

Community Affairs Legislation Committee

Personally Controlled Electronic Health Records (Consequential Amendments) Bill
2011, Personally Controlled Electronic Health Records Bill 2011

ANSWER TO QUESTION ON NOTICE

Department of Human Services

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Question:

Senator SIEWERT: Were you aware before today of the criticisms that were raised about the potential risks to safety and some of the problems with issues of identification numbers?

Mr Madden: Through the CCA processes and development, we have certainly worked hard to understand what some of those clinical risks and things might be. The notion that there could be misidentification and how that system works is certainly being worked through the processes that exist with Medicare. I will hand over to Medicare to talk about the description of the HI Service and how we take those risks and issues out of the system.

Ms Golightly: Certainly there has been a very lengthy process with NEHTA, Health and all of the other stakeholders to work out specific processes on how we might deal with an issue should there be a duplicate or some other issue found, and they are fully documented. There is quite a formal and official process whereby we would work through and investigate whether indeed there was a duplicate or some other issue, then work through who we would need to notify if that were the case, link those records and so on and so forth to make sure that that number was indeed unique.

Senator SIEWERT: It was reported to us today that there have been problems.

Ms Golightly: Yes, I heard about that evidence and I am not aware of what the MSIA was referring to. We do monthly reports for NEHTA on the data quality issues, and there have been none identified to us.

Senator SIEWERT: From a patient perspective, with the health identifier number and/or the provider number, there have been no problems with either?

Ms Golightly: Not that we are aware of.

Senator SIEWERT: Could you take on notice to see if in fact there have been?

Ms Golightly: Certainly.

Answer:

There have been no known issues with the misidentification of individuals or healthcare providers in the Healthcare Identifiers Service. Assignment of healthcare identifiers occurs automatically for individuals with an active Medicare enrolment, a Department of Veterans' Affairs registration and for healthcare providers that are registered under the Australian Health Practitioner Regulation Agency. Other individuals, healthcare providers and healthcare provider organisations must register directly with the Healthcare Identifiers Service.