# Healthcare Identifiers Service

## Annual Report 2019–20

Services Australia is proud to operate the Healthcare Identifiers Service (HI Service) on behalf of the Australian Government and state and territory governments. Every year the HI Service grows and improves, and this year we recognise its 10th anniversary.

The HI Service is a foundational service for the broader digital health ecosystem in Australia, including the My Health Record system. The value of the HI Service lies in the foundation it provides for the systems in Australia’s health settings, to uniquely identify and verify individuals, healthcare providers and healthcare organisations. Accurate identification in health systems is a fundamental requirement when a transfer of patient care and information occurs between providers and organisations. The best health systems in the world use a single patient identifier. The HI Service enables that single identifier for Australians, helping to ensure our health systems associate information with the right patient and provider at the point of care.

During the 2019–20 financial year, Services Australia was established, and with a clear vision from Government, we’ve begun transforming how we deliver our services to Australians and reorienting service delivery. We’re working with the Commonwealth Department of Health and key stakeholders to explore opportunities to leverage the HI Service as the source for a single health identifier, which can be used with all health programs administered by Services Australia, and possibly more broadly. Although we’re in the early stages, this work has the potential to improve services for our customers, including healthcare providers. We look forward to exploring this next year.

The last 12 months have been a significant time of change and challenge for all Australians. During the national bushfire emergencies and worldwide COVID-19 pandemic, the foundational aspects of the HI Service came to the fore. Implementing Services Australia’s Pandemic Operational Plan, our staff worked to safeguard the availability of the HI Service. Significantly, there was minimal disruption to services that support the My Health Record system during these crises. This allowed healthcare providers to continue to access their patients’ My Health Records, including records of patients who visited medical practitioners and other providers who they would not usually attend.

In the face of these challenges, we’ve continued to achieve the Government’s vision to transform how we deliver services to Australians.

In collaboration with the Australian Digital Health Agency, other notable achievements this year include:

* developing an online registration process for allied healthcare providers
* improving our data analytics skills, allowing us to deliver data quality improvements and efficiencies for healthcare organisations that use the HI Service.

I’d like to thank all our partners for their collaboration to improve services for our customers. I’d especially like to thank our staff, who worked diligently on the HI Service during a most challenging year.

Signed Vanessa Beck

A/g Chief Executive Medicare

# Introduction

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

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

This annual report captures the details of our activities, finances, and operations for the 2019–20 financial year as they relate to the HI Act and regulations.

## About the HI Service

The HI Service is a national system for identifying patients, healthcare providers and healthcare organisations. This service is the foundation of digital health in Australia and a key building block for the My Health Record system.

Through the HI Service, people, healthcare providers and healthcare organisations are assigned a unique 16-digit number that enables them to be correctly identified by electronic systems across our national healthcare system.

Accurate identification is a fundamental requirement whenever patient information or care transfers between providers or organisations. The HI Service ensures providers and patients can be confident that the right information is associated with the right person at the point of care.

People who have an active Medicare enrolment or register with the Department of Veterans’ Affairs (DVA) are automatically assigned a healthcare identifier.

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

Providers and organisations get a healthcare identifier in the following ways:

1. The Australian Health Practitioner Regulation Agency (Ahpra) allocates healthcare identifiers to providers.
2. Providers apply directly to the HI Service if they aren’t registered by one of the national boards supporting Ahpra.
3. Organisations apply directly to the HI Service.

Organisations assigned a HPI–O can create a hierarchy of HPI–Os (referred to as ‘network HPI–Os’) according to the organisation’s requirements. For example, to identify important business areas or functions, or to group healthcare organisations, such as franchises, under the one hierarchy.

## Our responsibilities as HI Service Operator

As the HI Service Operator, our responsibilities are to:

* assign healthcare identifiers to people, healthcare providers and healthcare organisations
* work with Ahpra to maintain a single, complete record of provider-assigned 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
* log each time a healthcare identifier is accessed or retrieved
* maintain the Healthcare Provider Directory
* provide information to key stakeholders about the HI Service
* provide reports to the ADHA about the finances and operations of the HI Service
* provide data and analytical information to the ADHA to identify and encourage better practice for our users.

## The year in review

In 2019–20, there was a steady growth in active identifiers and increased connections using the HI Service. During the year we:

* assigned 520,972 healthcare identifiers to people
* collected or assigned 46,420 healthcare identifiers for healthcare providers
* assigned 1,988 healthcare identifiers to healthcare organisations
* assigned 4 registration numbers to contracted service providers
* published 340 entries in the Healthcare Provider Directory for consenting healthcare providers
* published 1,732 entries in the Healthcare Provider Directory for healthcare organisations
* responded to 13,416 enquiries from people and healthcare providers. Enquiries included requests for healthcare identifiers and questions about registering with the HI Service.

There were no complaints.

# Delivering HI Service initiatives

In addition to the normal operations of the HI Service, we implemented a number of improvements in 2019–20.

We continued to build on a reporting modernisation initiative in collaboration with the ADHA, which aligns with the Government’s mandate to enhance our data capability. This initiative continues to strengthen our use of data to improve customer services and inform decision making. We drew on this improved data surveillance to highlight areas where users could improve their interactions with the HI Service. This has seen fewer errors and less unnecessary transactions. As a result, the average daily transaction volume reduced by 23.53% from 2018–19, to 776,365 in 2019–20.

We worked with the ADHA to establish an online registration channel for allied health professionals. The online channel enables health professionals to register and manage their identifier registration. Importantly, the process is more convenient and faster for users to obtain their unique healthcare identifier.

Together with the ADHA, we demonstrated the new registration channel to peak body associations. The associations who attended the demonstration represented approximately 25,000 allied health professionals. They were strongly in support of the new online process with all providing positive feedback.

In our role as HI Service Operator, we also continued to work with and securely exchange data with Ahpra.

## Assignment of healthcare identifiers

The HI Act defines 3 types of healthcare identifiers. These are assigned to:

* healthcare recipients—we call these Individual Healthcare Identifiers (IHI)
* individual healthcare providers—we call these Healthcare Provider Identifier—Individuals (HPI–I)
* healthcare organisations—we call these Healthcare Provider Identifier—Organisations (HPI–O).

Table 1: Number of identifiers assigned

|  | 2018–19 | 2019–20 | % change since 2018–19 | Total 1 July 2010 to 30 June 2020 |
| --- | --- | --- | --- | --- |
| Assigned IHIs | 568,896 | 520,972 | -8.42% | 29,324,605 |
| Assigned HPI–Is | 61,525 | 46,420 | -24.55% | 936,311 |
| Assigned HPI–Os | 3,586 | 1,988 | -44.56% | 18,914 |

The volume of assigned HPI–Is declined as expected in 2019–20. This followed a significant increase in 2018–19 due to the regulation of paramedicine under the National Registration and Accreditation Scheme. The volume of assigned HPI-Os declined as expected in 2019–20. This followed a significant increase in 2018–19 as part of the ADHA’s take-up strategy for pharmacy registrations.

## Disclosure of healthcare identifiers for authorised purposes

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

* healthcare providers, so they can communicate and manage patient information as part of their healthcare
* people who ask for their own healthcare identifier
* registration authorities, so they can assign healthcare identifiers to their registrants
* entities that issue security credentials, so they can 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 using the authorised web service channel. Appropriate software and approved authentication technology is required to use the web service channel.

People can also access their own IHI number by contacting us.

Each time the HI Service discloses an IHI it counts as a disclosure under the HI Act. The number of disclosures doesn’t represent the number of people who have an IHI. For example, a healthcare provider may search for the same IHI on multiple occasions, such as each time their patient has an appointment.

Table 2: Number of Individual Healthcare Identifiers disclosed

|  | 2018–19 | 2019–20 | % change since 2018–19 |
| --- | --- | --- | --- |
| IHIs disclosed by telephone and service centres | 274 | 166 | -39.42% |
| IHIs disclosed through web services | 370,805,053 | 283,567,251 | -23.53% |

The number of IHIs disclosed declined in 2019–20. This was expected and is driven by improved data surveillance to identify where users could improve their interactions with the HI Service.

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

In 2019–20, we disclosed 557,943 HPI–Is and HPI–Os. In line with the HI Act, we made the disclosures to entities that authenticate healthcare providers and healthcare organisations in digital health transmissions.

Table 3: Number of HPI–Is and HPI–Os disclosed

|  | 2018–19 | 2019–20 | % change since 2018–19 |
| --- | --- | --- | --- |
| HPI–Is and HPI–Os disclosed via web services | 518,662 | 557,943 | +7.57% |

## Provision of the Healthcare Provider Directory

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

During 2019–20, the number of healthcare providers and organisations whose details were published in the directory increased by 2,072, bringing the total number of entries published since 1 July 2010 to 33,795.

## 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 the general public and healthcare providers. We review our policies and procedures every 6 months or when changes are required.

### Healthcare identifier information systems

We maintain systems that contain:

* IHI information (demographic details and addresses)
* HPI–I information (demographic details, addresses and field of practice)
* HPI–O information (organisation names, addresses, services provided and 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

As part of our program assurance responsibilities, every year we undertake business continuity and disaster recovery planning for the HI Service. During 2019–20, under the guidance of the Services Australia Coronavirus Taskforce, we reviewed and adapted our plans to prioritise our critical functions. This action ensured we remained vigilant and well placed to maintain our essential services.

## Interactions with software vendors and contracted service providers

During 2019–20, in collaboration with the ADHA, we used our enhanced data capability to improve the way we work with software vendors and contracted service providers.

### Software vendors

In 2019–20, we continued to engage with software vendors to develop their products for the HI Service.

Software vendors can find information on connecting with the HI Service at servicesaustralia.gov.au/organisations/health-professionals/subjects/healthcare-identifiers-service-software-developers

In 2019–20, 37 software vendors registered to develop compatible software for the HI Service.

### Contracted service providers

Healthcare organisations can engage contracted service providers to provide ICT services to communicate and manage health information.

A contracted service provider applies to us for a unique HI Service registration number. Once registered, a healthcare organisation can link the contracted service provider in the HI Service so they can access the HI Service on behalf of the healthcare organisation.

# Service level results

Performance of the HI Service is measured against service levels agreed between Services Australia and the ADHA.

Table 4: Service levels for 2019–20

| Service level description | Target |
| --- | --- |
| Platform availability | ≥ 99.5% |
| Platform responsiveness (within Services Australia’s environment is < 4 seconds) | ≥ 99% |
| Call centre responsiveness (average speed of answer) | ≤ 2 minutes |
| Call abandonment rate | < 10% |
| Online service request (successful validation requests processed within < 5 minutes) | ≥ 95% |
| Online service request—staff intervention (request resolved within 5 business days from submission) | ≥ 95% |
| Paper form and mail-out fulfilment (processed with 10 business days of completed application) | ≥ 95% |
| Complaints (acknowledged within 2 business days) | ≥ 98% |
| Complaints (responded to within 15 business days) | 100% |
| System incident management (resolved within timeframe applicable to the severity level)  | ≥ 80% |
| Security policy compliance (breach of) | = 0 |
| Data source integration—eBusiness Gateway (submissions integrated within 2 business days) | ≥ 80% |

We report each month to the ADHA on the service level performance. Over the course of the year we met or exceeded the agreed service levels, except in two areas as outlined on the next page.

### Paper form service requests and mail-out fulfilment

The service level for these requests is 95% of applications processed. Processed means either finalised or notifying the applicant of an incomplete application within 10 business days from receipt of an application.

We didn’t meet this service level in November 2019. This was due to:

* low volumes of requests
* training new staff, resulting in a delay to processing.

### Online service request—staff intervention

The service level for this request is 95% resolved within 5 business days from time of submission.

We didn’t meet the service level in October and December 2019. This was due to:

* staff unplanned leave in October
* prioritising support to healthcare providers affected by bushfires in December.

We identified the service levels weren’t met following a retrospective change to the way the service level result was calculated. We addressed this by training additional staff in February 2020.

# Communication activities to support the HI Service

We continued to publish and maintain information about healthcare identifiers for healthcare providers and organisations at servicesaustralia.gov.au

# Operating Statement

The ADHA funds the operation of the HI Service.

Operating statements for the 2019–20 financial year are included on the next page. There were no additional expenses for system enhancements this year.

Table 5: HI Service operating statement 2019–20

|  | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | 2019–20 |
| --- | --- | --- | --- | --- | --- |
|  | Jul–Sep | Oct–Dec | Jan–Mar | Apr–Jun | Total |
|  |  $'000  |  $'000  |  $'000  |  $'000  |  $'000  |
| **Income** |
| Operational Revenue | 2,703  | 3,023  | 3,558  | 3,978  | 13,262  |
| **Total Income** | 2,703  | 3,023  | 3,558  | 3,978  | 13,262  |
| **Expenditure** |
| Program Management |  |  |  |  |   |
| Staff Costs | 294  | 312  | 321  | 332  | 1,259  |
| Contractors | (35)  | 272  | 197  | 150  | 584  |
| Staff Related Costs | – | 1 | – | – | 1 |
| Travel | – |  – | –  | – | – |
| Other Operational Costs | 13  | 13  | 13  | 13  | 52  |
|  | 272  | 598  | 531  | 495  | 1,896  |
| Service Delivery |  |  |  |  |  |
| Staff Costs | 177  | 42  | 228  | 781  | 1,228  |
| Contractors | – | –  | –  | –  | –  |
| Staff Related Costs | – | –  | –  | –  | – |
| Travel | – | – | –  | – | – |
| Other Operational Costs | –  | –  | –  | 41  | 41  |
|  | 177  | 42  | 228  | 822  | 1,269  |
| Information Technology |  |  |  |  |  |
| Staff Costs | 241  | 293  | 327  | 253  | 1,114  |
| Contractors | 901  | 978  | 1,360  | 1,292  | 4,531  |
| Staff Related Costs | – | – | – | – | – |
| Travel | –  | – | – | –  | – |
| Computer Hardware & Software | 784  | 784  | 784  | 784  | 3,136  |
|  | 1,926  | 2,055  | 2,471  | 2,329  | 8,781  |
| Overheads | 328  | 328  | 328  | 328  | 1,312  |
| Total Expenditure | 2,703  | 3,023  | 3,558  | 3,974  | 13,258  |
| Operating Surplus/(Deficit) | – | –  |  –  | 4  | 4  |

# Security, privacy and confidentiality

The Privacy Act 1988 (the Privacy Act) regulates the way Services Australia collects, handles and discloses personal information.

We also comply with the secrecy provisions in the legislation governing the programs we deliver.

We have strict controls and policies in place for access and disclosure of personal information for all programs. We apply appropriate penalties, including staff dismissal, for unauthorised access.

## Online security

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

* Provider Digital Access (PRODA)—a two-step online authentication system used by providers to securely access government online services
* Public Key Infrastructure (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:

* collecting all personal information in accordance with the Privacy Act
* all staff completing privacy training
* maintaining a Privacy Management Plan
* undertaking privacy impact assessments and audits where required
* providing up to date privacy advice
* investigating complaints and possible breaches
* complying with specific processes and legislation when disclosing information.

The HI Act also imposes restrictions on the collection, use or disclosure of healthcare identifiers and identifying information. It is an offence for a person or organisation to collect, use or disclose certain healthcare identifiers or identifying information. This is unless it is authorised by the HI Act or another law.

A breach of the HI Act relating to a person is a breach of the Privacy Act, and the Office of the Australian Information Commissioner (OAIC) may investigate.

## Dealing with breaches

If a person thinks their healthcare identifier or identifying information has been inappropriately accessed they can contact us for help. They can also contact their healthcare provider or ask the OAIC to investigate. The HI Service keeps a full audit of all system interactions for use in investigations if required.

There have been no privacy or confidentiality breaches by staff in relation to the HI Service since the service started on 1 July 2010.

On 22 February 2018, the Notifiable Data Breaches Scheme under the Privacy Act came into effect. Under the scheme, Services Australia must notify affected people and the OAIC if there is:

* unauthorised access to personal information
* unauthorised disclosure or loss of personal information likely to result in harm to the person.

Services Australia has had no notifiable data breaches reported for the HI Service since the Notifiable Data Breaches Scheme started.

# Audits and reviews

There were no audits or reviews of the HI Service during 2019–20.

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