

PHO Services Agreement Amendment Protocol (PSAAP) Meeting 23 October 2025

A meeting of PHO Services Agreement Amendment Protocol (PSAAP) took place on Thursday 23 October 2025. The purpose of the meeting was to update PSAAP members on work in process, and to prepare for 2025/26 PSAAP work programme.

Health NZ introduced the Capitation Reweighting project for discussion and feedback. Whilst supportive overall of the project, PSAAP PHO and provider members expressed significant disappointment that ethnicity is not included as a factor. They also noted that not having unmet need accounted for is another limitation of the model. Health NZ talked to the potential inclusion of Care Plus into capitation, as it aligns with the multimorbidity factor in the re-weighting. There was concern that the redistribution of funding implicit in these changes to capitation may impact service provision delivered by PHOs.

Capitation reweighting is a large piece of work and will be a substantial negotiation. Health NZ proposed to establish a dedicated PSAAP negotiation group for the FY2026/27 annual negotiations. Other PSAAP members agreed and agreed to provide nominations shortly with the aim to have the group meeting early next year.

PSAAP were supportive of the automatic enrolment of newborn babies in practices where the mother is enrolled and would consider a proposal for inclusion in the PHOSA/reference document. It is a high priority to enrol pregnant mothers who are not enrolled, but further discussion is needed to agree the best way to enable this.

Revised workforce reporting is underway. The updated reporting template has been circulated with data coming in. PHO and provider members hoped to reduce the administrative burden by automating the data collection process in the longer term. There is also some interest in expanding the reporting in the future to include vacancies and/or optimal staffing requirements.

The Chair of the Primary Care Data Governance Group presented the work to date. The Group noted the tight timeframe for the proposed go-live date early in 2026 and it was suggested that focussing on just the health target would be advisable.

Contracted Providers proposed that PSAAP agree to allow different fees for urgent care provided in general practice. Neither the PHOs nor Health NZ agreed with this proposal but PHOs and Te Kahui believe more discussion is needed. Contracted Providers also suggested that youth rates should be the same as adult fees. This can be explored further. Contracted Providers noted that they have limited means to contest Health NZ's position on contractual interpretation.

The proposed PSAAP 2025/26 work programme was noted by PSAAP. It includes important items for members, including developing a more fit-for-purpose ASRFI methodology.

The long form agreement was raised as requiring urgent attention, but this matter is not part of PSAAP and must continue to be managed and resolved outside PSAAP.

The next PSAAP meeting will be in February 2026.