

Clinical: Women's Health  
Financial/ Funder: Eligibility  
Proactive Release: 27 July 2018

13 July 2018

██████████  
Waikato Reporter  
NZ Herald

E-mail: ██████████

Dear ██████████

### Official Information Act (1982) Request

I write in response to your Official Information Act request, which we received on 25 June 2018. You requested information on maternity services for non-eligible women, and our responses are set out below each question:

For context, each year over 7,000 women will use CM Health services and facilities to give birth. Further information on these services is publicly available on our website in the *“Annual Women’s Health and New Born Report 2017”*.

Our responses regarding financial details on “non-residents” use the invoiced amounts for services provided to non-New Zealand citizens, who are not entitled (ineligible) to receive publicly-funded healthcare under the 2011 Eligibility Direction. The amounts will exclude costs for non-New Zealand citizens for treatments that are not billable under that Direction. For example: treating notifiable infectious diseases, Maternity care for women who have an eligible partner, and care for those under Australian or UK reciprocal health agreements etc.

More information on the Ministry of Health 2011 Eligibility Direction is available at:

- <https://www.health.govt.nz/new-zealand-health-system/eligibility-publicly-funded-health-services/guide-eligibility-publicly-funded-health-services>

1. How many non-resident women gave birth in hospitals run by the DHB in the past five years?
  - a. Please break down numbers by year and hospital.

The numbers of women birthing in all CM Health facilities and services for the five years are provided in **Table 1** below:

Year	2013/14	2014/15	2015/16	2016/17	2017/2018
Numbers	172	146	155	144	113

**Table 1: Note - 2017/2018 total is to mid-June only**

2. Were any non-residents billed by the DHB for the births?
  - a. If so how many?

All people who are determined to be ineligible for publicly funded healthcare (under the Ministry of Health *Eligibility Direction 2011*) are invoiced. The number of women billed for birthing is in Table 1 above, and they were all invoiced.

3. Of those who were billed, how many paid the bill, and what was the total each year?

Our systems for invoicing do not enable us to confirm who has paid what amounts by service type (e.g., delivery versus other forms of care), but we are able to provide the total amounts invoiced per annum for Maternity services, in Table 2 below:

Year	2013/14	2014/15	2015/16	2016/17	2017/2018
Invoiced totals	\$657,538	\$493,956	\$613,503	\$586,728	\$788,756

Table 2: note amounts incl. GST

To show the trend and context, the total amounts invoiced and the amounts of unpaid debt per year for all CMDHB services are in Table 3 below:

Year	2013/14	2014/15	2015/16	2016/17	2017/2018
Total Invoiced	\$8,768,519	\$7,921,731	\$8,332,907	\$8,419,735	\$9,862,805
Total Paid	\$3,071,257	\$3,606,651	\$4,947,487	\$4,599,578	\$4,720,929

Table 3: note amounts incl. GST and 2017/18 is only 11 months

4. What was the cost of the most inexpensive and expensive non-resident births for the DHB in the past five years, and were those bills paid?

The costs are provided in Table 4 below. Please note that maternity services have a 'package of care' pricing, except for high-cost births (that may involve additional care or services. For 2017/18, a *Normal Birth* package cost is \$8,048 (excl. GST) and a *Caesarean Birth* package cost is \$13,044 (excl. GST)).

Year	2013/14	2014/15	2015/16	2016/17	2017/2018
Most expensive	\$18,918	\$8,854	\$17,708	\$9,296	\$13,044
Most inexpensive	\$2,396	\$2,396	\$2,396	\$2,516	\$4,380

5. Did the DHB sue any of the non-residents for non-payment?
  - a. If so, what was the total sued for each year?
  - b. Were any cases won and the money paid back?

The DHB does not take people invoiced for health care services to court, or sue individuals to recover costs. All non-resident (ineligible) patients are invoiced for their treatment as required by the Ministry of Health 2011 Eligibility Direction.

Debts incurred for all health services received by ineligible patients are expected to be paid, or a payment plan put in place within 90 days. If payment is not made, the debt is transferred to Baycorp to manage the ongoing debt collection process.

We are aware that some women who are ineligible for publicly funded services but requiring maternity services will elect to set up a payment plan in advance of birthing, so that by the time the baby is born the debt is reduced.

There have been two cases where eligibility for health services was challenged, which were taken to the Disputes Tribunal, and awarded to the DHB. However, in both cases the women did not have the financial capacity to pay.

**6. What was the legal cost to the DHB of pursuing those birth costs?**

There have been no legal costs incurred for these debts. Any debt collection fees incurred are passed onto the non-resident (ineligible) patient; as per our policy and the Ministry of Health 2011 Eligibility Direction.

**7. Has the DHB experienced “birth tourists” as other countries do, whereby non-residents give birth in a NZ hospital in an effort to claim residency/ citizenship?  
a. (Please elaborate)**

Since 2006, to be able to claim NZ citizenship status for a baby, all births require at least one parent to be confirmed as eligible as per the Ministry of Health Eligibility Direction 2011.

**8. Has the DHB ever turned away any expectant mothers because they were non-residents?**

As a NZ publicly-funded NZ hospital, no expectant mothers are turned away at the point of labour/ birthing. We have a duty to treat and provide care - and then to determine / confirm eligibility. For those who are not eligible, we are required to invoice for ‘payment for services’ as per Ministry of Health policy and Eligibility Direction.

**9. Have any non-residents used fake passports or identification to achieve a free birth?**

There have been cases of identity fraud by ineligible patients, but none of these related to women seeking maternity care.

**10. Does the DHB run any fraud-type campaigns/ hotlines to try and stamp out non-residency birth non-payments/ frauds?**

Within clinical settings, identity fraud can be difficult to isolate and is usually picked up via unrelated diagnostic activity (such as laboratory blood results), or more frequently when the Eligibility Team are dealing with evidence (such as passport information). Many people will not have requisite eligibility information with them when they present to the Emergency Department, so the information to determine eligibility is usually provided via contact with Immigration NZ, making identity fraud checking difficult.

We continuously work with our CM Health staff to educate and support them on correct processes for confirming eligibility for publicly-funded services. Because of the complexity, our approach is that if the condition is acute, people presenting will always be treated first. However, they will be made aware that if they are deemed not eligible for publicly funded services they will be charged for those services. All CM Health staff have a role to assist, identify and alert patients of the eligibility checking processes. Once eligibility status is confirmed, this is entered into the Patient Management System (iPM) by our Eligibility Team for future reference.

The Ministry of Health operate *The Health Integrity Line* - 0800 424 888 – as a free, anonymous 24/7 phone-line, which responds to reports of fraud or other activity of concern in the health system. While the *Health Integrity Line* is primarily for the use of health sector employees, anyone can contact the number. The service is operated by Crime-Stoppers who run integrity contact services for a range of government agencies, and is staffed by specially trained operators.

I trust this information satisfactorily answers your request. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act.

Please note that this response or an edited version of this may be published on the Counties Manukau DHB website.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'G. Johnson', with a long, sweeping horizontal line extending to the right.

Gloria Johnson  
**Acting Chief Executive**