Healthcare Identifiers Service

Annual Report 2022–23









Acknowledgement of Country

Services Australia acknowledges the Traditional Custodians of the lands we live on. We pay our respects to all Elders, past and present, of all Aboriginal and Torres Strait Islander nations.



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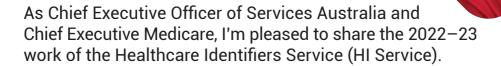
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Chief Executive Officer's Introduction



After a focus in previous years on supporting the Australian Government's COVID-19 response and vaccine roll out, in 2022–23 the HI Service focused on service delivery and improvement opportunities.

The demand for digital health services continues to increase. As a foundational service for digital health in Australia, we're making sure the HI Service is a high-quality healthcare service in an ecosystem of modern connected care.

We've worked in partnership with the Department of Health and Aged Care and the Australian Digital Health Agency on activities to enable a safe, fit for purpose, scalable and flexible service.

There is great growth potential for healthcare identifiers and the HI Service. Therefore, I look forward to delivering improvements in line with the Australian Digital Health Agency's National Healthcare Interoperability Plan. This plan will guide policy, systems, as well as education material updates, and make sure the HI Service continues to meet the needs of current and emerging digital health technologies.

I extend my gratitude to HI Service staff who work hard to provide simple and helpful services, and to our partners who collaborate with us on modernising these services for customers.

Services Australia is proud to operate the HI Service and in accordance with the *Healthcare Identifiers Act 2010*, I present the 2022–23 HI Service Annual Report.

Rebecca Skinner PSM

Chief Executive Medicare Chief Executive Officer Services Australia

Introduction

Services Australia administers the Healthcare Identifiers Service (HI Service) on behalf of the Australian Government and state and territory governments. We deliver it under an agreement with the Australian Digital Health Agency (ADHA).

The *Healthcare Identifiers Act 2010* (HI Act) and Healthcare Identifiers Regulations 2020 set the framework and rules for the HI Service.

This annual report captures the details of our activities, finances and operations for 2022–23.

ABOUT THE HI SERVICE

The HI Service is a national system for identifying people, healthcare providers and healthcare organisations. It's a foundational service for digital health in Australia and ensures health systems match information with the right patient and provider at the point of care. The best health systems in the world use a single patient identifier and the HI Service provides that identifier for people in Australia.

The HI Service assigns people, healthcare providers and healthcare organisations a unique 16-digit number. This allows electronic systems across the national healthcare system to identify them correctly.

People are assigned a healthcare identifier when they enrol in Medicare. People who aren't eligible for Medicare can register for a healthcare identifier online or submit a paper form.

Information linked to a healthcare identifier is limited to demographic details such as name, date of birth and gender. The identifier doesn't contain healthcare information.

Healthcare providers are assigned a healthcare identifier by:

- the Australian Health Practitioner Regulation Agency (Ahpra) on behalf of the HI Service
- applying directly to the HI Service if they're not registered by one of the national boards supported by Ahpra.

Healthcare organisations can request a healthcare identifier by applying directly to the HI Service.

OUR RESPONSIBILITIES AS THE HI SERVICE OPERATOR

As the HI Service Operator, our responsibilities are to:

- assign healthcare identifiers to people, healthcare providers and healthcare organisations
- assist people who aren't eligible for Medicare to link and use the Individual Healthcare Identifier (IHI) Service in myGov
- work with Ahpra to maintain a single, complete record of provider healthcare identifiers
- administer secure processes for sharing healthcare identifiers with healthcare providers, healthcare organisations and contracted service providers
- disclose healthcare identifiers to contracted service providers that help manage health information for healthcare organisations
- disclose healthcare identifiers to healthcare providers and healthcare organisations
- · keep a log of every time a healthcare identifier is accessed or retrieved
- maintain the Healthcare Provider Directory (HPD)
- · share information with key stakeholders about the HI Service
- provide ADHA with reports about the finances and operations of the HI Service
- supply ADHA with data and analytical information to help identify areas for service improvement for our users.

The year in review

ACTIVITIES AND IMPROVEMENTS

Activities and improvements to the HI Service in 2022–23 focused on continuing to ensure the service is fit for purpose, scalable and flexible enough to meet the needs of current and emerging digital health technologies.



The HI Service supports initiatives outlined in a number of strategic plans, reports and projects. These include:









The HI Service provides the common identifiers needed to link health information, programs and services for customers, their healthcare providers and healthcare organisations.

Services Australia has been working in partnership with the Department of Health and Aged Care (the department) and ADHA on a range of short and long-term activities.

These activities include collaborating with the:



Department on the Healthcare Identifiers Framework Project.

The project's key objectives are to align the HI Act and the HI Service to allow use of healthcare identifiers across health, aged care and disability sectors. This will enable the delivery of safe, high-quality healthcare services in a connected care environment.



ADHA on deliverables under the National Healthcare Interoperability Plan.

The Plan outlines activities to update policies, systems and education material to make sure the HI Service can support strategic plan initiatives.

During 2022–23, Services Australia implemented changes to support the operation of the HI Service by:



supporting customers using Medicare Public Key Infrastructure (PKI) certificates to upgrade to National Authentication Service for Health (NASH) certificates for access to the HI Service



supporting customers using the NASH PKI certificates transition from SHA-1 to SHA-2, providing time for customers to test and implement a staged approach



supporting the integration of Provider Connect Australia, administered by ADHA, to authenticate using PRODA credentials



continuing to support the life event of birth of a child for earlier connectivity to digital health services



continuing to support people with their access to Medicare Entitlement Statements, secure messaging and electronic prescriptions.

ASSIGNMENT OF HEALTHCARE IDENTIFIERS

The HI Act defines 3 types of healthcare identifiers:





Healthcare Provider Identifier-Individual (HPI-I)

- for individual healthcare providers



Healthcare Provider Identifier-Organisation (HPI-0)

- for healthcare organisations.

Organisations with an HPI-O can create a hierarchy or network of HPI-Os according to their requirements. For example, multiple specialised business areas in a healthcare organisation.

In 2022–23, there was steady growth in active identifiers and increased connections using the HI Service. During the year we:



assigned 536,425 healthcare identifiers to people



collected or assigned 55,511 healthcare identifiers for healthcare providers



assigned 3,230 healthcare identifiers to healthcare organisations



assigned 16 registration numbers to contracted service providers



published 398 entries in the HPD for consenting healthcare providers



published 3,040 entries in the HPD for healthcare organisations



responded to 33,628 enquiries from people and healthcare providers. Enquiries included requests for healthcare identifiers and questions about registering with the HI Service.

Table 1: Number of identifiers assigned

Identifiers	2021-22	2022-23	% change since 2021-22	1 July 2010 to 30 June 2023
Assigned IHIs	1,284,540	536,425	-58.24%	31,606,835
Assigned HPI-Is	48,011	55,511	22.48%	1,085,533
Assigned HPI-Os	3,023	3,230	15.60%	27,680

Refer to Table 2 for the change in assigned identifiers for people who aren't eligible for Medicare.

Table 2: Number of IHIs assigned to people who aren't eligible for Medicare

IHIs	2021-22	2022-23	% change since 2021-22	1 July 2010 to 30 June 2023
Assigned IHIs	844,970	222,139	-73.71%	970,468

This is a subset of the number of identifiers assigned in Table 1.

During 2021–22, a large number of people not eligible for Medicare were assigned IHIs as a requirement for proof of COVID-19 vaccinations.

DISCLOSURE OF HEALTHCARE IDENTIFIERS FOR AUTHORISED PURPOSES

Under the HI Act, we're authorised to disclose healthcare identifiers to:

- healthcare providers to communicate and manage patient information as part of their healthcare
- people who want to know their own healthcare identifier
- registration authorities to assign healthcare identifiers to their registrants
- entities that issue security credentials to authenticate a provider's identity in electronic transmissions
- the My Health Record System Operator for the My Health Record system.

DISCLOSURE OF HEALTHCARE IDENTIFIERS FOR INDIVIDUALS

Registered healthcare providers and healthcare organisations access their patient's IHI when their health system software interacts with the HI Service. This interaction occurs using appropriate software and approved authentication technology through an authorised web service channel.

People can also access their own IHI:

- by contacting us
- through their Medicare Online Account in myGov or Express Plus Medicare mobile app (for Medicare-enrolled people)
- using the IHI Service in myGov (for people not eligible for Medicare).

Each time the HI Service discloses an IHI, it counts as a disclosure under the HI Act. A healthcare provider may search for their patient's IHI each time they have an appointment. Each search counts as a disclosure.

Table 3: Number of IHIs disclosed

IHI disclosures	2021–22	2022-23	% change since 2021-22
IHIs disclosed by telephone and service centres	91,779	4,666	-94.92%
IHIs disclosed through web services	454,459,036	511,074,278	12.46%

During 2021–22, an increased number of IHIs were disclosed through telephony and service centres due to the impact of COVID-19 and service registrations. The 2022–23 IHI disclosures are now in line with population growth.

DISCLOSURE OF HEALTHCARE IDENTIFIERS FOR HEALTHCARE PROVIDERS AND ORGANISATIONS

In 2022–23, we disclosed 909,901 HPI-Is and HPI-Os in accordance with our obligations under the HI Act. We made the disclosures to entities that authenticate healthcare providers and organisations in digital health transmissions.

Table 4: Number of HPI-Is and HPI-Os disclosed

HPI-I and HPI-O disclosures	2021-22	2022-23	% change since 2021-22
HPI-Is and HPI-Os disclosed via web services	1,433,028	909,901	-36.48%

The decrease in disclosure of identifiers for healthcare providers and organisations during 2022–23 corresponded with decreased demand for the HI Service, following the impact of COVID-19.

PROVISION OF HEALTHCARE PROVIDER DIRECTORY

Healthcare providers and healthcare organisations use the HPD to access information about each other.

During 2022–23, the number of published healthcare provider and organisation details increased by 3,438. This brought the total number of entries published since 1 July 2010 to 44,682.

POLICIES, PROCESSES AND SYSTEMS USED TO OPERATE THE HI SERVICE

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

POLICIES AND PROCESSES

HI Service operational policies and procedures are available for staff who manage enquiries from people and healthcare providers. We review these documents every 6 months or when changes are required, whichever occurs first.

HEALTHCARE IDENTIFIER INFORMATION SYSTEMS

We maintain systems that contain:

- IHI information demographic details and addresses
- HPI-I information demographic details, contact details and field of practice
- HPI-O information organisation names, contact details and services provided.
 We also capture demographic details of the responsible officer and organisation maintenance officer where applicable.

No health information is stored in the HI Service.

MANAGING BUSINESS CONTINUITY PLANS

We conduct annual business continuity and disaster recovery planning as part of our program assurance responsibilities. During 2022–23, we reviewed and adapted our plans to prioritise our critical functions. This allowed us to be responsive and maintain our essential services throughout the COVID-19 pandemic.

INTERACTIONS WITH SOFTWARE DEVELOPERS AND CONTRACTED SERVICE PROVIDERS

Throughout 2022–23, we continued to interact with software developers and contracted service providers.

SOFTWARE DEVELOPERS

Software developers build practice management software and patient administration systems for healthcare providers. We support them in developing software that's also compatible with the HI Service.

In 2022–23, 66 software developers registered to build HI Service compatible software.

There's information for software developers on our website at servicesaustralia.gov.au/hiservicedev

CONTRACTED SERVICE PROVIDERS

Healthcare organisations can engage ICT services to communicate and manage health information.

These ICT services register with us as contracted service providers (CSP). Once registered, a healthcare organisation can link to the CSP in the HI Service. This allows the CSP to access the HI Service on behalf of the healthcare organisation.

In 2022–23, 16 CSPs were registered.

Service level results

The HI Service performance is measured against service levels agreed between Services Australia and the ADHA.

Table 5: Service levels and results 2022-23

Service level description	Target	Result
Platform availability	≥ 99.5%	99.97%
Platform responsiveness (within Services Australia's environment is < 4 seconds)	≥ 99.0%	99.99%
Call centre responsiveness (average speed of answer)	≤ 2 minutes	1 minute 42 seconds
Call abandonment rate	< 10%	5.75%
Online service request (successful validation requests processed within < 5 minutes)	≥ 95%	100%
Online service request – staff intervention (request resolved within 5 business days from submission)	≥ 95%	96.28%
Paper form and mail-out fulfilment (processed within 10 business days of completed application)	≥ 95%	99.46%
Complaints (acknowledged within 2 business days)	≥ 98.0%	100%
Complaints (responded to within 15 business days)	100%	100%
System incident management (resolved within timeframe applicable to the severity level)	≥ 80.0%	100%
Security policy compliance (breach of)	= 0	0
Data source integration – eBusiness Gateway (submissions integrated within 2 business days)	≥ 80%	100%

During 2022–23, we met and exceeded all targets.

IMPROVED INFORMATION TO SUPPORT THE HI SERVICE

We continued communication activities throughout 2022–23 to support the HI Service.

We updated content on our customer IHI webpages to explain how non-Medicare eligible individuals under 14 can get their proof of vaccinations online through My Health Record.

We updated the HI Service Request an Individual Healthcare Identifier or amend an Individual Healthcare Identifier record (MS003) form. We can now amend personal details connected to an IHI record using the form.

In response to feedback from internal and external stakeholders, we restructured the Healthcare Provider Directory by simplifying content and improving navigation. This has enhanced the provider's user experience.

We updated several provider forms and webpages to guide healthcare providers who transitioned from using a NASH SHA-1 certificate to a NASH SHA-2 certificate. This allows them continued secure access to digital health services.

Operating statement

The operating statement for 2022–23 details the amounts invoiced to the ADHA to fund the operation of the HI Service.

Table 6: HI Service operating statement 2022-23

	Qtr 1 Jul-Sep \$'000	Qtr 2 Oct-Dec \$'000	Qtr 3 Jan-Mar \$'000	Qtr 4 Apr-Jun \$'000	2022-23 Total \$'000
Income					
Operational revenue	2,220	2,171	2,826	2,555	9,772
Total income	2,220	2,171	2,826	2,555	9,772
Expenditure					
HI Service Program Mana	gement				
Staff costs	505	694	830	849	2,878
Contractors	18	38	21	2	79
Staff related costs	31	22	25	1	79
Travel	_	_	_	_	_
Other operational costs	65	16	61	1	143
Sub-total	619	769	937	853	3,179
HI Service Delivery					
Staff costs	164	101	129	207	601
Contractors	_	_	_	_	_
Staff related costs	_	_	_	_	_
Travel	_	_	_	_	_
Other operational costs	7	1	7	_	15
Sub-total	171	102	136	207	616
Information Technology					
Staff costs	155	136	433	196	921
Contractors	592	481	637	615	2,324
Staff related costs	_	_	_	_	_
Travel	_	_	_	_	_
Computer hardware and software	683	683	683	683	2,732
Sub-total	1,430	1,300	1,753	1,494	5,977
Total expenditure	2,220	2,171	2,826	2,555	9,772

Security, privacy and confidentiality

The *Privacy Act 1988* (Cth) (the Privacy Act) regulates the way Services Australia collects, handles and discloses personal information. We comply with the secrecy provisions in the legislation governing the programs we deliver.

We have strict controls and policies in place for the access and disclosure of personal information. We apply appropriate penalties for unauthorised access.

ONLINE SECURITY

The HI Service uses online authentication systems to protect the security and privacy of customer information. This includes information transmitted between the HI Service, healthcare providers and the My Health Record system. The HI Service uses the following authentication systems:

- PRODA a 2 step online authentication system used by providers to securely access government online services
- PKI a set of procedures and technology that provides security and confidentiality for electronic business.

PRIVACY MANAGEMENT PROCEDURES

We adhere to policies and procedures to protect all personal information. This includes:

- handling all personal information in accordance with the Privacy Act obligations
- all staff completing annual privacy training
- adhering to our Privacy Policy, Privacy Management Plan, and Privacy Incident and Management Plan
- · reviewing our Data Breach Response Plan annually
- undertaking Privacy Threshold Assessments for all projects that potentially involve handling personal information
- · undertaking Privacy Impact Assessments where required
- investigating all reported privacy incident complaints and suspected data breaches, including notification to the Office of the Australian Information Commissioner (OAIC) where required.

The HI Act also imposes restrictions on the collection, use or disclosure of healthcare identifiers and identifying information. It's an offence for a person or organisation to collect, use or disclose certain healthcare identifiers or identifying information unless authorised by the HI Act or other legislation.

A breach of the HI Act relating to a person is a breach of the Privacy Act. People can make a complaint about possible privacy breaches to the OAIC. They can also contact their healthcare provider or ask the OAIC to investigate.

The agency works with the OAIC to investigate any complaint referred to the agency. We take appropriate action to remediate confirmed privacy breaches and resolve complaints where possible. The OAIC has powers to investigate any suspected breach of privacy and can make a determination, including any orders the OAIC considers appropriate.

DEALING WITH BREACHES

The Notifiable Data Breaches Scheme, under Chapter IIIA of the Privacy Act, came into effect on 22 February 2018.

Under the Scheme, regulated entities, including Services Australia, must notify the OAIC and affected individuals of unauthorised privacy breaches. This includes:

- access to personal information
- disclosure or loss of personal information likely to result in serious harm to the person whose personal information was accessed.

The HI Service keeps a full audit of all system interactions for use in investigations if required.

The HI Service had no notifiable data breaches in 2022–23.

Audits and reviews

There were no audits or reviews of the HI Service during 2022–23.

