## Healthcare Identifiers Service Operator Healthcare Identifiers Service Annual Report 2017–18

## Executive summary

The Healthcare Identifiers Service (the HI Service) is a foundation service 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 Australian Government and state and territory governments fund the HI Service through the Australian Digital Health Agency (the Agency). The Department of Human Services (the department) operates the HI Service under an arrangement with the Agency.

During the 2017–18 financial year, the department and the Agency have continued to develop a collaborative and supportive relationship. The department worked with the Agency to improve the HI Service and support the implementation of the Australian Government’s 2017–18 Budget measure, *My Health Record—continuation and expansion*. Together, we have worked to develop improvements for users of the HI Service, including an online registration channel for healthcare organisations.

The pattern of growth for the HI Service continued in 2017–18, with the average daily transactions exceeding 605 000, up from more than 474 000 daily transactions in 2016–17.

I appreciate the continued hard work by our staff to deliver the HI Service and the support provided by our colleagues at the Agency during 2017–18.

**Amanda Cattermole**Chief Executive Medicare

## Introduction

The Department of Human Services (the department), through the Chief Executive Medicare, is the Service Operator of the Healthcare Identifiers Service (the HI Service). The HI Service is delivered by the department under an arrangement with the Australian Digital Health Agency (the Agency).

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

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

### 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, a healthcare provider or a healthcare organisation. The information the department holds is limited to 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.

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 also apply for an IHI.

People do not need an IHI to receive health care 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.

### 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—such as AHPRA—that can also assign healthcare identifiers under the HI Act to maintain a single complete record of all assigned healthcare identifiers
* developing and administering secure 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
* disclosing healthcare identifiers to businesses that healthcare provider organisations engage with to help them manage health information. These businesses are referred to in the HI Act as ‘contracted service providers’
* keeping a record in an audit log each time a healthcare identifier is accessed or retrieved
* maintaining the Healthcare Provider Directory. If a healthcare provider consents, their professional and business details are published in the 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.

### Operating framework for the HI Service

The HI Service 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 established the framework and rules for the HI Service. There were no amendments to the HI Act and Regulations in 2017–18.

The Australian Government and state and territory governments fund the HI Service through the Agency. The operational agreement is 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.

### Year in review—a summary

The pattern of growth for the HI Service continued in 2017–18, with the average daily transactions exceeding 605 000, up from more than 474 000 daily transactions in 2016–17. This growth is also seen in the number of healthcare provider organisations accessing the HI Service, largely arising from targeted education and communication activity by the Agency. The department ensured that the HI Service was able to handle the increased transactions. The department also worked with the Agency to develop improvements for users of the HI Service, including an online registration channel for healthcare organisations.

During 2017–18, the department:

* assigned 565 416 healthcare identifiers to individuals
* collected or assigned 37 723 healthcare identifiers from or to individual healthcare providers
* assigned 2 500 healthcare identifiers to healthcare provider organisations
* allocated 6 registration numbers to contracted service providers
* published 749 entries in the Healthcare Provider Directory for consenting healthcare providers
* published 2 350 entries in the Healthcare Provider Directory for healthcare organisations.

In 2017–18, the department responded to enquiries from individuals and healthcare providers:

* 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 generally related to digital health and registrations with the HI Service.

The department received no complaints about the HI Service during 2017–18.

Table 1: Telephone enquiries to the HI Service Operator

|  | 2016–17 | 2017–18 | % change since 2016–17 |
| --- | --- | --- | --- |
| Telephone enquiries to the HI Service Operator | 14 642 | 12 588 | -14.0%\* |

\*The reduction in telephone enquiries in 2017–18 is attributed to enhanced online IHI search routines introduced in June 2017.

## Operation of the HI Service

### Assignment of healthcare identifiers

The HI Act defines three types of healthcare identifiers:

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

#### Individuals

During the 2017–18 financial year, the HI Service maintained the IHIs allocated since 1 July 2010 and continued to assign IHIs to people enrolling in Medicare or registering 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 2018 is 28 234 737.

#### Table 2: Assigned IHIs

|  |  |  |  |
| --- | --- | --- | --- |
|  | 2016–17 | 2017–18 | % change since 2016–17 |
| Assigned IHIs | 597 008 | 565 416 | -5.3% |

#### 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 2017–18, 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.

The total number of HPI–Is assigned to healthcare providers between 1 July 2010 and 30 June 2018 is 828 366.

#### Table 3: Assigned HPI–Is

|  | 2016–17 | 2017–18 | % change since 2016–17 |
| --- | --- | --- | --- |
| Assigned HPI–Is | 37 527 | 37 723 | +0.5% |

#### Healthcare provider organisations

To obtain a HPI–O, healthcare provider organisations apply directly to the HI Service Operator.

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 2018 is 13 340.

#### Table 4: Assigned HPI–Os

|  |  |  |  |
| --- | --- | --- | --- |
|  | 2016–17 | 2017–18 | % change since 2016–17 |
| Assigned HPI–Os | 943 | 2 500 | +165.1%\* |

\*The increase in the number of assigned HPI-Os is attributed to the Agency’s provider readiness activities to support the national expansion of the My Health Record system in 2018. All healthcare providers and healthcare organisations wishing to participate in the My Health Record system must first be registered with the HI Service.

### 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 own 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

|  |  |  |  |
| --- | --- | --- | --- |
|  | 2016–17 | 2017–18 | % change since 2016–17 |
| IHIs disclosed by telephone and service centres | 5 769 | 1 156 | –79.9% |
| IHIs disclosed through web services | 173 233 533 | 220 971 955 | +27.6%\* |

\*The increase in IHIs disclosed through web services is partly due to the improvements in the HI Service, which has increased the match rates for IHI searches. It is also due to individuals and healthcare providers choosing to conduct their business using secure digital services.

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

In 2017–18, the HI Service Operator disclosed 97 825 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

|  | 2016–17 | 2017–18 | % change since 2016–17 |
| --- | --- | --- | --- |
| Disclosed HPI–Is and HPI–Os | 115 270 | 97 825 | –15.1% |

### Healthcare Provider Directory

Under section 31 of the HI Act, the HI Service Operator maintains the Healthcare Provider Directory. The aim of the directory is to facilitate communication between healthcare providers and organisations by providing a reliable source of contact information.

Healthcare providers must give consent for their contact details to be published in the directory. Healthcare organisations’ business details are automatically published in the directory—no consent is required.

The number of healthcare providers who consented to have their details published in the directory continued to increase in 2017–18. A total of 3 099 entries were published. This brings the total number of entries published in the directory between 1 July 2010 and 30 June 2018 to 26 199.

### 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 HI Service for the general public and healthcare providers at [humanservices.gov.au](http://humanservices.gov.au)

This includes information about what healthcare identifiers are, how they are used, and the role of the HI Service Operator (as supported in legislation).

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
* information 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.

During 2017–18, the department’s HI Service and National Authentication Service for Health (NASH) Public Key Infrastructure (PKI) policies were updated. This aligns them with the Digital Transformation Agency’s Gatekeeper PKI Framework 3.1 for issuing PKI certificates.

#### Healthcare identifier information systems

The HI Service Operator maintains the following systems:

* those that contain IHI information (demographic details and addresses)
* those that contain HPI–I information (demographic details, addresses and specialty details)
* those that contain HPI–O information (organisation names, addresses, services provided and demographic details of the responsible officer and organisation maintenance officer where applicable).

There is no health information stored in the HI Service.

#### 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.

### Collaboration to deliver digital health initiatives

In 2017–18, the department worked with the Agency to improve the HI Service and support the implementation of the Australian Government’s 2017–18 Budget measure, *My Health Record—continuation and expansion*. This included simplifying how healthcare organisations register with the HI Service. A project to automate the existing paper-based registration process was established and most of the work for the project was completed in 2017–18. The design builds on the department’s authentication program, Provider Digital Access (PRODA), for online identity verification.

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

### Interactions with software vendors and contracted service providers

As a foundation element for 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 developing an effective HI Service.

#### Software vendors

The department continued to support software vendors to facilitate the development of their products.

Updates to specifications are published in the HI Service Change Guide. This guide is available at [humanservices.gov.au](http://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 (NOC). The HI Service NOC testing process validates the software’s ability to interact successfully with the HI Service without adversely affecting the department’s systems.

In 2017–18, there were 58 registrations of software vendors developing compatible software for the HI Service. This brings the total number of registrations between 1 July 2010 and 30 June 2018 to 406.

#### 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 applies to the HI Service Operator for 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.

## Service levels

In 2017–18, 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. |

### HI application

In 2017–18, the department met the system availability service level and the system reliability service level under the HI application service category. Two sub-requirements under the system response service level require 100 per cent system response to meet this service level. During 2017–18, the 8-second system response service level was 99.9 per cent and the 4-second system response service level was 99.8 per cent.

### Customer management and support

In 2017–18, the call centre responsiveness sub-requirement was tracked against two performance measures. Against the 30-second response time the result was 84 per cent (against a measure of 90 per cent). Against the department’s measure of ≤2 minutes, the average speed of answer for calls to the HI Service was 31 seconds.

The processing sub-requirement—80 per cent of paper forms processed within 20 business days—was met over the course of 2017–18 with a result of 89.6 per cent. However, following a significant increase in the number of healthcare organisation registrations forms in the fourth quarter of 2017–18, this sub-requirement was not met in April 2018. The department increased staff numbers to handle the continued increase in the number of registration forms and met the sub-requirement in May and June 2018.

### HI service desk

In 2017–18, the department met the quick resolution of high-severity incidents service level under the HI service desk category.

The service level requirements for the HI service desk category are:

* severity 1 incidents: 80 per cent resolved within 4 hours
* severity 2 incidents: 80 per cent resolved within 12 hours
* severity 3 incidents: 80 per cent resolved within 48 hours.

This service level was met over the course of 2017–18. However, in October 2017, one severity 1 incident occurred with the HI Service system. This incident was resolved within 4 hours and 5 minutes.

The HI Service Operator met all other service level requirements in 2017–18.

## 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](http://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 Service licensed material for software vendors.

During 2017–18 the department reviewed [humanservices.gov.au](http://humanservices.gov.au) to improve the overall user experience. This included updates to webpages containing information about the HI Service. The ‘new look’ humanservices.gov.au was launched on 27 August 2017.

## Financial statements

During 2017–18, the HI Service Operator was funded through the Agency. The operational expenditure for 2017–18 was $9.13 million—a decrease of $2.38 million on the 2016–17 expenses of $11.50 million. There were no additional expenses for system enhancements this year.

#### Table 7: Healthcare Identifiers Service—Financial statement for the year ending 30 June 2018

|  | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | 2017–18 |
| --- | --- | --- | --- | --- | --- |
|  | Jul–Sep | Oct–Dec | Jan–Mar | Apr–Jun | Total |
|  | $'000 | $'000 | $'000 | $'000 | $'000 |
| Income |  |  |  |  |  |
| Operational Revenue | 2,293 | 2,178 | 2,149 | 2,506 | 9,126 |
| Total Income | 2,293 | 2,178 | 2,149 | 2,506 | 9,126 |
| Expenses |  |  |  |  |  |
| **HI Service Program Management** |  |  |  |  |  |
| Staff Costs | 668 | 702 | 588 | 611 | 2,569 |
| Contractors | – | – | – | – | – |
| Staff-Related Costs | – | – | 3 | 2 | 5 |
| Travel | 2 | – | 1 | 1 | 4 |
| Other Operational Costs | – | – | – | – | – |
|  | 670 | 702 | 592 | 614 | 2,578 |
| **HI Service Help Desk** |  |  |  |  |  |
| Staff Costs | 279 | 233 | 276 | 406 | 1,194 |
| Contractors | – | – | – | – | – |
| Staff Related Costs | – | – | – | – | – |
| Other Operational Costs | 7 | 8 | 10 | 9 | 34 |
|  | 286 | 241 | 286 | 415 | 1,228 |
| **Privacy, Legal & SLA Reporting** |  |  |  |  |  |
| Staff Costs | 44 | 36 | 52 | 44 | 176 |
| Contractors | – | – | – | – | – |
| Travel | – | – | – | – | – |
|  | 44 | 36 | 52 | 44 | 176 |
| **Information Technology** |  |  |  |  |  |
| Staff Costs | 227 | 220 | 268 | 307 | 1,022 |
| Contractors | 460 | 309 | 313 | 488 | 1,570 |
| Staff Related Costs | – | – | – | – | – |
| Travel | – | – | – | – | – |
| Computer Hardware & Software | 606 | 670 | 638 | 638 | 2,552 |
|  | 1,293 | 1,199 | 1,219 | 1,433 | 5,144 |
| Total Expenses | 2,293 | 2,178 | 2,149 | 2,506 | 9,126 |
| Operating Surplus/(Deficit) | – | – | – | – | – |

## Security, privacy and confidentiality

The department is bound by the *Privacy Act 1988* (the Privacy Act) which regulates the way it collects, handles and discloses personal information. In addition, the department must comply with a range of secrecy provisions 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:

* maintaining a Privacy Management Plan that identifies specific and measurable privacy goals and targets
* requiring all new staff to do induction privacy training, sign a declaration for handling personal information and abide by the undertaking in this document
* requiring all staff to do annual privacy refresher training, acknowledge the declaration for handling personal information and abide by the undertaking in this document
* undertaking privacy impact assessments for any project or activity that involves a significant change to the department’s management of the personal information involved, or that might have a significant impact on the privacy of individuals
* carrying out proactive audits of access to personal information to identify any unauthorised access by departmental staff
* providing 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 personal information the HI Service Operator collects must be managed in accordance with the Privacy Act. The HI Act also imposes obligations on the HI Service Operator and others that restrict the collection, use or disclosure of healthcare identifiers and identifying information. It is an offence for a person to collect, use or disclose certain healthcare identifiers or identifying 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 (OAIC) may investigate.

#### Dealing with breaches

People who believe their healthcare identifier or identifying information 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 OAIC to investigate. 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.

On 22 February 2018, the Notifiable Data Breaches Scheme under the Privacy Act came into effect. Under the Scheme the department is required to notify affected individuals and the Australian Information Commissioner where there is unauthorised access, unauthorised disclosure or loss of personal information likely to result in serious harm to the individual.

There have been no notifiable data breaches reported by the department in relation to the HI Service since the Notifiable Data Breach Scheme commenced.

### Online authentication

Security, privacy and confidentiality of information is protected by using 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 a framework in place (Gatekeeper PKI Framework 3.1) outlining the requirements for issuing PKI certificates. The department ensures the HI Service registration requirements align with this framework.

## Audits

There were no audits of the HI Service Operator during 2017–18.

## 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 |  |  |  |
| Licence Agreement—use of the Healthcare Identifiers Licensed Material for Notice of Connection |  |  |  |
| Healthcare Organisation Type Reference Guide |  |  |  |
| Healthcare Organisation type classification |  |  |  |
| Healthcare Provider type classification |  |  |  |
| HI Service user guide |  |  |  |
| 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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