Vote Health

APPROPRIATION MINISTER(S): Minister of Health (M36), Minister for Seniors (M61)

DEPARTMENT ADMINISTERING THE VOTE: Ministry of Health (A21)

RESPONSIBLE MINISTER FOR MINISTRY OF HEALTH: Minister of Health

Vote Health Overview of the Vote

Overview of the Vote

Vote Health ('the Vote'), \$29,637 million in 2024/25, is a significant public investment in the wellbeing of New Zealanders and their families. The Vote directly supports the day-to-day operation of strong and equitable public health services delivered by a skilled workforce in our communities, hospitals, and other care settings.

The Vote plays a key role in supporting population health across peoples' lives, including improving health equity for Māori and other groups, and helps facilitate the delivery of key system priorities including child wellbeing, mental wellbeing, wellbeing through prevention, and primary health care.

The make-up of the Vote for 2024/25 reflects the significant changes that occurred following the Government's health reforms from 1 July 2022 with those changes detailed in the Estimates of Appropriations 2022/23 - Health Sector.

The Vote for 2024/25 comprises the following:

- \$14,611 million (49% of the Vote) to enable Health New Zealand | Te Whatu Ora to deliver hospital and specialist services
- \$9,088 million (31% of the Vote) largely to enable Health New Zealand | Te Whatu Ora to deliver primary, community, public and population health services
- \$3,281 million (11% of the Vote) for capital investment, largely for infrastructure projects and to fund the resolution of claims from historical non-compliance with the Holidays Act 2003
- \$1,611 million (5% of the Vote) to enable Pharmac | Te Pātaka Whaioranga to both manage (\$29 million) and purchase pharmaceuticals (\$1,582 million)
- \$749 million (3% of the Vote) to enable Health New Zealand | Te Whatu Ora to deliver hauora Māori services
- \$229 million (1% of the Vote) to enable the Ministry of Health | Manatū Hauora to undertake its stewardship role of the health system
- \$67 million to support other health services including \$37 million for monitoring and protecting health and disability consumer interests and \$25 million for problem gambling services.

There is also a capital expenditure permanent legislative authority of \$1.6 million for the Ministry of Health | Manatū Hauora.

The Minister of Health (M36) is responsible for all appropriations in the Vote except for the non-departmental output expense appropriation 'Aged Care Commissioner' (\$2 million) which is the responsibility of the Minister for Seniors (M61).

In previous years, the Vote has included separate appropriations for the response to the COVID-19 pandemic. While further funding is provided in 2024/25 and outyears for the COVID-19 response and pandemic preparedness, this is now incorporated in business-as-usual activities and not identified by way of separate appropriations. This funding is shown in Part 1.1 - New Policy Initiatives.

Details of these appropriations are set out in Parts 2-4.

Details of Appropriations and Capital Injections

Annual Appropriations and Forecast Permanent Appropriations

	2023/24		2024/25	
Titles and Scopes of Appropriations by Appropriation Type	Final Budgeted \$000	Estimated Actual \$000	Budge \$000	
Departmental Capital Expenditure				
Ministry of Health - Capital Expenditure PLA (M36) (A21)	2,000	2,000	1,600	
This appropriation is limited to the purchase or development of assets by and for the use of the Ministry of Health, as authorised by section 24(1) of the Public Finance Act 1989.				
Total Departmental Capital Expenditure	2,000	2,000	1,600	
Non-Departmental Output Expenses				
Aged Care Commissioner (M61) (A21)	2,104	2,104	2,104	
This appropriation is limited to the functions of the Aged Care Commissioner				
Delivering hauora Māori services (M36) (A21)	704,106	704,106	749,424	
This appropriation is limited to developing, implementing and delivering hauora Māori services, supporting the development of hauora Māori providers, developing partnerships with iwi, commissioning kaupapa Māori services and other services developed for Māori, and other related services.				
Delivering Hospital and Specialist Services (M36) (A21)	14,389,512	14,381,833	14,610,883	
This appropriation is limited to hospital and specialist health services (including mental health services).				
Delivering Primary, Community, Public and Population Health Services (M36) (A21) This appropriation is limited to primary, community (including mental health), public and population health services at international, national, regional, and local levels.	8,668,148	8,668,148	9,087,520	
Monitoring and Protecting Health and Disability Consumer Interests (M36) (A21) This appropriation is limited to the provision, purchase, and support of services that monitor and protect health and disability consumer interests.	41,123	41,123	36,723	
National Management of Pharmaceuticals (M36) (A21)	29,907	29,907	29,507	
This appropriation is limited to services relating to the national management of pharmaceuticals.				
National Pharmaceuticals Purchasing (M36) (A21)	1,806,211	1,806,211	1,581,634	
This appropriation is limited to purchasing pharmaceuticals on the national pharmaceutical schedule and subsidising the supply of pharmaceuticals not on the national pharmaceutical schedule.				
Problem Gambling Services (M36) (A21)	29,557	27,963	24,599	
This appropriation is limited to the provision, purchase, and support of services that minimise the harm from gambling, in accordance with the Gambling Act 2003.				
Total Non-Departmental Output Expenses	25,670,668	25,661,395	26,122,394	
Non-Departmental Other Expenses				
International Health Organisations (M36) (A21)	2,730	2,730	2,230	
This appropriation is limited to the Crown funding New Zealand's World Health Organization (WHO) membership and contributing to specific WHO projects.				
Legal Expenses (M36) (A21)	1,808	1,808	1,208	
This appropriation is limited to funding the defence and settlement of health-related or disability- related legal claims against the Crown.				

	2023/	24	2024/25	
Titles and Scopes of Appropriations by Appropriation Type	Final Budgeted \$000	Estimated Actual \$000	Budget \$000	
Loss on sale of Crown-owned assets (M36) (A21)	750	750	-	
This appropriation is limited to the loss on sale incurred when disposing of Crown-owned assets.				
Total Non-Departmental Other Expenses	5,288	5,288	3,438	
Non-Departmental Capital Expenditure				
Remediation and resolution of Holidays Act 2003 historical claims (M36) (A21)	572,314	284,031	1,663,216	
This appropriation is limited to fund Te Whatu Ora (including their subsidiaries and associates) and the New Zealand Blood and Organ Service for resolution of claims from historical non-compliance with the Holidays Act 2003.				
Residential Care Loans - Payments (M36) (A21)	32,000	32,000	35,000	
This appropriation is limited to the provision of interest-free loans to people entering into aged residential care facilities.				
Standby Credit to Support Health System Liquidity (M36) (A21)	200,000	200,000	200,000	
This appropriation is limited to the provision of a revolving standby credit facility to support Te Whatu Ora-Health New Zealand with working capital fluctuations, assist with treasury liquidity management, and maintain health system liquidity.				
Capital investment in Health New Zealand (M36) (A21)	10,916	10,916	-	
This appropriation is limited to capital investment to establish Health New Zealand.				
Total Non-Departmental Capital Expenditure	815,230	526,947	1,898,216	
Multi-Category Expenses and Capital Expenditure				
Stewardship of the New Zealand health system MCA (M36) (A21)	286,046	279,346	228,563	
The single overarching purpose of this appropriation is to enable the Ministry of Health to discharge its role as the chief steward of New Zealand's health system and principal advisor to the Minister of Health.				
Departmental Output Expenses				
Equity, Evidence and Outcomes	22,394	22,394	16,620	
This category is limited to health science research, leadership, analysis and publishing quality evidence, data and insights.	·	,	·	
Policy Advice and Related Services	44,169	44,169	39,791	
This category is limited to the provision of policy advice (including second opinion advice and contributions to policy advice led by other agencies) and other support to Ministers in discharging their policy decision-making and other portfolio responsibilities relating to health.				
Public health and population health leadership	139,864	133,164	103,743	
This category is limited to providing leadership on policy, strategy, regulatory, intelligence, surveillance and monitoring related to public and population health.				
Regulatory and Enforcement Services	61,573	61,573	53,274	
This category is limited to implementing, enforcing and administering health-related legislation and regulations, and provision of regulatory advice to the sector and to Ministers, and support services for committees appointed by the Minister under statute.				
Sector Performance and Monitoring	18,046	18,046	15,135	
This category is limited to advising and providing assurance on health sector planning and system performance, including the Government Policy Statement and the New Zealand Health Plan; and monitoring and supporting the governance of health sector Crown entities.				

	2023	3/24	2024/25
Titles and Scopes of Appropriations by Appropriation Type	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Implementing the COVID-19 Vaccine Strategy MCA (M36) (A21)	105,287	105,287	-
The single overarching purpose of this appropriation is to implement the COVID-19 vaccine strategy so as to minimise the health impacts of COVID-19.			
Non-Departmental Output Expenses			
Implementing the COVID-19 Immunisation Programme	105,287	105,287	-
This category is limited to delivering approved vaccines through an immunisation programme as part of minimising the health impacts of COVID-19.			
National Response to COVID-19 Across the Health Sector MCA (M36) (A21)	210,961	210,961	-
The single overarching purpose of this appropriation is to implement a national response to COVID-19 across the health sector.			
Departmental Output Expenses			
National Health Response to COVID-19	10	10	-
This category is limited to managing and coordinating the overall national health response to COVID-19.			
Non-Departmental Output Expenses			
COVID-19 Public Health Response	210,951	210,951	-
This category is limited to the on-going public health system response to COVID-19.			
Total Multi-Category Expenses and Capital Expenditure	602,294	595,594	228,563
Total Annual Appropriations and Forecast Permanent Appropriations	27,095,480	26,791,224	28,254,211

Multi-Year Appropriations

Type, Title, Scope and Period of Appropriations	Appropriations, Adjustments and Use	\$000
Non-Departmental Capital Expenditure		
Health Capital Envelope (M36) (A21)	Original Appropriation	4,864,162
This appropriation is limited to the provision or purchase of health sector assets, providing capital to health sector Crown entities or agencies for new	Adjustments to 2022/23	589,071
investments.	Adjustments for 2023/24	539,505
Commences: 01 July 2022	Adjusted Appropriation	5,992,738
Evaluate 20 June 2027	Actual to 2022/23 Year End	1,591,596
Expires: 30 June 2027	Estimated Actual for 2023/24	950,000
	Estimate for 2024/25	1,090,429
	Estimated Appropriation Remaining	2,360,713
New Dunedin Hospital 2021-2026 (M36) (A21)	Original Appropriation	1,327,578
This appropriation is limited to capital expenditure on the construction of the new Dunedin Hospital and associated projects.	Adjustments to 2022/23	120,000
	Adjustments for 2023/24	-
Commences: 01 November 2021	Adjusted Appropriation	1,447,578
Expires: 30 June 2026	Actual to 2022/23 Year End	95,027
	Estimated Actual for 2023/24	156,871
	Estimate for 2024/25	292,280
	Estimated Appropriation Remaining	903,400

Total Annual Appropriations and Forecast Permanent Appropriations and Multi-Year Appropriations

	202	2023/24	
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Annual Appropriations and Forecast Permanent Appropriations	27,095,480	26,791,224	28,254,211
Total Forecast MYA Non-Departmental Capital Expenditure	1,106,871	1,106,871	1,382,709
Total Annual Appropriations and Forecast Permanent Appropriations and Multi-Year Appropriations	28,202,351	27,898,095	29,636,920

Capital Injection Authorisations

	202	3/24	2024/25
	Final Budgeted \$000		Budget \$000
Ministry of Health - Capital Injection (M36) (A21)	-	-	-

Supporting Information

Part 1 - Vote as a Whole

1.1 - New Policy Initiatives

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Budget 2024 Funding for Cost Pressures (see Note 1)						
Health Cost Pressure Funding for Health New Zealand Te Whatu	Delivering Hospital and Specialist Services	-	860,000	860,000	860,000	860,000
Ora (Budget 2024)	Non-Departmental Output Expenses					
	Delivering Primary, Community, Public and Population Health Services	-	531,000	531,000	531,000	531,000
	Non-Departmental Output Expenses					
	Delivering hauora Māori services		39,000	39,000	39,000	39,000
	Non-Departmental Output Expenses					
Health Cost Pressure Funding for Health New Zealand Te Whatu	Delivering Hospital and Specialist Services	-	-	825,000	825,000	825,000
Ora (Budget 2025 Precommitment)	Non-Departmental Output Expenses					
	Delivering Primary, Community, Public and Population Health Services	-	-	507,000	507,000	507,000
	Non-Departmental Output Expenses					
	Delivering hauora Māori services	-	-	38,000	38,000	38,000
	Non-Departmental Output Expenses					
Health Cost Pressure Funding for Health New Zealand Te Whatu	Delivering Hospital and Specialist Services	-	-	-	826,000	826,000
Ora (Budget 2026 Precommitment)	Non-Departmental Output Expenses					
	Delivering Primary, Community, Public and Population Health Services	-	-	-	507,000	507,000
	Non-Departmental Output Expenses					
	Delivering hauora Māori services	-	-	-	37,000	37,000
	Non-Departmental Output Expenses					

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Budget 2024 Funding for New Initiatives						
Investment to Continue Access to Medicines	National Pharmaceuticals Purchasing	-	420,400	442,420	455,430	455,430
	Non-Departmental Output Expenses					
COVID-19 and Pandemic Preparedness: Maintaining Essential Health Services and Critical Surveillance Infrastructure	Delivering Primary, Community, Public and Population Health Services	-	56,435	50,558	43,460	43,459
Official Guivellance Illiastracture	Non-Departmental Output Expenses					
	Stewardship of the New Zealand health system MCA					
	Public health and population health leadership	-	9,560	9,560	9,560	9,560
	Departmental Output Expenses					
Emergency Department Security - Service Expansion	Delivering Hospital and Specialist Services	-	6,170	8,226	8,226	8,226
	Non-Departmental Output Expenses					
Breast Screening Extension of Eligibility to Include 70-74-year olds as part of the Free National	Delivering Primary, Community, Public and Population Health Services	-	6,000	6,000	6,000	6,000
Programme	Non-Departmental Output Expenses					
Gumboot Friday - Delivering Free Youth Mental Health Counselling Services	Delivering Primary, Community, Public and Population Health Services	-	6,000	6,000	6,000	6,000
	Non-Departmental Output Expenses					
Training 25 More Doctors	Delivering Hospital and Specialist Services	-	300	300	300	300
	Non-Departmental Output Expenses					
Budget 2024 Savings Initiatives						
Reduction in Back-office Functions - Ministry of Health	Stewardship of the New Zealand health system MCA					
	Equity, Evidence and Outcomes	-	(1,934)	(1,970)	(1,934)	(2,015)
	Departmental Output Expenses					
	Policy Advice and Related Services	-	(2,197)	(2,194)	(2,197)	(2,265)
	Departmental Output Expenses					
	Public health and population health leadership	-	(4,492)	(4,431)	(4,492)	(4,333)
	Departmental Output Expenses					

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
	Regulatory and Enforcement Services	-	(3,069)	(3,097)	(3,069)	(3,049)
	Departmental Output Expenses					
	Sector Performance and Monitoring	-	(908)	(908)	(908)	(938)
	Departmental Output Expenses					
Prescription Co-payment - Reinstating the \$5 Prescription Co-payment with Targeted	Delivering Primary, Community, Public and Population Health Services	-	(70,979)	(64,586)	(66,201)	(67,856)
Exemptions	Non-Departmental Output Expenses					
	National Pharmaceuticals Purchasing	23,780	31,234	32,015	32,815	33,635
	Non-Departmental Output Expenses					
Return of Funding - Māori Health Authority Disestablishment	Delivering hauora Māori services	(31,500)	(1,000)	(1,000)	(1,000)	(1,000)
	Non-Departmental Output Expenses					
Budget 2024 Reprioritisation Initiatives						
Mental Health and Addiction Community Sector Innovation Fund	Delivering Primary, Community, Public and Population Health Services	(5,820)	5,000	4,720	-	-
	Non-Departmental Output Expenses					
	Delivering Hospital and Specialist Services	(3,900)	-	-	-	-
	Non-Departmental Output Expenses					
Waikato New Medical School - Independent Cost Benefit Analysis	Stewardship of the New Zealand health system MCA					
and Business Case Development	Policy Advice and Related Services	-	2,575	-	-	-
	Departmental Output Expenses					
	Public health and population health leadership	(2,575)	-	-	-	-
	Departmental Output Expenses					
Subtotal Budget 2024 Initiatives		(20,015)	1,889,095	3,281,613	4,651,990	4,651,154

		2023/24 Final Budgeted	2024/25 Budget	2025/26 Estimated	2026/27 Estimated	2027/28 Estimated
Policy Initiative	Appropriation	\$000	\$000	\$000	\$000	\$000
Government 100-day Plan Initiatives						
Disestablishment of Māori Health Authority - Funding Transfer to the Ministry of Health (see Note 2)	Delivering hauora Māori services Non-Departmental Output Expenses	(716)	(2,864)	(2,864)	(2,864)	(2,864)
	Stewardship of the New Zealand health system MCA					
	Policy Advice and Related Services	470	1,881	1,881	1,881	1,881
	Departmental Output Expenses					
	Sector Performance and Monitoring	246	983	983	983	983
	Departmental Output Expenses					
Subtotal Government 100-day Plan Initiatives		-	-	-	-	-
Pay Equity Settlements and Improving Pay Relativities						
Health New Zealand Te Whatu Ora Nurses Pay Equity Claim - Drawdown of Final Settlement	Delivering Hospital and Specialist Services	685,842	172,587	172,587	172,587	172,587
	Non-Departmental Output Expenses					
Improving Pay Relativities for Funded Sector Health Workers - Drawdown of Tagged Contingency	Delivering Primary, Community, Public and Population Health Services	55,506	55,506	55,506	55,506	55,506
Funding	Non-Departmental Output Expenses					
Extending Pay Equity Settlement for Social Workers in Community and Iwi Organisation	Delivering Primary, Community, Public and Population Health Services	19,030	21,816	23,916	25,893	25,893
	Non-Departmental Output Expenses					
	Delivering hauora Māori services	215	286	369	435	435
	Non-Departmental Output Expenses					
Health Sector Pay Equity Claim - Health New Zealand Te Whatu	Delivering Hospital and Specialist Services	12,215	12,215	12,215	12,215	12,215
Ora Midwifery Claim	Non-Departmental Output Expenses					
Subtotal Pay Equity Settlements and Improving Pay Relativities		772,808	262,410	264,593	266,636	266,636

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Drawdown of Tagged Contingency Funding						
Drawdown of the Budget 2022 Contingency - Addressing Future Health System Cost Pressures	Delivering Hospital and Specialist Services	764,719	764,719	764,719	764,719	764,719
(2023/24)	Non-Departmental Output Expenses					
	Delivering Primary, Community, Public and Population Health Services	494,980	494,980	494,980	494,980	494,980
	Non-Departmental Output Expenses					
	Delivering hauora Māori services	34,704	34,704	34,704	34,704	34,704
	Non-Departmental Output Expenses					
	Monitoring and Protecting Health and Disability Consumer Interests	1,572	1,572	1,572	1,572	1,572
	Non-Departmental Output Expenses					
	National Management of Pharmaceuticals	1,135	1,135	1,135	1,135	1,135
	Non-Departmental Output Expenses					
	Aged Care Commissioner	81	81	81	81	81
	Non-Departmental Output Expenses					
Final Drawdown of COVID-19 Response Tagged Contingency for 2023/24	National Response to COVID-19 Across the Health Sector MCA					
101 2020/27	COVID-19 Public Health Response	233,696	-	-	-	-
	Non-Departmental Output Expenses					
	Stewardship of the New Zealand health system MCA					
	Public health and population health leadership	24,000	-	-	-	-
	Departmental Output Expenses					
Call on Budget 2022 Contingency to Strengthen the Ministry's Stewardship Role	Stewardship of the New Zealand health system MCA					
Ctowardomp (tolo	Equity, Evidence and Outcomes	1,453	1,732	1,655	1,655	1,655
	Departmental Output Expenses					
	Policy Advice and Related Services	10,981	5,039	3,528	3,528	3,528
	Departmental Output Expenses					

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
	Public health and population health leadership	4,885	5,825	5,563	5,563	5,563
	Departmental Output Expenses					
	Regulatory and Enforcement Services	1,299	1,548	1,479	1,479	1,479
	Departmental Output Expenses					
	Sector Performance and Monitoring	4,876	5,814	5,553	5,553	5,553
	Departmental Output Expenses					
Drawdown of the Budget 2022 Contingency - Data and Digital	Delivering Hospital and Specialist Services	19,828	25,326	5,329	5,348	5,348
Foundations and Innovation for Health New Zealand Te Whatu Ora	Non-Departmental Output Expenses					
Health Sector Agreements and Payments Programme Tranche 3 Funding Drawdown	Delivering Primary, Community, Public and Population Health Services	9,895	9,174	10,335	10,335	10,335
	Non-Departmental Output Expenses					
Drawdown of the Budget 2021 Contingency - Data and Digital Infrastructure and Capability for Health New Zealand Te Whatu Ora Payroll System Remediation and Stabilisation	Delivering Hospital and Specialist Services Non-Departmental Output Expenses	4,000	11,000	-	-	-
Homelessness Action Plan Contingency Cost Pressure Drawdown	Delivering Primary, Community, Public and Population Health Services	1,003	3,133	3,061	-	-
	Non-Departmental Output Expenses					
Drawdown of Contingency for Meeting the Cost of Replacing the	Stewardship of the New Zealand health system MCA					
IT Platform to Support the Assisted Dying Service	Regulatory and Enforcement Services	2,667	-	-	-	-
	Departmental Output Expenses					
Emergency Housing Reset and Redesign - Approval of Funding	Delivering hauora Māori services	400	700	700	700	-
for Action 10 Initiatives	Non-Departmental Output Expenses					
	Delivering Primary, Community, Public and Population Health Services	150	-	-	-	-
	Non-Departmental Output Expenses					

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
A Social Sector Recovery Plan to Ensure a Coordinated Approach to Social Sector Recovery Over the Medium Term	Delivering Primary, Community, Public and Population Health Services Non-Departmental Output Expenses	150	-	-	-	-
Subtotal Drawdown of Tagged Contingency Funding		1,616,474	1,366,482	1,334,394	1,331,352	1,330,652
Other Initiatives						
Shared Approach to Back-office Transformation	Stewardship of the New Zealand health system MCA					
	Equity, Evidence and Outcomes	-	(16)	(16)	(16)	(16)
	Departmental Output Expenses					
	Policy Advice and Related Services	-	(30)	(30)	(30)	(30)
	Departmental Output Expenses					
	Public health and population health leadership	-	(41)	(41)	(41)	(41)
	Departmental Output Expenses					
	Regulatory and Enforcement Services	-	(29)	(29)	(29)	(29)
	Departmental Output Expenses					
	Sector Performance and Monitoring	-	(14)	(14)	(14)	(14)
	Departmental Output Expenses					
Transitioning COVID-19 Vaccination and Treatments Funding into the Combined	Implementing the COVID-19 Vaccine Strategy MCA					
Pharmaceutical Budget	Purchasing Potential and Proven COVID-19 Vaccines and Other Therapeutics	(165,200)	-	-	-	-
	Non-Departmental Output Expenses					
	National Management of Pharmaceuticals	400	-	-	-	-
	Non-Departmental Output Expenses					
	National Pharmaceuticals Purchasing	164,800	-	-	-	-
	Non-Departmental Output Expenses					
Options to Support Pharmac - Removal of the \$5 Prescription Co-payment	Delivering Primary, Community, Public and Population Health Services	(21,800)	-	-	-	-
	Non-Departmental Output Expenses					
	National Pharmaceuticals Purchasing	21,800	-	-	-	-
	Non-Departmental Output Expenses					

Total Operating Expenditure		2,301,620	3,496,676	4,859,289	6,228,667	6,238,950
Subtotal Other Initiatives		(67,647)	(21,311)	(21,311)	(21,311)	(9,492)
	Departmental Output Expenses					
	Public health and population health leadership	(1,500)	-	-	-	-
	Stewardship of the New Zealand health system MCA					
	Non-Departmental Output Expenses					
	COVID-19 Public Health Response	(22,735)	-	-	-	-
	National Response to COVID-19 Across the Health Sector MCA					
	Non-Departmental Output Expenses					
	Implementing the COVID-19 Immunisation Programme	(24,631)	-	-	-	-
COVID-19 Funding Return	Implementing the COVID-19 Vaccine Strategy MCA					
	Departmental Output Expenses					
	Sector Performance and Monitoring	(18,077)	(19,221)	(17,912)	(16,028)	(6,276)
Rapid Saving - Return of DHB Sustainability Funding	Stewardship of the New Zealand health system MCA					
	Departmental Output Expenses					
	Sector Performance and Monitoring	(704)	(1,960)	(3,269)	(5,153)	(14,905)
	Stewardship of the New Zealand health system MCA					
	Non-Departmental Output Expenses					
Increasing Medical School Enrolments for the 2024 Intake	Delivering Hospital and Specialist Services	-	-	-	-	11,819
Policy Initiative	Appropriation	Budgeted \$000	Budget \$000	Estimated \$000	Estimated \$000	Estimated \$000
		2023/24 Final	2024/25	2025/26	2026/27	2027/28

Policy Initiative	Appropriation	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Capital Expenditure						
National Cost Pressure Contingency for the Health Capital Portfolio	Health Capital Envelope Non-Departmental Capital Expenditure	-	103,139	-	-	-
Drawdown of the Budget 2021 Contingency - Data and Digital Infrastructure and Capability for Health New Zealand Te Whatu Ora Payroll System Remediation and Stabilisation	Health Capital Envelope Non-Departmental Capital Expenditure	-	10,100	-	-	-
Breast Screening Extension of Eligibility to Include 70-74-year olds as part of the Free National Programme	Health Capital Envelope Non-Departmental Capital Expenditure	-	7,190	-	-	-
Residential Care Loans	Residential Care Loans - Payments Non-Departmental Capital Expenditure	12,000	15,000	15,000	15,000	15,000
Transfer of COVID-19 Inventories - Recognising Impact of Year-end Audit Adjustment on the Health Capital Envelope	Health Capital Envelope Non-Departmental Capital Expenditure	419,076	-	-	-	-
Total Capital Expenditure		431,076	135,429	15,000	15,000	15,000
Total Initiatives		2,732,696	3,632,105	4,874,289	6,243,667	6,253,950

Note 1 - The Government has agreed a multi-year funding approach (three years) for cost pressure funding for Health New Zealand | Te Whatu Ora. Funding for year one (2024/25) is charged against the Budget 2024 operating allowance with a total impact of \$5,720 million over the forecast period from 2024/25 to 2027/28; funding for year two (2025/26) is pre-committed against the Budget 2025 operating allowance with a total impact of \$5,480 million over the Budget 2025 forecast period from 2025/26 to 2028/29; funding for year three (2026/27) is pre-committed against the Budget 2026 operating allowance with a total impact of \$5,480 million over the Budget 2026 forecast period from 2026/27 to 2029/30.

Note 2 - Other funding in the Delivering hauora Māori services appropriation is being reallocated to Health New Zealand | Te Whatu Ora to deliver the associated services.

1.2 - Trends in the Vote

Summary of Financial Activity

	2019/20	2020/21	2021/22	2022/23	2023	3/24		2024/25		2025/26	2026/27	2027/28
	Actual \$000	Actual \$000	Actual \$000	Actual \$000	Final Budgeted \$000	Estimated Actual \$000	Departmental Transactions Budget \$000	Non- Departmental Transactions Budget \$000	Total Budget \$000	Estimated \$000	Estimated \$000	Estimated \$000
Appropriations												
Output Expenses	17,024,557	18,411,558	19,469,601	22,611,556	25,670,668	25,661,395	-	26,122,394	26,122,394	27,425,063	28,766,442	28,775,708
Benefits or Related Expenses	-	-	-	-	-	-	N/A	-	-	-	-	-
Borrowing Expenses	-	-	-	-	-	-	-	-	-	-	-	-
Other Expenses	3,115	4,196	4,791	4,224	5,288	5,288	-	3,438	3,438	3,438	3,438	3,438
Capital Expenditure	728,030	1,234,708	760,837	1,698,703	1,924,101	1,635,818	1,600	3,280,925	3,282,525	2,240,000	1,297,313	36,600
Intelligence and Security Department Expenses and Capital Expenditure	-	-	-	-	-	-	-	N/A	-	-	-	-
Multi-Category Expenses and Capital Expenditure (MCA)												
Output Expenses	155,434	658,851	4,362,958	2,313,406	602,294	595,594	228,563	-	228,563	217,680	217,279	213,696
Other Expenses	-	-	-	-	-	-	-	-	-	-	-	-
Capital Expenditure	-	-	-	-	-	-	N/A	-	-	-	-	-
Total Appropriations	17,911,136	20,309,313	24,598,187	26,627,889	28,202,351	27,898,095	230,163	29,406,757	29,636,920	29,886,181	30,284,472	29,029,442
Crown Revenue and Capital Receipts												
Tax Revenue	-	-	-	-	-	-	N/A	-	-	-	-	-
Non-Tax Revenue	875,390	865,530	998,335	1,205,993	1,424,082	1,424,082	N/A	1,501,246	1,501,246	1,553,843	1,606,726	1,662,555
Capital Receipts	26,138	29,731	26,597	27,991	44,499	44,499	N/A	47,499	47,499	47,499	47,499	47,499
Total Crown Revenue and Capital Receipts	901,528	895,261	1,024,932	1,233,984	1,468,581	1,468,581	N/A	1,548,745	1,548,745	1,601,342	1,654,225	1,710,054

Note - where restructuring of the vote has occurred then, to the extent practicable, prior years information has been restated as if the restructuring had occurred before the beginning of the period covered. In this instance Total Appropriations for the Budgeted and Estimated Actual year may not equal Total Annual Appropriations and Forecast Permanent Appropriations and Multi-Year Appropriations in the Details of Appropriations and Capital Injections.

1.3 - Analysis of Significant Trends

Output Expenses

Expenditure has seen significant growth since 2019/20 (refer Part 1.2 - Trends in the Vote). The main drivers for this change have been:

- annual increases to address core demographic, volume and price pressures for frontline health services, with further increments appropriated in 2025/26 and 2026/27 (refer Part 1.1 - New Policy Initiatives) reflecting the multi-year approach the Government has agreed for cost pressure funding for Health New Zealand | Te Whatu Ora
- wage settlements, including funding to address pay equity and improving pay relativities
- increases aimed at improving or extending the reach of health services such as:
 - primary and community mental health and addiction services particularly through significant investment in Budget 2019
 - public health services including the national rollout of the bowel screening programme, BreastScreen Aotearoa critical infrastructure replacement and the implementation of human papillomavirus (HPV) primary screening under the National Cervical Screening Programme
 - disability support services which received significant funding increases prior to 2022/23 (see Note)
 - primary care services, ensuring the cost of visiting a GP remains affordable and supporting lowcost visits for community card holders
 - pharmaceutical purchasing to give Pharmac | Te Pātaka Whaioranga additional scope to invest in medicines
- enabling the health and disability system reform, including the operating costs associated with digital investment, and additional investment in primary and community care, and
- funding to enable the Ministry of Health | Manatū Hauora to provide support, oversight and governance of the health sector in its role as the chief steward of the health system.

Other Expenses

Vote Health also provides funding for Other Expenses, such as funding for international health organisations and legal expenses for the defence and settlement of claims against the Crown.

Capital Expenditure

Appropriations for 2024/25 are \$3,283 million compared to actual expenditure of \$728 million in 2019/20. This trend is mainly a result of increasing demand for remediating and upgrading hospital infrastructure, and from 2023/24 to fund the resolution of claims from historical non-compliance with the Holidays Act 2003. The funding for infrastructure has included investment in many, often multi-year, projects such as:

- the new Dunedin Hospital development, and
- digital infrastructure and capability to enable system transformation.

It also includes \$1.600 million of capital expenditure in 2024/25 for the Ministry of Health | Manatū Hauora.

Multi-Category Expenses and Capital Expenditure

The main drivers for the changes in multi-category expenses are:

- the COVID-19 pandemic response, which has contributed to a significant increase in funding by way of multi-category appropriations (MCAs) since 2020/21 but is now incorporated in business-as-usual activities along with pandemic preparedness in non-departmental output expenses. This included significant funding for the national vaccine strategy rollout
- the fiscally neutral transfer of funding, previously held under Departmental Output Expenses, into the Stewardship of the New Zealand health system MCA (from 2022/23).

Crown Revenue and Capital Receipts

The increased income from Crown revenue and capital receipts includes:

- Crown revenue from ACC for the purchase of public health acute and other services provided by Health New Zealand | Te Whatu Ora. The ACC revenue has increased from \$573 million in 2019/20 to forecast revenue of \$925 million in 2024/25, largely reflecting changes in the price and volume of services provided but also including funding for maternal birth injuries from 2023/24
- capital charge revenue from Crown entities in the health sector. This has grown from \$302 million in 2019/20 to forecast revenue of \$576 million in 2024/25, reflecting the revaluation of assets and new infrastructure projects, and
- residential care loan repayments which have grown from \$14 million in 2019/20 to forecast capital receipts of \$35 million per annum in 2024/25, reflecting a substantial increase in the number of people entering aged residential care facilities in recent years and larger numbers who pay the maximum contribution for aged care services.

Note - Disability support services were transferred to the new Whaikaha | Ministry of Disabled People from 1 July 2022 as part of the Health and Disability System reforms.

Part 2 - Details of Departmental Appropriations

2.3 - Departmental Capital Expenditure and Capital Injections

Ministry of Health - Capital Expenditure PLA (M36) (A21)

Scope of Appropriation

This appropriation is limited to the purchase or development of assets by and for the use of the Ministry of Health, as authorised by section 24(1) of the Public Finance Act 1989.

Capital Expenditure

	202	2024/25	
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Forests/Agricultural	-	-	-
Land	-	-	-
Property, Plant and Equipment	2,000	2,000	1,500
Intangibles	-	-	100
Other	-	-	-
Total Appropriation	2,000	2,000	1,600

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the renewal, upgrade, or redesign of assets to support the delivery of Ministry of Health | Manatū Hauora's core functions and responsibilities.

How Performance will be Assessed and End of Year Reporting Requirements

	202	2024/25	
Assessment of Performance	Final Budgeted Standard		
Expenditure is in accordance with Manatū Hauora - Ministry of Health's capital asset management plan	Achieved	Achieved	Achieved

End of Year Performance Reporting

The Ministry of Health | Manatū Hauora will report performance information for this appropriation in its Annual Report.

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is owing to the transfer of most of the Ministry of Health | Manatū Hauora's intangible assets to Health New Zealand | Te Whatu Ora as part of the health reforms and accounting policy changes for the treatment of software as a service (SaaS).

Capital Injections and Movements in Departmental Net Assets

Ministry of Health

Details of Net Asset Schedule	2023/24 Estimated Actual \$000	2024/25 Projected	Explanation of Projected Movements in 2024/25
Opening Balance	4,632	4,116	
Capital Injections	-	-	
Capital Withdrawals	(516)	-	
Surplus to be Retained (Deficit Incurred)	-	-	
Other Movements	-	-	
Closing Balance	4,116	4,116	

Part 3 - Details of Non-Departmental Appropriations

3.1 - Non-Departmental Output Expenses

Aged Care Commissioner (M61) (A21)

Scope of Appropriation

This appropriation is limited to the functions of the Aged Care Commissioner

Expenses

	202	3/24	2024/25
	Final Budgeted \$000		
Total Appropriation	2,104	2,104	2,104

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide greater oversight of the aged care sector, including monitoring and addressing emerging quality and safety issues, and advocating on behalf of consumers and their whānau for better services.

How Performance will be Assessed and End of Year Reporting Requirements

	202	2024/25	
Assessment of Performance	Final Budgeted Standard		
Undertake a number of engagements with older consumers and their whānau from all communities in order to reflect their perspectives in the Aged Care Commissioner's work including the Commissioner's monitoring report	50	100	Discontinued measure
Develop effective relationships with stakeholders, including actively engaging with older consumers and their whānau	New measure	New measure	100 engagements

Additional measures relating to the Aged Care Commissioner's role and function will be available in the Health and Disability Commissioner | Te Toihau Hauora, Hauātanga's Statement of Performance Expectations.

This existing Aged Care Commissioner performance measure is being removed and replaced by a better measure going forward in order for the Aged Care Commissioner to provide stronger sector leadership to drive quality improvement and advocate for better services for older people.

End of Year Performance Reporting

Performance information will be reported in the Health and Disability Commissioner | Te Toihau Hauora, Hauātanga's Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Drawdown of the Budget 2022 Contingency - Addressing Future Health System Cost Pressures (2023/24)	2023/24	81	81	81	81	81
Addressing Historical and Future Vote Health Cost Pressures	2022/23	78	78	78	78	78
Establishment of an Aged Care Commissioner under the Health and Disability Commissioner	2021/22	2,320	2,320	2,320	2,320	2,320

Delivering hauora Māori services (M36) (A21)

Scope of Appropriation

This appropriation is limited to developing, implementing and delivering hauora Māori services, supporting the development of hauora Māori providers, developing partnerships with iwi, commissioning kaupapa Māori services and other services developed for Māori, and other related services.

Expenses

	202	3/24	2024/25
	Final Budgeted \$000		Budget \$000
Total Appropriation	704,106	704,106	749,424

What is Intended to be Achieved with this Appropriation

This appropriation is intended to secure the development, implementation and delivery of hauora Māori services, development of hauora Māori providers, development of partnerships with iwi, commissioning of kaupapa Māori services and other services developed for Māori, and other related services.

How Performance will be Assessed and End of Year Reporting Requirements

	2023	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Support Iwi Māori Partnership Boards in fulfilling their functions as outlined in s30 of the Pae Ora (Healthy Futures Act) 2022	New measure	New measure	Achieved
Draw on Te Ao Māori to enhance the pathways into, and strengths of, the Māori Health workforce	New measure	New measure	Achieved
Whānau accessing Te Ao Māori services commissioned through this appropriation report an improved wellbeing experience	New measure	New measure	Satisfied
Increase number of hauora Māori service providers operating under Te Ao Māori service provision and workforce training compared to the base year of 2021/22	Achieved	Achieved	Discontinued measure
Hauora Māori service providers are covering a larger geographical area compared to the base year of 2021/22	Achieved	Achieved	Discontinued measure

	2023	3/24	2024/25
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Increase number of hauora Māori service providers providing Mātauranga Māori services as part of their overall health service compared to the base year of 2021/22	Achieved	Achieved	Discontinued measure
Increase wrap-around health support for wāhine hapū antenatal and birthing care that include longer-term intervention and prevention services compared to the base year of 2021/22	Achieved	Achieved	Discontinued measure
Increase in support for new models of taurite specialist Māori mental health and addiction services compared to the base year of 2021/22	Achieved	Achieved	Discontinued measure
Māori data sovereignty and data governance from Te Aka Whai Ora - Māori Health Authority will be adopted by 2 or more Health partners compared to the base year of 2021/22	Achieved	Not achieved	Discontinued measure
lwi Māori Partnership Boards are satisfied that they are fulfilling their role in developing health interventions for Māori based on results from annual survey of lwi Māori Partnership Boards	Very satisfied/satisfied	Not achieved	Discontinued measure

The responsibility of the Delivering Hauora Māori Services appropriation was transferred from Te Aka Whai Ora | Māori Health Authority to Health New Zealand | Te Whatu Ora from 1 April 2024. The existing performance measures have been discontinued and replaced with the new set of performance measures that Health New Zealand | Te Whatu Ora will be responsible for delivering on.

End of Year Performance Reporting

End of year performance information will be reported in the Annual Report of Health New Zealand | Te Whatu Ora.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Current Government						
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2024)	2024/25	-	39,000	39,000	39,000	39,000
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2025 Precommitment)	2025/26	-	-	38,000	38,000	38,000
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2026 Precommitment)	2026/27	-	-	-	37,000	37,000
Return of Funding - Māori Health Authority Disestablishment	2023/24	(31,500)	(1,000)	(1,000)	(1,000)	(1,000)
Disestablishment of Māori Health Authority - Funding Transfer to the Ministry of Health (see Note 1)	2023/24	(716)	(2,864)	(2,864)	(2,864)	(2,864)

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Drawdown of the Budget 2022 Contingency - Addressing Future Health System Cost Pressures (2023/24)	2023/24	34,704	34,704	34,704	34,704	34,704
Emergency Housing Reset and Redesign - Approval of Funding for Action 10 Initiatives	2023/24	400	700	700	700	-
Extending Pay Equity Settlement for Social Workers in Community and Iwi Organisation	2023/24	215	286	369	435	435
Transfer of Funding for Specific Hauora Māori Services	2023/24	387,655	387,655	387,655	387,655	387,655
Health Response: Hauora Māori Disaster Response Package	2022/23	5,656	-	-	-	-
HIV Action Plan - Implementation Plan and Drawdown of Tagged Contingency	2022/23	500	450	450	450	450
Hauora Māori Commissioning	2022/23	44,777	45,077	45,077	45,077	45,077
Health Workforce Development	2022/23	8,000	12,000	12,000	12,000	12,000
Addressing Historical and Future Vote Health Cost Pressures	2022/23	6,809	6,809	6,809	6,809	6,809
Māori Primary and Community Care Provider Development - Securing Future Capability and Shifting into New Models of Care	2022/23	8,000	8,000	8,000	8,000	8,000
lwi-Māori Partnership Boards	2022/23	5,510	5,460	5,460	5,460	5,460

Note 1 - Other funding in the Delivering hauora Māori services appropriation is being reallocated to Health New Zealand | Te Whatu Ora to deliver the associated services.

Reasons for Change in Appropriation

The increase in this appropriation for 2024/25 is mainly due to:

- \$39 million of additional funding for the Budget 2024 initiative Health Cost Pressure Funding for Health New Zealand | Te Whatu Ora (Budget 2024) to provide funding for core demographic, volume and price pressures for frontline health services to maintain current health policy settings
- \$30.500 million for the net impact of the Budget 2024 initiative to deliver savings from the disestablishment of Te Aka Whai Ora | Māori Health Authority reflecting underspend from entity establishment and reduced need for governance functions, and
- \$4 million of additional funding for the Budget 2022 initiative Health Workforce Development to provide funding for workforce training and development to underpin critical reform initiatives.

This increase was partially offset by:

- \$7.250 million for the net impact of a fiscally neutral transfer from the Delivering Primary, Community, Public and Population Health Services appropriation to enable the commissioning of Te Ao Māori models of maternity and early years care as part of Kahu Taurima
- \$6.293 million for the net impact of fiscally neutral transfers from the Delivering Primary, Community, Public and Population Health Services appropriation to provide funding for Māori Kaiāwhina roles and the workforce development of these roles as part of the Comprehensive Primary Care Programme

- \$5.656 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2023 North Island Weather Events Response and Recovery initiative Health Response: Hauora Māori Disaster Response Package that provided funding for urgent psychosocial response and recovery services that support whānau wellbeing and support the community to recover from the impacts of North Island Weather Events
- \$2.758 million for a fiscally neutral transfer in 2023/24 only from the Delivering Primary, Community, Public and Population Health appropriation to provide funding for the engagement with Iwi Māori Partnership Boards as part of the service integration for locality provider networks
- \$2.671 million reduction in funding from the net impact of baseline transfers from the previous appropriation structure to reflect the new structure of the Vote Health appropriations from 1 July 2022 to support the health reforms
- \$2.148 million for the net impact of a fiscally neutral transfer to the Stewardship of the New Zealand health system MCA to reflect the transfer of some functions to the Ministry of Health | Manatū Hauora from April 2024 following the decision to disestablish Te Aka Whai Ora | Māori Health Authority, and
- \$2 million for a fiscally neutral transfer in 2023/24 only from the New Zealand Customs Service to reflect the increase in costs for alcohol-related programmes with associated revenue.

Vote Health was restructured from 1 July 2022 to reflect the impact of the Health and Disability System reforms. Details of this restructuring can be found in the Estimates of Appropriations 2022/23. The Reasons for Change in Appropriations and Current and Past Policy Initiatives associated with the earlier appropriations can be found in prior years' Estimates of Appropriations (2021/22 and prior years) for Vote Health.

Delivering Hospital and Specialist Services (M36) (A21)

Scope of Appropriation

This appropriation is limited to hospital and specialist health services (including mental health services).

Expenses

	202	2024/25	
	Final Budgeted \$000		
Total Appropriation	14,389,512	14,381,833	14,610,883

What is Intended to be Achieved with this Appropriation

This appropriation is intended to secure hospital and specialist services for the eligible New Zealand population in line with existing service coverage expectations and operating policy requirements and to ensure service and system improvements are continuously progressed as set out in the interim New Zealand Health Plan.

How Performance will be Assessed and End of Year Reporting Requirements

	2023	/24	2024/25
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Percentage of people accessing specialist mental health and addiction services are seen within three weeks (see Note 1)	New measure	New measure	Improve from baseline as at June 2024
Train additional mental health and addiction professionals each year (see Note 1)	New measure	New measure	Improve from baseline as at June 2024
Decrease in the percentage of missed first specialist assessment appointments for Māori, Pacific, Non-Māori/Non-Pacific people	Achieved	Not achieved	Achieved
Decrease the percentage of cardiac patients (both acute and elective) who are waiting for treatment beyond 120 days	25%	25%	25%
ESPI 2 - Percentage of patients are waiting over four months or FSA	0%	33%	Discontinued measure
95% of patients wait less than 4 months for a first specialist appointment (see Note 1)	New measure	New measure	Improve from baseline as at June 2024
ESPI 5 - Percentage of patients who are waiting over 120 days or treatment	0%	40%	Discontinued measure
15% of patients wait less than 4 months for elective treatment see Note 1)	New measure	New measure	Improve from baseline as at June 2024
15% of patients admitted, discharged or transferred from In ED within 6 hours (see Note 1)	New measure	New measure	Improve from baseline as at June 2024
10% of patients receive cancer management within 31 days if the decision to treat (see Note 1)	New measure	New measure	Improve from baseline as at June 2024
Percentage of patients prioritised using approved nationally ecognised processes or tools (see Note 2)	100%	99%	Discontinued measure
Percentage of women, where the diagnosis is cancer who have heir initial treatment performed within 31 calendar days of the inal decision to treat (see Note 3)	Greater than or equal to 90%	Data not available	Discontinued measure
Percentage of women, who have evidence of clinical suspicion of invasive carcinoma, or a laboratory report indicating 'features suspicious for invasion', or 'changes consistent with squamous ell carcinoma', or similar, who receive a date for a colposcopy appointment or a gynaecological assessment that is within 0 working days of receipt of the referral (see Note 3)	Greater than or equal to 95%	Data not available	Discontinued measure
ncrease the percentage of National Bowel Screening rogramme participants diagnosed with cancer who are referred or pre-operative presentation at a multidisciplinary meeting vithin 20 working days of diagnosis	95%	78%	95%
Percentage of rangatahi seen within the three weeks from a mental health referral	80%	80%	Improve from baseline as at June 2024
Decrease in the rate of diabetes complications for Māori, Pacific, Asian, and other people	Achieved	Data not available	Achieved
ncrease in actual expenditure by kaupapa Māori hospital and pecialist health service providers compared with the average f last five financial years (see Note 4)	Achieved	Achieved	Discontinued measure
expenditure is consistent with budget for this appropriation gainst key line items and overall (see Note 4)	Achieved	Achieved	Discontinued measure
Proportion of total expenditure directed to mental health and addiction meets agreed level (see Note 4)	Achieved	Achieved	Discontinued measure

	2023	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Increase in the proportion of Māori and other under-represented groups in the regulated health workforce, compared with the proportion of the total population, as compared with 12 months prior to 30 June 2022 (see Note 5)	Achieved	Achieved	Discontinued measure
Increase in proportion of Māori and other under-represented groups in the unregulated health workforce employed by Health New Zealand Te Whatu Ora compared with the proportion of the total population, as compared with 12 months prior to 30 June 2022 (see Note 5)	Achieved	Achieved	Discontinued measure
Increase in proportion of Māori and Pacific people in leadership and governance roles in Health New Zealand Te Whatu Ora, compared with 2022/23 (see Note 5)	Achieved	Unable to be assessed	Discontinued measure
Decrease in rate of acute readmissions within 28 days of discharge	12%	Data not available	12%
The proportion of hospital and specialist services within Health New Zealand Te Whatu Ora that have been assessed against the Consumer Engagement Quality and Safety Marker; and of those, the proportion that have been assessed at Level 3 or 4	Achieved	Achieved	Achieved

Note 1 - This measure is a Government target. This reflects the PBE FRS 48 principle of understandability.

Note 2 - This measure has been discontinued as it does not reflect Health New Zealand performance. This reflects the PBE FRS 48 principle of relevance.

Note 3 - This measure has been discontinued as the data to calculate the measure is not available. This reflects the PBE FRS 48 principle of verifiability.

Note 4 - This measure has been discontinued. This reflects the PBE FRS 48 principle of relevance, as this information is already collected through financial information reporting.

Note 5 - This measure has been discontinued following difficulty collecting the data. This reflects the PBE FRS 48 principle of faithful representation. A new measure will be developed in 2024/25.

End of Year Performance Reporting

End of year performance information will be reported in the Annual Report of Health New Zealand | Te Whatu Ora.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Current Government						
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2024)	2024/25	-	860,000	860,000	860,000	860,000
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2025 Precommitment)	2025/26	-	-	825,000	825,000	825,000
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2026 Precommitment)	2026/27		-	-	826,000	826,000

Dell'and leithering	Year of First	2023/24 Final Budgeted	2024/25 Budget	2025/26 Estimated	2026/27 Estimated	2027/28 Estimated
Policy Initiative	Impact	\$000	\$000	\$000	\$000	\$000
Emergency Department Security - Service Expansion	2024/25	-	6,170	8,226	8,226	8,226
Training 25 More Doctors	2024/25	-	300	300	300	300
Drawdown of the Budget 2021 Contingency - Data and Digital Infrastructure and Capability for Health New Zealand Te Whatu Ora Payroll System Remediation and Stabilisation	2023/24	4,000	11,000	-	-	-
Mental Health and Addiction Community Sector Innovation Fund	2023/24	(3,900)	-	-	-	-
Previous Governments						
Increasing Medical School Enrolments for the 2024 Intake	2027/28	-	-	-	-	11,819
Drawdown of the Budget 2022 Contingency - Addressing Future Health System Cost Pressures (2023/24)	2023/24	764,719	764,719	764,719	764,719	764,719
Health New Zealand Te Whatu Ora Nurses Pay Equity Claim - Drawdown of Final Settlement	2023/24	685,842	172,587	172,587	172,587	172,587
Drawdown of the Budget 2022 Contingency - Data and Digital Foundations and Innovation for Health New Zealand Te Whatu Ora	2023/24	19,828	25,326	5,329	5,348	5,348
Health Sector Pay Equity Claim - Health New Zealand Te Whatu Ora Midwifery Claim	2023/24	12,215	12,215	12,215	12,215	12,215
Neonatal Retinopathy Screening	2023/24	2,332	2,332	2,332	2,332	2,332
Pay Equity Settlements and Improving Pay Relativities	2022/23	406,959	406,959	406,959	406,959	406,959
Addressing Historical and Future Health System Cost Pressures - Drawdown of 2022/23 Tagged Contingency	2022/23	520,793	520,793	520,793	520,793	520,793
Ministry ICT and Data & Digital Contracts and Funding Transfer	2022/23	14,963	14,963	14,963	14,963	14,963
Southern Digital Transformation Programme - Drawdown of Stage One Funding	2022/23	4,229	1,760	14,828	14,828	14,828
Drawdown from Contingency Funding for Capital Charge on New Capital Projects for Health New Zealand Te Whatu Ora	2022/23	9,874	9,874	9,874	9,874	9,874
Health Response: Hospital and Specialist Services	2022/23	4,753	-	-	-	-
Supporting the Infrastructure and Investment Group Work Programme - Drawdown of Tagged Contingency	2022/23	3,710	-	-	-	-
Addressing Historical and Future Vote Health Cost Pressures	2022/23	961,443	961,443	961,443	961,443	961,443
Resourcing Additional Critical Care Beds across Aotearoa New Zealand	2022/23	140,200	140,200	140,200	140,200	140,200
Specialist Mental Health and Addiction Services - Increasing Availability of Focused Supports	2022/23	14,700	25,900	50,000	50,000	50,000
Continuing the Alcohol and Other Drug Treatment Courts: Auckland, Waitākere and the Waikato	2022/23	8,119	8,119	8,119	8,119	8,119
Drawdown of Capital Charge for Taranaki DHB (now part of Health New Zealand Te Whatu Ora)	2022/23	2,456	2,456	2,456	2,456	2,456
Preventing Family Violence and Sexual Violence: Services for Victims of Non-Fatal Strangulation	2022/23	2,028	2,028	2,028	2,028	2,028
Meeting the Demand for Organ Donation and Transplantation	2022/23	2,750	3,750	3,750	3,750	3,750

Reasons for Change in Appropriation

The increase in this appropriation for 2024/25 is mainly due to:

- \$860 million of additional funding for the Budget 2024 initiative Health Cost Pressure Funding for Health New Zealand | Te Whatu Ora (Budget 2024) to provide funding for core demographic, volume and price pressures for frontline health services to maintain current health policy settings
- \$12 million for the net impact of funding carried forward from 2023/24 to 2024/25 for the Regional Hospital Redevelopment Programme to deliver business cases for major hospital redevelopments, reflecting rephasing of the programme
- \$11.200 million of additional funding for the Budget 2022 initiative Specialist Mental Health and Addiction Services - Increasing Availability of Focused Supports to increase the availability and trial new models of specialist mental health and addiction services
- \$7 million of additional funding for Health New Zealand | Te Whatu Ora to support the remediation and stabilisation of immediate payroll system risks
- \$6.923 million of additional funding from the net impact of baseline transfers from the previous appropriation structure to reflect the new structure of the Vote Health appropriations from 1 July 2022 to support the health reforms
- \$6.170 million of additional funding for the Budget 2024 initiative Emergency Department Security -Service Expansion to provide for new 24/7 security guards across the highest-risk Health New Zealand | Te Whatu Ora emergency departments
- \$6 million for the net impact of funding carried forward from 2023/24 to 2024/25 for the Mental Health Infrastructure Programme to deliver initiatives to accelerate delivery of projects in the mental health portfolio, reflecting rephasing of the programme
- \$5.498 million of additional funding for data and digital priorities to support health sector reforms and investment in priority areas that enable improvements in health system performance, and
- \$3.900 million for the net impact of funding in 2023/24 transferred to the Delivering Primary, Community, Public and Population Health Services appropriation for the Budget 2024 initiative to provide funding for a Mental Health and Addiction Community Sector Innovation Fund.

This increase was partially offset by:

- \$513.255 million reduction between 2023/24 and 2024/25 in funding for the settlement of the nurses pay equity litigation reflecting lump sum payments and backpay included in the earlier year
- \$110 million carried forward from 2022/23 to 2023/24 only to help clear the backlog of Planned Care that arose through the height of the COVID-19 pandemic
- \$28.145 million for the net impact of a fiscally neutral transfer to the Delivering Primary, Community, Public and Population Health Services appropriation to align funding with the reforecast expenses for the Data and Digital Infrastructure and Capability programme
- \$17 million carried forward from 2022/23 to 2023/24 only for the Regional Hospital Redevelopment Programme to complete planning, analysis, high level design and costing estimations

- \$7 million for the net impact of funding carried forward from 2022/23 to 2023/24 and 2024/25 for the Mental Health Infrastructure Programme to support the planning and development of business cases and support activities that will accelerate future mental health redevelopments, reflecting rephasing of the programme
- \$5.150 million carried forward from 2022/23 to 2023/24 only to fund the cost of the demolition of the old Christchurch Energy Centre Building
- \$4.753 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2023 North Island Weather Events Response and Recovery initiative Health Response: Hospital and Specialist Services to provide funding for air and road transport enabling planned care, outreach and other hospital services for isolated communities
- \$3.710 million reduction in funding from the impact of time-limited funding ending in 2023/24 to support the delivery of the Infrastructure and Investment Group work programme, and
- \$2.469 million reduction in funding to implement Stage 1 of the Southern Digital Transformation programme.

Vote Health was restructured from 1 July 2022 to reflect the impact of the Health and Disability System reforms. Details of this restructuring can be found in the Estimates of Appropriations 2022/23. The Reasons for Change in Appropriations and Current and Past Policy Initiatives associated with the earlier appropriations can be found in prior years' Estimates of Appropriations (2021/22 and prior years) for Vote Health.

Delivering Primary, Community, Public and Population Health Services (M36) (A21)

Scope of Appropriation

This appropriation is limited to primary, community (including mental health), public and population health services at international, national, regional, and local levels.

Expenses

	202	2024/25	
	Final Budgeted \$000		Budget \$000
Total Appropriation	8,668,148	8,668,148	9,087,520

What is Intended to be Achieved with this Appropriation

This appropriation is intended to secure Primary, Community, Public and Population Health services at international, national, regional, and local levels in line with existing service coverage expectations and operating policy requirements and to ensure service and system improvements are continuously progressed as set out in the interim New Zealand Health Plan.

How Performance will be Assessed and End of Year Reporting Requirements

	202	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
80% of people accessing primary mental health and addiction services through the Access and Choice programme are seen within one week (see Note 1)	New measure	New measure	Improve from baseline as at June 2024
Mental health expenditure ringfence expectations are met	Achieved	Achieved	Achieved
Increase the percentage of eligible eight-month-olds enrolled on the Aotearoa Immunisation Register that are fully immunised with age-appropriate immunisations	95% Māori, Pacific and Total population	Māori 66.8%, Pacific 80.7% Total 82.7%	95% Māori, Pacific and Total population
95% of children fully immunised at 24-months of age	95% Māori, Pacific and Total population	Māori 70.1%, Pacific 80.5% Total 83%	95% Māori, Pacific and Total population
Increase the percentage of eligible five-year-olds enrolled on the Aotearoa Immunisation Register that are fully immunised with age appropriate immunisations	95% Māori, Pacific and Total population	Māori 60.7%, Pacific 79% Total 80.5%	95% Māori, Pacific and Total population
Increase the percentage of girls and boys between 9 and 26 who have completed their HPV immunisation course as per Schedule and recorded on the Aotearoa Immunisation Register fully immunised	75% Māori, Pacific and Total population	Māori 30.4%, Pacific 35.3% Total 38.3%	75% Māori, Pacific and Total population
Increase the percentage of eligible people aged 65 years and over enrolled on the Aotearoa Immunisation Register who have completed at least one influenza vaccination for the given vaccination year	75% Māori, Pacific and Total population	Māori 57%, Pacific 57% Total 64.3%	75% Māori, Pacific and Total population
Increase in expenditure by kaupapa Māori primary, community, public and population health service providers, compared with the average of the last five financial years	Achieved	Achieved	Achieved
Increase in percentage of Māori, Pacific, Asian, and other people who say they receive care from a GP or nurse when they need it	Achieved	Data not yet available	Achieved
Increase in percentage of Māori, Pacific, Asian, and other people who say they feel involved in their own care and treatment with their GP or nurse	At least 86%	Data not yet available	At least 86%
Increase in rongoā consultations for rongoā Māori clients provided in terms of both total volumes and spread across the country	Achieved	Achieved	Discontinued measure
Improvement in feedback from the Iwi-Māori Partnership Boards on how they are fulfilling their role and whether they are receiving the support they require	Achieved	Achieved	Achieved
Decrease in proportion of people reporting unmet need for primary health care, reported by ethnicity and geographic area, compared with the 12 months to 30 June 2019	Achieved	Data not available	Discontinued measure
Decrease in rate (per 100,000) of hospital admissions for children under five years of age for an illness that might have been prevented or better managed in the community	Achieved	Not achieved	Achieved
Decrease in rate of hospital admissions (per 100,000) for people aged 45-64 years for an illness that might have been prevented or better managed in the community	Achieved	Not achieved	Achieved
Number of people who have access to Kaupapa Māori, Pacific and Youth Primary Mental Health and Addiction Services through the Access and Choice programme	Meet annual access level established for 2023/24	Achieved	Meet annual access level established for 2024/25
Increase in percentage of pregnant people who register with a Lead Maternity Carer in the first trimester of their pregnancy of all registrations	Achieved	Achieved	Achieved

	202	2023/24		
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard	
Expenditure is consistent with budget for the appropriation against key line items and overall	Achieved	Achieved	Discontinued measure	
Proportion of total expenditure directed to mental health and addiction meets agreed level	Achieved	Achieved	Discontinued measure	
Increase the proportion of primary, community, public and population health, and hospital and specialist services within Health New Zealand Te Whatu Ora that have been assessed against the Consumer Engagement Quality and Safety Marker; and of those, the proportion that have been assessed at Level 3 or 4	Achieved	Achieved	Achieved	
Number of people who have access to primary mental health and addiction support services through the Access and Choice programme	Meet annual access level established for 2023/24	Achieved	Meet annual access level established for 2024/25	

Note 1 - This measure is a Government mental health target.

End of Year Performance Reporting

End of year performance information will be reported in the Annual Report of Health New Zealand | Te Whatu Ora.

Current and Past Policy Initiatives

	Year of First	2023/24 Final Budgeted	2024/25 Budget	2025/26 Estimated	2026/27 Estimated	2027/28 Estimated
Policy Initiative	Impact	\$000	\$000	\$000	\$000	\$000
Current Government						
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2024)	2024/25	-	531,000	531,000	531,000	531,000
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2025 Precommitment)	2025/26	-	-	507,000	507,000	507,000
Health Cost Pressure Funding for Health New Zealand Te Whatu Ora (Budget 2026 Precommitment)	2026/27	-	-	-	507,000	507,000
COVID-19 and Pandemic Preparedness: Maintaining Essential Health Services and Critical Surveillance Infrastructure	2024/25	-	56,435	50,558	43,460	43,459
Breast Screening Extension of Eligibility to Include 70-74-year olds as part of the Free National Programme	2024/25	-	6,000	6,000	6,000	6,000
Gumboot Friday - Delivering Free Youth Mental Health Counselling Services	2024/25	-	6,000	6,000	6,000	6,000
Prescription Co-payment - Reinstating the \$5 Prescription Co-payment with Targeted Exemptions	2024/25	-	(70,979)	(64,586)	(66,201)	(67,856)
Mental Health and Addiction Community Sector Innovation Fund	2023/24	(5,820)	5,000	4,720	-	-

Dell'acclettation	Year of First	2023/24 Final Budgeted	2024/25 Budget	2025/26 Estimated	2026/27 Estimated	2027/28 Estimated
Previous Governments	Impact	\$000	\$000	\$000	\$000	\$000
Drawdown of the Budget 2022 Contingency - Addressing	2023/24	494,980	494,980	494,980	494,980	494,980
Future Health System Cost Pressures (2023/24)	2023/24	494,900	494,900	494,900	494,900	434,300
Improving Pay Relativities for Funded Sector Health Workers - Drawdown of Tagged Contingency Funding	2023/24	55,506	55,506	55,506	55,506	55,506
Extending Pay Equity Settlement for Social Workers in Community and Iwi Organisation	2023/24	19,030	21,816	23,916	25,893	25,893
Health Sector Agreements and Payments Programme Tranche 3 Funding Drawdown	2023/24	9,895	9,174	10,335	10,335	10,335
Homelessness Action Plan Contingency Cost Pressure Drawdown	2023/24	1,003	3,133	3,061	-	-
A Social Sector Recovery Plan to Ensure a Coordinated Approach to Social Sector Recovery Over the Medium Term	2023/24	150	-	-	-	-
Emergency Housing Reset and Redesign - Approval of Funding for Action 10 Initiatives	2023/24	150	-	-	-	-
Options to Support Pharmac - Removal of the \$5 Prescription Co-payment	2023/24	(21,800)	-	-	-	-
Transfer of Funding for Specific Hauora Māori Services	2023/24	(387,655)	(387,655)	(387,655)	(387,655)	(387,655)
Removing Prescription Co-payments for all New Zealanders	2023/24	170,197	174,452	178,813	183,284	183,284
Psychosocial Recovery: Mental Health and Wellbeing Response	2023/24	10,000	-	-	-	-
New Zealand's Future Quarantine and Isolation Capability	2023/24	3,323	3,323	-	-	-
Well Child Tamariki Ora - Continuation of the Enhanced Support Pilots	2023/24	1,250	2,450	2,450	2,450	2,450
Pay Equity Settlements and Improving Pay Relativities	2022/23	177,357	177,442	177,527	177,580	177,580
BreastScreen Aotearoa Critical Infrastructure Replacement - Drawdown of Tagged Contingency	2022/23	24,571	18,941	9,750	9,750	9,750
Supporting the Establishment of the National Public Health Service and Public Health Agency - Drawdown of Tagged Contingency	2022/23	18,017	12,376	5,902	5,902	5,902
Human Papillomavirus Primary Screening for the National Cervical Screening Programme - Drawdown of Tagged Contingency	2022/23	19,889	5,660	3,621	2,998	1,981
Health Sector Agreements and Payments Programme - Drawdown of Tranche Two Funding	2022/23	15,548	4,157	4,157	4,157	4,157
Ministry ICT and Data & Digital Contracts and Funding Transfer	2022/23	8,057	8,057	8,057	8,057	8,057
HIV Action Plan - Implementation Plan and Drawdown of Tagged Contingency	2022/23	5,100	5,250	4,200	4,200	4,200
Smokefree Aotearoa 2025 Action Plan - Remaining Implementation Funding - Drawdown of Tagged Contingency	2022/23	1,639	2,232	2,485	2,485	2,485
Health Response: Primary, Community, and Residential Care Recovery	2022/23	2,817	-	-	-	-

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Health Response: Transport and Power	2022/23	1,157	-	-	-	-
Addressing Historical and Future Vote Health Cost Pressures	2022/23	304,723	304,723	304,723	304,723	304,723
Population Health and Disease Management Digital Capability	2022/23	29,281	29,316	29,316	29,316	29,316
Emergency Road Ambulance Services - Additional Support Funding	2022/23	44,776	44,776	44,776	44,776	44,776
Emergency Air Ambulance Services - Additional Support Funding	2022/23	22,512	22,550	22,563	22,563	22,563
Mana Ake - Continuation and Expansion of Mental Wellbeing Support for Primary and Intermediate School- aged Students	2022/23	21,817	24,456	28,734	28,734	28,734
Primary Care Funding Formula - Equity Adjustments to Capitation	2022/23	24,414	24,414	24,414	24,414	24,414
Allowing Payment to Family Members for Support Services	2022/23	17,000	22,000	22,000	22,000	22,000
Pacific Primary and Community Care Provider Development - Securing Future Capability and Shifting into New Models of Care	2022/23	14,044	14,044	14,044	14,044	14,044
Comprehensive Primary Care Teams	2022/23	61,146	35,000	-	-	-
Service Integration for Locality Provider Networks	2022/23	27,624	-	-	-	-
Health Workforce Development	2022/23	13,000	10,000	10,000	10,000	10,000
Extending School Based Health Services	2022/23	3,137	3,137	3,137	3,137	3,137
Addressing the Burden of Diabetes for Pacific Communities	2022/23	5,000	6,000	6,000	6,000	6,000
Dementia Mate Wareware Action Plan - Implementation Support Funding	2022/23	2,860	3,660	3,660	3,660	3,660
Piki - Continuation of Integrated Primary Mental Health and Addiction Support for Young People in Greater Wellington	2022/23	3,500	3,500	3,500	3,500	3,500
Introducing a Rights-based Approach to Health Care for Intersex Children and Young People	2022/23	699	684	434	434	434
Improving Access to Primary Health Care Services for Transgender People	2022/23	583	481	529	529	529
Strategy to Prevent and Minimise Gambling Harm 2022/23 to 2024/25	2022/23	460	460	-	-	-
Preventing the Harm from Serious and Organised Crime in New Zealand	2022/23	188	188	188	188	189

Reasons for Change in Appropriation

The increase in this appropriation for 2024/25 is mainly due to:

\$531 million of additional funding for the Budget 2024 initiative Health Cost Pressure Funding for Health New Zealand | Te Whatu Ora (Budget 2024) to provide funding for core demographic, volume and price pressures for frontline health services to maintain current health policy settings

- \$56.435 million of additional funding for the Budget 2024 initiative COVID-19 and Pandemic Preparedness: Maintaining Essential Health Services and Critical Surveillance Infrastructure to provide funding for operational delivery costs to support timely access to COVID-19 vaccines and therapeutics and retain critical public health surveillance infrastructure, supporting system preparedness to identify and respond to future disease outbreaks
- \$28.145 million for the net impact of a fiscally neutral transfer from the Delivering Hospital and Specialist Services appropriation to align funding with the reforecast expenses for the Data and Digital Infrastructure and Capability programme
- \$21.800 million for a fiscally neutral transfer in 2023/24 only to the National Pharmaceuticals Purchasing appropriation to provide funding for the increased demand for medicines resulting from the Budget 2023 initiative to remove the \$5 prescription co-payments for all New Zealanders over the age of 14
- \$20 million for the net impact of \$10 million of funding carried forward from 2023/24 to 2024/25 for the BreastScreen Aotearoa Critical Infrastructure Replacement programme to provide funding for the development of an implementation business case to replace vital components of the information and communication technology infrastructure, reflecting rephasing of the programme
- \$10.820 million for the net impact of funding carried forward from 2023/24 to 2024/25 for the Budget 2024 initiative to provide funding for a Mental Health and Addiction Community Sector Innovation Fund to enable community organisations to submit proposals for innovative new approaches to address the mental health and wellbeing needs of New Zealanders
- \$8.400 million for the net impact of \$4.200 million of funding carried forward from 2023/24 to 2024/25 for the development of a national public health operating IT system, reflecting rephasing of the programme
- \$7.250 million for the net impact of a fiscally neutral transfer to the Delivering hauora M\u00e4ori services appropriation to enable the commissioning of Te Ao Māori models of maternity and early years care as part of Kahu Taurima
- \$6.293 million for the net impact of fiscally neutral transfers to the Delivering haoura Māori services appropriation to provide funding for Māori Kaiāwhina roles and the workforce development of these roles as part of the Comprehensive Primary Care Programme
- \$6 million of additional funding for the Budget 2024 initiative to provide funding to extend the BreastScreen Aotearoa programme to include free mammograms for women up to 74 years old
- \$6 million of additional funding for the Budget 2024 initiative to provide funding to deliver free mental health counselling services for youth between the ages of 5 and 25 years through Gumboot Friday
- \$5 million of additional funding for the Budget 2022 initiative Allowing Payment to Family Members for Support Services to ensure that people receiving disability supports have the option to choose to pay a family member to provide those supports
- \$5 million for a fiscally neutral transfer in 2023/24 only to the Stewardship of the New Zealand health system MCA to support the coordination and implementation of the support workers' pay equity process
- \$4.255 million of additional Budget 2023 funding to remove the cost of prescription co-payments for all New Zealanders

- \$2.786 million of additional funding to implement the pay equity extension for social workers in community and iwi organisations
- \$2.758 million for a fiscally neutral transfer in 2023/24 only to the Delivering hauora Māori services appropriation to provide funding for the engagement with Iwi Māori Partnership Boards for the service integration for locality provider networks
- \$2.639 million of additional funding for the Budget 2022 initiative Mana Ake Continuation and Expansion of Mental Wellbeing Support for Primary and Intermediate School-aged Students to provide funding to enable ongoing service delivery of Mana Ake, and
- \$2.130 million of additional funding to meet the cost pressures related to the Homelessness Action Plan initiatives.

This increase was partially offset by:

- \$70.979 million reduction in funding in 2024/25 for the Budget 2024 savings initiative to reintroduce the \$5 prescription co-payment for those 14 years and over, with exemptions for people with a Community Services Card and those aged 65 and over
- \$60.666 million reduction in funding from the net impact of baseline transfers from the previous appropriation structure to reflect the new structure of the Vote Health appropriations from 1 July 2022 to support the health reforms
- \$43.570 million carried forward from 2022/23 to 2023/24 only for funding to deliver the Cyber Security and Hira tranche 1 programmes, reflecting rephasing of the programme
- \$27.624 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2022 initiative Service Integration for Locality Provider Networks to enable the delivery of joint, multidisciplinary services within locality provider networks
- \$26.146 million reduction in funding for the Budget 2022 initiative Comprehensive Primary Care
 Teams to provide funding for the establishment of integrated primary care teams within locality
 provider networks
- \$14.600 million carried forward from 2021/22 to 2023/24 only for the Early Years Health and Disability System Review to deliver a package of initiatives across government to improve outcomes in the first 1,000 days of life
- \$14.229 million reduction in funding for the National Cervical Screening Programme to implement human papillomavirus (HPV) primary screening and the upgrade of the supporting information and communications technology
- \$11.391 million reduction in funding to deliver Tranche 2 of the Health Sector Agreements and Payments programme
- \$10 million in 2023/24 only for the Budget 2023 North Island Weather Events Response and Recovery initiative Psychosocial Recovery: Mental Health and Wellbeing Response to provide funding for locally-led, community-based mental wellbeing initiatives
- \$8.520 million for a fiscally neutral transfer in 2023/24 only from the New Zealand Customs Service to reflect the increase in costs for alcohol-related programmes with associated revenue
- \$5.641 million reduction in funding to support the establishment of the National Public Health Service and Public Health Agency

- \$5.630 million reduction in funding to implement the BreastScreen Aotearoa Critical Infrastructure Replacement programme to deliver reduced risk of ICT failure, improved health outcomes, reduced inequity and improved participant performance
- \$5 million carried forward from 2022/23 to 2023/24 only for funding to support the coordination and implementation of the support workers' pay equity process
- \$3 million reduction in funding for the Budget 2022 initiative Health Workforce Development to provide funding for workforce training and development to underpin critical reform initiatives, and
- \$2.817 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2023 North Island Weather Events Response and Recovery initiative Health Response: Primary, Community, and Residential Care Recovery to support the provision of primary, community and residential care services to the population affected by the North Island Weather Events.

Vote Health was restructured from 1 July 2022 to reflect the impact of the Health and Disability System reforms. Details of this restructuring can be found in the Estimates of Appropriations 2022/23. The Reasons for Change in Appropriations and Current and Past Policy Initiatives associated with the earlier appropriations can be found in prior years' Estimates of Appropriations (2021/22 and prior years) for Vote Health.

Conditions on Use of Appropriation

Reference	Conditions
Pae Ora (Healthy Futures) Act 2022	Section 94 of the Act sets out the process for giving notice of payment terms or conditions to any person. The Ministry of Health Manatū Hauora has issued a Notice pursuant to section 94 of the Act, "the Arrangements relating to payments", which sets out terms and conditions.

Monitoring and Protecting Health and Disability Consumer Interests (M36) (A21)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of services that monitor and protect health and disability consumer interests.

Expenses

	202	3/24	2024/25	
		Final Budgeted Estimated Actual \$000 \$000		
Total Appropriation	41,123	41,123	36,723	

What is Intended to be Achieved with this Appropriation

This appropriation is intended to protect the rights of people using health and disability services. This includes addressing the concerns of whānau and investigating alleged breaches of patients' rights.

How Performance will be Assessed and End of Year Reporting Requirements

	202	3/24	2024/25
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Health and Disability Commissioner Te Toihau Hauora, Hauātanga (HDC)			
Number of complaints closed by HDC	2,700 - 3,000	2,700 - 2,900	2,700 - 3,000
Number of complaints closed by Advocacy	2,600 - 3,100	2,600 - 3,100	2,600 - 3,100
Generate 50 media stories on HDC decision report or other matters of public interest that affect consumer rights, in order to promote the Code of Rights work	50	62	Discontinued measure
Number of visits carried out by advocates with community groups and provider organisations to provide information about the Code of Health and Disability Services Consumers' Rights, HDC and the Advocacy Service	3,500	3,300	Discontinued measure
Number of networking visits carried out by advocates with community groups and provider organisations to provide information about the Code of Health and Disability Services Consumers' Rights, HDC and the Advocacy Service	New measure	New measure	3,300
At least 75% of networking visits and meetings are focused on vulnerable consumers	New measure	New measure	75%
Number of education sessions HDC provides to consumers to promote awareness of, respect for, and observance of the rights of consumers and how they may be enforced	1000	730	Discontinued measure
Number of people that accessed the online provider educational resources and number of people who have viewed the online consumer 'Your Rights' video, which promotes and educates the practical implication of consumers' rights	New measure	New measure	12,000
Number of enquiries managed by HDC and the Advocacy Service about the Act, the Code, and consumer rights under the Code	New measure	New measure	20,000
Make recommendations to improve quality of services, and monitor compliance with the implementation of recommendations by providers	New measure	New measure	97% compliance
Health Quality and Safety Commission Te Tāhū Hauora			
A publication on the quality of Aotearoa New Zealand's health care is provided by 30 June	Achieved	Achieved	Achieved
Provide tools (for example the atlas of healthcare variation, quality and safety markers, and quality dashboard) to allow the system and public to explore the quality and safety of services by 30 June	Achieved	Achieved	Achieved
Support the health workforce to build capability in quality improvement through provision of a course by 30 June	Achieved	Achieved	Achieved
Mental Health and Wellbeing Commission Te Hiringa Mahara			
He Ara Āwhina monitoring framework has been applied to a publish report on mental health and addiction services (which includes the access and choice programme) by 30 June	Achieved	Achieved	Achieved

There are five new and three discontinued performance measures under the HDC category, the changes are to provide informative measures of performance around education and stakeholder engagement.

The performance measures in this appropriation reflect the indicative information provided in the Statement of Performance Expectations.

End of Year Performance Reporting

Crown entity performance information will be reported in their respective Annual Reports.

Service Providers

Provider	2023/24 Final Budgeted \$000	2023/24 Estimated Actual \$000		Expiry of Resourcing Commitment
Crown Entities				
Health and Disability Commissioner Te Toihau Hauora, Hauātanga	17,597	17,597	Not yet known	Ongoing
Health Quality and Safety Commission Te Tāhū Hauora (HQSC)	18,167	18,167	Not yet known	Ongoing
Mental Health and Wellbeing Commission Te Hiringa Mahara	5,359	5,359	Not yet known	Ongoing
Total	41,123	41,123	36,723	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Drawdown of the Budget 2022 Contingency - Addressing Future Health System Cost Pressures (2023/24)	2023/24	1,572	1,572	1,572	1,572	1,572
Health Reform - Consumer/Whānau Voice Framework	2022/23	2,300	2,200	2,200	2,200	2,200
Addressing Historical and Future Vote Health Cost Pressures	2022/23	1,429	1,429	1,429	1,429	1,429
Health and Disability Commissioner - Sustainability and Expansion of Scope due to New Legislation	2021/22	2,900	-	-	-	-
Health Quality and Safety Commission - Additional Resourcing	2021/22	1,400	-	-	-	-
Establishing and Operating the Mental Health and Wellbeing Commission	2020/21	2,961	2,961	2,961	2,961	2,961

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is mainly due to:

- \$2.900 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2021 initiative Health and Disability Commissioner - Sustainability and Expansion of Scope due to New Legislation to ensure the HDC is appropriately funded to undertake its statutory functions,
- \$1.400 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2021 initiative Health Quality & Safety Commission New Zealand - Additional Resourcing to provide funding for the HQSC to maintain national quality, safety and equity improvement work alongside oversight of sector quality risks.

National Management of Pharmaceuticals (M36) (A21)

Scope of Appropriation

This appropriation is limited to services relating to the national management of pharmaceuticals.

Expenses

	202	3/24	2024/25
	Final Budgeted \$000		Budget \$000
Total Appropriation	29,907	29,907	29,507

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for the operating costs of Pharmac | Te Pātaka Whaioranga to deliver health-related services that align with Government priorities for the strategic direction for health services (see Ministry of Health | Manatū Hauora's Statement of Strategic Intentions).

How Performance will be Assessed and End of Year Reporting Requirements

	2023	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Proportion of key pharmaceutical decisions consulted on for new proposals (see Note 1)	100%	100%	Discontinued measure
Timeliness of funding decisions is improved through a reduction in the average time to assess and rank new applications (see Note 2)	Achieved	Achieved	Discontinued measure
A reduction in the average time to assess and rank new applications (average number of months)	Replacement measure	Replacement measure	Achieved
Timeliness of Pharmacology and Therapeutics Advisory Committee and sub-committee records is improved through a reduction in the average time to publish records (see Note 2)	Achieved	Achieved	Discontinued measure
A reduction in average time to publish Pharmacology and Therapeutics Advisory Committee (PTAC) and sub committee records	Replacement measure	Replacement measure	Achieved

Note 1 - This measure has been discontinued as it is no longer useful.

Note 2 - Both performance measures were discontinued and replaced with descriptions that are more concise. This reflects the PBE FRS 48 principle of understandability.

The performance measures in this appropriation reflect the indicative information provided in the Statement of Performance Expectations.

End of Year Performance Reporting

Performance information for this appropriation will be reported by Pharmac | Te Pātaka Whaioranga in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Drawdown of the Budget 2022 Contingency - Addressing Future Health System Cost Pressures (2023/24)	2023/24	1,135	1,135	1,135	1,135	1,135
Transitioning COVID-19 Vaccination and Treatments Funding into the Combined Pharmaceutical Budget	2023/24	400	-	-	-	-
Addressing Historical and Future Vote Health Cost Pressures	2022/23	1,110	1,110	1,110	1,110	1,111
Pharmac - Increase in Operational Budget	2020/21	1,774	1,774	1,774	1,774	1,774

National Pharmaceuticals Purchasing (M36) (A21)

Scope of Appropriation

This appropriation is limited to purchasing pharmaceuticals on the national pharmaceutical schedule and subsidising the supply of pharmaceuticals not on the national pharmaceutical schedule.

Expenses

	202	3/24	2024/25		
		Final Budgeted Estimated Actual \$000			
Total Appropriation	1,806,211	1,806,211	1,581,634		

What is Intended to be Achieved with this Appropriation

This appropriation is intended to secure for eligible people in need of pharmaceuticals, the best health outcomes that are reasonably achievable from pharmaceutical treatment from within the amount of funding provided in the appropriation.

How Performance will be Assessed and End of Year Reporting Requirements

	2023/24	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Increase in the number of New Zealanders receiving funded medicines (see Note 1)	Achieved	Achieved	Achieved
Increase in the number of new medicines funded (see Note 1)	Achieved	Achieved	Achieved
Access is widened to an increased number of medicines that are already funded	Achieved	Achieved	Achieved
Increase in the estimated number of people benefitting from new medicines funded (see Note 1)	Achieved	Achieved	Achieved

Note 1 - The total number is accumulated during the year as decisions come into effect.

The performance measures in this appropriation reflect the indicative information provided in the Statement of Performance Expectations.

End of Year Performance Reporting

Performance information for this appropriation will be reported by Pharmac | Te Pātaka Whaioranga in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Current Government						
Investment to Continue Access to Medicines	2024/25	-	420,400	442,420	455,430	455,430
Prescription Co-payment - Reinstating the \$5 Prescription Co-payment with Targeted Exemptions	2023/24	23,780	31,234	32,015	32,815	33,635
Previous Governments						
Transitioning COVID-19 Vaccination and Treatments Funding into the Combined Pharmaceutical Budget	2023/24	164,800	-	-	-	-
Options to Support Pharmac - Removal of the \$5 Prescription Co-payment	2023/24	21,800	-	-	-	-
Investment to Increase Access to Medicines	2023/24	66,000	-	-	-	-
Increase in the Combined Pharmaceutical Budget	2022/23	120,000	-	-	-	-

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is due to:

- \$449.631 million for the net impact of fiscally neutral transfers in 2023/24 only from the Implementing the COVID-19 Vaccine Strategy MCA to transition COVID-19 vaccination and treatments funding into the Combined Pharmaceutical Budget
- \$120 million reduction in funding from the impact of time-limited funding ending in 2023/24 for the Budget 2022 initiative Increase in the Combined Pharmaceutical Budget to ensure more medicines are available to more New Zealanders through an increase to the Combined Pharmaceutical Budget
- \$66 million in 2023/24 only to give Pharmac | Te Pātaka Whaioranga additional scope to invest in more new medicines, and
- \$21.800 million for a fiscally neutral transfer in 2023/24 only from the Delivering Primary, Community, Public and Population Health appropriation to provide funding for the increased demand for medicines resulting from the removal of the \$5 prescription co-payments for all New Zealanders over the age of 14.

This decrease was partially offset by:

- \$420.400 million of additional Budget 2024 funding so that Pharmac | Te Pātaka Whaioranga can continue to fund medicines at the currently planned level from 1 July 2024
- \$7.454 million of additional funding in 2024/25 to fund the costs of people with a Community Services Card and those aged 65 and over who are exempted from the Budget 2024 initiative to reintroduce the \$5 prescription co-payment for those aged 14 years and over, and
- \$5 million of additional funding from the net impact of a baseline transfer from the previous appropriation structure to reflect the new structure of the Vote Health appropriations from 1 July 2022 to support the health reforms.

Vote Health was restructured from 1 July 2022 to reflect the impact of the Health and Disability System reforms. Details of this restructuring can be found in the Estimates of Appropriations 2022/23. The Reasons for Change in Appropriations and Current and Past Policy Initiatives associated with the earlier appropriations can be found in prior years' Estimates of Appropriations (2021/22 and prior years) for Vote Health.

Problem Gambling Services (M36) (A21)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of services that minimise the harm from gambling, in accordance with the Gambling Act 2003.

Expenses

	202	3/24	2024/25
	Final Budgeted \$000		Budget \$000
Total Appropriation	29,557	27,963	24,599

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide services to reduce the harm caused by problem gambling.

How Performance will be Assessed and End of Year Reporting Requirements

	202	2024/25	
Assessment of Performance	Final Budgeted Standard		Budget Standard
The number of people accessing support from problem gambling services	6,750	5,768	6,750
The number of brief only interventions delivered (see Note 1)	6,000	6,000	6,000

End of Year Performance Reporting

Performance information for this appropriation will be reported in the Annual Report of Health New Zealand | Te Whatu Ora

Service Providers

Provider	2023/24 Final Budgeted \$000	2023/24 Estimated Actual \$000		Expiry of Resourcing Commitment
Crown Entities				
Health New Zealand Te Whatu Ora	20,751	20,751	Not yet known	Ongoing
Māori Health Authority Te Aka Whai Ora	6,008	6,008	N/A	N/A
Non-Governmental Organisations				
Other NGOs	2,798	1,204	Not yet known	Ongoing
Total	29,557	27,963	24,599	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Strategy to Prevent and Minimise Gambling Harm 2022/23 to 2024/25	2022/23	15,006	13,375	-	-	-

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is due to:

- \$2.592 million carried forward from 2022/23 to 2023/24 only to develop and implement the Strategy to Prevent and Minimise Gambling Harm 2022/23 to 2024/25 which sets out the approach to and budget for funding and co-ordinating problem gambling services over the three-year period, reflecting delays with allocating funding across the entities responsible for delivering the services while Health New Zealand | Te Whatu Ora and Te Aka Whai Ora | Māori Health Authority were being established
- \$1.631 million reduction in funding for the Strategy to Prevent and Minimise Gambling Harm 2022/23 to 2024/25, and
- \$735,000 carried forward from 2022/23 to 2023/24 only to provide funding for the procurement of research related investment for problem gambling services, reflecting a delay to allow for necessary discussions between the Ministry of Health | Manatū Hauora, Health New Zealand | Te Whatu Ora and Te Aka Whai Ora | Māori Health Authority on the allocation of funding between the health entities.

3.4 - Non-Departmental Other Expenses

International Health Organisations (M36) (A21)

Scope of Appropriation

This appropriation is limited to the Crown funding New Zealand's World Health Organization (WHO) membership and contributing to specific WHO projects.

Expenses

	202	2024/25	
	Final Budgeted \$000		
Total Appropriation	2,730	2,730	2,230

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that New Zealand maintains its membership in the World Health Organisation (WHO) and contributes to specific WHO projects.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted as the appropriation is one from which resources will be provided to a person or entity other than a department, a functional chief executive, an Office of Parliament, or a Crown entity under s15D(2)(b)(iii) of the Public Finance Act as the amount of this annual appropriation for a non-departmental other expense is less than \$5 million.

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is owing to a fiscally neutral transfer in 2023/24 only from the Stewardship of the New Zealand health system MCA to reprioritise funding to cover the cost pressures for New Zealand's World Health Organization memberships and related projects.

Legal Expenses (M36) (A21)

Scope of Appropriation

This appropriation is limited to funding the defence and settlement of health-related or disability-related legal claims against the Crown.

Expenses

	202	2024/25	
	Final Budgeted \$000		
Total Appropriation	1,808	1,808	1,208

What is Intended to be Achieved with this Appropriation

This appropriation is intended to enable action to be taken regarding legal claims related to Vote Health and meet the legal costs and claim settlements as appropriate.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted as the appropriation is one from which resources will be provided to a person or entity other than a department, a functional chief executive, an Office of Parliament, or a Crown Entity under s.15D(2)(b)(ii) of the Public Finance Act 1989, as additional performance information is unlikely to be informative because this appropriation is limited to funding the defence and settlement of healthrelated or disability-related legal claims against the Crown.

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is owing to a fiscally neutral transfer in 2023/24 only from the Stewardship of the New Zealand health system MCA to reprioritise funding to cover the cost pressures for legal expenses.

3.5 - Non-Departmental Capital Expenditure

Health Capital Envelope (M36) (A21)

Scope of Appropriation and Expenses

Type, Title, Scope and Period of Appropriations	Appropriations, Adjustments and Use	\$000
Health Capital Envelope (M36) (A21)	Original Appropriation	4,864,162
providing capital to nealth sector Crown entities or agencies for new	Adjustments to 2022/23	589,071
	Adjustments for 2023/24	539,505
Commences: 01 July 2022	Adjusted Appropriation	5,992,738
,	Actual to 2022/23 Year End	1,591,596
Expires: 30 June 2027	Estimated Actual for 2023/24	950,000
	Estimate for 2024/25	1,090,429
	Estimated Appropriation Remaining	2,360,713

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for the provision or purchase of health sector assets, providing capital to health sector Crown entities or agencies for new investments.

How Performance will be Assessed and End of Year Reporting Requirements

	2023	3/24	2024/25
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Develop an Investment Strategy and National Asset Management Strategy by 31 December 2023	Achieved	Achieved	Discontinued measure
Increased proportion of medical appointments completed through digital channels, as compared with 2021/22 baseline measure	Achieved	Achieved	At least 10%
Health New Zealand Te Whatu Ora is seen as a high-quality asset manager for the health estate as measured by the Asset Management Maturity index for the health portfolio (see Note 1)	40-60%	30%	40-60%
Health New Zealand Te Whatu Ora provides an annual update to the Ministers of Health and Finance on the improvement programme's enhancement of the asset and investment management framework	Achieved	Achieved	Annual Update provided
The extent to which actual benefits meet the expected benefits from those capital investments as set out in the relevant business case	80%	100%	80%

Note 1 - The Asset Management Maturity index scale is 0-20% Aware, 20-40% Minimum, 40-60% Core, 60-80% Intermediate and 80-100% Advanced on the index criteria established by the Treasury. This will include a continuous improvement programme to achieve 75-85% in future years.

The performance measure information provided support the expectations outlined in the Health Capital Settings Cabinet Paper and subsequent Letter of Expectations.

End of Year Performance Reporting

Performance information for this appropriation will be reported in Health New Zealand | Te Whatu Ora's Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Current Government						
National Cost Pressure Contingency for the Health Capital Portfolio	2024/25	-	103,139	-	-	-
Drawdown of the Budget 2021 Contingency - Data and Digital Infrastructure and Capability for Health New Zealand Te Whatu Ora Payroll System Remediation and Stabilisation	2024/25	-	10,100	-	-	-
Breast Screening Extension of Eligibility to Include 70-74-year olds as part of the Free National Programme	2024/25	-	7,190	-	-	-
Previous Governments						
Transfer of COVID-19 Inventories - Recognising Impact of Year-end Audit Adjustment on the Health Capital Envelope	2023/24	419,076	-	-	-	-
Equity Injection for the New Zealand Blood and Organ Service	2022/23	15,000	-	-	-	-
Southern Digital Transformation Programme - Drawdown of Stage One Funding	2022/23	24,006	15,525	-	-	-
State Sector Decarbonisation	2022/23	39,543	-	-	-	-
Capital for Health Sector Infrastructure	2022/23	1,519,600	1,058,032	982,000	-	-

Conditions on Use of Appropriation

Reference	Conditions
Cabinet Office Circular CO (19) 6: Investment Management and Asset Performance in the State Services Health System: New Capital Settings [SWC-22- MIN-0063]	 In Stage One of the new capital settings for the Health system, the following apply: Investments up to \$25 million in whole-of-life cost, and are either low or medium risk, may be approved by the Health New Zealand Te Whatu Ora Board. Investments that are between \$25 million and \$100 million, or are high risk, must be approved by the Minister of Health.
	 Investments that are more than \$100 million, require new Crown funding (over and above existing appropriated funding), or seek to employ alternative financing and/or procurement methods must have Cabinet approval.

New Dunedin Hospital 2021-2026 (M36) (A21)

Scope of Appropriation and Expenses

Type, Title, Scope and Period of Appropriations	Appropriations, Adjustments and Use	\$000
New Dunedin Hospital 2021-2026 (M36) (A21)	Original Appropriation	1,327,578
This appropriation is limited to capital expenditure on the construction of the new Dunedin Hospital and associated projects.	Adjustments to 2022/23	120,000
	Adjustments for 2023/24	-
Commences: 01 November 2021	Adjusted Appropriation	1,447,578
Expires: 30 June 2026	Actual to 2022/23 Year End	95,027
	Estimated Actual for 2023/24	156,871
	Estimate for 2024/25	292,280
	Estimated Appropriation Remaining	903,400

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for capital expenditure on the construction of the New Dunedin Hospital and associated projects.

How Performance will be Assessed and End of Year Reporting Requirements

	202	2024/25	
Assessment of Performance	Final Budgeted Standard		
Hospital redevelopment project meets project milestones	90%	100%	90%

The performance measure information provided support the expectations outlined in the Health Capital Settings Cabinet Paper and subsequent Letter of Expectations.

End of Year Performance Reporting

Performance information for this appropriation will be reported in Health New Zealand | Te Whatu Ora's Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Additional Funding for New Dunedin Hospital	2023/24	8,000	-	2,000	-	-
New Dunedin Hospital - Drawdown of Tagged Contingency Funding	2021/22	250,000	250,000	496,030	-	-

Conditions on Use of Appropriation

Reference	Conditions
Cabinet Office Circular CO (19) 6: Investment Management and Asset Performance in the State Services Health System: New Capital Settings [SWC-22- MIN-0063]	 In Stage One of the new capital settings for the Health system, the following apply: Investments up to \$25 million in whole-of-life cost, and are either low or medium risk, may be approved by the Health New Zealand Te Whatu Ora Board Investments that are between \$25 million and \$100 million, or are high risk, must be approved by the Minister of Health Investments that are more than \$100 million, require new Crown funding (over and above existing appropriated funding), or seek to employ alternative financing and/or procurement methods must have Cabinet approval

Remediation and resolution of Holidays Act 2003 historical claims (M36) (A21)

Scope of Appropriation

This appropriation is limited to fund Te Whatu Ora (including their subsidiaries and associates) and the New Zealand Blood and Organ Service for resolution of claims from historical non-compliance with the Holidays Act 2003.

Capital Expenditure

	202	2024/25	
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	572,314	284,031	1,663,216

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for working capital on behalf of the Crown, to fund Health New Zealand | Te Whatu Ora (including their subsidiaries and associates) and the New Zealand Blood and Organ Service | Te Ratonga Toto O Aotearoa to meet the costs of rectifying and remediating any liabilities associated with historical non-compliance with the Holidays Act 2003.

How Performance will be Assessed and End of Year Reporting Requirements

	2023/24	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Payments for former employees who have registered on the national employee portal and whose information has been validated will commence in 2024/25	New measure	New measure	Achieved
Remediate all current employees for each Te Whatu Ora - Health New Zealand District, and the New Zealand Blood and Organs Service, within agreed timelines (see Note 1)	Completed by 30 June 2024	Not achieved	Completed by 30 June 2025
Establish a national portal to facilitate the identification and remediation of former Te Whatu Ora - Health New Zealand and New Zealand Blood and Organ Service employees, and commence the remediation payments process for former employees by 31 December 2023	Achieved	Achieved	Discontinued measure

Note 1 - The New Zealand Blood and Organ Service | Te Ratonga Toto O Aotearoa completed their remediation of current and former employees in February 2024. Health New Zealand | Te Whatu Ora commenced payments to current employees and this will continue into 2024/25.

End of Year Performance Reporting

Performance information for this appropriation will be reported in the respective Annual Reports of Health New Zealand | Te Whatu Ora, and the New Zealand Blood and Organ Service | Te Ratonga Toto O Aotearoa.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Previous Governments						
Establishing Funding Baselines for Holidays Act Remediation	2023/24	1,642,330	593,200	-	-	-

Reasons for Change in Appropriation

The increase in this appropriation for 2024/25 is due to:

 \$2,140.032 million for the net impact of \$1,070.016 million of funding carried forward from 2023/24 to 2024/25 for the Holidays Act 2003 Remediation programme to fund Health New Zealand | Te Whatu Ora and the New Zealand Blood and Organ Service | Te Ratonga Toto O Aotearoa for resolution of claims from historical non-compliance with the Holidays Act 2003, reflecting rephasing of the programme.

This increase was partially offset by:

\$1,049.130 million reduction between years relating to the initial phasing of the funding for this initiative being \$1,642.330 million in 2023/24 and \$593.200 million in 2024/25.

Residential Care Loans - Payments (M36) (A21)

Scope of Appropriation

This appropriation is limited to the provision of interest-free loans to people entering into aged residential care facilities.

Capital Expenditure

	202	2024/25	
	Final Budgeted \$000	Estimated Actual \$000	
Total Appropriation	32,000	32,000	35,000

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that New Zealanders who are entering residential care facilities receive an appropriate level of financial assistance so they can afford that care.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted as the appropriation is one from which resources will be provided to a person or entity other than a department, a functional chief executive, an Office of Parliament, or a Crown Entity under s.15D(2)(b)(ii) of the Public Finance Act 1989, as additional performance information is unlikely to be informative because this appropriation is solely for the provision of interest-free loans for people entering into aged residential care facilities.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Current Government						
Residential Care Loans	2023/24	12,000	15,000	15,000	15,000	15,000

Reasons for Change in Appropriation

The increase in this appropriation for 2024/25 is owing to additional funding for Residential Care Loans to address a forecast funding shortfall reflecting a substantial increase in the number of people entering aged residential care facilities in recent years and larger numbers who pay the maximum contribution for aged care services. The loans are secured against the properties and repayments are made over time.

Standby Credit to Support Health System Liquidity (M36) (A21)

Scope of Appropriation

This appropriation is limited to the provision of a revolving standby credit facility to support Te Whatu Ora-Health New Zealand with working capital fluctuations, assist with treasury liquidity management, and maintain health system liquidity.

Capital Expenditure

	202	2024/25	
	Final Budgeted \$000		Budget \$000
Total Appropriation	200,000	200,000	200,000

What is Intended to be Achieved with this Appropriation

This appropriation is intended to improve Health New Zealand | Te Whatu Ora's ability to manage short-term working capital fluctuations and other liquidity management needs for its own operations and for those of other health sector agencies it provides treasury services to.

How Performance will be Assessed and End of Year Reporting Requirements

	202	2024/25	
Assessment of Performance	Final Budgeted Standard		Budget Standard
Percentage of drawdowns repaid in 10 business days or less	100%	Not Applicable	100%

This measure reflects the maximum drawdown period of this facility agreement.

The estimated actual of this measure is not applicable as the facility was not accessed during the year.

End of Year Performance Reporting

End of year performance information will be reported in the Annual Report of Health New Zealand | Te Whatu Ora.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget	2025/26 Estimated \$000	2026/27 Estimated \$000	
Previous Governments						
Health New Zealand Te Whatu Ora Standby Credit Facility	2022/23	200,000	200,000	200,000	-	-

Conditions on Use of Appropriation

Reference	Conditions
Final approval of Health New Zealand Standby Credit Facility [HNZ00009562]	An appropriation will be required in each year of the term of the facility, and the maximum fiscal implication on net debt at any point in time would only be \$200 million. Any drawn downs need to be repaid within 10 working days.

Part 4 - Details of Multi-Category Expenses and Capital Expenditure

4 - Multi-Category Expenses and Capital Expenditure

Stewardship of the New Zealand health system (M36) (A21)

Overarching Purpose Statement

The single overarching purpose of this appropriation is to enable the Ministry of Health to discharge its role as the chief steward of New Zealand's health system and principal advisor to the Minister of Health.

Scope of Appropriation

Departmental Output Expenses

Equity, Evidence and Outcomes

This category is limited to health science research, leadership, analysis and publishing quality evidence, data and insights.

Policy Advice and Related Services

This category is limited to the provision of policy advice (including second opinion advice and contributions to policy advice led by other agencies) and other support to Ministers in discharging their policy decision-making and other portfolio responsibilities relating to health.

Public health and population health leadership

This category is limited to providing leadership on policy, strategy, regulatory, intelligence, surveillance and monitoring related to public and population health.

Regulatory and Enforcement Services

This category is limited to implementing, enforcing and administering health-related legislation and regulations, and provision of regulatory advice to the sector and to Ministers, and support services for committees appointed by the Minister under statute.

Sector Performance and Monitoring

This category is limited to advising and providing assurance on health sector planning and system performance, including the Government Policy Statement and the New Zealand Health Plan; and monitoring and supporting the governance of health sector Crown entities.

Expenses, Revenue and Capital Expenditure

	2023	2023/24		
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000	
Total Appropriation	286,046	279,346	228,563	
Departmental Output Expenses				
Equity, Evidence and Outcomes	22,394	22,394	16,620	
Policy Advice and Related Services	44,169	44,169	39,791	
Public health and population health leadership	139,864	133,164	103,743	
Regulatory and Enforcement Services	61,573	61,573	53,274	
Sector Performance and Monitoring	18,046	18,046	15,135	

	2023/24	1	2024/25
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Funding for Departmental Output Expenses			
Revenue from the Crown	254,065	254,065	206,261
Equity, Evidence and Outcomes	21,052	21,052	16,309
Policy Advice and Related Services	43,081	43,081	38,898
Public health and population health leadership	129,643	129,643	101,672
Regulatory and Enforcement Services	42,697	42,697	34,637
Sector Performance and Monitoring	17,592	17,592	14,745
Revenue from Others	31,981	31,981	22,302
Equity, Evidence and Outcomes	1,342	1,342	311
Policy Advice and Related Services	1,088	1,088	893
Public health and population health leadership	10,221	10,221	2,071
Regulatory and Enforcement Services	18,876	18,876	18,637
Sector Performance and Monitoring	454	454	390

What is Intended to be Achieved with this Appropriation

This appropriation is intended to enable Ministry of Health | Manatū Hauora to discharge its role as the chief steward of New Zealand's health system and principal advisor to the Minister of Health.

How Performance will be Assessed for this Appropriation

	202	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Ministerial satisfaction with how the Ministry has discharged its role as chief steward of New Zealand's health system and principal advisor to the Minister of Health	Equal to or greater than 4 out of 5	4	Discontinued measure
Ministerial satisfaction with the quality of system performance advice	Replacement measure	Replacement measure	Equal to or greater than 4 out of 5
Ministerial Advisory Committee (MAC) assessment of the Ministry of Health's progress in establishing its role in the reformed system	Equal to or greater than 4 out of 5	4	Discontinued measure
Ministerial satisfaction with how the Ministry supports them to set and maintain strategic direction for the health system	Replacement measure	Replacement measure	Equal to or greater than 4 out of 5

The Chief steward and Ministerial Advisory Committee performance measures have been discontinued and replaced with more informative performance measures to better reflect the Ministry of Health | Manatū Hauora's system stewardship role.

What is Intended to be Achieved with each Category and How Performance will be Assessed

	2023/24		2024/25
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Departmental Output Expenses			
Equity, Evidence and Outcomes			
Ensuring the representativeness of the sample for the New Zealand Health Survey aligns with Statistics New Zealand population data (see Note 1)	New measure	New measure	Achieved
Number of times the Research and Evaluation Fund runs each year	New measure	New measure	2
Applicants will be informed of the outcome of their application within 8 weeks of the completion of each round	New measure	New measure	100%
The number of cross-agency engagements convened with clinical, quality and safety leaders, that inform policy, strategy and legislation	New measure	New measure	At least 6 per year
Average score on the extent to which policy advice is informed by relevant research and evidence, attained from a sample of the Ministry's written policy advice as assessed using the agreed DPMC Framework	New measure	New measure	Greater than 3.2 out of 5
Number of horizon scanning projects completed annually	New measure	New measure	2
This category is intended to the provision of health science research, equity, leadership, analysis, publishing quality evidence, data and insights.			
Establish with Te Aka Whai Ora - Māori Health Authority and Te Whatu Ora - Health New Zealand cross-agency leadership, governance and a shared work programme for health research system strategic initiatives by December 2023	Achieved	Not achieved	Discontinued measure
Complete scoping and commence baseline research on the Smokefree Aotearoa 2025 action plan by January 2024	Achieved	Not achieved	Discontinued measure
Health and Independence Report is published annually	Achieved	Achieved	Achieved
Health Survey release is published no later than 1 December	Achieved	Not achieved	Achieved
Number of page views of the Health Survey web pages	Year on year increase	Achieved	Discontinued measure
Health Survey release is free from significant errors	Achieved	Achieved	Achieved
Policy Advice and Related Services			
Minister of Mental Health Ministerial satisfaction on the satisfaction of Mental Health policy advice	New measure	New measure	Equal to or greater than 4 out of 5
This category is limited to the provision of policy advice (including second opinion advice and contributions to policy advice led by other agencies) and other support to Ministers in discharging their policy decision-making and other portfolio responsibilities relating to health.			
Percentage of Ministerial letter responses provided to the Minister within agreed timeframes (see Note 3)	95%	99%	95%
Percentage of Written Parliamentary Question responses provided to the Minister within agreed timeframes (see Note 3)	95%	99%	95%
Percentage of Ministerial Official Information Act request responses provided to the Minister within agreed timeframes (see Note 3)	95%	99%	95%

	2023	3/24	2024/25
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Percentage of Ministerial Letter responses provided to the Minister that required no [substantive] amendments (see Note 3)	95%	100%	95%
Percentage of Written Parliamentary Question responses provided to the Minister that required no [substantive] amendments (see Note 3)	95%	100%	95%
Percentage of Ministerial Official Information Act request responses provided to the Minister that required no [substantive] amendments (see Note 3)	95%	100%	95%
Ministerial satisfaction with the policy advice service	Equal to or greater than 4 out of 5	4	Equal to or greater than 4 out of 5
Average score attained from a sample of the Ministry's written policy advice as assessed using the agreed Department Prime Minster Cabinet (DPMC) Framework	Greater than 3.2 out of 5	3.48	Greater than 3.2 out of 5
Quality of policy advice papers - 85% score 3 or higher and 25% score 4 or higher	Achieved	Achieved	Achieved
Public health and population health leadership			
This category is limited to providing leadership on policy, strategy, regulatory, intelligence, surveillance and monitoring related to public and population health.			
Delivery of a report that provides a range of options on how to optimally implement and arrange existing laboratory capabilities and capacities of the functions needed to deliver a lead public health laboratory service by 30 June 2025	New measure	New measure	Achieved
Complete an investigation and report on the value of establishing and maintaining a directory of surveillance activities and information repositories within New Zealand including where this is best located by 30 June 2025	New measure	New measure	Achieved
Obtain full legislative compliance to the Civil Defence and Emergency Management Plan Order (2015) for the Ministry of Health by 30 June 2025	New measure	New measure	Achieved
Develop a Public Health Monitoring and Assurance Framework for Crown Entities and public health programmes by September 2024	New measure	New measure	Achieved
Ministerial satisfaction with how the Ministry provided leadership on policy, strategy, regulatory, intelligence, surveillance and monitoring of public and population health	Equal to or greater than 4 out of 5	4	Discontinued measure
Ministerial satisfaction with how the Ministry provided leadership on policy, strategy, the strengthening of regulatory practice, surveillance and monitoring of public and population health	Replacement measure	Replacement measure	Equal to or greater than 4 out of 5
Establish a Pacific Health Chart Book work programme of health outcomes and system performance for Pacific peoples by 30 June 2024	Achieved	Achieved	Discontinued measure
Annual work programme is developed and agreed with the public health advisory committee chair, Public Health Agency in Manatū Hauora - Ministry of Health and the Minister. All reports are delivered on time	Achieved	Achieved	Discontinued measure
Annual work programme is developed and agreed with the public health advisory committee chair, Public Health Agency in the Ministry of Health Manatū Hauora and the Minister. All reports are delivered on time	Replacement measure	Replacement measure	Achieved

	2023	2024/25	
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard
Set the foundations for an effective Intelligence, Surveillance and Knowledge system by: establishing the Public Health Knowledge and Surveillance System (PHKSS) programme alongside Te Aka Whai Ora - Māori Health Authority; and developing frameworks and systems to ensure that Aotearoa's public health system is well supported with evidence, data, and insights	Achieved	Achieved	Discontinued measure
Set up the Public Health Knowledge and Surveillance System to consistently collect and disaggregate Māori data that demonstrates how public health programmes and activities impact on public health outcomes for Māori by 30 June 2024	Achieved	Achieved	Discontinued measure
Regulatory and Enforcement Services			
This category is limited to implementing, enforcing and administering health-related legislation and regulations, and provision of regulatory advice to the sector and to Ministers, and support services for committees appointed by the Minister under statute.			
Number of regulatory stewardship projects completed annually	New measure	New measure	2
Developing a monitoring and reporting framework for the Vaping Regulatory Authority (VRA) by 30 June 2025	New measure	New measure	Achieved
The percentage of high priority incident notifications relating to medicines and medical devices that undergo an initial evaluation within 5 working days	90%	97%	90%
The percentage of all certificates issued to providers under the Health and Disability Services (Safety) Act 2001 within target timeframes	90%	91%	90%
Percentage of licences and authorities issued under the Medicines Act 1981 and Misuse of Drugs Act 1975 within target timeframes	90%	78%	90%
The percentage of all licences and consents issued to radiation users under the Radiation Safety Act 2016 within 10 working days of accepting the application	90%	96%	90%
The percentage of all New Medicines Applications (for ministerial consent to market) that receive an initial assessment within 200 days	80%	87%	80%
The percentage of all Changed Medicines Notifications (for ministerial consent to market) responded to within 45 days	100%	99%	100%
Mean rating for statutory committee satisfaction with secretariat services provided by the Ministry	4 out of 5 or greater	4	4 out of 5 or greater
The percentage of District Mental Health Inspectors' monthly reports, on their duties undertaken, sent to the Director of Mental Health, within one month after completion (see Note 3)	90%	95%	90%
The start of the Mental Health Tribunal reviews are held within 28 days of receipt of the applications (see Note 4)	80%	92%	80%

	2023	2023/24		
Assessment of Performance	Final Budgeted Standard	Estimated Actual	Budget Standard	
Sector Performance and Monitoring				
This category is intended to advise and provide assurance on health sector planning and system performance, including the Government Policy Statement and the New Zealand Health Plan; and monitoring and supporting the governance of health sector Crown entities.				
The percentage of quarterly monitoring reports about Crown entities (includes Te Aka Whai Ora - Māori Health Authority and Te Whatu Ora - Health New Zealand) provided to the Minister within agreed timeframes	100%	100%	Discontinued	
The percentage of quarterly monitoring reports about Crown entities provided to the Minister within agreed timeframes	Replacement measure	Replacement measure	100%	
The percentage of appointments to other health Crown entity boards (includes Te Aka Whai Ora - Māori Health Authority and Te Whatu Ora - Health New Zealand) where advice is presented to the Minister prior to the current appointee's term expiring	95%	100%	Discontinued	
The percentage of appointments to health Crown entity boards where advice is presented to the Minister at least one month prior to the current appointee's term expiring (see Note 5)	Replacement measure	Replacement measure	95%	
The percentage of quarterly monitoring reports about mental health and addiction provided to the Minister for Mental Health within agreed timeframes	New measure	New measure	100%	
Ministerial satisfaction with the advice provided on governance matters for Crown entities	New measure	New measure	Equal to or greater than 4 out of 5	

Note 1 - The New Zealand Health Survey (NZHS) is carefully designed to select a representative sample of the NZ population each year. However not every household and individual selected for the survey is able to be contacted and agrees to participate. A representativeness indicator measures to what extent the composition of the achieved sample of NZHS respondents is similar to the demographic make-up of the NZ population - known from official statistics produced by Statistics NZ - taking into account age, gender, ethnicity and geographic location.

Note 2 - Limited to Ministry of Health | Manatū Hauora developed responses only.

Note 3 - District inspectors reports are required under the Mental Health (Compulsory Assessment and Treatment) Act Section 98A.

Note 4 - Appeals against Review Tribunal decisions in certain cases are required under the Mental Health (Compulsory Assessment and Treatment) Act Section 83.

Note 5 - Unexpected resignation or departure prior to the expiration of the term is not included.

The discontinued performance measures under the Equity, Evidence and Outcomes category have been removed due to a change in the government's policies and priorities. New measures have been included to better reflect the Ministry of Health | Manatū Hauora's stewardship function and/or with more informative performance measures.

The discontinued performance measures under the public health and population health leadership category have been replaced with more informative monitoring measures to better reflect the Ministry of Health | Manatū Hauora's stewardship function.

The additional performance measure under the Regulatory and enforcement services category has been included to reflect the Ministry of Health | Manatū Hauora's regulatory stewardship role.

The replacement measures under the Sector performance and monitoring category remove the Crown Entity names and replace with health Crown entities to cover all entities.

End of Year Performance Reporting

The Ministry of Health | Manatū Hauora will report performance information for this appropriation in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Current Government						
Reduction in Back-office Functions - Ministry of Health						
Equity, Evidence and Outcomes	2024/25	-	(1,934)	(1,970)	(1,934)	(2,015)
Policy Advice and Related Services	2024/25	-	(2,197)	(2,194)	(2,197)	(2,265)
Public health and population health leadership	2024/25	-	(4,492)	(4,431)	(4,492)	(4,333)
Regulatory and Enforcement Services	2024/25	-	(3,069)	(3,097)	(3,069)	(3,049)
Sector Performance and Monitoring	2024/25	-	(908)	(908)	(908)	(938)
COVID-19 and Pandemic Preparedness: Maintaining Essential Health Services and Critical Surveillance Infrastructure						
Public health and population health leadership	2024/25	-	9,560	9,560	9,560	9,560
Waikato New Medical School - Independent Cost Benefit Analysis and Business Case Development						
Policy Advice and Related Services	2024/25	-	2,575	-	-	-
Public health and population health leadership	2023/24	(2,575)	-	-	-	-
Disestablishment of Māori Health Authority - Funding Transfer to the Ministry of Health						
Policy Advice and Related Services	2023/24	470	1,881	1,881	1,881	1,881
Sector Performance and Monitoring	2023/24	246	983	983	983	983
Previous Governments						
Shared Approach to Back-office Transformation						
Equity, Evidence and Outcomes	2024/25	-	(16)	(16)	(16)	(16)
Policy Advice and Related Services	2024/25	-	(30)	(30)	(30)	(30)
Public health and population health leadership	2024/25	-	(41)	(41)	(41)	(41)
Regulatory and Enforcement Services	2024/25	-	(29)	(29)	(29)	(29)
Sector Performance and Monitoring	2024/25	-	(14)	(14)	(14)	(14)
Final Drawdown of COVID-19 Response Tagged Contingency for 2023/24						
Public health and population health leadership	2023/24	24,000	-	-	-	-

Policy Initiative	Year of First Impact	2023/24 Final Budgeted \$000	2024/25 Budget \$000	2025/26 Estimated \$000	2026/27 Estimated \$000	2027/28 Estimated \$000
Call on Budget 2022 Contingency to Strengthen the Ministry's Stewardship Role						
Equity, Evidence and Outcomes	2023/24	1,453	1,732	1,655	1,655	1,655
Policy Advice and Related Services	2023/24	10,981	5,039	3,528	3,528	3,528
Public health and population health leadership	2023/24	4,885	5,825	5,563	5,563	5,563
Regulatory and Enforcement Services	2023/24	1,299	1,548	1,479	1,479	1,479
Sector Performance and Monitoring	2023/24	4,876	5,814	5,553	5,553	5,553
Drawdown of Contingency for Meeting the Cost of Replacing the IT Platform to Support the Assisted Dying Service						
Regulatory and Enforcement Services	2023/24	2,667	-	-	-	
Increasing Medical School Enrolments for the 2024 Intake						
Sector Performance and Monitoring	2023/24	(704)	(1,960)	(3,269)	(5,153)	(14,905)
Rapid Saving - Return of DHB Sustainability Funding						
Sector Performance and Monitoring	2023/24	(18,077)	(19,221)	(17,912)	(16,028)	(6,276)
COVID-19 Funding Return						
Public health and population health leadership	2023/24	(1,500)	-	-	-	-
End of Life Choice Act - Additional Drawdown of Tagged Contingency Related to Assisted Dying Service						
Regulatory and Enforcement Services	2024/25	-	2,555	2,555	2,555	2,555
New Zealand's Future Quarantine and Isolation Capability						
Public health and population health leadership	2023/24	356	356	-	-	
Ministerial Advisory Committee for Health Reform Implementation - Funding Transfer for 2023/24 from Department of the Prime Minister and Cabinet						
Regulatory and Enforcement Services	2023/24	900	-	-	-	
Supporting the Establishment of the National Public Health Service and Public Health Agency - Drawdown of Tagged Contingency						
Public health and population health leadership	2022/23	6,000	6,000	6,000	6,000	6,000
Smokefree Aotearoa 2025 Action Plan - Remaining Implementation Funding - Drawdown of Tagged contingency						
Public health and population health leadership	2022/23	9,211	5,518	4,765	4,765	4,765
Ministry ICT and Data & Digital Contracts and Funding Transfer						
Equity, Evidence and Outcomes	2022/23	(2,072)	(2,072)	(2,072)	(2,072)	(2,072)
Policy Advice and Related Services	2022/23	(5,985)	(5,985)	(5,985)	(5,985)	(5,985)
Public health and population health leadership	2022/23	(5,686)	(5,686)	(5,686)	(5,686)	(5,686)
Regulatory and Enforcement Services	2022/23	(7,343)	(7,343)	(7,343)	(7,343)	(7,343)
Sector Performance and Monitoring	2022/23	(1,934)	(1,934)	(1,934)	(1,934)	(1,934)
Smokefree Aotearoa 2025 Action Plan - Initial Implementation Support Funding						
Public health and population health leadership	2022/23	500	500	500	500	500

Reasons for Change in Appropriation

The decrease in this appropriation for 2024/25 is mainly due to:

- \$24 million in 2023/24 only to deliver a limited, prioritised set of COVID-19 services as part of a transition towards a longer-term approach, targeting communities at greatest risk of serious illness from COVID-19
- \$12.600 million reduction in funding in 2024/25 for the Budget 2024 savings initiative to deliver 6.5% operating savings from the departmental baseline of the Ministry of Health | Manatū Hauora through a number of targeted programmes, including reducing back-office staff and other non-personnel related costs and spend on contractors and consultants
- \$7.740 million reduction in funding from the net impact of baseline transfers from the previous appropriation structure to reflect the new structure of the Vote Health appropriations from 1 July 2022 to support the health reforms
- \$7.042 million for the net impact of fiscally neutral transfers in 2023/24 only from the Ministry of Foreign Affairs and Trade to reflect the increase in forecast costs of the Polynesian Health Corridors programme with associated revenue
- \$6 million carried forward from 2022/23 to 2023/24 only for the implementation of the Fluoridation Capital Works Subsidies programme, reflecting rephasing of the programme
- \$5 million for a fiscally neutral transfer in 2023/24 only from the Delivering Primary, Community, Public and Population Health Services appropriation to support the coordination and implementation of the support workers' pay equity process
- \$4.500 million carried forward from 2022/23 to 2023/24 only for the implementation of community water fluoridation, reflecting rephasing of the programme
- \$3.693 million reduction in funding for the implementation and ongoing operation of the tobacco products regulator, the Smokefree Aotearoa 2025 Action Plan, and compliance and enforcement activities under the Smokefree Environments and Regulated Products Act 1990
- \$3.536 million reduction in funding from the Budget 2022 contingency to strengthen the Ministry's Stewardship role to reflect the reduction of forecast costs in 2024/25 to establish and sustainably operate the Ministry of Health | Manatū Hauora and its functions
- \$2.667 million in 2023/24 only for the one-off cost of delivering the IT platform required to underpin the Assisted Dying Service, and
- \$2.555 million for the net impact of funding carried forward from 2021/22 to 2022/23 and 2023/24 only to meet the ongoing departmental costs for the operational elements to support the Assisted Dying Service to take place, reflecting rephasing of the programme.

This decrease was partially offset by:

 \$9.560 million of additional funding for the Budget 2024 initiative COVID-19 and Pandemic Preparedness: Maintaining Essential Health Services and Critical Surveillance Infrastructure to provide funding for operational delivery costs to support timely access to COVID-19 vaccines and therapeutics and retain critical public health surveillance infrastructure, supporting system preparedness to identify and respond to future disease outbreaks

- \$5.150 million for the net impact of \$2.575 million of funding carried forward from 2023/24 to 2024/25 to provide funding for the independent cost benefit analysis and business case development of the proposal for a new medical school at the University of Waikato
- \$4 million for the net impact of \$2 million of funding carried forward from 2023/24 to 2024/25 for the Ministry of Health | Manatū Hauora to secure the expert resources to ensure the final stages of the Holidays Act Remediation programme occurs and that appropriate assurance processes are in place
- \$3.071 million for the net impact of funding carried forward from 2023/24 to 2024/25 for the development of a Group A Streptococcus vaccine, reflecting rephasing of the programme
- \$2.555 million of additional funding to implement the Assisted Dying Service under the End of Life Choice Act 2019, and
- \$2.148 million for the net impact of a fiscally neutral transfer from the Delivering hauora Māori services appropriation to reflect the transfer of some functions to the Ministry of Health | Manatū Hauora from April 2024 following the approval to disestablish Te Aka Whai Ora | Māori Health Authority.

Vote Health was restructured from 1 July 2022 to reflect the impact of the Health and Disability System reforms. Details of this restructuring can be found in the Estimates of Appropriations 2022/23. The Reasons for Change in Appropriations and Current and Past Policy Initiatives associated with the earlier appropriations can be found in prior years' Estimates of Appropriations (2021/22 and prior years) for Vote Health.

Memorandum Account

	2023/2	2023/24		
	Budgeted \$000	Estimated Actual \$000	Budget \$000	
Medicinal Cannabis				
Opening Balance at 1 July	(1,208)	(1,208)	(1,606)	
Revenue	1,061	431	1,061	
Expenses	1,061	829	1,061	
Closing Balance at 30 June	(1,208)	(1,606)	(1,606)	
	2023/2	4	2024/25	
	Budgeted \$000	Estimated Actual \$000	Budget \$000	
MedSafe				
Opening Balance at 1 July	(3,473)	(3,473)	(2,206)	
Revenue	10,891	11,957	10,891	
Expenses	10,891	10,690	10,891	
Closing Balance at 30 June	(3,473)	(2,206)	(2,206)	

	202	2023/24		
	Budgeted \$000	Estimated Actual \$000	Budget \$000	
Office of Radiation Safety				
Opening Balance at 1 July	(2,954)	(2,954)	(3,201)	
Revenue	2,500	2,209	2,500	
Expenses	2,500	2,456	2,500	
Closing Balance at 30 June	(2,954)	(3,201)	(3,201)	
	202	3/24	2024/25	
	Budgeted \$000	Estimated Actual \$000	Budget \$000	
Providing the functions as the Vaping Regulator				
Opening Balance at 1 July	29	29	86	
Revenue	1,250	1,358	1,250	
Expenses	1,250	1,301	1,250	
Closing Balance at 30 June	29	86	86	