

COVID-19 CARE IN THE COMMUNITY

The COVID-19 Care in the Community programme is available to practices to provide care to positive COVID-19 patients.

Eligibility for all Programmes:

- Enrolled and unenrolled patients who have tested positive with COVID-19
- For the purposes of claiming, “High needs” is defined as Māori, Pacific peoples, people living in NZ deprivation quintile 4 and 5 areas, refugees and people 75 years-old and over.

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Consult Types:

- Virtual clinical care for COVID-19 positive patients – telephone/video/text/patient portal
- In-person clinical care for COVID-19 positive patients includes in-home and in-person care in a health facility where appropriate streaming is available

Initial Assessment:

- Initial assessment can be undertaken by any member of the general practice team
- Practices must check 3CM prior to making a claim to ensure an initial assessment has not already been claimed for by another provider. When this occurs the later claim will be declined. If an initial review already exists in 3CM, practice should claim for a regular review
- A care plan is agreed based on the patient’s clinical condition and risk factors. People may be placed on either an active clinical management or a self-management pathway

** Most regular reviews are intended to be undertaken during standard work hours (weekdays) with weekend reviews based on clinical need.*

Desktop Assessment

- Chart review and contact (via text, email, patient portal– not bulk text messaging)
- Patients that are higher risk but do not require a full initial assessment.

Regular Review - Standard

- Clinical management of COVID-19 illness and co-morbidities exacerbated by COVID-19 for people under active management
- Virtual monitoring with frequency of reviews determined clinically
- Escalation when clinically indicated

Regular Review - High Needs

- Clinical management of COVID-19 illness and co-morbidities exacerbated by COVID-19 for people under active management who meet the definition of high needs
- Virtual monitoring, with frequency as clinically indicated
- Escalation when clinically indicated.

Clinical Escalation

Clinical escalation following regular reviews. . This includes liaison and referral to specialist hospital-based services where needed.

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Clinical Assessment Post Hospital Transfer:

Re-assessment following transfer of care from hospital to community-based care

Clinical Discharge:

General practice team determines whether the patient has clinically recovered and can be discharged from clinical regular reviews

Follow-up Check:

General practice team provides a follow-up check. Timing of follow-up will be clinically determined

In Home Care:

Where clinically required. PRIME funding is available for clinicians who have a primary response in Medical Emergencies (PRIME) contract. ****tick box available when assessment type is 'In home care' and 'in person care'.***

In Person Care (In GP Clinic):

Full assessment where clinically required.

Claiming:

- Claiming is via the WellSouth PHN portal
- No fee to patient (including no charge for prescription) and no claim for a GMS clawback
- Limited to one type of claim per day per person.

- A claim can be submitted for each person in a household, who is COVID-19 positive
- Initial assessment for those people who are not enrolled with a general practice are claimed at the high needs rate
- Subsequent regular reviews are claimed . at the standard rate unless they meet the high needs definition
- No simultaneous claiming against any other funding streams

Service codes over the next 3 pages for your PMS—please set these up prior to using the programmes.

Initial Assessment

Code	Amount	Description
COVC01	\$215.63	C19 IA S WD
COVC02	\$355.79	C19 IA S AH
COVC03	\$355.79	C19 IA S WE
COVC04	\$280.31	C19 IA HN WD
COVC05	\$462.52	C19 IA HN AH
COVC06	\$462.52	C19 IA HN WE

Initial Assessment payment rates are:

\$187.50+GST (Standard - Weekday)
\$309.38+GST (Standard - After Hours)
\$309.38 +GST (Standard - Weekend)
\$243.75+GST (High Needs - Weekday)
\$402.19+GST (High Needs - After Hours)
\$402.19+GST (High Needs - Weekend)

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Desktop Assessment

Code	Amount	Description
COVC37	\$39.10	C19 Desktop Assess
COVC38	\$64.52	Desktop Assmnt WE

Desktop Assessment payment rates are:

\$34.00+GST (Desktop Assessment—Weekday)

\$56.10+GST (Desktop Assessment—Weekend)

Regular Review

Code	Amount	Description
COVC09	\$39.10	C19 RRCL2— NS S WS
COVC10	\$64.52	C19 RRCL2 NS S WE
COVC11	\$182.85	C19 RRCL2 NS S E WD
COVC12	\$301.70	C19 RRCL2 NS S E WE
COVC13	\$50.83	C19 RRCL2 NS HN WD
COVC14	\$83.87	C19 RRCL2 NS HN WE
COVC15	\$194.58	C19 RRCL2 NS HN E WD
COVC16	\$321.06	C19 RRCL2 NS HN E WE

Regular Review payment rates are:

\$34.00+GST (Regular Review Standard - Weekday)

\$56.10+GST (Regular Review Standard -Weekend)

\$159.00+GST (Regular Review Standard+ Clinical Escalation -Weekday)

\$262.35 +GST (Regular Review Standard + Clinical Escalation —Weekend)

\$44.20+GST (Regular Review High Needs - Weekday)

\$72.93+GST (Regular Review High Needs - Weekend)

\$169.20+GST (Regular Review High Needs + Clinical Escalation - Weekday)

\$279.18+GST (Regular Review-High Needs + Clinical Escalation -- Weekend)

After-hours on weekday is between **8pm-8am Monday – Thursday**. Weekend rate covers **5pm Friday- 8am Monday** and any public holiday.

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Clinical Assessment Post Hospital Transfer:

Code	Amount	Description
COVC25	\$143.75	C19 CA PHT WD
COVC26	\$237.19	C19 CA PHT WE

Clinical Assessment Post Hospital Transfer payment rates are:

\$125.00+GST (Standard - Weekday)

\$206.25+GST (Standard - Weekend)

Clinical Discharge:

Code	Amount	Description
COVC27	\$95.83	C19 CD S
COVC28	\$124.58	C19 CD HN

Clinical Discharge payment rates are:

\$83.33+GST (Standard - Weekday)

\$108.33+GST (Standard - After Hours)

Follow-up Check:

Code	Amount	Description
COVC29	\$71.88	C19 FUP CHK

Follow-up Check payment rates are:

\$62.50+GST (Follow-up Check)

In Home Care:

Code	Amount	Description
COVC30		C19 IHC WD
COVC31		C19 IHC AH
COVC32		C19 IHC WE

In Home Care payment rates are:

\$250+GST per hour + 0.62 per kilometre - (Standard)

\$412.50+GST per hour + 0.62 per kilometre \$+GST - (After Hours)

\$412.50+GST per hour + 0.62 per kilometre - (Weekend)

In Person Care (In GP Practice):

Code	Amount	Description
COVC33	\$287.50	C19 IPC GPC WD
COVC34	\$474.38	C19 IPC GPC WE

In Person Care payment rates are:

\$250.00+GST (Standard - Weekday)

\$412.50+GST (Weekend)

Please refer to Southern Health Pathways (COVID-19 Case Management in Adults) for further Information visit: Health Pathways