

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Supplementary Budget Estimates 2011-2012, 19 October 2011

Question: E11-500

OUTCOME 10: Health System Capacity and Quality

Topic: EHEALTH – PERSONALLY CONTROLLED ELECTONIC HEALTH RECORDS
INCENTIVES AND ADOPTION

Written Question on Notice

Senator Fierravanti-Wells asked:

- a) A nominated healthcare provider will be responsible for creating and managing a consumer's shared health summary - this is surely going to increase the time burden on that healthcare provider?
- b) Is there an estimate of how much extra time the "nominated healthcare" provider will spend maintaining a consumers shared health summary?
- c) Will they be compensated financially for this extra time?
- d) Is this not time that medical professionals will spent entering data and managing electronic records rather than seeing patients?
- e) What incentive do doctors have to spend this extra time managing the shared health summary?

Answer:

a), b) and d)

The Royal Australian College of General Practitioners (RACGP) General Practice Guidelines (4th Edition) recommends that at least 75 per cent of active patient health records contain a current health summary. Most doctors already create and maintain electronic health records for their patients. The registration system for the personally controlled electronic health record (PCEHR) is designed to be as simple as possible. Nominated providers are not expected to update a Shared Health Summary outside of a consultation with the individual.

c) and e)

No financial compensation has been announced for the PCEHR system.