



Healthcare Identifiers Service

Request or update an Individual Healthcare Identifier or request an Individual Healthcare Identifier card

When to use this form

Use this form if you (or a dependent child under 14 years of age) are not eligible for Medicare or you are not eligible for a pension or benefit from the Department of Veterans' Affairs (DVA) and need to:

- get an Individual Healthcare Identifier (IHI), **or**
- request an IHI card, **or**
- notify the Healthcare Identifiers (HI) Service that a person is deceased.

Individuals 14 years of age and over can request their own IHI or an IHI card using this form.

Healthcare Identifiers Service

The HI Service is a system that provides a consistent set of identifiers for individuals and healthcare providers. Healthcare identifiers provide a way to match the correct record to the person being treated. This improves accuracy when health information is shared between healthcare providers.

The *Healthcare Identifiers Act 2010* is available at www.legislation.gov.au

Healthcare identifier

A healthcare identifier is a unique 16 digit number that is assigned and used to identify everyone associated with healthcare in Australia.

No clinical information is linked to the identifier. You do not need to remember your IHI to receive healthcare.

If an IHI is being requested for a person under 14 years of age, it will be created using the address of the parent or guardian.

Individual Healthcare Identifier card

You can use this form to request an IHI card. You must have an existing IHI or be requesting one to get an IHI card.

If an IHI card is being sent, it will be addressed to you or, for a person under 14 years of age, to the parent or guardian, at the postal address provided in this form.

My Health Record

A My Health Record is an online summary of an individual's health information. It can be accessed at any time by the individual and their healthcare providers. You can get a My Health Record when you get your IHI.

For more information about My Health Record, go to www.myhealthrecord.gov.au

Evidence of identity

You must provide **1** document from the Primary group or **2** documents from the Secondary group for each person applying for an IHI or IHI card. The names in these documents must be identical.

If you are attaching documentation, the copies provided must be certified.

Primary group

- foreign passport
- Australian driver licence
- travel document with valid visa

Secondary group

- Department of Foreign Affairs and Trade (DFAT) issued Certificate or Document of Identity
- DFAT issued United Nations convention travel document
- foreign government issued documents (for example, driver licences)
- security guard/crowd control photo licence
- consular photo identity card issued by DFAT
- Australian tertiary student photo identity document
- Australian secondary student photo identity document
- certified academic transcript from an Australian university
- bank or credit card

For more information

Go to servicesaustralia.gov.au/hi or email healthcareidentifiers@servicesaustralia.gov.au or call **1300 361 457** Monday to Friday, 8:30 am to 5 pm, Australian Eastern Standard Time.

Call charges may apply.

Filling in this form

You can complete this form on your computer, print and sign it.

If you have a printed form:

- Use black or blue pen.
- Print in BLOCK LETTERS.
- Where you see a box like this **Go to 1** skip to the question number shown.

Applicant's details

1 Dr Mr Mrs Miss Ms Other

Family name

First given name

Second given name

2 Your date of birth

3 Your gender

Male

Female

4 Your residential address in Australia

Postcode

Your postal address in Australia (if different to above)

Postcode

5 Daytime phone number

Mobile phone number

Fax number

Email

6 I would like to:

Get an IHI or IHI card **Go to 7**

Get an IHI or IHI card for a dependent child
under 14 years of age **Go to 10**

Notify of a deceased person **Go to 12**

Request an IHI or IHI card

If you would like a My Health Record, you can get one after you get your IHI.

For more information about My Health Record, go to www.myhealthrecord.gov.au

7 Do you want an IHI for yourself?

No

Yes

8 Do you want an IHI card for yourself?

No

Yes Your IHI card will be sent to the postal address you gave at question 4.

9 Do you want an IHI or IHI card for a dependent child under 14 years of age?

No **Go to 11**

Yes Go to next question

Request an IHI or IHI card for a dependent child

If you would like a My Health Record for a child under 14 years of age, you can get one for them after you get their IHI.

For more information about My Health Record, go to www.myhealthrecord.gov.au

10 Do you have parental responsibility for this child?

No As you do not have parental responsibility for the child, you cannot request an IHI for them. **Go to 11**

Yes Give details

Child 1 details

Family name

First given name

Second given name

Date of birth

Gender Male Female

How many IHI cards do you require for this child?
(a maximum of 2 cards available)

If an IHI card is being sent, it will be addressed to the parent or guardian, at the postal address you gave at question 4.

Child 2 details

Family name	<input type="text"/>
First given name	<input type="text"/>
Second given name	<input type="text"/>
Date of birth	<input type="text" value="/ /"/>
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
How many IHI cards do you require for this child? (a maximum of 2 cards available)	<input type="text"/>
If an IHI card is being sent, it will be addressed to the parent or guardian, at the postal address you gave at question 4.	



If you would like to request an IHI or IHI card for more than 2 dependent children, provide a separate sheet with details.

11 Are you notifying the HI Service that a person is deceased?

No **Go to 17**

Yes Go to next question

Deceased person's details

12 IHI (if known)

13 Dr Mr Mrs Miss Ms Other

Family name

First given name

Second given name

14 Date of birth

15 Date of death

16 Your relationship to the deceased person

Privacy notice

17 Your personal information is protected by law, including the *Privacy Act 1988* and is collected by Services Australia and the Service Operator of the Healthcare Identifiers Service, for purposes related to the operation of the Healthcare Identifiers Service. The collection of this information is authorised by the *Healthcare Identifiers Act 2010*, and is required to process your application.

Your information may be used by us, or given to other parties where you have agreed to that, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which Services Australia will manage your personal information, including our privacy policy, at servicesaustralia.gov.au/privacy

Applicant's declaration

18 I declare that:

- I have provided certified copies of relevant documentation to support this application.
- I have parental responsibility for the child(ren) under 14 years of age that I have included on this form.
- the information I have provided in this form is complete and correct.

I understand that:

- I am not entitled to claim Medicare or pharmaceutical benefits with the Individual Healthcare Identifier requested or updated in this form.
- giving false or misleading information is a serious offence.

Applicant's signature



Date

Returning this form

Return this form and any supporting document(s):

- by post to:**
Services Australia
HI Service
GPO Box 2987
MELBOURNE VIC 3001
- by fax to: 03 9605 7987**
- by email to: healthcareidentifiers@servicesaustralia.gov.au**
There may be risks with sending personal information through unsecured networks or email channels.
- in person to one of our service centres if you are unable to submit this form and any supporting documents online or by post.