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E-health take-up 'missing its target'

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THREE Australians have been allowed to use a fake name to sign up for an electronic health record but even taking pseudonyms into account, the federal government will fall well short of its registration target.

Little-known provisions in the Personally Controlled Electronic Health Record program allow people to register using another name for privacy reasons, for example, if they are taking extra precautions to avoid an abusive spouse or are worried their reputation will suffer if their health status becomes publicly known.

But in gaining the right to withhold their identity, the first three Australians to take up the provision for pseudonyms may have also lost the right to claim government benefits.

"You can seek and receive treatment using your pseudonymous Individual Healthcare Identifier, but you can only claim Medicare Benefit Scheme or the Pharmaceutical Benefits Scheme payments using your name on your Medicare card," a spokeswoman for the Department of Health and Ageing said.

The government had hoped to see 500,000 Australians with a PCEHR by July, but as of March 4 there were only 73,648 registrations, with 108 shared health summaries and 51 discharge summaries also uploaded to the system.

In February, an average of 705 eHealth records were accessed each day through the Consumer Portal, while healthcare providers had access 6147 times a day.

Opposition health spokesman Peter Dutton has already identified e-health as an area in which the Coalition would seek to deliver value for money.

The reliability of internet services for telehealth may be an important issue when comparing the government's National Broadband Network with the Coalition's more wireless-intensive plan, but a new study has questioned the value of telehealth altogether.

According to the British Medical Journal, a study of more than 3000 patients with chronic, long-term conditions showed that telehealth was more costly but not more effective.

Federal, state and territory governments have agreed to a new memorandum of understanding on e-health which has yet to be made public.

The Standing Council on Health gave in-principle support for the MOU in November but the health ministers are still finalising the details.

The Australian has obtained under Freedom of Information laws an independent review of the MOU's precursor, the National Partnership Agreement on E-Health, which expired last year. The review found some stakeholders were critical of the lack of targets, deadlines, performance benchmarks and clear roles and responsibilities.