

Benefits and Implications of Enrollment with a General Practice

The Government funds General Practices through [Primary Health Organisations \(PHOs\)](#) and [District Health Boards \(DHBs\)](#). These funding organisations have requirements to provide care through affiliated General Practices. The majority of General Practices in New Zealand are affiliated to a PHO. The amount of funding a practice receives depends on the age, gender, ethnicity and address of the people receiving the health care and for this reason patients are required to complete an enrolment form. Enrolment is straightforward and free and allows patients to receive a number of benefits that include:

- Cheaper fees at the Family Medicine Birkenhead practice
- Continuity of care with our Doctor and Nurse team
- Cheaper prescriptions
- Reminders when heart risk checks, immunisations, cervical smear, mammogram, bowel screen or other check-ups and tests are due
- Access to the Patient Portal and for some patient's additional support services

Children and adolescents (16 years of age or under) require an adult to enroll them. Once over the age of 16, patients can then re-enroll. Should patients choose not to enroll or are ineligible they can still receive care from any chosen General Practice however this will be at a higher fee.

Once enrolled, patients can change to a new medical centre at any time. If you are enrolled at one medical centre and visit another, you will pay a higher fee for that visit. If you have a High User Health or a Community Services Card and visit another medical centre they will make a claim for subsidy and the practice where you are enrolled will be informed of the date of that visit. The name of the practice or the nature of the visit will not be disclosed unless your consent is given.

If you enroll somewhere else, the change will be notified to the Ministry of Health, who will advise us of this change. Upon request, medical notes will be transferred electronically and your access to our patient portal discontinued. If you have not seen anyone from your medical centre in a three year period, the practice will contact you and ask if you wish to remain enrolled with them. If you are not able to be contacted, you become a casual patient automatically and will not receive the subsidised rates unless you re-enroll. You can re-enroll with the same medical centre or another one at an anytime.