



Australian Government

Medicare Australia



***Healthcare Identifiers Service  
2010–11 Annual Report:  
Healthcare Identifiers  
Service Operator***



# ***Table of contents***

---

<b>1. Executive summary</b>	<b>1</b>
<b>2. Introduction</b>	<b>3</b>
2.1 Year in review—a summary	5
<b>3. Operation of the HI Service</b>	<b>6</b>
3.1 Assignment of healthcare identifiers	6
3.2 Disclosure of healthcare identifiers for authorised purposes to authorised users	7
3.3 Healthcare Provider Directory	9
3.4 Policies, processes and systems used to operate the HI Service	10
3.5 Collaboration with National E-Health Transition Authority on the roll-out of healthcare identifiers	11
3.6 Interactions with third party software vendors or contracted service providers	12
<b>4. Service levels</b>	<b>14</b>
<b>5. Communications activities to support the HI Service</b>	<b>15</b>
<b>6. Financial statements</b>	<b>16</b>
<b>7. Security, privacy and confidentiality</b>	<b>19</b>
<b>8. Audits</b>	<b>20</b>
<b>Appendix A</b>	<b>21</b>



# **Executive summary**

1

The framework that underpins the Healthcare Identifiers (HI) Service includes the *Healthcare Identifiers Act 2010* (the Act) and the Healthcare Identifiers Regulations 2010, the National Partnership Agreement on eHealth and the Service Level Agreement between the National E-Health Transition Authority (NEHTA) and Medicare Australia.

The Chief Executive Officer of Medicare Australia is defined in the Act as the HI Service Operator for the purposes of the Act. On 1 July 2011, legislative amendments commenced which integrated Medicare Australia and Centrelink into the Federal Department of Human Services (DHS). These legislative changes included consequential amendments to the Act which resulted in the Chief Executive Medicare taking over the role of the HI Service Operator from the Chief Executive Officer of Medicare Australia. The amendment to legislation and new executive structure under DHS has no impact on operations of the HI Service.

Medicare Australia (now DHS) was contracted by NEHTA to design, develop and test the HI Service. The HI Service Operator takes seriously the privacy and security of all information it receives and has excellent controls in place and a strict policy for accessing or disclosing personal information with an emphasis on unauthorised access. In addition, during the design of the HI Service and as part of our safeguards to protect personal information, the Office of the Australian Information Commissioner (previously known as the Office of the Privacy Commissioner) was consulted. The HI Service holds data that is limited to demographic information about the individual, individual healthcare provider or healthcare provider organisation: not clinical information. The handling of any personal information associated with a healthcare identifier is subject to the Act and existing privacy arrangements under Commonwealth, state or territory law that apply to the body holding the information.

The HI Service is funded by all Australian governments and is a foundation element of the broader eHealth system. It is designed to support other initiatives, for example the consent based personally controlled electronic health record to be introduced in July 2012. Through the HI Service, every Australian who has an active enrolment in Medicare or the Department of Veterans' Affairs has been automatically issued with a 16-digit individual healthcare identifier number.

The inclusion of healthcare identifiers in a health record system or patient file will not change how and when healthcare providers share information about individuals, but will provide a much more reliable way of referencing information, particularly in electronic communications and information management systems. Patients will continue to be involved in decisions about how health information is handled by their healthcare team. Additionally, healthcare identifiers are not required to receive healthcare or to claim healthcare benefits such as Medicare. If healthcare identifiers are not available for any reason, treatment will not be refused.

When the HI Service started all legislative requirements for 1 July 2010 were available. These requirements included assigning healthcare identifiers to individuals, individual healthcare providers and healthcare provider organisations, collecting healthcare provider identifiers through national registration authorities, disclosing of healthcare identifiers for authorised purposes, and the provision of a Healthcare Provider Directory.

A late amendment to the Act was the contracted service provider requirement. This requirement allows businesses (typically information technology (IT) firms), that provide health information communication and/or management services under contract to healthcare provider organisations registered with the HI Service, to store and share healthcare identifiers on their behalf. A schedule for delivery of the contracted service provider function in 2010 was agreed with NEHTA, and is being implemented within the set timeframe.

1

On commencement of the HI Service a suite of information to support healthcare providers participating in the HI Service was also made available on the HI Service website. This information provided an overview of the HI Service, registration processes for individual healthcare providers and healthcare provider organisations, and outlined the roles and responsibilities for all parties using and interacting with the HI Service, as well as the handling of customer enquires and complaints and support to providers.

During 2010–11, the Office of the Australian Information Commissioner conducted an audit to review the HI Service Operator’s collection, use, disclosure and security processes relating to healthcare identifier information and assess whether these procedures are in accordance with the Information Privacy Principles in section 14 of the *Privacy Act 1988*.

The auditors’ observations showed that the HI Service Operator handles personal information relating to the HI Service in accordance with the Information Privacy Principles in the *Privacy Act 1988* and the audit team held the opinion that the HI Service Operator is compliant in meeting its obligations under the Act. The auditors did not identify any privacy risks in relation to the HI Service Operator’s handling of personal information.

The HI Service Operator has worked closely with stakeholders in government and the healthcare industry (including software vendors) in an open, collaborative and transparent way. Numerous presentations at meetings and workshops were delivered providing industry with information on the HI Service. These have produced positive results in improving HI Service operations. The HI Service Operator continues to work closely with the Department of Health and Ageing, NEHTA and other key stakeholders on sharing of best practices, and to make sure corporate governance and operational arrangements are appropriate and continue to develop in a timely and robust manner.

The success of the first year of operations of the HI Service could not have been achieved without the support of all stakeholders. I would like to thank the stakeholders and HI Service staff for their contributions and dedication in making our first year in operating the HI Service a success. I look forward to working with you in the year ahead.

A handwritten signature in black ink, reading "M. Golightly". The signature is written in a cursive style with a large, stylized initial "M" and a triangular flourish at the end.

Malisa Golightly  
Chief Executive Medicare

For the 2010-11 reporting period, the Chief Executive Officer of Medicare Australia was the Healthcare Identifiers (HI) Service Operator under the *Healthcare Identifiers Act 2010* (the Act). On 1 July 2011, legislative amendments commenced which integrated Medicare Australia and Centrelink into the Department of Human Services (DHS). These legislative changes included consequential amendments to the Act which resulted in the Chief Executive Medicare taking over the role of the HI Service Operator from the Chief Executive Officer of Medicare Australia. The legislative amendments and the executive structure across DHS does not impact on operations of the HI Service, nor does the HI Service relate to the DHS functions of making payments.

## **What is the Healthcare Identifiers Service?**

The HI Service is a national system for uniquely identifying healthcare providers and individuals. Use of healthcare identifiers helps ensure individuals and providers can have confidence the right information is associated with the right individual at the point of care.

A healthcare identifier is not a health record. The information held by the HI Service Operator is limited to demographic information such as an individual's name, date of birth and sex needed to uniquely identify the individual and their healthcare providers. The Act specifies that the identifiers are to be used for healthcare and related management purposes, with penalties in place for misuse.

The inclusion of healthcare identifiers in a health record system or patient file will not change how and when healthcare providers share information about individuals, but will provide a much more reliable way of referencing information, particularly in electronic communications and information management systems. Patients will continue to be involved in decisions about how health information is handled by their healthcare team. An individual healthcare identifier is not required to receive healthcare or to claim healthcare benefits such as Medicare. If a healthcare provider is unable to obtain an individual's healthcare identifier from the HI Service, or the individual healthcare identifier is not available for any reason, treatment will not be refused.

As part of the HI Service, every Australian with an active Medicare enrolment or the Department of Veterans' Affairs registration is assigned a unique 16 digit healthcare identifier number which has been created to be used by healthcare providers to improve the efficient management of an individual's personal health information. Medicare enrolments and the Department of Veterans' Affairs registrations include individuals visiting from other countries with reciprocal healthcare agreements with Australia, people who may have temporarily or permanently left Australia, or individuals who may be deceased. Until confirmation is received that a person has left the country or is deceased, their Medicare enrolment remains active.

Individuals visiting or residing in Australia but not eligible to claim Medicare benefits or register with the Department of Veterans' Affairs may also be assigned a healthcare identifier by the HI Service Operator upon their request.

## Our roles and responsibilities

As the HI Service Operator, DHS is responsible for delivering the HI Service to Australians. This means:

- assigning healthcare identifiers to individuals, individual healthcare providers and healthcare provider organisations, so they can be more accurately identified in health records
- working with other bodies which can also assign healthcare identifiers under the Act to maintain the single complete record of all healthcare identifiers which have been assigned
- disclosing healthcare identifiers to individual healthcare providers and healthcare provider organisations, so healthcare identifiers can be used in the delivery of health services to the Australian community. The HI Service Operator also discloses healthcare identifiers with the businesses that individual healthcare providers and healthcare provider organisations engage to help them manage health information. These businesses are typically information technology (IT) firms, and are referred to in the Act as contracted service providers
- developing and administering robust processes for sharing healthcare identifiers with individual healthcare providers, healthcare provider organisations and contracted service providers
- keeping a record in an audit log each time a person's healthcare identifier is accessed or retrieved from the HI Service
- maintaining the Healthcare Provider Directory. If a healthcare provider consents, the HI Service Operator publishes professional and business details of a healthcare provider in the Healthcare Provider Directory, and other individual healthcare providers and healthcare provider organisations can access those details
- disclosing healthcare identifiers of individual healthcare providers and healthcare provider organisations, to enable the individual healthcare provider or healthcare provider organisation to be securely identified in electronic communications
- providing information about the HI Service to individuals and healthcare providers, both when the HI Service Operator is asked questions and through guidance material published on the HI Service website
- seeking advice and direction from, and providing reports to, the Australian Health Ministers' Conference, as required.

## The framework under which we operate

The HI Service is an initiative funded by all Australian governments. It is a foundation element of the broader eHealth system, designed to support other eHealth initiatives around the country by enabling better linkage of health information to the right individuals and healthcare providers.

The framework for delivery of the HI Service reflects the intergovernmental cooperation which underpins it. This framework is found in:

- the Act and the Healthcare Identifiers Regulations 2010 (the Regulations)
- the National Partnership Agreement on eHealth
- the Service Level Agreement between the HI Service Operator and NEHTA.

The Act and Regulations establish the rules for the operation of the HI Service, and the National Partnership Agreement sets out the national governance framework, including accountabilities of the HI Service Operator to all Australian Health Ministers, and funding for the HI Service.

The Service Level Agreement between the HI Service Operator and NEHTA, a company established by all Australian governments to develop better ways to electronically collect and securely exchange health information, deals with the implementation of technical and process requirements to support the day to day operations of the HI Service.

## 2.1 Year in review—a summary

On 1 July 2010, all legislative requirements were available. These included assigning healthcare identifiers to individuals, individual healthcare providers and healthcare provider organisations, collecting healthcare provider identifiers through national registration authorities, disclosing of healthcare identifiers for authorised purposes, and the provision of a Healthcare Provider Directory.

A late amendment to the Act was the contracted service provider requirement. This requirement allows businesses (typically information technology (IT) firms), that provide health information communication and/or management services under contract to healthcare provider organisations registered with the HI Service, to store and share healthcare identifiers on their behalf. A schedule for delivery of the contracted service provider function was agreed with NEHTA, and is being implemented within the set timeframe.

Over the first year of operations, the HI Service Operator has:

- assigned 24 051 919 healthcare identifiers to individuals
- collected or assigned 528 300 healthcare identifiers to individual healthcare providers
- assigned 170 healthcare identifiers to healthcare provider organisations.

The HI Service licence agreement (the licence agreement) for materials to enable software vendors to develop and test their products to connect with the HI Service was agreed with medical software vendor associations. The licence agreement was made available as an online click-through agreement.

The HI Service Operator worked with key stakeholders, including consumers, healthcare providers, jurisdictions and software vendors. The HI Service Operator participated in working groups and provided timely information to make sure stakeholders were involved and aware of the HI Service operations.

Two jurisdictions applied for and received their healthcare provider organisation identifiers in August 2010. Later, along with a software vendor that was contracted by NEHTA to work with the jurisdictions, they completed an interim Compliance, Conformance and Accreditation process and signed an interim Declaration of Conformity, allowing them restricted access to the HI Service through the web service channel. The restricted access was provided to allow the jurisdictions to undertake preparatory activity to cleanse their data, and did not permit the jurisdictions to store or use identifiers in their local records.

The HI Service Operator received three formal complaints. Of these, one was later found to be a query about obtaining a healthcare identifier rather than a complaint. One was seeking further information on availability of software vendor development material and the other related to a provision of the healthcare identifier. All three were resolved within agreed service level timeframes.

# **Operation of the HI Service**

Strategic oversight of the HI Service and its programs, projects and initiatives, the provision of financial forecasts and reporting and monitoring of service delivery performance in accordance with the agreed service levels is provided at the executive and operational level, by the Department of Health and Ageing, NEHTA and the HI Service Operator.

## **3.1 Assignment of healthcare identifiers**

The Act defines three types of healthcare identifiers:

- Individual Healthcare Identifier (IHI)—for individuals receiving healthcare services
- Healthcare Provider Identifier–Individual (HPI-I)—for healthcare professionals involved in providing patient care
- Healthcare Provider Identifier–Organisation (HPI-O)—for organisations that deliver healthcare (such as hospitals or general practices).

### **Individuals**

Every individual who had an active Medicare enrolment or the Department of Veterans' Affairs registration was assigned an IHI. IHIs continue to be allocated for new Medicare enrolments, registrations with the Department of Veterans' Affairs and others seeking healthcare in Australia, such as individuals visiting or residing in Australia but not eligible to claim Medicare benefits or register with the Department of Veterans' Affairs.

During the year there were a total of 24 051 919 IHIs assigned.

### **Individual healthcare providers**

Under Section 9 of the Act, the HI Service Operator and national registration authorities prescribed by the Regulations are authorised to assign healthcare identifiers to individual healthcare providers. During 2010–11, the Australian Health Practitioner Regulation Agency (AHPRA) was the only national registration authority assigning HPI-Is.

The HI Service Operator provided AHPRA with 5.1 million HPI-I numbers for assignment to their registrants. These numbers have been quarantined by the HI Service for AHPRA's use only. When AHPRA assigns a HPI-I to a registrant, the information is transmitted to the HI Service Operator, and once it is all in a format compatible with the HI Service, the information is recorded in the HI Service. During the year, the HI Service Operator worked with AHPRA on the format of information to improve compatibility between AHPRA's records and the HI Service.

Individual healthcare providers whose health profession is not covered under AHPRA must complete a registration form and apply directly to the HI Service to obtain their HPI-I. These forms are located on the HI Service Operator's website.

During the year a total of 528 300 HPI-Is were either collected from AHPRA, or assigned to individual healthcare providers who had applied directly to the HI Service Operator.

## Healthcare provider organisations

To obtain a HPI-O the principle legal entity must apply directly to the HI Service Operator and complete the registration form which is available on the HI Service Operator's website. Once the principle legal entity has been assigned an HPI-O, an organisational structure can be set up to accommodate their use of the HI Service.

During the year a total of 170 HPI-Os were assigned.

## 3.2 Disclosure of healthcare identifiers for authorised purposes to authorised users

Under sections 17, 18, 19 and 20 of the Act, the HI Service Operator is authorised to disclose healthcare identifiers to:

- healthcare providers for the purpose of communicating or managing health information as part of providing healthcare to an individual
- healthcare recipients (their healthcare identifier)
- registration authorities established for the purpose of the registration authority registering the healthcare provider
- entities established to provide healthcare provider authentication services for the purposes of issuing security credentials to authenticate a healthcare provider's identity in electronic transmissions.

### Disclosure of healthcare identifiers for individuals

Under the Act, the HI Service Operator disclosed IHIs to healthcare recipients and healthcare providers through the Medicare Australia (now DHS) service channel, which includes face-to-face, telephone, fax or email. There were a total of 367 IHIs disclosed through these channels.

When searching for an IHI an exact match is required on the search criteria entered before an IHI will be returned by the HI Service. Search criteria must include family name, date of birth, and sex. Optional search criteria can also be used such as Medicare card number, the Department of Veterans' Affairs file number, the IHI, given name and address.

In addition to the face-to-face, telephone, fax or email channels, searches can also be made via the web service channel. The search criteria for IHIs via the web service channel remain the same as outlined above, regardless of the software used.

During 2010–11, NEHTA contracted a software vendor to work with two jurisdictions to undertake preparatory work to cleanse their jurisdictional data. The work undertaken was done in accordance with the Act.

The two jurisdictions applied for and received their HPI-Os in August 2010. Later, along with a software vendor they completed an interim Compliance, Conformance and Accreditation (CCA) process and signed an interim Declaration of Conformity, allowing access to the HI Service. As the full CCA process and Declaration of Conformity had not been finalised when the jurisdictions and software vendor were seeking access to the HI Service, they were provided with restricted access to the HI Service and were not permitted to store or use identifiers in their local records.

The CCA process was developed by the Department of Health and Ageing, NEHTA, medical software vendors, jurisdictions, and the HI Service Operator. It is a set of mandatory, conditional and optional requirements on how software products store, use and share healthcare identifiers for clinical use. The CCA process is governed by a CCA Governance Group which consists of the jurisdictions, medical software vendors, Standards Australia, the National Accreditation and Testing Authority (NATA), the Department of Health and Ageing, NEHTA and the HI Service Operator. Once the software product has completed the CCA process a Declaration of Conformity must be signed by the software vendor and provided to the HI Service Operator.

The CCA is in addition to individual healthcare providers' and healthcare provider organisations' requirements under the Act.

A significant step towards embedding and streamlining the CCA process occurred on 22 June 2011, when the NATA accredited two laboratories to conduct healthcare identifier CCA testing. This means there is easier access to testing, while testing parameters are maintained at a consistently high standard for all organisations wanting to connect to the HI Service.

The total number of IHIs disclosed through web services were 782 772.

## **Disclosure of healthcare identifiers for individual healthcare providers and healthcare provider organisations**

During 2010–11, the HI Service Operator did not receive any requests to disclose healthcare provider identifiers to national registration authorities. Therefore, no healthcare provider identifiers were disclosed. Healthcare identifiers quarantined and provided to AHPRA by the HI Service Operator for the purpose of assigning the numbers to their registrants are not disclosures under the Act.

The HI Service Operator did disclose, in line with legislative requirements, 67 healthcare identifiers of both registered individual healthcare providers and healthcare provider organisations to an entity providing authentication services, for the purpose of enabling the identity of the individual healthcare providers and healthcare provider organisations to be authenticated in electronic transmissions with the HI Service.

### 3.3 Healthcare Provider Directory

Under section 31 of the Act, the HI Service Operator established and maintains the Healthcare Provider Directory (the Directory). Healthcare providers must give consent for their details to be made available in the Directory.

The Directory assists healthcare providers to quickly search for and find individual healthcare providers, including AHPRA and non-AHPRA providers, and healthcare provider organisations registered to use the service. For example, the Directory will enable, in a timely manner, a general practitioner to locate other providers (such as specialists) who have given consent to have their details published in the Directory, and facilitate communication with other providers when referring patients or making decisions about the patient's care needs by providing contact details for electronic messaging.

The establishment of the Directory is one of the key benefits associated with the HI Service. The Directory aims to facilitate communication between healthcare providers by providing a reliable source of identifying and contact information about other participating healthcare providers.

During the year, 172 individual healthcare providers and healthcare provider organisations gave consent to have their details published in the Directory.

## 3.4 Policies, processes and systems used to operate the HI Service

The HI Service Operator has implemented several channels (face-to-face by visiting a Medicare office, telephone, email, or fax) for individuals and healthcare providers using the HI Service. A suite of HI Service policies and procedures has been developed to support HI Service staff managing enquiries through these channels.

In addition to developing policies and procedures for staff to answer questions the general public might have about the HI Service, the HI Service Operator has developed and published website information which is available directly to the general public. The information includes what healthcare identifiers are, what they can be used for and the role of the HI Service Operator (as supported in legislation).

All HI Service policies are provided to NEHTA for review to ensure they meet with NEHTA's policy requirements and the requirements of the legislation. Policies and procedures are reviewed every six months, or when a change is required to existing material (whichever occurs first). Training in new policies and procedures is provided to HI Service staff.

To support healthcare providers using the HI Service, the HI Service Operator developed information guides in consultation with the Department of Health and Ageing and NEHTA. The information guides, which are available on the HI Service Operator's website, provide an overview of the HI Service, the registration processes for individual healthcare providers and healthcare provider organisations and information about HI Service roles and the associated responsibilities. Website content also includes HI Service forms and links to other relevant material.

Through engagement with stakeholders, the HI Service Operator improved the registration process for healthcare providers by recognising individual healthcare providers and healthcare provider organisations representatives who are already known to DHS. Where an organisation or individual healthcare provider has previously applied for a public key infrastructure (PKI) Certificate and provided evidence of identity to a data source as defined in the Act there is no requirement to provide that information again when applying to register with the HI Service. Consequently during 2010-11, a number of organisation representatives who applied for their HPI-O did not have to provide their evidence of identity again, making the process quicker and easier.

### Maintenance of healthcare identifier information

The HI Service Operator maintains the systems that contain IHI information (demographic details and address), HPI-I information (demographic details, address and specialty details) and HPI-O information (organisation name, address and services provided, and demographic details and addresses of the responsible officer and organisation maintenance officer where applicable). There is no health information stored in the HI Service.

The HI Service Operator provides NEHTA with a work plan, which includes the scheduled maintenance for the HI Service systems. This schedule is provided weekly.

The HI Service Operator is also responsible for the management of disaster recovery and business continuity of the HI Service. The HI Service is included in the DHS Disaster Recovery Plan and Business Continuity Plan as part of the annual business planning cycle. In 2010–11, a disaster recovery test was successfully conducted and twice yearly reviews of the Business Continuity Plan were carried out and amendments to procedures made.

## **3.5 Collaboration with National E-Health Transition Authority on the roll-out of healthcare identifiers**

The HI Service Operator and the National E-Health Transition Authority (NEHTA) have worked closely to support the roll-out of healthcare identifiers, making sure healthcare providers have access to information and assistance with any HI Service related process.

In addition to providing support to users of the HI Service as part of operations, the HI Service Operator has been involved with the Department of Health and Ageing and NEHTA's personally controlled electronic health record lead sites, visiting sites to provide information about how to use the service. The HI Service Operator continues to have regular interaction with these sites, as well as with most jurisdictions to support the roll-out of the healthcare identifiers.

The HI Service Operator has made sure staff were available to support 'tours' of the model healthcare community, which demonstrates how healthcare identifiers are used in a healthcare environment. The HI Service Operator also attends and supports NEHTA at their Stakeholder Reference Group meetings, and provides presentations and workshops to ensure healthcare providers and jurisdictions understand the HI Service.

## 3.6 Interactions with third party software vendors or contracted service providers

As a foundation element of the eHealth system, the HI Service is intended to provide the basis for quick, efficient and secure management of patient health information for healthcare providers. This means the organisations that develop software for the health sector, and those that provide IT services to healthcare providers, are key partners in the development of an effective HI Service.

The eHealth ICT Industry Implementation Group was established by the Department of Health and Ageing to provide a framework for consultation on eHealth initiatives, including the HI Service. This group is constituted by representatives from the Department of Health and Ageing, the HI Service Operator, NEHTA, the Medical Software Industry Association, Australian Information Industry Association, Australian Association of Practice Managers and the Aged Care IT Vendor Association.

The HI Service Operator provides ongoing support to third party software vendors to facilitate the development of their products (by publishing advance notice on the HI Service Operator's website of HI Service maintenance and updates to specifications and future releases) and meets with medical software industry stakeholder groups to identify emerging issues and work to resolve them.

Software vendors are required to accept the HI Service licence agreement (the licence agreement) for materials before developing and testing their software products to connect with the HI Service.

Software vendor industry associations questioned the licence agreement and testing processes. To work towards resolving their concerns the HI Service Operator, in consultation with the Department of Health and Ageing and NEHTA, worked closely with the software vendor associations and commissioned risk assessments on the financial, legal and technical aspects of the licence agreement and testing processes.

The outcome from discussions with the software vendor associations resulted in a revised online licence agreement and testing process. The revised licence agreement and testing process were agreed by all medical software vendor associations. The licence agreement incorporates use of the HI Service Licensed Material to enable software vendors to develop and test their products to connect with the HI Service. In May 2011, the licence agreement was made available as an online click-through agreement on the HI Service Operator's website.

For software vendors to gain access to and connect with the HI Service, they must do the following.

- Complete and pass all mandatory conformance requirements of the CCA process and sign a Declaration of Conformity. The CCA process is a set of mandatory, conditional and optional requirements on how software products store, use and share healthcare identifiers for clinical use.
- Complete the HI Service Operator's testing process and receive their HI Service Notice of Connection. The HI Service Notice of Connection testing process validates the software's ability to interact successfully with the HI Service without adversely affecting DHS systems.

## **Contracted service providers**

Contracted service providers may have access to healthcare identifiers where they are handling these for a legitimate purpose on behalf of individual healthcare providers and healthcare provider organisations. This function was a late amendment to the Act. Over 2010–11, there has been significant work on how to support access to the HI Service by contracted service providers in an effective and responsible way.

Under the protocols developed, a contracted service provider must register with the HI Service Operator and is allocated a unique identifier called a contracted service provider number. Once registered, a healthcare provider organisation can link the contracted service provider to itself in the HI Service. Until a contracted service provider has been linked by a healthcare provider organisation, it cannot access the HI Service to get healthcare identifiers.

The HI Service Operator ran weekly meetings with the software industry and NEHTA to co-design, develop and implement the contracted service provider functionality. Feedback received from industry regarding the co-design process was very positive.

The HI Service Operator guidance material for contracted service providers is on the HI Service Operator's website.

In line with the National Partnership Agreement on eHealth, the HI Service Operator has entered into a service level agreement with NEHTA. The HI Service Operator reports monthly to NEHTA against service levels under seven different categories: HI application; data quality; customer management and support; processes, applications, data and infrastructure; identity management, authentication and support; security policies and procedures; and the HI Service helpdesk. Under these categories, the HI Service Operator reports against 17 service levels and eight of the service levels have sub-requirements (a total of 41 sub-requirements).

The HI Service Operator is only required to formally report on a maximum of six service levels, or as agreed between NEHTA and the HI Service Operator. For 2010–11, it was agreed that all service levels and sub-requirements would be reported on, with the exception of two service levels under the processes, applications, data and infrastructure category. These service levels were exempt from reporting as the HI Service Operator was not receiving information that related to the two service levels.

The HI Service Operator also reports on any incidents that may occur under the service level agreement. These incidents are classified into three severity levels: one being the highest and three the lowest.

The HI Service Operator reported a severity one incident in late August 2010. This incident was recorded under the HI application service level category, and therefore one of the 12 months for one service level under this category was not met. The incident related to a power outage which caused a loss of connectivity for a period of eight hours. Connectivity was established and business systems were made progressively available on a risk management basis over the next 16 hours. The system enabling disclosure of healthcare identifiers to individuals was restored within four hours as a critical business service. There were no healthcare providers registered with the HI Service at the time of the incident, therefore restoration of the system capturing healthcare provider details was restored later in the day. By October 2010, DHS installed extra infrastructure to safeguard against any adverse impact to critical business systems, should such incidents occur in the future.

All other service levels and their sub-requirements were met for every month with the exception of two under the data quality service level category. These two service levels were met for the nine of the 12 reporting months, but were not met for the remaining three reporting months as a sub-requirement in each was not met. This did not impact on the operation of the HI Service.

The first sub-requirement relates to the postal address that healthcare organisations provide the HI Service Operator when registering. For example, some healthcare organisations that are located across more than one address (for example, hospitals) do not provide the address that has been allocated the Australia Post Delivery Point Identifier. The HI Service automatically checks that the address provided has been allocated a Delivery Point Identifier. If the address does not have a Delivery Point Identifier then it is flagged in the system. The HI Service Operator is reviewing this sub-requirement with NEHTA.

The second relates to the need for a mandatory healthcare provider category for all healthcare providers registered in the HI Service. Healthcare provider information was received from a national registration authority without the healthcare provider category. To rectify this, the HI Service Operator notified the national registration authority that the healthcare provider category is a mandatory requirement, and is working with the national registration authority to make sure the provider information submitted is corrected. To prevent this occurring again, a change has also been made to the HI Service to make sure that if the healthcare provider category is not supplied, the provider information is automatically returned for correction and resubmission.

# ***Communications activities to support the HI Service***

---

**5**

Before the start of the HI Service, Medicare Australia (now DHS), the Department of Health and Ageing and NEHTA agreed on areas of responsibility for stakeholder engagement and communication. The HI Service Operator's agreed area of responsibility in communication activities was to support the operation of the HI Service, and included activities such as providing content on the HI Service Operator's website and the development of an interim HI Service brochure that was made available in DHS offices.

An agreed set of Frequently Asked Questions (FAQs) was developed by the Department of Health and Ageing with input from NEHTA and the HI Service Operator. The HI Service Operator provides a link on its website to the FAQs.

For software vendors the HI Service Operator published quick reference guides, FAQs and contact details, as well as the HI licensed materials on its website.

The HI Service Operator is funded on a cost recovery basis (that is, the HI Service Operator is only paid for the actual costs it incurs to operate the service).

The core activities of the HI Service include:

- managing the HI Service in accordance with the legislation
- developing and maintaining information on policies and procedures for HI staff
- developing information guides and internet content for users of the HI Service
- maintaining HI licensed material and information for software vendors
- stakeholder engagement with medical software industry associations and users of the HI Service
- provision of a helpdesk (face-to-face, telephone, email or fax)
- monthly service level reporting
- financial management and reporting
- disaster recovery and business continuity
- operating and maintaining the HI systems and the Healthcare Provider Directory.

Based on the agreed demand plan with NEHTA the original forecast cost for the first year of operations was \$13.8 million (m). The actual cost of operations was \$9.23m, a \$4.58m reduction from the forecast, due to lower than expected enquiries and registrations from individual healthcare providers, resulting in reduced cost for helpdesk services. The cost is expected to increase in the forthcoming year as the take-up of the service increases.

Two additional activities of \$2.0m were undertaken in 2010–11. The first one related to the contracted service provider function, which was a late amendment to the Act, and therefore not included in the development contract for the HI Service and funded separately. The second related to implementation of the authorised employee logging functionality, to assist healthcare providers to meet their legislative requirements. This additional activity was agreed with NEHTA following stakeholder consultation.

**Table 3: Healthcare Identifiers Service**  
**- operating statement for the year ending 30 June 2011**

	Qtr 1 Jul - Sep \$'000	Qtr 2 Oct - Dec \$'000	Qtr 3 Jan - Mar \$'000	Qtr 4 Apr - Jun \$'000	2011/12 Total \$'000
<b>Income</b>					
Operational revenue	2234	2371	2503	2125	9233
Additional activities revenue		5	317	1674	1996
<b>Total income</b>	<b>2234</b>	<b>2376</b>	<b>2820</b>	<b>3799</b>	<b>11229</b>
<b>Expenditure</b>					
<b>HI Service program management</b>					
Staff costs	550	749	846	636	2781
Contractors	75	70	75	31	251
Staff related costs	8	10	22	24	64
Travel	17	26	16	28	87
	<b>650</b>	<b>855</b>	<b>959</b>	<b>719</b>	<b>3183</b>
<b>HI Service Help Desk</b>					
Staff costs	177	214	261	185	837
Contractors	47	5	-	-	52
Staff related costs	1	1	-	-	2
Travel	2	-	-	-	2
Other operational costs	-	-	-	3	3
	<b>227</b>	<b>220</b>	<b>261</b>	<b>188</b>	<b>896</b>
<b>Privacy, Legal &amp; Reporting</b>					
Staff costs	66	106	61	60	293
Contractors	7	-	-	-	7
Travel	3	-	-	-	3
	<b>76</b>	<b>106</b>	<b>61</b>	<b>60</b>	<b>303</b>
<b>Information technology</b>					

	Qtr 1 Jul - Sep \$'000	Qtr 2 Oct - Dec \$'000	Qtr 3 Jan - Mar \$'000	Qtr 4 Apr - Jun \$'000	2011/12 Total \$'000
Staff costs	91	41	84	39	255
Contractors	283	242	230	211	966
Computer hardware & software	907	907	908	907	3629
	<b>1281</b>	<b>1190</b>	<b>1222</b>	<b>1157</b>	<b>4850</b>
<b>Additional activities</b>					
Staff costs	-	-	21	143	164
Contractors	-	5	296	1531	1832
Other build costs	-	-	-	1	1
	-	<b>5</b>	<b>317</b>	<b>1675</b>	<b>1997</b>
<b>Total expenditure</b>	<b>2234</b>	<b>2376</b>	<b>2820</b>	<b>3799</b>	<b>11229</b>
<b>Operating surplus/(deficit)</b>	-	-	-	-	-

# **Security, privacy and confidentiality**

The government's priority is to protect the information it holds about individuals. DHS takes seriously the privacy and security of the health information it receives. There are excellent controls in place and a strict policy for accessing or disclosure of personal information for all DHS programs. DHS is committed to proactively protecting all personal information it holds, with appropriate penalties in place for unauthorised access, including dismissal of staff.

DHS privacy management procedures include:

- induction training for new staff and follow-up training on identified privacy issues relevant to staff in different business areas
- privacy impact assessments of new DHS initiatives involving the collection, use or disclosure of personal information
- proactive audits of access to personal information to identify any unauthorised access by DHS staff
- provision of high quality and timely privacy advice to all business units to encourage the identification and resolution of any privacy issues as they arise
- investigation of customer complaints and staff reports of possible privacy breaches to make sure action is taken to address any ongoing risks
- specific processes for the release of personal information to any other agency or person (personal information is only disclosed in line with legislative requirements)
- all staff messages about privacy standards.

Protection of the privacy of individuals and healthcare providers was a critical consideration in the development of the HI Service. The Office of the Australian Information Commissioner was consulted in the development and design of the system, and training packages for HI Service officers include a DHS privacy refresher component to make sure service officers handling healthcare identifiers are reminded of their duties in relation to privacy and confidentiality of information.

The Act describes the HI Service Operator's duty of confidentiality. It is a breach of the Act for the HI Service Operator to use or disclose healthcare identifier information for any other purpose than provided for under the Act. The authority under Part 4 of the Act to collect, use or disclose healthcare identifiers or identifying information is also an authority to collect, use or disclose the information for the purpose of the *Privacy Act 1988*. All information collected by the HI Service Operator must be managed in accordance with the *Privacy Act 1988*.

Individuals who believe their record has been inappropriately accessed can contact the HI Service Operator who will investigate the request. The individual can also request the Office of the Australian Information Commissioner to undertake an investigation. The HI Service features a full audit log which tracks and identifies all interactions with the HI Service. This log will be used to identify potential inappropriate access during these investigations.

Additionally, security, privacy and confidentiality of information is protected by the use of public key infrastructure (PKI) for electronic transmissions between the HI Service and healthcare providers. PKI restricts healthcare providers' access to the HI Service to only those functions relating to their role. PKI is a set of procedures and technology that provides security and confidentiality for electronic business. It encrypts and secures information and authenticates both the sender and receiver.

There have been no suspected privacy or confidentiality breaches by employees in relation to the HI Service, and consequently there have been no investigations conducted to date.

The Office of the Australian Information Commissioner undertook two audits of the HI Service during 2010–11.

The purpose of the first audit was to determine whether the HI Service Operator's handling of the healthcare identifier information is in accordance with the Act, the Regulations and the Information Privacy Principles contained in section 14 the *Privacy Act 1988*. The audit reviewed the HI Service Operator's collection, use, disclosure and security processes relating to healthcare identifier information and assessed whether these procedures are in accordance with the Information Privacy Principles.

The audit started in October 2010. The final report was presented in June 2011 and accepted by the then Chief Executive Officer of Medicare Australia. The auditors' observations showed that the HI Service Operator handles personal information relating to the HI Service in accordance with the Information Privacy Principles in the *Privacy Act 1988*. The audit team held the opinion that the HI Service Operator is compliant in meeting its obligations under the Act. The auditors did not identify any privacy risks in relation to handling of personal information. The Office of the Australian Information Commissioner made no recommendations in this audit and the report will be published on their website.

The second audit by the Office of the Australian Information Commissioner focused on the HI Service Operator's collection processes relating to HPI-I and HPI-O information, as well as processes undertaken when conducting batch searches of healthcare identifier information. The audit started in June 2011 and at the time of writing this the final report was not available.

# **Appendix A**

## **Documents available on the HI Service Operator's website**

### **Information for healthcare individuals**

#### **Medicare Australia website**

- Information about the Healthcare Identifiers Service
- Frequently asked questions
- Contact information

#### **Online tutorial**

- *Viewing your IHI and alternate name*

### **Information for healthcare providers (individuals and organisations)**

#### **Medicare Australia website**

- Information about the Healthcare Identifiers Service
- Frequently asked questions
- Contact information

#### **HI Service guides**

##### Information guides

- *Introduction and overview*
- *Responsible officer*
- *Organisation maintenance officer*
- *Authorised employee*
- *Individual healthcare provider*
- *Contracted service provider*

##### User guides

- *Services Catalogue—HI Service*
- *Authorised employee logging*
- *HPOS*

##### Reference guide

- *HPI-O Organisation Type Classification*
- *HPI-I - Provide Type Classification*

#### **HI Service forms**

##### Healthcare Provider Organisation

- *Application to register a Seed Organisation*
- *Application to Register a Network Organisation*
- *Application to replace a Responsible Officer or add/remove an Organisation Maintenance Officer for an Organisation*
- *Application to amend Organisation Officer's personal information*
- *Application to amend a Healthcare Organisation record*
- *Application to deactivate, reactivate or retire a Healthcare Organisation record*

## Healthcare Provider Individual

- *Application to Register a Healthcare Provider*
- *Application to amend a Healthcare Provider Record*

## Contracted Service Provider

- *Application to Register a Contracted Service Provider*
- *Application to add, replace or remove a Contracted Service Officer*
- *Application to link or unlink a contracted service provider organisation*

## Accessing the HI Service with PKI

- *Application to request or update a PKI certificate*

## Online consent web form

- *Healthcare Identifiers Service HPD consent and PKI*

## Information for software developers

### Medicare Australia website

- *Information about the Healthcare Identifiers Service for software developers*
- *Frequently asked questions*
- *Developing software for the Healthcare Identifiers Service—steps required*
- *Contact Information*
- *Latest release information*
- *Licence Agreement—use of the Healthcare Identifiers Licensed Material for Notice of Connection*

### Healthcare Identifiers Licensed Material

- *HI Service—Software Vendor Developers Guide*
- *HI Service Change Guides*
- *HI Service—IHI Searching Guide*
- *HI Service WSDL Artefacts*
- *HI Service System Interface Specifications (SIS)*

### Quick reference guides

- *HI Service—Release 3.2.0 B2B Web Services*
- *HI Service—Web Services with related System Interface Specifications*
- *Incorporating the HI Service into your software*

## Information for healthcare providers (individuals and organisations), healthcare individuals and software developers

### HI Service guide

#### User guide

- *Services catalogue—HI Service*



