



7 November 2024

Consultation team
Pharmac

By email: consult@pharmac.govt.nz

Tēnā koe

Submission - Pharmac proposal to fund β -hCG low sensitivity urine test kits

Thank you for the opportunity to provide a submission on the proposal to fund β -hCG low sensitivity urine test kits, which are intended to widen access to medicines that are already funded and covers medicines for both cancer and non-cancer health conditions.

The Royal New Zealand College of General Practitioners (the College) is the largest medical college in New Zealand. Our membership of 6,238 specialist GPs and rural hospital doctors comprising 40 percent of New Zealand's specialist medical workforce. The Medical Council of New Zealand accredits the College to deliver vocational training to the specialist General Practitioner and Rural Hospital Doctor workforce. Our kaupapa aspires to improve equity by upholding principles of Te Tiriti o Waitangi and supporting members to be culturally safe and competent through our Training, CPD and Quality¹ programmes.

College members provide medical care in the community to 23 million patient contacts each year. The mahi by 1077 general practice teams across the motu provide first point of contact care for patients, their whānau, and wider communities, and they manage 90 percent of health concerns.

Our submission

The College supports funding β -hCG low sensitivity urine test kits. However, we note that the Pharmac [Reproductive and Sexual Health Advisory Committee \(RSHAC\) \(18 July 2022\)](#) raised important concerns about the administration and implementation of the test kits.

The College recommends:

That best practice points identified by the RSHAC¹ are developed to guide consistent advice and inform effective management in the implementation of β -hCG low sensitivity urine test kits.

Points raised by the RSHAC:

1. Women's health – timely follow up

Half of people provided with tests kits may not complete follow up testing post-early medical abortion (EMA), although this may vary by region. Follow up by practices is time, labour, and resource intensive.

2. Accessibility – Telehealth concerns

The RSHAC noted that experience shows post-EMA testing for patients receiving treatment via telehealth occurs less often than those receiving in-clinic treatment.

3. Effectiveness – best practice guidance

Based on member feedback and RSHAC advice and best practiceⁱⁱ, the test should be completed for all women. We recommend that best practice guidance is needed to support development of systems to manage the impact on administrative processes, staff, and to ensure that patients receive equitable and consistent advice about how to correctly use test kits.

Points raised by our members:

Equity and privacy concerns

Management of test kits will introduce an additional burden for clinical and administration teams. Our members raised awareness of the needs and potential burden at the practice level and suggested development of clinical guidance or a pathway to support practices. Suggestions relate to clinical and administration roles, e.g.,

- Management and reporting patient test results - How will the results be reported to the practice?
- Identify roles - Who will patients talk to if they call the practice?
- Privacy concerns – If patients need to call back have provisions been made for privacy?
- Patient records - Who will enter results and where will they be recorded?
- Abnormal results and referral - who is the right professional to be involved? If a result is abnormal a specialist GP consultation will need to be organised, and a care plan developed
- Contacting patients, maintaining confidentiality, continuity of care
- Funding - Who pays for additional consultations – the patient or health system?

The College Quality programme suggests a discussion/hui with specialist GPs and general practice teams to provide thoughtful feedback – especially those who receive the service via telehealth.

Conclusion

The College notes that the funding of β -hCG low sensitivity urine test kits test will reduce the burden for patients who need to access the tests. However, we recommend consideration and development of best practice advice to support the implementation of the test kits.

If you require further clarification, please contact Maureen Gillon, Manager Policy, Advocacy, Insights – Maureen.Gillon@rnzcgp.org.nz.

Nāku noa, nā



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ⁱ Pharmac. Reproductive and Sexual Health Advisory Committee. Agenda notes: [2022-07-18-Reproductive-and-Sexual-Health-AC-Record.pdf](#)

ⁱⁱ [New Zealand Aotearoa Abortion Clinical Guideline | Ministry of Health NZ](#) - 2021