

Expression of Interest (EOI)

ACT Primary Care Pilot

Contents

Introduction

Part A - Reference Schedule

Part B - Statement of Requirements

Part C - Conditions of the EOI Process

Introduction

Capital Health Network (CHN) is the Primary Health Network (PHN) for the ACT. PHNs have been established by the Australian Government with the key objectives of:

- Increasing the efficiency and effectiveness of health services for patients, particularly those at risk of poor health outcomes, and
- Improving coordination of care to ensure patients receive the right care in the right place at the right time.

CHN has received funding from ACT Health Directorate through the Australian Government to work in partnership with ACT Health and Canberra Health Services (CHS) to deliver the ACT Primary Care Pilot. The Pilot is a trial of a collaborative intervention involving primary care, community-based care, and the public health system to provide additional, early community-based support to patients at risk of presentation to the Emergency Department or admission to hospital to reduce their preventable risk of deterioration. The Pilot will run for up to 18 months.

Part A: Reference Schedule

The information contained in this Reference Schedule must be read in conjunction with **Part C** of this EOI.

By completing the EOI response form, practices are confirming they meet the eligibility criteria and are willing to participate in delivery of the ACT Primary Care Pilot.

Item 1	EOI Reference	EOI – PAC099
Item 2	Key contact during EOI process	Kate Aigner Email: tenders@chnact.org.au
Item 3	Timetable*	
	EOI issued	21/09/2023
	End of period for questions or requests for information	5:00pm Monday 1 April 2024 or earlier if the quota of practices is filled. Questions or requests for information must be submitted via email to tenders@chnact.org.au and include 'EOI PAC099' in the subject heading.
	Closing time and date	5:00pm Friday 5 April 2024 or earlier if the quota of practices is filled.
Item 4	Lodgement	Responses must be submitted through the online EOI Response Form . All questions must be answered, no other documentation will be accepted.
Item 5	Additional materials and information	The following information can be found on the CHN website : <ol style="list-style-type: none"> 1. General Practice information sheet 2. Patient Selection Guide 3. Frequently Asked Questions 4. Information Session Recording (<i>will be uploaded and available from 27/09/23</i>)

* Please note this timetable may be changed by CHN in accordance with the Conditions of the EOI process set out in Part C of this EOI.

Part B: Statement of Requirements

1. Overview

The ACT Primary Care Pilot is a federally funded trial of a collaborative intervention involving primary care, community-based care, and the public health system to provide additional, early community-based support to patients at risk of presentation to the Emergency Department (ED) or admission to hospital to reduce their preventable risk of deterioration.

View the [Information for General Practices and Frequently Asked Questions](#) documents.

ACT Health is partnering with CHN and CHS to deliver the project. CHN is coordinating the expression of interest process to engage general practices, and will facilitate payments to general practices.

2. Requirements

CHN is seeking an Expression of Interest from general practices who wish to participate in the ACT Primary Care Pilot Program until 30 June 2025. The following standards would also need to be maintained by any potential future supplier.

Professional Standards

A general practice must:

- Be a Royal Australian College of General Practitioners (RACGP) accredited general practice located in the ACT.
- Have a registered Australian Business Number (ABN).

Medical Practitioners must comply with the [RACGP Standards for General Practice 5th edition](#).

Activity Requirements

Practice onboarding

It is planned for 15 practices to participate in the pilot. Practices with higher numbers of patients with complex multimorbidity or high intensity users of an emergency department will be prioritised for selection. Practice location will also be taken into account to ensure a geographical spread across each major ACT region.

There will be a phased approach to practice onboarding; delivered in 3 x 3-monthly Tranches. Five practices will be onboarded in a staggered approach each Tranche. Tranche 1 will commence in October 2023, Tranche 2 in January 2024 and Tranche 3 in April 2024.

After onboarding, practices will continue participating for the duration of the 18-month pilot.

It is recommended that multiple GPs participate from each practice to spread the pilot model equitably throughout the practice.

Patient selection and intake

General practices will be required to:

- Identify suitable patients as per the [Patient selection guide](#).
- Work with the LaNS team to select eligible patients for the pilot (5-25 patients per Cycle, up to 50 per practice)
- Discuss the Pilot and provide consumer information to the identified patients
- Obtain verbal consent from patients to refer to LaNS
- Agree to proactively manage these patients using a case management approach including participation in case conferencing and liaison with the LaNS team as necessary.
- Access CHS specialist advice via telephone or virtual meeting to support management of their patient in the community.
- Provide appropriate access, care and referrals as necessary.
- Participate in specialist shared care programs as appropriate.
- Agree to provide free at point-of-care appointments for pilot patients in accordance with their care plan via their preferred funding mechanism and within the constraints of the Commonwealth *Health Insurance Act 1973*.

Patient eligibility criteria

Refer to the linked [Patient selection guide](#) document for patient eligibility criteria. Patients should be prioritised where access to health services outside the pilot is limited due to their financial or other socioeconomic circumstances.

Patients will be enrolled in 6 x 3-monthly Cycles. New enrolments will cease at 12 months (end of Cycle 4), with pilot services running until 18 months (Cycles 5 and 6). Only re-enrolments will be accepted in months 13-18 (Cycles 5 and 6).

Each general practice will have the opportunity to nominate approximately 50 patient enrolments in total, including re-enrolments. Participating practices will be supported to identify and select between 5 and 25 patients per Cycle dependent of the timing of their onboarding Cycle, and with the expectation that eligible patients identified to be frequent ED users be prioritised for selection. All practices will have their patient allocation and onboarding dispersed across the intake Cycles. Practices that commence participation in the later Tranches will have an accelerated intake of their patients.

The standard pilot participation length for a patient is three months and most patients will return to routine care at this point. If a patient requires ongoing pilot participation, they may be re-enrolled for another three-month cycle up to two times. Exceptions can be made for continued re-enrolment of patients requiring longer-term pilot participation until pilot completion.

Care Plans

A pilot care plan will be developed for each patient. The care plan will not take the form of a General Practitioner Management Plan (GPMP) or Team Care Arrangement (TCA) under the [MBS](#). Standard care plan duration will be 3 months with the option to renew based on patient need.

The number of free-at-point-of-care GP consultations provided under the pilot for each patient will be determined by the practice and specified in the patient's care plan and may be updated according to the patient's care needs. The per patient payment is based on 5 long appointments, however the GP may determine that 10 short appointments or a combination of long and short appointments are more appropriate.

Reporting

Practices will be supplied with a reporting template and required to submit this report to CHN at the end of each 3-month cycle.

Anticipated Funding

Practices will be funded to support costs for care co-ordination activities such as:

- GP time in accessing the medical specialist telephone/virtual advice service.
- Case coordination time including case conference where required.
- Time spent for engagement with other health practitioners.
- Practice administration.
- Free at point-of-care appointments with the GP (for practices choosing Option A).

There are two funding options: Option A or Option B and practices will need to choose their funding option at commencement of the pilot to determine how they want to cover costs associated with GP consultations. Once selected, this option cannot be changed.

All participating practices will receive a block funding amount (made up of an Administration block payment and an Engagement block payment) on initial engagement and an additional Engagement block payment at 6 months of participation. In addition, practices will also receive per patient payments which will be paid as patients are enrolled in the Pilot. The amount includes for any GP time spent attending a case conference for the pilot patient. Therefore, the GP should not claim their attendance at a pilot funded case conference through the MBS to ensure compliance with the *Health Insurance Act 1973*.

General practices will be required to provide to the participating GP, as per standard business practice, a percentage of all patient payments and of the 10 hours of GP time allowed for in the Administration payment.

Option A:

- Full remuneration through the pilot for the cost of each appointment.
- The GP will not bill the MBS for these appointments.
- An additional per patient payment will be made to practices that choose funding option A at the patient's enrolment, to cover the cost of five long appointments for the patient over the Cycle.
- Where a patient requires additional GP appointments over the Cycle the practice may claim this cost in arrears at the end of the month. Practices will only be remunerated for additional GP appointments where there is a shortfall in payments for GP appointments for all pilot patients at that practice for the Cycle.
- The pricing for pilot consultations have been set at the per minute rate for average standard consultation charges in the ACT (\$6.06 per minute). This is to ensure GPs are not financially disadvantaged in offering longer consultations for pilot patients.
- Where a patient requires less GP appointments over the Cycle or does not attend a scheduled GP appointment and the practice is able to reallocate the time to other funded activities, the practice must either:
 - allocate the corresponding funding towards additional appointment(s) for another pilot patient or patients at their practice, or
 - offer the corresponding number of appointments to the pilot patient after the expiry of their care plan.
 - Where a pilot patient does not attend a scheduled GP appointment and the practice is unable to fill this time with other funded services or bookings, the practice does not

need to reallocate the corresponding funding. The intent is to ensure practices are not out-of-pocket arising from a patient not attending the appointment. Practices must make reasonable efforts to ensure patients are able to confirm in advance if they are unable to attend an appointment and fill the available time with appointments for other patients or other funded activities.

Option B:

- GPs would agree to bulk-bill pilot patients for appointments.

There is no Section 19 Exemption for Option B however the payment model has been endorsed by the Department of Health and Aged Care.

Payment structure

Option A (fully funded)		Option B (bulk billed appointments)	
Initial Administration block payment on engagement to cover the cost of selecting patients and set up activities. Provides for up front practice manager (7.5 hours), practice nurse (7.5 hours) and GP (10 hours) time plus practice administration.	\$3,550	Initial Administration block payment on engagement to cover the cost of selecting patients and set up activities. Provides for up front practice manager (7.5 hours), practice nurse (7.5 hours) and GP (10 hours) time plus practice administration.	\$3,550
Engagement block payment 1 (on engagement).	\$2,000	Engagement block payment 1 (on engagement).	\$10,875
Engagement block payment 2 (at 6 months).	\$2,000	Engagement block payment 2 (at 6 months).	\$10,875
Per patient enrolment payment to cover care coordination activities and GP time in accessing the medical specialist telephone/virtual advice service, engagement with other health practitioners and practice administration.	\$510 per patient	Per patient enrolment payment to cover care coordination activities and GP time in accessing the medical specialist telephone/virtual advice service, engagement with other health practitioners and practice administration.	\$510 per patient
Appointment payments to cover the cost of 5 long appointments.	\$1,210 per patient	Appointments are bulk billed by the practice.	Medicare benefit

Maximum amount payable for an Option A practice with 50 patients: \$93,550 (+ GST) + any additional appointments

Maximum amount payable for an Option B practice with 50 patients: \$50,800 (+GST)

Anticipated timeframes

This procurement activity will be undertaken in accordance with the below timeframes:

Stage	Activity
1	EOI closes 05/04/2024 or when 15 practices are engaged
2	Review of Submissions: Practices will be contacted within one week of submission
3	Contract Finalisation: within two weeks of submission
4	Establishment: Practices assigned to and onboarded in Tranches – October 2023 to April 2024
5	Services Commence: <ul style="list-style-type: none"> • Tranche 1: October 2023 • Tranche 2: January 2024 • Tranche 3: April 2024

Part C: Conditions of the EOI Process

1. Application of these rules

Participation in the EOI Process is subject to compliance with the rules contained in this **Part C**.

All persons (whether or not they submit an EOI) having obtained or received this EOI may only use it, and the information contained in it, in compliance with the rules set out in this **Part C**.

All Respondents are deemed to accept the rules contained in this **Part C**.

The rules contained in this **Part C** of the EOI apply to:

- a. the EOI and any other information given, received, or made available in connection with the EOI including any additional materials specified in the **Reference Schedule (Part A)** and any revisions or addenda,
- b. the EOI Process, and
- c. any communications (including any briefings, presentations, meetings or negotiations) relating to the EOI or the EOI Process.

2. Structure expression of Interest

This EOI consists of the following parts:

Introduction – contains an overview of the opportunity presented in, and the objectives of, this EOI.

Part A – Reference Schedule

Part B - Statement of Requirements describes the Goods and/or Services in respect of which CHN invites EOIs from invited suppliers.

Part C - Conditions of the EOI Process sets out the rules applying to the EOI documents and to the EOI Process. These rules are deemed to be accepted by all Respondents and by all persons having received or obtained the EOI.

3. Expression of Interest

3.1 Status of EOI

This EOI is not an offer. It is an invitation for potential Suppliers to submit an Expression of Interest for the provision of the Goods and/or Services set out in the Statement of Requirements contained in **Part B** of this EOI.

Nothing in this EOI is to be construed as creating any binding contract for the supply of the Goods and/or Services (express or implied) between CHN and any Respondent until CHN and a Respondent enter into a final, binding contract.

3.2 Accuracy of EOI

While all due care has been taken in connection with the preparation of this EOI, CHN does not warrant the accuracy of the content of the EOI and CHN will not be liable for any omission from the EOI.

3.3 Additions and amendments

CHN reserves the right to change any information in, or to issue addenda to, this EOI.

3.4 Representations

No representation made by or on behalf of CHN in relation to the EOI (or its subject matter) will be binding on CHN unless that representation is expressly incorporated into any contract(s) ultimately entered into between CHN and a respondent.

3.5 Licence to use and Intellectual Property Rights

Suppliers obtaining or receiving this EOI and any other documents issued in relation to this EOI may use the EOI and such documents only for the purpose of preparing a response.

Such Intellectual Property Rights as may exist in the EOI and any other documents provided to Respondents by or on behalf of CHN in connection with the EOI Process are owned by (and will remain the property of) CHN except to the extent expressly provided otherwise.

3.6 Availability of additional materials

Additional materials (if any) may be accessed in the manner set out in the **Reference Schedule (Part A)**.

4. Communications during the EOI Process

4.1 Key Contact

All communications relating to the EOI and the EOI Process must be directed to the Key Contact by email to tenders@chnact.org.au.

4.2 Requests for clarification or further information

Any communication by a Respondent to CHN will be effective upon receipt by the Key Contact (provided such communication is in the required format).

CHN may restrict the period during which it will accept questions or requests for further information or for clarification and reserves the right not to respond to any question or request, irrespective of when such question or request is received.

Except where CHN is of the opinion that issues raised apply only to an individual Respondent, questions submitted and answers provided will be made available to all potential Suppliers as described in Part A at the same time without identifying the person or organisation having submitted the question.

A potential Supplier may, by notifying the Key Contact in writing, withdraw a question submitted in accordance with this **section 4.1 and 4.2**, and only if the question remains unanswered at the time of the request.

4.3 Improper assistance

Respondents must not seek or obtain the assistance of directors, employees, agents, contractors or service providers (with respect to this EOI) of CHN in the preparation of their response to this EOI. In addition to any other remedies available to it under law or contract, CHN may, in its absolute discretion, immediately disqualify a Respondent that it believes has sought or obtained such assistance.

4.4 Anti-competitive conduct

Respondents and their respective directors, officers, employees, agents and advisers must not engage in any collusion, anti-competitive conduct or any other similar conduct with any other Respondent or any other person in relation to the preparation, content or lodgement of their response. In addition to any other remedies available to it under law or contract, CHN may, in its absolute discretion, immediately disqualify a Respondent that it believes has engaged in such collusive or anti-competitive conduct.

4.5 Complaints about the EOI Process

Any complaint about the EOI Process must be submitted to the Key Contact via email to tenders@chnact.org.au immediately upon the cause of the complaint arising or becoming known to the Respondent. The written complaint statement must set out:

- a. the basis for the complaint (specifying the issues involved)
- b. how the subject of the complaint (and the specific issues) affect the person or organisation making the complaint
- c. any relevant background information, and
- d. the outcome desired by the person or organisation making the complaint.

5. Submission of Responses

5.1 Lodgement

Respondent responses must be lodged only by the means set out in the **Reference Schedule (Part A)**.

5.2 Late responses

Responses must be lodged by the Closing Time set out in the **Reference Schedule (Part A)**. The Closing Time may be extended by CHN in its absolute discretion.

Responses lodged after the Closing Time or lodged at a location or in a manner that is contrary to that specified in this EOI will be disqualified from the EOI Process and will be ineligible for consideration, except where the Respondent can clearly demonstrate (to the reasonable satisfaction of CHN) that late lodgement of the response:

- a. resulted from the mishandling of the Respondent response by CHN, or
- b. was hindered by a major incident and the integrity of the EOI Process will not be compromised by accepting a response after the Closing Time.

The determination of CHN as to the actual time that a response is lodged is final. Subject to (a) and (b) above, all responses lodged after the Closing Time will be recorded by CHN, and will only be processed for the purposes of identifying a business name and address of the Respondent. CHN will inform a Respondent whose response was lodged after the Closing Time of its ineligibility for consideration.

6. EOI documents

6.1 Format and contents

Respondents must ensure that:

- a. their response is presented on the required template
- b. all the information fields in the EOI template are completed and contain the information requested, and
- c. links to websites or online documents must not be included in the EOI template as they will not be reviewed by CHN.

CHN may in its absolute discretion reject a response that does not include the information requested or is not in the format required.

Unnecessarily elaborate responses beyond what is sufficient to present a complete and effective EOI are not desired or required.

Word limits where specified should be observed and CHN reserves the right to disregard any parts of the response exceeding the specified word limit.

Respondents should fully inform themselves in relation to all matters arising from the Invitation, including all matters regarding CHN's requirements for the provision of the Goods and/or Services.

6.2 Illegible content, alteration and erasures

Incomplete responses may be disqualified or evaluated solely on the information contained in the response to this EOI.

CHN may disregard any content in a response that is illegible and will be under no obligation whatsoever to seek clarification from the Respondent.

CHN may permit a Respondent to correct an unintentional error in its response where that error becomes known or apparent after the Closing Time, but in no event will any correction be permitted if CHN reasonably considers that the correction would materially alter the substance of the response.

6.3 Obligation to notify errors

If, after a response has been submitted, the Respondent becomes aware of an error in the response (excluding clerical errors which would have no bearing on the assessment of the response) the Respondent must promptly notify CHN of such error.

6.4 Preparation of Responses

CHN will not be responsible for, nor pay for, any expense or loss that may be incurred by Respondents in the preparation of their response to this EOI.

6.5 Disclosure of Respondent contents and information

All responses will be treated as confidential by CHN. CHN will not disclose response contents and information, except:

- a. as required by Law
- b. for the purpose of investigations by the Australian Competition and Consumer Commission (ACCC) or other government authorities having relevant jurisdiction
- c. to external consultants and advisers CHN engaged to assist with the Assessment Process
- d. to other government departments or agencies in connection with the subject matter of the related Commonwealth programme or EOI Process, or
- e. general information from responses required to be disclosed by government policy.

CHN does, however, reserve the right to benchmark costings against relevant industry standards and across other primary health network organisations.

6.6 Use of responses to EOI

Upon submission in accordance with the requirements of **section 5** of this **Part C** and the **Reference Schedule (Part A)**, all responses become the property of CHN. Respondents will retain all ownership rights of intellectual property contained in the response. The submission of a response does not transfer to CHN any ownership interest in the Respondent's intellectual property rights, or give CHN any rights in relation to the response, except as expressly set out below.

Each Respondent, by submission of their response, is deemed to have licensed CHN to reproduce the whole, or any portion, of their response for the purposes of enabling CHN to evaluate the response to this EOI.

6.7 Withdrawal of response to EOI

A Respondent who wishes to withdraw a response previously submitted by it must immediately notify CHN of that fact. Upon receipt of such notification, CHN will cease to consider that response to this EOI.

7. Capacity to comply with Statement of Requirements

Part B of this EOI gives a statement of CHN requirements with regard to the Goods and/or Services the subject of this EOI. It will be assumed that each Respondent will be capable of providing all of the Goods and/or Services in full. Where Respondents believe they will not be capable of providing all the Goods and/or Services in full or will only comply with the Statement of Requirements subject to conditions, they should either not apply or set out any potential limitations in their response.

8. Assessment of responses to EOI

8.1 Assessment process

Following the Closing Time, CHN intends to evaluate all responses received.

Responses to this EOI will be evaluated against the Assessment Criteria specified in **Part B** of the EOI.

A response will not be deemed to be unsuccessful until such time as the Respondent is formally notified of that fact by CHN.

8.2 Clarification of response to EOI

If, in the opinion of CHN, a response to this EOI is unclear in any respect, CHN may, in its absolute discretion, seek clarification from the Respondent. Failure to supply clarification to the satisfaction of CHN may render the response liable to disqualification.

CHN is under no obligation to seek clarification to a response to this EOI and CHN reserves the right to disregard any clarification that CHN considers to be unsolicited or otherwise impermissible in accordance with the rules set out in this **Part C**.

9. Next stage

9.1 Options available to CHN

After assessment of all EOI proposals, CHN may, without limiting other options available to it, do any of the following:

- a. prepare a shortlist of Respondents and invite further response to the EOI from those Respondents
- b. prepare a shortlist of Respondents and call for tenders for Goods and/or Services or any similar Goods or Services
- c. call for tenders from the market generally for the Goods or Services or any similar or related Goods or Services
- d. enter into pre-contractual negotiations with one or more Respondents without any further need to go to tender
- e. decide not to proceed further with the EOI Process or any other procurement process for the Goods or Services,
- f. commence a new process by calling for EOIs or proposals on a similar or different basis to that outlined in this Invitation, or
- g. terminate the process at anytime.

9.2 No legally binding contract

Being shortlisted does not give rise to a contract (express or implied) between the Respondent and CHN.

No legal relationship will exist between CHN and a shortlisted Respondent relating to the supply of the Goods or Services unless and until such time as a binding contract is executed by them.

10. Additional rules

Any rules governing this EOI Process in addition to those set out in this **Part C**, are set out in the **Reference Schedule (Part A)**.

11. Respondent warranties

By submitting a response to this EOI, a Respondent warrants that:

- a. in lodging its response it did not rely on any express or implied statement, warranty or representation, whether oral, written, or otherwise made by or on behalf of CHN, its officers, employees, agents or advisers other than any statement, warranty or representation expressly contained in the EOI documents
- b. it did not use the improper assistance of CHN employees or information unlawfully obtained from CHN in compiling its response
- c. it has examined this EOI, and any other documents referenced or referred to herein, and any other information made available in writing by CHN to Respondents for the purposes of submitting a response to this EOI
- d. it has sought and examined all necessary information which is obtainable by making reasonable enquiries relevant to the risks and other circumstances affecting its response
- e. it has otherwise obtained all information and advice necessary for the preparation of its response
- f. it is responsible for all costs and expenses related to the preparation and lodgement of its response, any subsequent negotiation, and any future process connected with or relating to the EOI Process
- g. it otherwise accepts and will comply with the rules set out in this **Part C** of the EOI
- h. it will provide additional information in a timely manner as requested by CHN to clarify any matters contained in the response to this EOI, and
- i. it is satisfied as to the correctness and sufficiency of its response to this EOI.

12. CHN rights

Notwithstanding anything else in this EOI, and without limiting its rights at law or otherwise, CHN reserves the right, in its absolute discretion at any time, to:

- a. vary or extend any time or date specified in this EOI for all or any Respondents or other persons, or
- b. terminate the participation of any Respondent or any other person in this EOI Process.

13. Governing law

This EOI and the EOI Process is governed by the laws applying in the Australian Capital Territory.

Each Respondent must comply with all relevant laws in preparing and lodging its response to this EOI and in taking part in the EOI Process.

14. Interpretation

14.1 Definitions

Respondent means an organisation that submits a response to this EOI

Briefing means a meeting (the details of which are specified in the **Reference Schedule**) that may be held by or on behalf of CHN to provide information about the EOI and the EOI Process.

Capital Health Network (CHN) means the organisation responsible for the EOI and the EOI Process.

Closing Time means the time specified as such in the **Reference Schedule** by which responses must be received.

Proposal(s) and/or Response(s) means a document lodged by a Respondent in response to this EOI containing a response to provide Goods or Services sought through this Process.

EOI Process means the process commenced by the issuing of this EOI and concluding upon formal announcement by CHN of the selection of shortlisted Respondent(s) or upon the earlier termination of the EOI Process.

Assessment Criteria means the criteria set out in **Part B** of the EOI.

Goods means the goods or other products required by CHN, as specified in **Part B** of this EOI.

Intellectual Property Rights includes copyright and neighbouring rights, and all proprietary rights in relation to inventions (including patents) registered and unregistered trademarks (including service marks), registered designs, confidential information (including trade secrets and know how) and circuit layouts, and all other proprietary rights resulting from intellectual activity in the industrial, scientific, literary or artistic fields.

Expression of Interest (EOI) means this document (comprising each of the **Parts A, B, and C**) and any other documents so designated by CHN.

Statement of Requirements means the statement of CHN requirements contained in **Part B** of this EOI.

Reference Schedule means the schedule so designated forming part of **Part A** of the EOI.

Services means the services required by CHN, as specified in **Part B** of this EOI.

14.2 Instruction

In this EOI, unless expressly provided otherwise a reference to:

- “includes” or “including” means includes or including without limitation, and

- “\$” or “dollars” is a reference to the lawful currency of the Commonwealth of Australia, and
- if a word and/or phrase is defined its other grammatical forms have corresponding meaning.