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# Medsafe Fees Review 2018

## Your feedback

Government agencies welcome your thoughts and feedback on this consultation which outlines the reasons for the fees review, provides a summary of financial information and sets out proposals for changes to the fees.

## How to provide feedback

You can provide feedback by:

- making a written submission using the form below (note: you can download this form at [www.medsafe.govt.nz/consultations/FeesReview2018.asp](http://www.medsafe.govt.nz/consultations/FeesReview2018.asp))

You can email written submissions with the subject line 'Medsafe Fees Review' to [medsafeapplications@moh.govt.nz](mailto:medsafeapplications@moh.govt.nz) or mail a hard copy to:

Medsafe Fees Review  
Medsafe  
PO Box 5013  
Wellington 6140.

## Publishing submissions

We may publish all submissions, or a summary of submissions on the Ministry of Health's website, unless you have asked us not to. If you are submitting as an individual, we will automatically remove your personal details and any identifiable information. You can also choose to have your personal details withheld if your submission is requested under the Official Information Act 1982.

## Closing date for submissions

The closing date for submissions and feedback on the fees review is **5pm Friday 27 April 2018**.

## Information about the person/organisation providing feedback

You are encouraged to fill in this section. The information you provide will help government agencies analyse the feedback. However, your submission will be accepted if you do not fill in this section.

This submission was completed by: *(name)* \_\_\_\_\_

Address: *(street/box number)* \_\_\_\_\_

*(town/city)* \_\_\_\_\_

Email: \_\_\_\_\_

Organisation *(if applicable)*: \_\_\_\_\_

Position *(if applicable)*: \_\_\_\_\_

This submission *(tick one box only)*:

- comes from an individual or individuals (not on behalf of an organisation nor in their professional capacity)
- is made on behalf of a group or organisation(s).

Please indicate which sector(s) your submission represents *(you may tick more than one box)*:

- |  |  |
|--|--|
| <input type="checkbox"/> Māori                         | <input type="checkbox"/> Regulatory authority                |
| <input type="checkbox"/> Pacific                       | <input type="checkbox"/> Member of the public (eg, consumer) |
| <input type="checkbox"/> Asian                         | <input type="checkbox"/> District health board               |
| <input type="checkbox"/> Education/training provider   | <input type="checkbox"/> Local government                    |
| <input type="checkbox"/> Service provider              | <input type="checkbox"/> Government                          |
| <input type="checkbox"/> Non-governmental organisation | <input type="checkbox"/> Union                               |
| <input type="checkbox"/> Primary health organisation   | <input type="checkbox"/> Professional association            |
| <input type="checkbox"/> Academic/researcher           | <input type="checkbox"/> Other <i>(please specify)</i> :     |

## Privacy

We may publish all submissions, or a summary of submissions on the Ministry's website. If you are submitting as an individual, we will automatically remove your personal details and any identifiable information.

If you do not want your submission published on the Ministry's website, please tick this box:

- Do not publish this submission.

Your submission will be subject to requests made under the Official Information Act. If you want your personal details removed from your submission, please tick this box:

- Remove my personal details from responses to Official Information Act requests.

If your submission contains commercially sensitive information, please tick this box:

- This submission contains commercially sensitive information.

# Consultation questions

1. Medsafe is seeking comments on the 2018 Fees Review.

Do you support the proposed increase to the Medsafe schedule of fees? Please provide background information supporting your opinion and indicate any possible implications of the proposed fee increase.

Please include any additional pages if necessary.

Thank you for taking the time to provide feedback.