# Healthcare Identifiers Service Annual Report 2016–17

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## 1. Executive summary

The Healthcare Identifiers Service (the HI Service) is funded by the Australian Government and state and territory governments and is the foundation for the broader digital health system. The HI Service started on 1 July 2010 and operates under the Healthcare Identifiers Act 2010 and the Healthcare Identifiers Regulations 2010.

The Department of Human Services has operated the HI Service under an arrangement with the Australian Digital Health Agency (the Agency) since it was established on 1 July 2016. On this date, the governance arrangements to support the day-to-day running of the HI Service transitioned from the National E-Health Transition Authority (NEHTA) to the Agency.

During the 2016–17 financial year, there was a continued pattern of growth with the average daily transactions delivered by the HI Service exceeding 474 000, up from 317 710 in 2015–16. This growth is a good indicator that the HI Service is a valuable foundation service for digital health in Australia.

I appreciate all of the hard work and support provided by our stakeholders, our colleagues at the Australian Government Department of Health, our colleagues at the Agency and especially our staff.

Caroline Edwards

Chief Executive Medicare

## 2. Introduction

The Department of Human Services (the department) is the Service Operator of the Healthcare Identifiers Service (the HI Service). The department delivers the HI Service on behalf of the Australian Digital Health Agency (the Agency).

The Agency is responsible for improving health outcomes for Australians through the delivery of digital health services and systems. This includes the HI Service.

Healthcare identifiers were introduced on 1 July 2010 as the foundation for digital health in Australia and as a building block for the My Health Record system.

### 2.1. What is the HI Service?

The HI Service is a national system for uniquely identifying individuals and healthcare providers. Healthcare identifiers help ensure individuals and providers can be confident that the right information is associated with the right individual at the point of care.

A healthcare identifier is not a health record; it is a unique 16-digit number that identifies an individual or a healthcare provider. The information the department holds is limited to the demographic information—such as an individual’s name, date of birth and gender—needed to uniquely identify an individual and their healthcare providers. The Healthcare Identifiers Act 2010 (the HI Act) specifies that the identifiers are to be used for healthcare and related management purposes only. There are penalties for misuse.

Including healthcare identifiers in a health record system or patient file does not change how and when healthcare providers share information about individuals. It does, however, provide a much more reliable way of referencing information, particularly in electronic communication and information management systems. This enables healthcare providers to improve the management of an individual’s health information.

As part of the HI Service, every person with an active Medicare enrolment or Department of Veterans’ Affairs (DVA) registration is automatically assigned an Individual Healthcare Identifier (IHI). People who are not eligible for Medicare enrolment or DVA registration—for example, visitors from other countries or international students—can apply for an IHI.

People do not need an IHI to receive healthcare or to claim healthcare benefits such as Medicare or private health insurance rebates. If a healthcare provider is unable to obtain a person’s IHI from the HI Service or the IHI is not available for any reason, treatment will not be refused.

Healthcare identifiers are also allocated to individual healthcare providers and healthcare provider organisations in the following ways:

* Individual healthcare providers are allocated a healthcare identifier by the Australian Health Practitioner Regulation Agency (AHPRA) or by applying directly to the HI Service.
* Healthcare organisations apply directly to the HI Service.

### 2.2. The department’s responsibilities as HI Service Operator

As the HI Service Operator, the department’s responsibilities include:

* assigning healthcare identifiers to individuals, individual healthcare providers and healthcare provider organisations
* working with other bodies that can also assign healthcare identifiers under the HI Act to maintain a single complete record of all assigned healthcare identifiers
* developing and administering robust processes for sharing healthcare identifiers with individual healthcare providers, healthcare provider organisations and contracted service providers
* disclosing healthcare identifiers to individual healthcare providers and healthcare provider organisations so that healthcare identifiers can be used in the delivery of health services to the Australian community. Healthcare identifiers are also disclosed to businesses that healthcare provider organisations engage to help them manage health information. These businesses are typically information technology (IT) firms and are referred to in the HI Act as ‘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, their professional and business details are published in the Healthcare Provider Directory. Other individual healthcare providers and healthcare provider organisations can then access these details
* disclosing healthcare identifiers 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 when the HI Service Operator receives requests for information and through material published on the HI Service webpages
* providing reports to the Agency about the activities, finances and operations of the HI Service.

### 2.3. Operating framework for the HI Service

The HI Service is funded by the Australian Government and state and territory governments. It is part of the broader digital health system designed to support other digital health initiatives in Australia.

The HI Act and Healthcare Identifiers Regulations 2010 establish the framework and rules for the HI Service. There were no amendments to the HI Act and Regulations in 2016–17.

On 1 July 2016, under the Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016, the governance arrangements for the HI Service transitioned from the National E-Health Transition Authority (NEHTA) to the Agency. Consequently, the operational agreement, previously managed between the department and NEHTA, is now managed between the department and the Agency. The agreement outlines the technical and process requirements to support the day-to-day running of the HI Service.

### 2.4. Year in review—a summary

During 2016–17, in its role as the HI Service Operator, the department continued to allocate healthcare identifiers for individuals, individual healthcare providers and healthcare provider organisations. This included:

* assigning 597 008 healthcare identifiers to individuals
* collecting or assigning 37 527 healthcare identifiers to individual healthcare providers
* assigning 943 healthcare identifiers to healthcare provider organisations
* allocating 4 registration numbers to contracted service providers
* publishing 570 entries in the Healthcare Provider Directory for consenting healthcare providers
* publishing 817 entries in the Healthcare Provider Directory for healthcare organisations.

In 2016–17, the department responded to enquiries from individuals and healthcare providers by phone:

* Enquiries from individuals included requests for their healthcare identifiers. Individuals can be given their identifier over the phone after they pass a security check.
* Enquiries from healthcare providers were mostly related to digital health and registrations with the HI Service.

Table 1: Telephone enquiries to the HI Service Operator

|  | 2015–16 | 2016–17 | % change since 2015–16 |
| --- | --- | --- | --- |
| Telephone enquiries to the HI Service Operator | 8 789 | 14 642 | +66.6% |

The department received and responded to two complaints about the HI Service during 2016–17.

During the year, the department also worked with the Agency to align HI Service products to the Agency’s new branding requirements. Products rebranded included forms, letters and information packs available for vendors.

## 3. Operation of the HI Service

### 3.1. Assignment of healthcare identifiers

The HI Act defines three types of healthcare identifiers:

* Individual Healthcare Identifier (IHI) number, for individuals receiving healthcare services
* Healthcare Provider Identifier—Individual (HPI–I) number, for healthcare providers involved in providing patient care
* Healthcare Provider Identifier—Organisation (HPI–O) number, for organisations delivering healthcare, such as hospitals or general practices.

#### Individuals

During the 2016–17 financial year, the HI Service maintained the IHIs allocated since 1 July 2010 and continued to assign IHIs to people who enrol in Medicare or register with DVA. People who visit or reside in Australia, and who are not eligible to claim Medicare benefits or register with DVA, have also been assigned IHIs at their request. The total number of IHIs assigned to individuals between 1 July 2010 and 30 June 2017 was 27 669 321.

Table 2: **Assigned IHIs**

|  | 2015–16 | 2016–17 | % change since 2015–16 |
| --- | --- | --- | --- |
|  Assigned IHIs  | 591 597 | 597 008 | +0.9% |

#### Individual healthcare providers

Under section 9 of the HI Act, the HI Service Operator and national registration authorities (which are prescribed in the Regulations) are authorised to assign healthcare identifiers to individual healthcare providers. During 2016–17, AHPRA was the only national registration authority that assigned HPI–Is.

In 2010, AHPRA was allocated 5.1 million HPI–I numbers by the HI Service to assign to its registrants. The HI Service allocated these numbers for AHPRA’s use only.

Individual healthcare providers whose profession is not covered by AHPRA can apply directly to the HI Service Operator for a healthcare identifier. In addition to evidence of identification documents, they must also provide evidence that they are a member of a professional association relating to the healthcare they provide. The registration form is available via the Health Professionals page at humanservices.gov.au

The total number of HPI–Is assigned to healthcare providers between 1 July 2010 and 30 June 2017 was 790 643.

Table 3: **Assigned HPI–Is**

|  | 2015–16 | 2016–17 | % change since 2015–16 |
| --- | --- | --- | --- |
| Assigned HPI–Is  | 35 806 | 37 527 | +4.8% |

#### Healthcare provider organisations

To obtain a HPI–O, healthcare provider organisations apply directly to the HI Service Operator by completing a registration form. The registration form is available via the Health Professionals page at humanservices.gov.au

When an organisation has been assigned a HPI–O (referred to as a ‘seed HPI–O’), nominated staff in the organisation can create a hierarchy of HPI–Os (referred to as ‘network HPI–Os’) to identify important business areas or functions in the organisation’s structure.

The total number of HPI–Os assigned to healthcare provider organisations between 1 July 2010 and 30 June 2017 was 10 840.

Table 4: **Assigned HPI–Os**

|  | 2015–16 | 2016–17 | % change since 2015–16 |
| --- | --- | --- | --- |
| Assigned HPI–Os  | 796 | 943 | +18.5% |

### 3.2. Disclosure of healthcare identifiers for authorised purposes

Under the HI Act, the HI Service Operator is authorised to disclose healthcare identifiers to:

* healthcare providers—so they can communicate or manage a patient’s health information as part of their healthcare
* individuals who ask for their healthcare identifier
* registration authorities—for the specific purpose of assigning healthcare identifiers to their registrants
* entities that issue security credentials—for the specific purpose of authenticating a healthcare provider’s identity in electronic transmissions.

#### Disclosure of healthcare identifiers for individuals

The HI Service Operator gives IHIs to individuals and healthcare providers through a number of channels:

* Individuals can request their IHI by telephone and through the department’s service centres. Information is provided once an individual has passed a security check.
* Healthcare providers and organisations can search for healthcare identifiers using the web service channel. Registered providers must have appropriate software and approved authentication technology to access healthcare identifiers via the web service channel.

Each time the HI Service discloses an IHI it is classed as a disclosure under the HI Act. The number of disclosures does not represent the number of individuals who have an IHI or the number of times a person has seen a healthcare provider. For example, a healthcare provider may search for an IHI each time an individual patient has an appointment, resulting in multiple disclosures over time for one person.

Table 5: **Disclosed IHIs**

|  | 2015–16 | 2016–17 | % change since 2015–16 |
| --- | --- | --- | --- |
| IHIs disclosed by telephone and service centres | 10 340 | 5 769 | -44.2% |
| IHIs disclosed through web services | 116 184 186 | 173 233 533 | +49.1% |

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

In 2016–17, the HI Service Operator disclosed 115 270 HPI–Is and HPI–Os. The disclosures were made in line with legislative requirements to entities that authenticate healthcare providers and organisations in digital health transmissions.

Table 6: **Disclosed HPI–Is and HPI–Os**

|  | 2015–16 | 2016–17 | % change since 2015–16 |
| --- | --- | --- | --- |
| Disclosed HPI–Is and HPI–Os | 97 983 | 115 270 | +17.6% |

### 3.3. Healthcare Provider Directory

Under section 31 of the HI Act, the HI Service Operator maintains the Healthcare Provider Directory. Healthcare providers must give consent for their details to be published in the directory.

Healthcare providers can use the directory to search and find other healthcare providers registered in the HI Service. The aim of the directory is to facilitate communication between healthcare providers by providing a reliable source of healthcare providers’ contact information.

The number of healthcare providers who consented to have their details published in the directory continued to increase in 2016–17. A total of 1 387 entries were published. This brings the total number of entries published in the directory between 1 July 2010 and 30 June 2017 to 23 100.

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

The HI Service operates with well-defined policies, procedures and systems.

#### Policies and processes

HI Service policies and procedures are available for staff who manage general public and healthcare provider enquiries.

The department publishes information about the Healthcare Identifiers Service for the general public and healthcare providers at humanservices.gov.au

Information about what healthcare identifiers are, how they are used, and the role of the HI Service Operator (as supported in legislation), is available for the general public.

Healthcare providers can obtain information including:

* an overview of the HI Service, including the HI Service roles and responsibilities
* the registration processes for individual healthcare providers and healthcare provider organisations
* forms for registering and updating details as well as links to other useful information.

Policies and procedures are reviewed every six months or when a change needs to be made, whichever occurs first.

The department worked with the Agency to find ways to simplify how healthcare providers and organisations register with the HI Service while still maintaining confidentiality and security. The department was involved with the design for improving and streamlining the Agency’s existing online registration form for organisations. Work commenced into how the department’s Provider Digital Access (PRODA) could be leveraged to allow online verification identity.

#### Maintaining healthcare identifier information systems

The HI Service Operator maintains healthcare identifier information systems as detailed in Table 7. Health information is not stored in the HI Service systems.

Table 7: **Healthcare identifier information systems**

| Healthcare Identifier Systems  | Demographic Details  | Addresses | Speciality Details | Organisation Names | Services Provided |
| --- | --- | --- | --- | --- | --- |
| Systems containing IHI information |  |  |  |  |  |
| Systems containing HPI–I information |  |  |  |  |  |
| Systems containing HPI–O information |  (of organisation officers) |  (of organisation officers) |  |  |  |

Organisation officers include Responsible Officer (RO) and Organisation Maintenance Officer (OMO)

#### Updates to the healthcare identifier information systems

Regular system maintenance was undertaken during 2016–17. Software vendors and the Agency were informed in advance of all scheduled maintenance.

#### Managing business continuity plans

The HI Service Operator is also responsible for managing disaster recovery and business continuity for the HI Service. The HI Service is included in the department’s Business Continuity Plan. The plan is regularly reviewed and updated as part of the annual business planning cycle and as required.

In 2016–17, the department did a detailed review of the Business Continuity Plan and developed a Catastrophic Event—Business Continuity Procedure for the HI Service.

### 3.5. Collaboration to deliver digital health initiatives

In 2016–17, the department worked with the Agency to improve the HI Service and support the uptake of the My Health Record program. This is in line with the Agency’s draft version of a new national digital health strategy. The work included the investigation of opportunities for the implementation of an online mechanism to simplify the registration process for healthcare provider organisations.

In its role as HI Service Operator, the department also continued to work and securely exchange data with AHPRA.

### 3.6. Interactions with software vendors and contracted service providers

As a foundation element of digital health, the HI Service provides the basis for efficiently and securely managing patient health information for healthcare providers. This means the organisations developing software for the health sector, and those providing IT services to healthcare providers, are key partners in the development of an effective HI Service.

The department also has representation at digital health forums. These forums bring together leading government policy makers, organisations that develop industry standards, and representatives from the medical software industry who share an interest in the quality, safety and interoperability of health information systems in Australia.

#### Software vendors

The department continued to support software vendors to:

* facilitate the development of their products
* work with medical software industry stakeholder groups to identify and resolve emerging issues.

Updates to specifications are published in the HI Service Change Guide. This guide is available via the Health Professionals page at humanservices.gov.au

To connect with the HI Service, software vendors are required to accept the HI Service licence agreement for materials before they develop and test their software products. This involves:

* completing and passing all mandatory conformance requirements of the compliance, conformance and accreditation (CCA) process and signing 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
* completing the HI Service Operator’s testing process and receiving 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 the department’s systems.

In 2016–17, there were 82 registrations of software vendors developing compatible software for the HI Service, bringing the total number of registrations between 1 July 2010 and 30 June 2017 to 348.

#### Contracted service providers

Contracted service providers provide ICT services relating to the communication or management of health information. These services are provided under contract to healthcare provider organisations.

A contracted service provider must apply directly to the HI Service Operator to be allocated a unique HI Service registration number. Once the contracted service provider is registered, a healthcare provider organisation can link to them in the HI Service. When linked, the contracted service provider can access the HI Service on behalf of the healthcare provider organisation.

## 4. Service levels

In 2016–17, the department provided services, as the HI Service Operator, in line with the service level agreement in place with the Agency.

The department reports monthly to the Agency against seven categories, under which there are 17 service levels and further sub-requirements.

The seven main categories are:

1. HI application
2. data quality
3. customer management and support
4. processes, applications, data and infrastructure
5. identity management, authentication and support
6. security policies and procedures
7. the HI Service desk.

During 2016–17, the HI Service Operator met 15 of the 17 service levels. The call centre responsiveness service level, managed under the customer management and support category, and the system response service level, managed under the HI application category, were not met.

#### Call centre responsiveness

The service level for call centre responsiveness is that 90 per cent or more of calls are answered within 30 seconds. The result for this service level was 85 per cent. The department will endeavour to improve the performance of this service level in 2017–18.

#### System response

Two sub-requirements under the system response service level require 100 per cent system response to meet this service level. The first sub-requirement is calculated against all web service transactions, except IHI search, and measures the average number of 15 minute periods with an 8 second response time each month. The department met this service level.

The second sub-requirement is calculated against the IHI search web service transactions and measures the average number of 15 minute periods with a 4 second response time each month. During June 2017, the HI Service experienced service degradations resulting in this service level not being met. The cause of each degradation was identified and rectified. The June 2017 system response service level was 99 per cent.

## 5. Communication activities to support the HI Service

Information about healthcare identifiers, their use and the role of the HI Service Operator is published at humanservices.gov.au. The information is for the general public, healthcare providers and organisations. Content is updated as needed and forms and supporting information are provided.

The webpages also include guides, contact details and HI licensed material for software vendors.

During 2016–17, the department continued to work with stakeholders, through both industry and government forums, to provide information about the HI Service and to support its use by healthcare providers.

In addition to maintaining HI Service material, the HI Service Operator provided input into digital health communication material published by the Agency.

In 2016–17, HI Service material was updated to replace references to NEHTA and Department of Health, to the Agency, where appropriate.

## 6. Financial statements

During 2016–17, the HI Service Operator was funded through the Agency.

The actual expenditure for 2016–17 was $11.50 million—an increase of $0.66 million on 2015–16 expenses of $10.84 million inclusive of system enhancements.

**Table 8: Healthcare Identifiers Service—Financial statement for the year ending 30 June 2017**

|  | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | 2016–17 |
| --- | --- | --- | --- | --- | --- |
|  | Jul–Sep | Oct–Dec | Jan–Mar | Apr–Jun | Total |
|  |  $'000  |  $'000  |  $'000  |  $'000  |  $'000  |
| Income |
| Operational Revenue | 2,432 | 2,458 | 3,484  | 3,130  | 11,504 |
| Total Income | 2,432  | 2,458 | 3,484  | 3,130  | 11,504 |
| Expenses |
| HI Service Program Management |
| Staff Costs | 700 | 707 | 642  | 714  | 2,763 |
| Contractors | –  | –  | – | –  | – |
| Staff Related Costs | –  | 2 | – | –  | 2 |
| Travel | –  | – | –  | – | –  |
| Other Operational Costs | –  | –  | –  | –  | –  |
|  | 700  | 709  | 642  | 714  | 2,765 |
| HI Service Help Desk |
| Staff Costs | 232  | 225  | 291  | 282  | 1030 |
| Contractors | – | –  | –  | –  | –  |
| Staff Related Costs | – | –  | –  | 1  | – |
| Other Operational Costs | 21 | 8 | 8 | 8 | 45 |
|  | 253  | 233  | 299  | 290  | 1,075 |
| Privacy, Legal & SLA Reporting |
| Staff Costs | 35  | 30  | 45  | 40  | 150 |
| Contractors | – | –  | –  | –  | –  |
| Travel | – | –  | –  | –  | –  |
|  | 35  | 30  | 45  | 40  | 150 |
| Information Technology |
| Staff Costs | 213  | 394  | 471  | 492  | 1,570  |
| Contractors | 625  | 486  | 1,421  | 987  | 3,519 |
| Staff Related Costs | – | – | – | – | – |
| Travel | –  | – | – | –  | – |
| Computer Hardware & Software | 606  | 606 | 606 | 606 | 2,425 |
|  | 1,444 | 1,486  | 2,498  | 2,086  | 7,514 |
| Total Expenses | 2,432 | 2,458  | 3,484  | 3,130  | 11,504 |
| Operating Surplus/(Deficit) | – | –  | –  | –  | –  |

## 7. Security, privacy and confidentiality

The department is bound by the Privacy Act 1988 (the Privacy Act) which regulates the way it handles and discloses personal information. In addition, the department must comply with a range of secrecy provisions contained in the legislation that governs the programs delivered.

In order to meet these obligations, the department has strict controls and policies in place for accessing and disclosing personal information for all programs. There are appropriate penalties, including dismissal of staff, for unauthorised access.

#### Privacy management procedures

The department is committed to proactively protecting all personal information held. Privacy management procedures include:

* operating by the department’s operational Privacy Policy, endorsed by the Secretary, Department of Human Services
* providing induction training for new staff and annual online refresher training
* making privacy impact assessments when personal information is being collected, used or disclosed for new departmental initiatives
* carrying out proactive audits of access to personal information to identify any unauthorised access by departmental staff
* giving high-quality, up-to-date privacy advice to business units to encourage staff to identify and resolve any privacy issues that arise
* investigating complaints and staff reports of possible privacy breaches to make sure action is taken to address any ongoing risks
* using specific processes for releasing personal information to other agencies or individuals (personal information is only disclosed in line with legislative requirements)
* providing messages to all staff to confirm their obligations to uphold privacy standards.

All information the HI Service Operator collects must be managed in accordance with the Privacy Act. The HI Act also imposes a duty of confidentiality on the HI Service Operator and others that restricts the use or disclosure of healthcare identifier information. It is a breach of the HI Act for the HI Service Operator to use or disclose certain information except as authorised by the HI Act or another law. A breach of the HI Act relating to an individual is also treated as a breach of the Privacy Act, which means that the Office of the Australian Information Commissioner may investigate.

#### Dealing with breaches

People who believe their identifier has been inappropriately accessed can contact the HI Service Operator for help. Alternatively, they can contact their healthcare provider. An individual can also ask the Office of the Australian Information Commissioner to undertake an investigation. The HI Service has a full audit log that tracks and identifies all interactions with the HI Service. This log will be used during investigations to identify potential inappropriate access.

There have been no privacy or confidentiality breaches by staff in relation to the HI Service since the department commenced as the HI Service Operator on 1 July 2010.

#### Online authentication

Security, privacy and confidentiality of information are protected by using Public Key Infrastructure (PKI) certificates for electronic transmissions between the HI Service, healthcare providers and the My Health Record system. The PKI certificate restricts a healthcare provider’s access to the HI Service to functions that relate to the healthcare provider’s role. PKI certificates are a set of procedures and technology that provide security and confidentiality for electronic business. They encrypt and secure information and authenticate both the sender and receiver.

The Digital Transformation Agency has updated the framework for issuing PKI certificates. The department ensures that HI Service registration requirements align with the framework.

Health professionals can also use Health Professional Online Services (HPOS) to do administrative functions in the HI Service. Health professionals can access HPOS using PKI certificates or the department’s Provider Digital Access (PRODA) program.

## 8. Audits

There were no audits of the HI Service Operator conducted during 2016–17.

## Appendix A—HI Service information available at humanservices.gov.au

|  | For individuals | For healthcare providers and contracted service providers | For software vendors |
| --- | --- | --- | --- |
| HI Service Operator’s webpages |  |  |  |
| Information about the HI Service |  |  |  |
| Contact information |  |  |  |
| Latest release information |  |  |  |
| Licence Agreement—use of the Healthcare Identifiers Licensed Material for Notice of Connection |  |  |  |
| HI Service reference guides |  |  |  |
| HPI–O Organisation type classification |  |  |  |
| HPI–I Provider type classification |  |  |  |
| HI Service user guide |  |  |  |
| HI Service—Web services with related system interface specifications |  |  |  |
| HI licensed material |  |  |  |
| HI Service—Developers Guide |  |  |  |
| HI Service—Services Catalogue |  |  |  |
| HI Service—Change Guide |  |  |  |
| HI Service—IHI Searching Guide |  |  |  |
| HI Service—Create Newborn Guide |  |  |  |
| HI Service WSDL Artefacts |  |  |  |
| HI Service System Interface Specifications (SIS) |  |  |  |
| HI Service forms—Individual Healthcare Identifier |  |  |  |
| Application to request a pseudonym IHI |  |  |  |
| Application to create or update an IHI |  |  |  |
| 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 an Organisation Officer’s personal details |  |  |  |
| Application to amend a Healthcare Organisation record |  |  |  |
| Application to deactivate, reactivate or retire a Healthcare Organisation record |  |  |  |
| Healthcare Identifiers Service—Authorised employee register form |  |  |  |
| HI Service forms—healthcare provider individual |  |  |  |
| Application to register a Healthcare Provider |  |  |  |
| Application to amend a Healthcare Provider record |  |  |  |
| HI Service forms—contracted service provider |  |  |  |
| Application to register a Contracted Service Provider organisation record |  |  |  |
| Application to add, replace or remove a Contracted Service Provider officer |  |  |  |
| Application to amend details of a Contracted Service Provider organisation record |  |  |  |
| Application to amend a Contracted Service Provider Officer’s details |  |  |  |
| Application to deactivate or retire a Contracted Service Provider Organisation record |  |  |  |
| HI Service forms—accessing the HI Service with PKI |  |  |  |
| Application to request or link a PKI certificate |  |  |  |
| **My Health Record system forms**HI Service forms have been updated to include My Health Record system sections to reduce duplicating the information healthcare providers and supporting organisations must provide in order to register. |  |  |  |
| Application to register a Seed Organisation |  |  |  |
| Application to register a Contracted Service Provider Organisation record |  |  |  |

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