Senate Standing Committee on Community Affairs

ANSWERS TO QUESTIONS ON NOTICE

The National E-Health Transition Authority (NEHTA)

Budget Estimates

June 2013

Subject Outcome: E-Health 10.2

Agency: NEHTA

Issue: NEHTA – Standards/Functionality of the PCEHR

Name of Senator: Sue Boyce

QUESTION: 22

Senator Boyce asked:

Has this issue been fixed?

Answer:

NEHTA is unclear as to what issue is being referred to here. If the issue is in relation to the recent Coveram, the descriptions relating to Coveram were created for inclusion in AMT during 2010 and have always been alphabetic. Some changes have been made to the descriptions for brand descriptions in AMT for Coveram and Reaptan to ensure that the AMT trade product terms reflect the pack labelling and where required, include additional information to disambiguate different strengths of a product.
NEHTA has investigated the issue from an AMT perspective and identified a number of actions. This work is ongoing and includes communication strategies, governance, implementation guidance, timely communication of changes/education and editorial rule review. The editorial rule review will include consideration of whether any rules require modification and, if so, determine what actual changes are required. This process will include all relevant stakeholders.

NEHTA, DoHA and other key representatives met on the 18 July 2013. Key points from this meeting were:

1) The AMT editorial rule referring to the alphabetical order of generic components for multi-ingredient products in the Medicinal Product (the non-branded generic representation of active ingredients), as agreed by the AMT Support Group, will remain unchanged for the current time (see next dot point). The latest Editorial Rules document will be published by NEHTA within the next business quarter; however the editorial rule describing this specific situation can be made

available prior to this if requested. The exceptions to this rule that currently exist within the AMT data for older products, will remain in place until agreement is reached to ensure consistency of naming by NEHTA, TGA, PBS and other key stakeholders such as the MSIA and clinical peak bodies.

2) In parallel, NEHTA will continue to work with the TGA to investigate establishing rules around any newly registered multi-ingredient products, with a focus on patient safety and a consistency of naming that will work across all sectors.

3) The suggestion put forward by the MSIA, around the creation of clinical interface terms for pharmacy dispense vendors, and supported by the other attendees will be taken to the next AMT Support Group meeting for consideration.