

[DATE] November 2008

Maternity Provider

Dear Sir/Madam

Re: Primary Maternity Services Notice 2007 and Caesarean Sections

The Ministry of Health (“the Ministry”) would like to highlight to all providers of maternity services the fees that can be claimed under the Primary Maternity Services Notice 2007 (“the Notice”) for women who have undergone an elective or emergency caesarean section.

Part B, Definitions and Interpretation, B1(b)(v) states that Primary Maternity Services do not include caesarean sections. This is because DHBs are funded directly to provide secondary maternity services.

Nevertheless, payment for attendance at an emergency or planned caesarean-section is possible in certain limited circumstances:

- Clause DA24(4) of the Notice allows the payment of the labour and birth fee if clinical responsibility for the labour and birth is intended to remain with the lead maternity carer (“LMC”) but circumstances then change and clinical responsibility transfers after established labour to secondary maternity services. (Examples of such situations may be an emergency caesarean section, forceps or vacuum delivery.)
- Clause DA25, labour and birth (exceptional circumstances) provides a woman with continuing support and continuity of care during labour and birth where there has been a transfer of care to secondary services. This fee can be claimed for DA25 (a), (b), (c) and where the Ministry agrees as outlined in (d).
- Exceptional circumstances can be paid acknowledging LMC attendance at the birth, for women who have been transferred to secondary care not more than 48 hours before established labour or birth – see DA25(a). The LMC must attend the birth in order for this fee to be paid. (Examples of such situations may include where a breech presentation is diagnosed and a caesarean section is performed the following day.)
- Clause DA25(b) allows the payment of the exceptional circumstances fee where there is no labour and it was anticipated that clinical responsibility for the labour and birth would remain with the LMC but circumstances change giving no opportunity for a planned transfer (an example of such situations may be an abrupted placenta.)
- Clause DA25(c) specifically allows the attendance of the LMC at an elective caesarean section where the LMC has provided second and third trimester care.

These provisions however are not intended to be used as a standard payment where there is an elective caesarean section.

It is also important to point out that clause CC2 states that no claim is payable if the claim is covered by another arrangement. That is, where the primary maternity services that relate to the claim have been provided by an authorised practitioner in their capacity as an employee of a DHB.

Yours sincerely

A handwritten signature in black ink, reading "Jane I. Coster". The signature is written in a cursive style with a large initial "J" and "C".

Jane I Coster
Senior Advisor
Maternity Services and Contracts
Population Health Directorate