

Optometrists Association Australia

Submission to the Senate Community Affair's Committee inquiry into the *Healthcare Identifiers Bill 2010 and Healthcare Identifiers (Consequential Amendments) Bill 2010*

February 2010

Contact Details:
Mr Joe Chakman
Chief Executive Officer
Optometrists Association Australia
PO Box 185
CARLTON SOUTH VICTORIA 3053

Optometrists Association Australia is pleased to provide a submission to Senate Community Affairs inquiry into the *Healthcare Identifiers Bill 2010 and Healthcare Identifiers (Consequential Amendments) Bill 2010.*

Optometrists Association Australia (Optometrists Association) is the peak professional body representing the interests of 96 per cent of practising optometrists in Australia.

Optometrists Association Australia supports the Australian Government's efforts, through the *Healthcare Identifiers Bill 2010 and Healthcare Identifiers (Consequential Amendments) Bill 2010*, to establish the foundations for e-health in recognition of the potential benefits e-health may provide to enhance patient care.

The provision of health services is information intensive and requires accuracy in order to equip health practitioners with the ability to make the best clinical decision. Health practitioners rely on the accuracy and currency of information on a daily basis to make clinical decisions. E-health has the potential to transform primary health care to better facilitate information management and the sharing of information in order to deliver more efficient and safer patient care.

For optometry, e-health has three key roles:

- i. **sharing of information** e.g. assistance in diagnosing conditions, referrals, prescriptions, care plans, test results, current health information and medications list;
- ii. **service delivery tools** e.g. telemedicine, electronic consultations, medication management tools; patient recall systems; and
- iii. information storage and sources e.g. datasets / individual patient records.

E-health has the capability to improve the delivery of health care and communications between health practitioners. There are likely to be benefits for both optometrists and their patients in the use of e-health tools in the provision of optometry services, such as electronic prescribing, and sharing of information in cases of co-management with other health practitioners as well as up to date medication lists

Incentives for health practitioners to cover the costs of investing in e-health

Optometrists Association reiterates the general comments that we made in the Australian Health Ministers Advisory Committee submission and a submission to the Department of Health and Ageing on the draft exposure legislation: that the introduction of e-health systems will be expensive for practitioners and to realise the improvements that e-health can deliver it will be necessary to provide incentives for its introduction and to ensure that there is smooth implementation of any future e-health programs.

To date the Australian Government has provided incentives to only some health professions. The incentives should be introduced for all health practitioners involved in patient care to recognise the investment in time and resources to adopt new e-health initiatives. The Final report of the National Health and Hospital Reform Commission recognises the importance of incentives for introduction of e-health systems, recommending "...significant funding and resources be made available to extend e-health teaching, training, change management and support to health care practitioners and managers" (recommendation 122).

Implementation of e-health to health practitioners and the health consumer

Whilst the Association understands that these two Bills are essentially framework Bills, there currently is little information available for health practitioners about the use of healthcare identifiers after 1 July 2010. The Bills do not specifically note whether individual healthcare practitioners or organisations are required to link Individual Healthcare Identifier numbers to existing patient records, nor is there advice about how Healthcare Provider Identifier – Individual (HPI-I) and Healthcare Provider Identifier – Organisation (HPI-O) numbers are to be used.

Other areas not canvassed in the Bills and which need clarification include use of these unique identifier numbers on practice stationery, and the inclusion on registration lists (this last point might be implicit if registration bodies become Trusted Data Sources).

There is also the question of duplication. Optometrists and other health practitioners already need to have a provider number for Medicare for each location at which they practice – how would the proliferation of numbers be addressed in the new system?

The Bills' Explanatory Memorandum does flag that healthcare providers will be "provided with supporting materials and appropriate sources to refer consumers to for more information. A public awareness program on the HI Service will provide information to consumers via a range of methods." 1

Optometrists Association encourages the Australian Government to consult with health practitioners and consumer organisations in the development of these materials. Optometrists Association Australia is happy to work with the Australian Government in providing feedback about implementation in private optometry practices.

Optometrists Association Australia looks forward to participating in further consultations and forums with the Australian Government in relation to the implementation of the legislation and providing comments on any draft regulations.

_

¹ Explanatory Memorandum, page 4.