# Additional Care Supplement Criteria

# Updated July 2024

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| **Antenatal** | **Criteria Description** | **Weighting** | **Notes** | **Phase One** | **Phase Two** |
| 1 | Ethnicity: Māori | Moderate | The LMC may claim one ethnicity fee per woman | **n/a** | **n/a** |
| 2 | Ethnicity: Pacific | Moderate |
| 3 | Ethnicity: Indian | Moderate |
| 4 | Age under 20 years at registration | High |  | Yes | No |
| 5 | Current refugee status | High |  | Yes | No |
| 6 | Received 2 or more visits in 1st trimester (excluding FARCP and pregnancy loss services) | Moderate |  | **n/a** | **n/a** |
| 7 | Received 5 visits in 2nd trimester (excluding FARCP and acute/after-hours call outs) | Moderate |  | **n/a** | **n/a** |
| 8 | Received 6 or more visits in 2nd trimester (excluding FARCP and acute/after- hours call outs) | High | Payment for antenatal criterion 8 replaces payment for antenatal criterion 7 | **n/a** | **n/a** |
| 9 | Received 10 visits in 3rd trimester (excluding FARCP and acute/after-hours call outs) | Moderate |  | **n/a** | **n/a** |
| 10 | Received 11 or more visits in 3rd trimester (excluding FARCP and acute/after- hours call outs) | High | Payment for antenatal criterion 10 replaces payment for antenatal criterion 9 | **n/a** | **n/a** |
| 11 | Received 2 or more visits of 60 minutes or more duration (excluding FARCP) in the antenatal period | High |  | **n/a** | **n/a** |
| 12 | Received 1 acute/after-hours in-person visit or assessment | High | Claimable per call-out | Yes  |  No |
| 13 | LMC attendance at 1 or more multi-disciplinary meetings during the antenatal period | Moderate |  | **n/a** | **n/a** |
| 14 | Received 2 or more home visits during the antenatal period | High |  | **n/a** | **n/a** |
| 15 | Use of professional interpreter services (telephone or in-person) | Low | Claimable per appointment when a professional interpreting service is used | No | Yes |
| 16 | Condition meeting the "Emergency" definition under the Referral Guidelines (LMC has continued to provide in person care) | High |  | Yes |  No |
| 17 | Condition meeting the "Consultation" definition under the Referral Guidelines (LMC has continued to provide care) | Low |  | **n/a** | **n/a** |
| 18 | Condition meeting the "Transfer of clinical responsibility" definition under the Referral Guidelines (LMC has continued to provide care) | Moderate | LMC can only claim payment for antenatal criterion 18 or antenatal criterion 17 | **n/a** | **n/a** |
| **Labour & birth** | **Criteria Description** | **Weighting**  | **Notes** |  |  |
| 1 | Ethnicity: Māori | Moderate | The LMC may claim one ethnicity fee per woman | **n/a** | **n/a** |
| 2 | Ethnicity: Pacific | Moderate | **n/a** | **n/a** |
| 3 | Ethnicity: Indian | Moderate | **n/a** | **n/a** |
| 4 | Age under 20 years at registration | High |  | Yes | No |
| 5 | Current refugee status | High |  | Yes | No |
| 6 | Use of professional interpreter services | High | Claimable when a professional interpreting service is used | Yes | No |
| 7 | Received more than 1 in-person visit in early labour | High | Claimable per in-person assessment | Yes (auditing will be added in Phase 2) | No |
| 8 | Condition meeting the "Emergency" definition under the Referral Guidelines (LMC has continued to provide care) | High |  | **n/a** | **n/a** |
| **Postnatal** | **Criteria Description** | **Weighting** | **Notes** |  |  |
| 1 | Mother or baby ethnicity: Māori | Moderate | The LMC may claim one ethnicity fee per woman and baby | **n/a** | **n/a** |
| 2 | Mother or baby ethnicity: Pacific | Moderate | **n/a** | **n/a** |
| 3 | Mother or baby ethnicity: Indian | Moderate | **n/a** | **n/a** |
| 4 | Age under 20 years at registration | High |  | Yes | No |
| 5 | Current refugee status | High |  | Yes | No |
| 6 | Received 1 acute/after-hours in-person visit or assessment  | High | Claimable per call-out | Yes | No |
| 7 | Multiple neonates born at ≤35+6 weeks gestation | Moderate |  | Yes | No |
| 8 | Multiple neonates born at ≥36+0 weeks gestation | Maximum |  | Yes | No |
| 9 | Received 10 visits in the postnatal period (excluding FARCP) | High |  | Yes | No |
| 10 | Received 11 or more visits in the postnatal period (excluding FARCP) | Maximum | Payment for postnatal criterion 10 replaces payment for postnatal criterion 9 | Yes | No |
| 11 | Received 2 or more visits of 75 minutes or more duration (excluding FARCP) in the postnatal period | High |  | Yes | No |
| 12 | LMC attendance at 1 or more multi-disciplinary meetings | Moderate |  | **n/a** | **n/a** |
|  13 | Use of professional interpreter services | Low | Claimable per appointment when a professional interpreting service was used | No | Yes |
| 14 | Condition meeting the "Emergency" definition under the Referral Guidelines (LMC has continued to provide care) | High |  | Yes | No |
| 15 | Condition meeting the "Consultation" definition under the Referral Guidelines (LMC has continued to provide care) | Moderate |  | **n/a** | **n/a** |
| 16 | Condition meeting the "Transfer of clinical responsibility" definition under the Referral Guidelines (LMC has continued to provide care) | Moderate | LMC can only claim payment for postnatal criterion 16 or postnatal criterion 15 | **n/a** | **n/a** |