of the Services. The Terms of Reference for the quarterly regional governance forum are specified within the Operational Guidelines.

- 9.2. You must be represented at a quarterly national steering group that will provide oversight of the Services, and contribute to the review of training, GPMRI Clinical Pathways and other policy guidelines related to the Services. The Terms of Reference for the quarterly national governance forum are specified within the Operational Guidelines.

10. SERVICE EXIT

- 10.1. Services are completed for a Client when:
- 10.1.1. The Client has received an MRI as a result of GP / NP referral in accordance with this Service Schedule;
 - 10.1.2. a treatment plan has been developed and communicated (either in person, via phone conversation or patient portal) to the Client by a GPMRI trained GP / NP in response to findings of the MRI; and
 - 10.1.3. post MRI outcome data has been reported from the Provider (GP / NP) to the Supplier (PHO).

11. EXCLUSIONS

- 11.1. The following Services are not purchased under this Service Schedule but may be purchased under other Service Schedules:
- 11.1.1. MRI - Imaging Costs – These are sourced under direct contract arrangements between ACC and MRI Suppliers who hold an ACC contract.
 - 11.1.2. Low Tech Imaging – X-Ray, US and CT – referrals for these investigations are excluded from this initiative.
 - 11.1.3. Integrated Care Pathways – These are covered under separate contracting arrangements between ACC and approved consortia.
 - 11.1.4. Surgical and other Specialist Services (i.e. assessment, treatment, follow up).
 - 11.1.5. Rehabilitation Services - (e.g. Vocational Rehabilitation Services and Physiotherapy Treatment).
 - 11.1.6. General Practice (such as procedures) funded through existing mechanisms (e.g. Cost of Treatment Regulations, Rural General Practice Contract, etc.).

12. OTHER SUPPLIERS

- 12.1. ACC reserves the right to appoint additional Suppliers, during the Term of this Service Schedule.

13. LINKAGES

- 13.1. The Supplier will ensure that linkages are maintained with the following Services:
- 13.1.1. Integrated Care Pathways – Proactive engagement with local ICP providers is expected as part of the ongoing development of the GP Referred MRI Service in those areas where ICP contracts are in place. Where multiple ICP providers exist engagement should occur with all providers;
 - 13.1.2. ACC-contracted HTI suppliers;
 - 13.1.3. Physiotherapists;
 - 13.1.4. Orthopaedic surgeons.

14. REPORTING

- 14.1. "Within four weeks of the Start Date, you must:
 - 14.1.1. enter into, and maintain, any agreements required by us to allow you to use the data exchange to share information in accordance with this Service Schedule; and
 - 14.1.2. implement the use of the data exchange arrangements specified by us in your performance of the Service in accordance with this Service Schedule."
- 14.2. Monthly Minimum Dataset (MDS) Reporting
 - 14.2.1. On or before 5.00pm on the fifth Business Day of each month during the Term of this Service Schedule you must send us data relating to the previous month that:
 - 14.2.1.1. complies with the data points specified in clause 21.3 (Appendix 1- Minimum Dataset);
 - 14.2.1.2. is in the form we specify and complies with the Data Specification in clause 21.3 Appendix 1- Minimum Dataset); and
 - 14.2.1.3. has the required fields completed for each referral.
 - 14.2.2. You must provide the first set of data one month after the Service Start Date.
 - 14.2.3. After receiving data from you in accordance with clause 10.1, we will send you confirmation as soon as practicable that confirms the accuracy of MDS data received in order to confirm eligibility for invoicing for services that month.
 - 14.2.4. You must submit a full and complete Minimum Dataset (MDS) in accordance with the Data Specification as included in the Memorandum of Understanding (MOU) Appendix 1 (Reporting) to be eligible to invoice for services that month. Where this report is incomplete and/or does not comply with the Data Specification as included in Appendix 1, we reserve the right to withhold payment for these services.
- 14.3. Quarterly service reporting
 - 14.3.1. On or before 5.00pm on the fifth Business Day of the month following each quarter end, you must send the below data (in addition to the Monthly Minimum Dataset (MDS) Reporting for the month prior as per Clause 14.2)
 - 14.3.1.1. Quarterly Practice and Trained GP / NP Reporting; and
 - 14.3.1.2. Quarterly QA Data.
 - 14.3.2. On or before 5.00pm on the twentieth Day of the month following each quarter end, you must respond to the Supplier Quarterly Reporting Survey (issued to you by ACC):
- 14.4. Establishment Report
 - 14.4.1. On or before 5.00pm on the fifth Business Day of each month during the first 12 months of the Term of this Service Schedule you must provide an update of implementation activities, as per the Establishment plan submitted as part of the Application process.
- 14.5. Refer to Appendix 3 in the Operational Guidelines for a sample reporting template that can be used to submit the above datasets (as per Clause 14.2 and 14.3)

15. PERFORMANCE REQUIREMENTS

- 15.1. Your performance will be measured against Key Performance Indicators specified in the table below:

| # | Objective | Key Performance Indicators | Target | Data Source |
|---|--|--|---|--|
| 1 | Successful Service Implementation | GP / NP training uptake | At least 50% of GPs / NPs complete training in first 12 months. | Quarterly Service Reporting |
| 2 | Local Access to GP / NP assessment and referral for MRI. | Supplier's enrolled population can access GP / NP referred MRI using intra and inter practice referrals. This may be via inter or intra practice referral processes. | Coverage for at least 85% of Supplier enrolled population | Quarterly Service Reporting |
| 3 | Reduce Client Waiting | Post MRI consult occurs within 7 days of receipt of the MRI report where telehealth/patient portal is used to follow up with Client 14 days where the consult is in-person. | 95% of Clients have follow up with GP / NP within 7-14 days (pending follow up method) | MDS reporting |
| 4 | Quality Assurance Processes are met | % of all referrals are checked for compliance with eligibility criteria before being sent to the HTI Supplier | 100% | Quarterly Service Reporting |
| | | Referrals will be assessed post MRI to assess appropriateness of referral (based on outcome) | 100% of the first three referrals from each newly trained GP / NP will be assessed post MRI And) >20% of all referrals | Quarterly Service Reporting Quarterly Service Reporting |
| | | % adherence to clinical criteria at both point of referral and post MRI QA | At least 85% ^[2] of all referrals checked meet criteria (MRI was appropriate) post MRI | MDS reporting and Quarterly Service Reporting |

16. OPERATIONAL CONTACT

- 16.1. During the Term of this Service Schedule the Supplier will nominate a person (as specified in Clause 4 of the Quick Reference Information in Part A of this Service Schedule) to be the main contact for ACC who will undertake the functions of the Relationship Manager at clause 11 of the Standard Terms and Conditions.

^[2] Note: This metric is designed to ensure a high proportion of referrals are appropriate and avoid unnecessary referrals. As GP experience and competency grows, we would expect this number to tend towards 95%.

17. RELATIONSHIP MANAGEMENT

- 17.1. To ensure the continuing effective operation of the service, formal working relationships are to be maintained as defined in Part A, Clause 4, Table 2 - Relationship Management.

18. PAYMENT AND INVOICING

- 18.1. Subject to clause 10 of the Standard Terms and Conditions, the amounts we will pay you for this Service are specified in Part A, Clause 3, Table 1 – Service Items and Prices.
- 18.2. For Lead PHOs already delivering the GPMRI service, the amount requested for Establishment Funding must be limited to the enrolled population of any new PHOs being onboarded.
- 18.3. To receive Establishment Funding up to the maximum agreed amount specified in Part A, Clause 3, Table 1 you must:
- 18.3.1. provide us with invoices that relate to activity that has been completed in accordance with the approved establishment plan (agreed as part of the RFA process); and
 - 18.3.2. Provide reports about the activity as specified in this Service Schedule.
- 18.4. To receive a payment for a Client Pathway Package, you must:
- 18.4.1. submit an invoice to us electronically, within 12 months of the Client exiting the Service.
 - 18.4.2. Ensure the client outcome data has been submitted to ACC via the monthly NMDS for the referral(s) for which you are claiming.
- 18.5. To receive a payment for Training you must:
- 18.5.1. Submit an invoice to us within 3 months of a training session occurring in accordance with the approved training plan (agreed as part of the RFA process, or as agreed through subsequent annual updates to that plan); and
 - 18.5.2. Ensure the training has been conducted in accordance to any training specifications as specified in this Service Schedule.
- 18.6. To receive a payment for Governance you must:
- 18.6.1. Submit an invoice to us within 3 months of the forum occurring; and
 - 18.6.2. Adhere to the specifications for that forum as specified in the Regional Steering Group Terms of Reference in the Operational Guidelines.

19. DEFINITIONS AND INTERPRETATION

- 19.1. In addition to the defined terms in the Standard Terms and Conditions, in this Service Schedule the following terms have the meaning given immediately below:

Client Payment Package

The Client Payment Package is an all-inclusive package which includes funding for both the Supplier and the GP / NP for their respective activities required in the provision of the GPMRI Service. The price for this service item includes a portion to cover GP / NP activities (such as extended initial consult, referral, Client follow up and outcome reporting submission) as well as Supplier activities: technology and system support, quality assurance, clinical leadership, service management and administrative support (including involvement in quarterly national governance on-line forum), reporting capability and data submission through to the Data Exchange. The Client Payment Package may be invoiced once the GP / NP has completed and sent outcome reporting to the PHO and this is reported through the monthly MDS data to ACC.

Date of the Claim Lodgement

The Date of the Claim Lodgement is the date the claim for the client injury was lodged with ACC.

Enrolled Population

Enrolled population means the eligible NZ population enrolled with the PHO in line with the national PHO enrolment criteria and submitted to the Ministry of Health.

General Practitioner

A medical practitioner with vocational registration in general practice and / or a registered medical practitioner working in a general practice setting delivering primary care services.

GP MRI Trained GP / NP

A GP / NP who has completed an ACC approved training programme for the GP Referred MRI service (which includes training on the GPMRI Clinical Pathways).

Nurse Practitioner

A person registered with the Nursing Council of New Zealand with a Nurse Practitioner scope of practice and working in a general practice setting delivering primary care services.

Operational Guidelines

The operational guidelines specified by ACC from time to time. “**GPMRI Operational Guidelines**” has the same meaning.

In person Training

Training delivered in person by a trainer, patient model and participants in the same physical location with clinical oversight by a lead clinician.

Integrated Care Pathways

An ACC service involving integrated pathways and packages of care.

Virtual Training

Training delivered via Zoom or other like technology with a trainer, patient model and other support team in one place, broadcast either live or recorded to one or more people in different locations.

20. GOVERNMENT PROCUREMENT RULES

- 20.1. The parties acknowledge that ACC must comply with the Government Procurement Rules (currently in its fourth edition, effective from 1 October 2019) and any associated guidance issued from time to time (referred to together as the “Procurement Rules”). In order to give effect to the Procurement Rules, the parties agree to the additional matters set out in this clause 20.
- 20.2. The Standard Terms and Conditions as they apply to this Service Schedule are amended as follows:
 - 20.2.1. Clause 8.16(a) is replaced with the following wording: “comply, and ensure the Supplier’s personnel and Subcontractors comply, with all relevant health and safety legislation including the Health and Safety at Work Act 2015 (“HSAWA”)”;
 - 20.2.2. Clause 9.3(c) is replaced with the following wording: “the use or disclosure is required or anticipated by the Procurement Rules, or required by law (including under the Official Information Act 1982), Ministers, or parliamentary convention”;
 - 20.2.3. Clause 16.4(b) is replaced with the following wording: “any subcontract you sign is consistent with this Contract, and includes any other matter which ACC, acting reasonably, advises is necessary in order to ensure compliance with Rule 25 of the Government Procurement Rules”;

- 20.2.4. A new clause 8.5(a) is added after clause 8.5, as follows: “The Supplier must comply with the Supplier Code of Conduct issued by the Ministry of Business, Innovation, and Employment”;
- 20.2.5. A new clause 10.9 is added as follows, under a new heading ‘Payments to Subcontractors’: “You should pay your Subcontractors promptly and offer them payment terms no less favourable than in this Contract. If ACC becomes aware that the Supplier has not paid its Subcontractors without reasonable justification, then ACC may choose to pay those Subcontractors directly, and deduct those amounts from the Charges that would otherwise have been due to the Supplier”.

20.3. You Must:

- 20.3.1. Perform the Services in a manner that gives appropriate regard to the protection of the natural environment, including by looking for opportunities to reduce emissions and waste impacts, such as by procuring and using low-waste and low emissions goods and services where practicable, and
- 20.3.2. Comply, and ensure that its Subcontractors and personnel comply, with all relevant employment standards and laws (including obligations under the Employment Relations Act 2000, Minimum Wage Act 1983, Wages Protection Act 1983, and the Holidays Act 2003). The Supplier will report any instances where it, or its personnel or subcontractors are being investigated by the Labour Inspectorate, or where you identify that you have breached any of the legislation referred to in this paragraph.

21. APPENDICES

APPENDIX 1 – REPORTING

21.1. Overview

21.1.1. You must provide us the data specified in Clause 3.1 below as per the attached Memorandum of Understanding (MOU), in the form we specify on either a monthly or quarterly basis as outlined below for each data set.

21.2. Requirements

21.2.1. Any reports required by ACC will be submitted electronically and using required formats or templates, or online tools where these are available.

21.2.2. Information on how to use the ACC Information Data Exchange (IDE) functionality is detailed in the Operational Guidelines. Appropriate training and support will be provided to enable you to comply with these requirements.

21.3. Data points

21.3.1. Refer to the attached GPMRI Data Sharing Memorandum of Understanding (MOU) for the data points to be supplied on either a monthly or quarterly basis.



MOU GPMRI Service
v0.1.docx

21.3.2. Data dictionaries with data element and data formats definitions, as well as a sample GPMRI Reporting template are included in the Operational Guidelines for reference and use where appropriate.

21.3.3. You acknowledge that we may propose to add, amend or delete some of the data points specified in the GPMRI MOU in consultation with you, as long as the addition or change is reasonable.