Business requirement specifications for changes to Free HPV Cervical Screening -

19 June 2024

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Document Control

Version	Date	Author	Changes
0.1	3/05/2024	Nikhil Ruhela	First draft
0.2	6/05/2024	Nikhil Ruhela	Incorporated feedback from Anthony and applied style template. Ready for internal socialisation.
0.3	7/05/2024	Anthony Townsend	Updated based on internal team review and feedback.
0.4	8/05/2024	Nikhil Ruhela	Updated based on review and feedback. Accepted all track changes and removed resolved comments.
1.0	19/6/2024	Anthony Townsend	Updated to include pricing.

Introduction

Purpose

The purpose of this document is to provide a comprehensive and unified source of information on the upcoming changes to the claiming rules for our HPV Primary screening programme. It aims to detail the various funding categories, their definitions, and the respective amounts that can be claimed under each category. This document serves as a guide for suppliers of Patient Management Systems (PMS), claiming, and reporting systems to implement the new funding arrangements accurately and efficiently in their claiming systems.

Background

The National Cervical Screening Programme (NCSP) introduced HPV Primary Screening in Aotearoa New Zealand on 12 September 2023. The new cervical screening test is expected to increase screening rates and significantly reduce cervical cancer deaths in Aotearoa New Zealand.

Interim funding model

In September 2023, at the time of introducing HPV tests for Cervical Screening, an interim funding model was introduced to support the HPV Primary Screening across Aotearoa.

The interim funding model enabled zero-fees HPV screening for priority populations, and free follow up testing for everyone (even if they are not eligible for free routine cervical screening).

Priority populations include:

- All Unscreened and Under-screened
- Priority Group (must be due for screening or it is no more than 6 months before their next screen is due)
 - o Māori, Pacific
 - o CSC Holders
- All Follow-Up Screens.

Comprehensive and sustainable funding model

From November 2023 to April 2024, work was undertaken with the Primary Care/General Practice sector, Screening Support Services, and Sexual Wellbeing Aotearoa (formerly Family Planning) to design a comprehensive and sustainable funding model.

New funding arrangements were endorsed by our Sector Funding Design Group on 5 April 2024 and noted by the PHO Service Agreement Amendment Protocol (PSAAP) Group on 19 June 2024.

The new funding arrangements will come into effect from 1 July 2024.

Scope

The scope of this document is to provide guidance for suppliers of Patient Management Systems (PMS), claiming, and reporting systems to reflect the new funding arrangements for HPV Primary Screening only. Any changes to provider contracts to reflect the new funding arrangements are outside the scope of this guidance.

HPV Primary Screening Funding Categories

Category Definitions

To be eligible for free cervical screening (regardless of whether an HPV self-test/clinician assisted test or cervical sample is taken), participants must meet one of the following criteria as outlined in the table below.

Funding Category	Eligibility Criteria
HPV Primary Screening - Unscreened and Under- screened	 Women and people with a cervix aged 30 to 74 years who have never been screened for cervical cancer. Under-screened Women and people with a cervix aged 30 to 69 years (or aged under 30 years if they are already part of the National Cervical Screening Programme); and it has been: Five years or more (three years or more if immune deficient) from their previous normal cytology screen. Seven years or more (five years or more if immune deficient) since their last normal HPV test. Women and people with a cervix aged 70 to 74 years who have not had: two consecutive normal cervical cytology results between age 62 to 69 years, OR a 'HPV not detected' result between age 65 to 69 years.
HPV Primary Screening - Priority Groups	Women and people with a cervix aged 25 to 69 years (or aged under 25 years and already part of the National Cervical Screening Programme) who are due for cervical screening and are: - Māori, - Pacific, or - Holders of a Community Services Card (CSC) regardless of ethnicity. Note: Screening tests are only funded if the patient is due for screening, or if it is no more than 6 months before their next screen is due. This is irrespective of whether the patient has clinically relevant symptoms. If a patient that is otherwise eligible for zero-fees screening presents with clinically relevant symptoms but is not due recall (and it is more than 6 months before they will be due for recall), this is not funded for a zero-fees screen. This is because it is a diagnostic test, not a screening test under the National Cervical Screening Programme. Refer to the clinical guidelines for determining when a person is due. Refer to the Glossary in Appendices for the definition of immune deficient individuals.
HPV Primary Screening - Follow-up testing	 Follow-up testing is fully funded for everyone who is eligible for publicly funded health services in New Zealand, regardless of their eligibility for fully funded routine screening. However, for a test to be classified as a follow-up test, it needs to meet the criteria listed below: All recommended HPV and cytology follow-up testing after 'HPV Other' detected (until returned to routine screening).

Funding Category	Eligibility Criteria
	 People who have not yet been returned to routine interval screening (prior to the commencement of the HPV primary screening programme on 12 September 2023) and require follow-up testing (e.g., 12 months repeat screening after a previous low-grade cytology result).
	 Repeat screening after an invalid or unsuitable for analysis HPV test result, or an unsatisfactory cytology sample. This includes test handling errors.
	 Test of Cure (including those eligible for a Test of Cure because of historical high-grade results) or recommended follow-up after colposcopy.
	 Annual co-testing (for life) because of the history of a previous HPV- negative high-grade cervical or vaginal lesion, or a history of adenocarcinoma in-situ (AIS) where the HPV status prior to treatment is unknown.

Claim Amounts

The claim amount is based on a combination of the participant demographic factors, their screening history, and the screening provider. This is detailed in the tables below.

For Primary Care/Sexual Wellbeing Aotearoa Providers

Name	Description	Purchase Unit ID	Price (per screen)
HPV Primary Screening - Priority Groups	HPV primary screening for participants who are due for screening and are Māori, Pacific, or Community Service Card holders.	NSU002	\$ 50.00 (GST exclusive)
HPV Primary Screening – Unscreened and Under- screened (Māori or Pacific people)	HPV primary screening for all unscreened and underscreened Māori or Pacific people.	NSU005	\$ 60.00 (GST exclusive)
HPV Primary Screening - Unscreened and Under- screened (non-Māori, non- Pacific people).	HPV primary screening for all unscreened and underscreened non-Māori, non-Pacific people.	NSU004	\$ 50.00 (GST exclusive)
HPV Primary Screening - Follow-up testing.	Follow up testing, as clinically indicated.	NSU003	\$ 72.00 (GST exclusive)

Claiming hierarchy

You can only claim once per screening test, and under only one category. For routine screening, please apply the following hierarchy:

- Un / under-screened:
 - o Māori / Pacific
 - o Non-Māori or Non-Pacific
- Priority Groups
 - o Māori / Pacific
 - o CSC holders

Note: Refer to the flow chart in Appendices for assessing the eligibility of a participant to free screening.

Co-Payments

Participants who are eligible for free screening must not be charged any co-payment in relation to their cervical screening.

Changes to Claiming Rules

This section summarises the changes to claiming rules coming into effect from 1 July 2024.

Summary of Changes

- A new funding category / rate for Un/Under-Screened Māori or Pacific for claiming.
 - o Invoices to Te Whatu Ora for this category will use a new PU Code NSU005.
 - Existing PU Code NSU004 will be used for Un/Under-Screened non-Māori or Pacific.
- Apply new rates across the four rate categories (the three existing categories and the new category above).

Funding arrangement for HPV Screening - 12 Sep 2023 to 30 June 2024

The table below provides a summary of funding categories and rates in place from 12 Sep 2023 to 30 June 2024.

Category	Population Description	Purchase Unit ID	Primary Care Current Pricing Rates (Sep 2023 – Jun 2024)
Unscreened/ Under- Screened	All Un/Under-Screened	NSU004	\$50.00
Priority Group	Due for a screen Māori and Pacific who are not Un/Under-Screened, or all CSC holders	NSU002	\$35.00
Follow Up	Anyone	NSU003	\$50.00
Routine Screening	Routine screening for all other population demographics not mentioned above	-	Not Funded under this initiative

Funding arrangement for HPV Screening - 1 July 2024 onwards

There is no change to the population eligibility rules for free HPV Cervical Screening. The changes applicable from 1 July 2024 are:

- A new funding category / rate for Un/Under-Screened Māori or Pacific for claiming.
 - o Invoices to Te Whatu Ora for this category will use a new PU Code NSU005.
 - Existing PU Code NSU004 will be used for Un/Under-Screened non-Māori or Pacific.

 Apply new rates across the four rate categories (the three existing categories and the new category above).

For Primary Care/Sexual Wellbeing Aotearoa Providers

The changes are marked in **Dark Red Text** in the table below:

Category	Population Description	Purchase Unit ID	Current Pricing Rates (Sep 2023 – Jun 2024)	Pricing Rates (From 1 July 2024)
Unscreened/ Under-	Māori or Pacific	NSU005	\$50.00	\$60.00 GST exclusive
Screened	Non-Māori or Non-Pacific	NSU004		\$50.00 GST exclusive
Priority Group	Due for a screen Māori and Pacific who are not Un/Under-Screened, or CSC holders	NSU002	\$35.00	\$50.00 GST exclusive
Follow Up	Anyone	NSU003	\$50.00	\$72.00 GST exclusive
Routine Screening	Routine screening for all other population demographics not mentioned above	-	Not Funded under this initiative	Not Funded under this initiative

These changes play an important role in reducing health inequities by enabling free HPV cervical screening tests for key groups including those populations that are at a higher risk of cervical cancer. Increasing screening coverage for these groups will play a critical role in helping more people to access the programme and detect cancer earlier.

Reporting Requirements

There is no change to reporting requirements. The table below sets out the quarterly quantitative reporting requirements for free HPV Cervical screening eligible claims. The PHOs aggregate the claims data received from the practices and submit to the National Health Screening Unit.

Funding category	Ethnicity	Quarterly screening volumes
Routine screens for Priority groups	Māori	
	Pacific	
	Asian Community Service Card holders	
	Other Community Service Card holders	
	Total	
Un-screened	Māori	
	Pacific	
	Asian	
	Other	
	Total	
Under-screened	Māori	
	Pacific	
	Asian	
	Other	
	Total	
Follow-up	Māori	
·	Pacific	
	Asian	
	Other	
	Total	

Note: While Asian ethnicity is not a specific eligibility criterion for publicly funded HPV screening, this population group has had historically low screening rates and capturing data is important to enable visibility of screening volumes for those of Asian ethnicity where they are CSC holders, Un/under-screened, or undertaking follow-up tests.

Contact for Support

If you need more information about who can get free screening or how much funding is available, please contact the following:

Screening Support

Phone: 0800 223 987

e-mail: screening@health.govt.nz

Commissioning Implementation Lead - HPV

Anthony Townsend

National Cervical Screening Programme / HPV Primary Screening Implementation

National Public Health Service

e-mail: anthony.townsend@tewhatuora.govt.nz

Appendices

Glossary

Term	Definition
CSC	Community Service Card
FDG	Funding Design Group is established to support the development of a comprehensive and sustainable funding model. The FDG included representatives from GPs, PHOs, Sexual Wellbeing Aotearoa (formerly Family Planning), SSS, and PSAAP agents, such as GenPro.
GP	General Practices
HPV Immune	Human papillomavirus See Clinical Practice Guidelines for Cervical Screening in Aotearoa New
NCSP PHO	 Zealand June 2023, p 74) https://www.tewhatuora.govt.nz/assets/For-the-health-sector/NSU/Publications/clinical_practice_guidelines_final_version_1-v2.1-2.pdf HIV positive Solid organ transplant Haemopoietic stem cell transplants On the following immune suppressant medications: Adilmumab, Azathioprine Cyclosporin, Infliximab, Methotrexate, Fingolimod, Natalizumab, Dimethyl Fumarate, Teriflunamide. Glatiramer Acetate and Interferon Beta have limited information but participants on these medications qualify for increased surveillance. This list is not exhaustive and is subject to change. National Cervical Screening Programme Primary Health Organisations
Priority Group	 Women and people with a cervix aged 25 to 69 years (or aged under 25 years if they are already part of the National Cervical Screening Programme) who are due for cervical screening (or it is no more than 6 months before their next screen is due) and are: Māori, Pacific, Holders of a Community Services Card (CSC) regardless of ethnicity.
PSAAP	PHO Services Agreement Amendment Protocol
SSS	Screening Support Services
Under- screened	 Women and people with a cervix aged 30 to 69 years (or aged under 30 years if they are already part of the National Cervical Screening Programme); and it has been: Five years or more (three years or more if immune deficient) from their previous normal cytology screen. Seven years or more (five years or more if immune deficient) since their last normal HPV test. Women and people with a cervix aged 70 to 74 years who have not had: two consecutive normal cervical cytology results between age 62 to 69 years, OR a 'HPV not detected' result between age 65 to 69 years.
Unscreened	Women and people with a cervix aged 30 to 74 years who have never been screened for cervical cancer.

FAQs

1. Are screening tests funded if the patient is not due for a cervical screen?

Screening tests are only funded if the patient is due for screening, or if it is no more than 6 months before their next screen is due.

This is irrespective of whether the patient has clinically relevant symptoms. If a patient that is otherwise eligible for zero-fees screening presents with clinically relevant symptoms but is not due recall (and it is more than 6 months before they will be due for recall), this is not funded for a zero-fees screen. This is because it is a diagnostic test, not a screening test under the National Cervical Screening Programme.

Refer to the clinical guidelines for determining when a person is due.

2. What about eligibility following a total hysterectomy?

Some women and people who have had a total hysterectomy also require cervical screening (please refer to the NCSP Clinical Guidelines1 p.62 for further detail).

The same eligibility criteria for zero-fees screening applies to these women and people i.e., they are eligible if they require cervical screening, and meet one of the following criteria:

- Are un/under-screened,
- · Need follow up testing as defined in this document, or
- Are Māori, Pacific, or hold a community-services card.

3. If a woman or person with a cervix has clinically relevant symptoms, are they eligible for zero-fees screening?

Screening tests are for people who do not have any symptoms. Therefore, the presence of symptoms is not an eligibility criterion for zero-fees screening.

However, if a person with symptoms is due for cervical screening (or due within the next six months) and is entitled to zero-fees screening, the fee can be claimed.

A co-test (HPV and cytology on a cervical sample) is recommended for people with symptoms.

The fee that can be claimed is related to the person's eligibility for zero-fees screening as described in this document.

4. Can a person request a co-test without a clinical indication?

Laboratories are not processing co-tests unless an appropriate clinical reason is written on the lab form, or a Test of Cure is indicated. If a co-test is not clinically indicated the laboratory will initially process the HPV test, and only perform cytology if HPV is detected.

Please note that if symptomatic, writing "clinically indicated" is not sufficient—the specific reason must be provided.

5. Are women and people with a cervix under 25 years eligible for screening?

People under 25 years **should not** be offered cervical screening.

The exception is those aged 20-24 who have previously started cervical screening (e.g., they commenced screening before the screening age was lifted to 25 years). In this case, they should be recalled in accordance with clinical guidelines and will be eligible for zero-fees screening if:

- They meet the eligibility criteria for zero-fees screening (i.e., require follow up testing or are Māori, Pacific, or hold a community services card), and
- Are due for screening, or it is no more than 6 months before they are due for recall.

6. Does HPV vaccination status impact when a woman or person with a cervix is recommended to be screened?

HPV vaccination status does not impact on screening recommendations.

7. Are colposcopy referrals and/or patient consultations to discuss results included in the 'follow up' category?

You cannot make a separate claim for patient consultations to discuss results, or for referrals to colposcopy. We have now factored in the time taken to discuss positive results and complete referrals into the new test prices.

8. Why does the reporting require collection of data by Asian ethnicity when this is not a criterion for publicly funded HPV screening?

While Asian ethnicity is not a specific eligibility criterion for publicly funded HPV screening, this population group has had historically low screening rates and capturing data is important to enable visibility of screening volumes for those of Asian ethnicity where they are CSC holders, Un/under-screened, or undertaking follow-up tests.

9. Is there a funding cap on screening volumes?

General Practice / PHO screening volumes are uncapped.

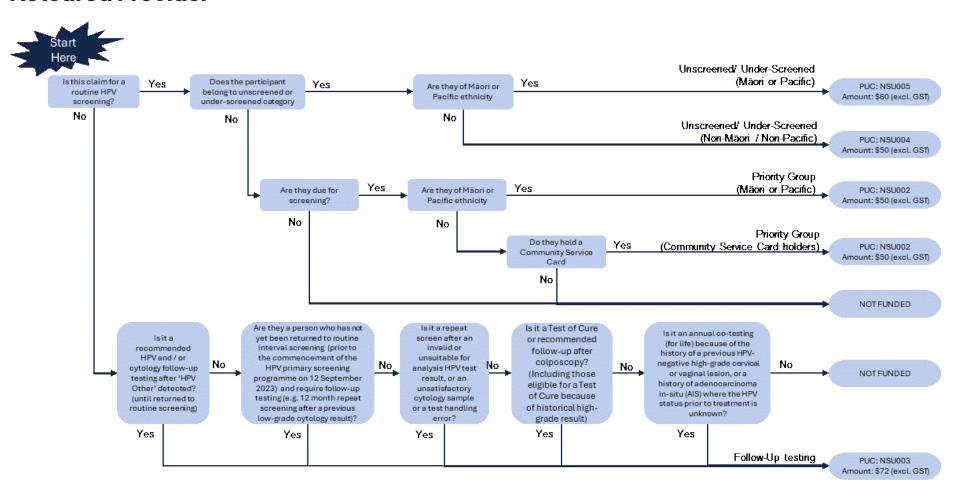
10. If a participant withdraws from retaining their details on the register, are they still eligible for free HPV funding?

Yes, they are still eligible for funding if they otherwise meet funding criteria. Note if a participant decides to withdraw their details from the register, the responsibility for their screening lies with their primary care provider and themselves.

11. Are participants who are aged under 25 years eligible for zero-fees follow-up testing?

Yes, anyone who is under 25 years and already on a follow-up testing pathway (e.g., because they commenced screening before the NCSP starting age was lifted from 20 years to 25 years) is eligible for zero-fees follow-up testing.

Flowchart – HPV Primary Screening Claims for Primary Care/Sexual Wellbeing Aotearoa Provider



References

Clinical Practice Guideline

https://www.tewhatuora.govt.nz/assets/For-the-health-sector/NSU/Publications/clinical_practice_guidelines_final_version_1-v2.1-2.pdf

Flow chart to identify who is eligible for free cervical screening

https://www.tewhatuora.govt.nz/assets/Our-health-system/Screening/HPV-Primary-Screening/flowcharts - free hpv primary screening and follow up 23august2023 0-v2.pdf