

## Minutes and actions

<b>Group</b>	Pharmac & Health Medical Devices NZ Supplier Reference Group
<b>Date</b>	Tuesday 19 May 2026
<b>Attendees</b>	<p><b>Pharmac</b> Catherine Epps, Director Medical Devices (Co-Chair) Andrew Davies, Medical Devices Transition Manager</p> <p>Megan Nagel, Engagement Lead Cat Boyes, Executive Assistant (notes)</p> <p><b>Health NZ</b> Philip Jones, Head of Sourcing Execution</p> <p><b>Suppliers</b> Wing Lam Wong – General Manager, Roche Diagnostics NZ Ltd Tania Hawkes – Country Lead NZ, BD Erin Currie – Country Manager, Philips Chris Iles – Director of Finance, Obex Med-Tech Group Andrew Short – Vice President Commercial, Permobil Dorcas Hemi – Product Manager NZ, FPH Care Rachelle Hodgson -Traksol Ltd</p>
<b>Apologies</b>	Andrea Gregory - Commercial Director, Health NZ (Co-Chair) Bruce Moller – Chief Executive Officer, Howard Wright

### 1. **Welcome and purpose**

- Members were welcomed to the second Supplier Reference Group (SRG) meeting.
- The purpose of this meeting is to:
  - reconfirm the role of the SRG and approve the Terms of Reference
  - provide an update on programme progress and key areas of joint Health NZ and Pharmac work
  - hear perspectives from suppliers on contract transition, supplier experience and priority issues
  - receive feedback on programme communications, HealthTech Week supplier conference and topics for future meetings.

### 2. **Scene setting and programme context**

#### *Terms of Reference*

- The updated Terms of Reference reflecting prior feedback and clearer purpose of the SRG was reviewed, with agreement to sign off.
- The group agreed the forum should remain adaptable (eg. frequency of meetings can be adjusted by agreement) to ensure it delivers value for members and aligns with intended strategic engagement.

- It was noted there is an upcoming member departure; the Co-Chair undertook to identify a suitable replacement to maintain diverse supplier representation. SRG members are also welcome to provide suggestions.

#### *Recap on the Medical Devices review and update on progress*

- The transition programme between Pharmac and Health NZ continues to be guided by the Joint Ministerial Letter of Expectations, focusing on clearer roles, reduced duplication, greater transparency, and a shared responsibility model.
- It was noted that Pharmac is leading Health Technology Assessments (HTA) and providing HTA support, while Health NZ retains overall budget responsibility, with both organisations leveraging their respective expertise.
- Key workstreams in progress include implementation of HTA processes, IT/data integration improvements, joint communications approach, and coordinated annual planning, prioritisation, and quarterly pipeline reviews.
- Supply chain disruptions due to the Middle East conflict are being actively managed through coordinated joint action.

### **3. Contract transition update**

#### *Overview of category leadership*

- Pharmac and Health NZ share responsibility for medical device procurement under a coordinated approach. Focus now is on transitioning contracts to align with the new category leadership model.
- Contracts will align with designated lead agencies, with each category having a clear owner to improve accountability and simplify supplier engagement.
- Devices are grouped into categories, with lead responsibility assigned based on organisational expertise (clinical vs infrastructure/service delivery).
- Each category has a defined lead agency, reducing duplication and enabling simpler, more consistent supplier engagement.
- Contracts will either fully transfer, partially transfer, or remain unchanged depending on which categories they cover, with suppliers notified directly and transfer agreements sent in phased stages from March to June to minimise disruption.

#### *Contract transfer programme*

- The contract transfer programme is underway with approximately 90 agreements identified for transfer from Pharmac to Health NZ, primarily via novation, with suppliers being notified and engaged.
- Acknowledged supplier concerns regarding ongoing negotiations and expiring contracts, noting that Pharmac and Health NZ are committed to a coordinated handover.
- Contracts are being transferred in tranches, starting with simpler single-category agreements and progressing to larger, more complex transfers. Activity has accelerated, with 41 contracts issued and 19 returned signed, and later tranches already in drafting and release stages.
- All contracts are targeted to be issued to suppliers by the end of June, with completion (including returns) expected by July.
- Key concerns from suppliers include clarity of timelines, impact of an earlier procurement pause, and delays to business-as-usual activities during transition.
- Once contracts have been transferred, Health NZ business-as-usual processes will apply immediately, supported by defined entry points (e.g., triage mailbox - [procurement-ssrm@tewhatuora.govt.nz](mailto:procurement-ssrm@tewhatuora.govt.nz)).

- Suppliers noted there is currently limited visibility of what these business-as-usual processes will involve in practice, and requested greater clarity on processes, timeframes, and information requirements.

#### 4. **Supplier experience and priority issues**

- Through the MTANZ survey and other discussions Pharmac and Health NZ are hearing supplier feedback that covers; procurement delays, pricing pressures, limited transparency, barriers to innovation, and ongoing role clarity issues. Suppliers were invited to provide feedback on current system challenges to shape future changes to how the system operates.
- Suppliers confirmed ongoing procurement challenges including delays, limited transparency, barriers to innovation, and lack of clarity in roles and responsibilities between and within agencies.
- Noted a need for clearer points of contact, with a strong emphasis on defining clear, accessible contact pathways (e.g. named roles, portal/email) and addressing gaps in category ownership and contract management.
- Suppliers asked for greater clarity on timeframes for price changes, contract processes for product changes (additions and removals), and future (HTA activities to support planning and market decisions).
- Feedback from suppliers highlighted continued uncertainty around HTA processes, roles, and engagement approaches, with a strong call for greater alignment and consistency across Pharmac and Health NZ.
- Suppliers raised concerns about duplication across systems, including the Pharmac Schedule, Health System Catalogue (HSC) and other data requirements. There was strong interest in understanding future system alignment, including whether a single source of truth will be established and how supplier data will be managed and maintained.

#### 5. **Communications and engagement**

##### *Joint email updates and planning for HealthTech Week*

- Noted that email updates to suppliers remain the primary communication channel, with ongoing milestone updates and a further joint email update planned for June.
- Suppliers emphasised the need for more consistent and detailed communication, including clearer timelines and visibility of next steps during the transition period.
- Noted the Pharmac and Health NZ plan for the HealthTech Week presentations is to update on the LoE and progress to date, what's under development including in HTA, and how we are engaging with suppliers as we move forward.
- Suppliers asked for the opportunity to review minutes for the SRG meetings prior to circulation to the wider industry to ensure accuracy and agreement. It was agreed that minutes should be circulated to the group for feedback (allow approximately 1–2 days for feedback), before these are published externally.
- Suppliers highlighted confusion due to personnel changes within Health NZ and requested clear guidance on who to contact for specific queries. A triaged or automated contact approach was discussed and broadly supported as a more efficient, user-friendly alternative to individual named contacts.
- Suppliers highlighted the need for clear communication of Health NZ's category management structure, roles, and processes to support understanding during transition.
- It was noted that progress reporting to Ministers has occurred (six-month report submitted in March), with oversight by the Ministry of Health and no feedback has been received to date.

*What will be important for suppliers to hear at HealthTech Week this year about procurement processes?*

- Suggestions:
  - Programme updates
  - Contract transfer progress
  - Reflection on what was presented last year and the progress/roadblocks since then
  - Insights on challenges and lessons learned
  - Clear explanation of category management approach, roles and processes, procurement planning, and how duplication between agencies will be reduced
  - How the operating model will evolve beyond the transition period.
  - Update on the future of the Health System Catalogue and broader system/data alignment
  - What are the next steps?

*Topic ideas for discussion at future meetings*

- Discussion on how to respond to unforeseen supply chain issues (eg. the Middle East crisis), and how we remain well connected and responsive.
- Procurement planning approach.
- How to engage clinical experts, including alignment and consistency between agencies and beyond the HTA process.
- SRG members expressed interest in having a face-to-face meeting in Auckland for the 17 November meeting alongside the Health Informatics NZ Conference.

**Next meeting date: 21 July 2026 at 2pm**

<b>Actions</b>	<b>Who</b>	<b>When</b>
Identify a new member to join the SRG	Catherine Epps and Andrea Gregory	
Meeting schedule content to be updated in response to the discussion.	Megan Nagel	
Provide an update on Supplier engagement in the new HTEP process	Philip Jones	Complete – this will be introduced at HealthTech Week.