#### **Practice Information**

Last updated: October 2025



#### **General Information**

This is specific funding for follow-up care, post-initial cellulitis treatment with <u>oral antibiotics</u> only.

Please use the Halcyon Web Portal Form: Cellulitis – Enhanced EPC to claim funding for qualifying individuals.

### **Programme Information**

Health New Zealand | Te Whatu Ora (HNZ) is moving to a common approach for the management of Cellulitis in the community to align with best practice clinical guidelines and advice from the Antimicrobial Stewardship Group. The updated approach is supported by a standardised funding model across the country

This service ensures that patients are managed in the community according to evidence based guidelines and that the service provided is accessible for patients.

The service will generally be provided in General Practice or Urgent Care.

### **Programme Objectives**

- More accessible healthcare for patients.
- Better health outcomes for patients.
- Reduced use of secondary care services.
- Supporting the primary care health workforce.
- A consistent approach to cellulitis care.
- Ensuring evidence-based healthcare provision for cellulitis treatment.
- Sustainability of services through the right care being provided at the right place at the right time.
- Equitable healthcare provision through better accessibility.

## Eligibility Criteria

- Providers should follow the local 'Cellulitis in Adults' HealthPathway for entry criteria.
- Eligible for publicly funded NZ Health Services
- Proactive first follow-up within 72 hours
- Subsequent follow-ups within 7 days of Initial Consult

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#### **Exclusion Criteria**

- ACC funded cellulitis claims, which should be claimed via ACC.
- IV antibiotic administration for cellulitis is not funded via this agreement.
- Follow-Up that occurs more than 7 days after initial consult date.
- Initial Consults for either pathway
- First Follow-Up for Reactive Pathway

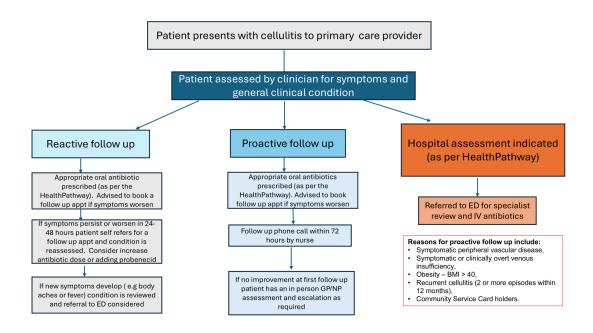
### **Programme Process**

There are two pathways for non-ACC Cellulitis: **Proactive Follow-Up** and **Reactive Follow-Up**. Follow <u>Health Pathways</u> guidelines for "Cellulitis in Adults"

Components of the funded cellulitis service include:

- Subsequent follow-up of a Reactive follow-up process (as defined by the below flowchart). This is not a first follow-up but a subsequent follow-up.
- First follow-up for a proactive follow-up process (as defined by the below flowchart).
- Subsequent follow-up for a proactive follow-up process (as defined by the below flowchart).

There may be unlimited follow-ups as long as they occur within 7 days of the initial consult.



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### Co-payment

\*\*\*No consumable costs to be charged to the patient for funded visits

Reactive Pathway	Initial Consultation	First Follow-Up	Subsequent Follow- Up (GP/NP or nurse prescriber)
Co-Pay?	Yes – standard consultation rate	Yes – standard consultation rate	No
Claim?	Not allowed	Not allowed	Allowed, Claim via Halcyon

Proactive Pathway (see eligibility criteria)	Initial Consultation	First Follow-Up (within 72hrs)	Subsequent Follow- Up (GP/NP or nurse prescriber)
Co-Pay?	Yes— standard consultation rate	No	No
Claim?	Not allowed	Allowed, Claim via Halcyon (within 72 hours)	Allowed, Claim via Halcyon

## **Payment**

#### Reactive Pathway

• Subsequent follow-ups (within 7 days of initial): \$109.25

#### Proactive Pathway

- First Follow-Up (within 72 hrs of initial): \$44.85
- Subsequent Follow-Ups (within 7 days of initial): \$109.25

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The table sets out the amount providers can claim for the updated package of care. Note pricing is GST exclusive and excludes consumables.

	Initial	First follow up	Subsequent follow
	consultation		up
Reactive follow up	Patients pay a co-pay	Patients pay a co-pay	Subsequent GP/NP*
	at the standard	at the standard	in person follow up
	consultation rate* as	consultation rate as	will be funded by
	the initial	the first follow up is	EPCC at a rate of
	consultation is	considered a routine	\$95.
	considered a routine	primary care	
	primary care	appointment for low-	
	appointment.	risk patients.	
Proactive follow up	Patients pay a co-pay	Patients will receive a	Subsequent GP/NP*
(eligibility defined	at the standard	phone or in person	in person follow up
in flow chart)	consultation rate as	clinical follow up	will be funded by
	the initial	(usually nurse led)	EPCC at a rate of
	consultation is	within 72 hours.	\$95.
	considered a routine	Funded via EPCC at a	
	primary care	rate of \$39. Whether	
	appointment.	this is virtual or in	
		person is up to	
		clinician discretion.	

<sup>\*</sup>or registered clinician working within their scope of practice with prescribing rights.

There is no limit to the number of follow ups if they occur within 7 days of the initial appointment where cellulitis was identified.

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## Frequently Asked Questions

Can I claim Cellulitis presentations under the Extended Primary Care?

 No, Cellulitis claims treated with either IV antibiotics or Oral Antibiotics are not allowed under the Extended Primary Care Programme

Can I claim for Cellulitis presentations that we are treating with IV antibiotics?

• No, you cannot claim for any Cellulitis presentations being treated with IV antibiotics.