



Healthcare Provider Identifiers

Business Requirements

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Table of Contents

Table of Contents	iv
Preface	1
1 Introduction.....	2
1.1 Context	2
1.1.1 National E-Health Strategy	2
1.1.2 HPI Policy Settings	2
1.1.3 Governance and Privacy.....	3
1.2 Business Principles.....	4
2 HPI-I and HPI-O Business Requirements.....	5
3 Stakeholder Representation.....	7

Preface

Purpose

The purpose of this document is to define the high-level business requirements for Healthcare Provider Identifiers - Individual (HPI-Is) and Healthcare Provider Identifiers - Organisation (HPI-Os) as part of the Healthcare Identifiers (HI) Service. The intention is to explain, at a high level:

- why HPI-Is and HPI-Os are required; and
- the requirements that need to be included in the technical design and build of the Healthcare Provider Identifier (HPI) component of the HI Service.

Scope

The scope of this document is to inform the development of the HPI Concept of Operations, High Level Design and Detailed Business Requirements documents.

Intended Audience

The key audience for this document is:

- Identification and Access Reference Group (IARG);
- Stakeholder Reference Forum (SRF);
- National Health Chief Information Officer Forum (NHCIOF);
- NEHTA Board; and
- Medicare Australia.

Assumptions

Every healthcare provider individual and organisation that needs a HPI-I or HPI-O to access national e-health infrastructure or for the purposes of electronic communication of health information within a healthcare context will be able to obtain one.

References

- [COAG06] COAG Communiqué on 10 February 2006
- [AHMC08] Australian Health Ministers' Conference, *National E-Health Strategy: Summary*, December 2008
- [COAG08] COAG Communiqué on 29 November 2008
- [AHMC09] Australian Health Ministers' Conference Communiqué 5 March 2009
- [AHMAC09] Australian Health Ministers' Advisory Council, *Healthcare identifiers and privacy: Discussion paper on proposals for legislative support*, July 2009

1 Introduction

1.1 Context

1.1.1 National E-Health Strategy

Currently in Australia, information concerning both healthcare provider individuals and organisations is stored in a fragmented manner across multiple repositories across both the public and private sectors, and at federal, state/territory and local levels. Further, each repository employs a different method of identifying the providers and provider organisations whose information it stores.

The National E-Health Strategy Summary included the following as one of the five key national foundations required for E-Health:

“Identification and authentication – There is a need to design and implement an identification and authentication regime for health information as soon as possible as this work will be absolutely fundamental to the nation’s ability to securely and reliably access and share health information. Australia should seek, as far as possible, to make the allocation of consumer and care provider national identifiers universal and automatic.”¹

In 2006, the Council of Australian Governments (COAG) agreed to a national approach to developing, implementing and operating systems for individual and healthcare provider identifiers as part of accelerating work on electronic health records to improve patient safety and increase efficiency for healthcare providers.²

On behalf of all Commonwealth, State and Territory governments NEHTA is designing and delivering the HI Service which will be responsible for allocating HPI-Is and HPI-Os to healthcare provider individuals and organisations.

Through the HI Service HPI-Is and HPI-Os will realise the following aims:

- To uniquely, accurately and consistently identify healthcare provider individuals and organisations, and the relationship between a healthcare provider individual and an organisation, when accessing national e-health infrastructure or in electronic communications between healthcare providers or with healthcare individuals;
- To support the development and operation of healthcare provider directory services to facilitate electronic communications within a healthcare context (such as discharge summaries and referrals); and
- To support the development and operation of a security and access framework that ensures the appropriate authorisation and authentication of healthcare providers to access national e-health infrastructure.

1.1.2 HPI Policy Settings

In November 2008 COAG reaffirmed its support for a national approach to healthcare identifiers.

¹ Australian Health Ministers’ Conference, *National E-Health Strategy Summary*, December 2008, p 10.

² Council of Australian Governments (COAG) Communique, 10 February 2006

The HPI policy settings below reflect the *Healthcare identifiers and privacy: Discussion paper on proposals for legislative support*.³

HPI-Is

- will be issued to any individual involved in providing healthcare who requires one;
- will be used to identify the healthcare provider individual associated with accessing health information and electronic health information transactions and communications;
- will be issued to a healthcare provider individual through their professional or registration body where one exists, or other Trusted Data Source and maintained through a one way synchronisation from the Trusted Data Source;
- will be issued to a healthcare provider individual by the HI Service in circumstances where a professional or registration body or Trusted Data Source does not exist;
- will be listed with the consent of the healthcare provider individual with a healthcare provider directory service;
- will be a persistent, unique identifier based on national and international standards;
- will not, on its own, provide automatic access to the HI Service;
- will be associated with a HPI-O when accessing the HI Service; and
- may be associated with more than one healthcare provider organisation simultaneously or over time.

HPI-Os

- will be issued to any organisation that employs or contracts one or more healthcare provider individuals, or sole trader that provides a health service;
- will be issued when an organisation signs a participation agreement;
- will be used to identify the healthcare provider organisation associated with accessing health information and electronic health information transactions and communications;
- will be listed with a healthcare provider directory service;
- will be a persistent, unique identifier based on national and international standards;
- will be required, together with an HPI-I, when accessing the HI Service; and
- will be required, together with the authorised user information, when accessing the HI Service.

The business requirements need to reflect these policy settings.

1.1.3 Governance and Privacy

The E-Health governance structure, recommended as part of the National E-Health Strategy and endorsed by Health Ministers in December 2008, must provide for three key governance functions:

i. Strategic Oversight

³ Australian Health Ministers' Advisory Council, *Healthcare identifiers and privacy: Discussion paper on proposals for legislative support*, July 2009

The body with responsibility for strategic oversight of the HI Service will be determined by Health Ministers. Key responsibilities of this body will be to determine national policies and strategic direction of the HI Service, including its scope and authorised participants, the required regulatory and institutional arrangements and monitoring of those arrangements to ensure they continue to be suitable.

ii. **Management and Operation**

In accordance with national policies, priorities and strategic directions, key functions to be undertaken by the HI Service Operator in relation to the HI Service include:

- managing the issue and assignment of national identifiers;
- managing access to and use/disclosure of national identifiers;
- maintaining records of national identifiers;
- managing relationships with participants and relevant data sources;
- providing advice and information to the strategic oversight body on the performance of the system;
- educating, training and informing healthcare providers and healthcare individuals about how the service operates; and
- responding to system/service complaints and enquiries (in the first instance).

iii. **Independent Regulatory Oversight**

A key element of independent regulation for; a) the establishment and operation of the HI Service and; b) the subsequent handling of healthcare identifiers by health sector participants is privacy regulation. Key functions of privacy regulators will include:

- handling complaints from healthcare individuals and providers in relation to use of healthcare identifiers and associated information;
- monitoring handling of healthcare identifiers and associated information;
- conducting investigations;
- applying a range of sanctions or penalties commensurate with the seriousness of a breach;
- developing and issuing codes or guidelines in accordance with policy set by strategic governance bodies; and
- general oversight powers.

1.2 Business Principles

The vision for the HI Service is to support the goal of ensuring:

"The right patient, the right provider, the right place – every time".

It is essential that the Business Requirements:

- support high uptake of the adoption and use of HPI-Is and HPI-Os across the healthcare sector; and
- minimise the burden on healthcare providers.

2 HPI-I and HPI-O Business Requirements

The following table highlights the key business requirements needed to deliver HPI-Is for healthcare provider individuals and HPI-Os for healthcare provider organisations.

Enhance Clinical Safety and Quality	
The HI Service will:-	
BR.2009.08.005	Facilitate reduction in errors and increase efficiency in handling health information by enabling electronic communications to be associated with the right healthcare providers;
BR.2009.08.010	Enable administrative efficiencies by reducing the need to capture the same information numerous times;
BR.2009.08.165	Maximise the use of health information for automated clinical decision support; and
BR.2009.08.020	Enable the development and implementation of processes to support use of information for statistical and reporting purposes.
Facilitate Healthcare Communications	
The HI Service will:-	
BR.2009.08.025	Enable consistent and accurate communications with healthcare individuals and healthcare providers;
BR.2009.08.030	Enable efficient, reliable and secure exchange of health information to maintain continuity of care;
BR.2009.08.035	Support the development and operation of healthcare provider directory services; and
BR.2009.08.040	Support search and retrieval of HPI-Is and HPI-Os and identify their addressing information for electronic communication.
Unique Identifiers	
The HI Service will:-	
BR.2009.08.045	At the point of issue of an HPI-I or HPI-O, accurately identify healthcare provider individuals and organisations;
BR.2009.08.050	Allocate a unique identifier to all eligible healthcare provider individuals and organisations that require one;
BR.2009.08.055	Enable accurate association of a healthcare provider individual by a healthcare provider organisation; and
BR.2009.08.060	Comply with national and international standards for healthcare provider identifiers.
Ensuring Uptake	
The HI Service will:-	
BR.2009.08.065	Provide the foundation building blocks to enable a national individual electronic health records system and to enhance the use of electronic health records;
BR.2009.08.070	Minimise the administrative processes for participation by healthcare provider individuals and organisations; and
BR.2009.09.071	Automatically allocate an HPI-I to a healthcare provider individual enrolled with a Trusted Data Source.
Accurate and Up to Date Information	

The HI Service will:-

- BR.2009.08.075 Deliver an online service to facilitate healthcare provider individuals and organisations to access and maintain their HPI-I and HPI-O records;
- BR.2009.08.080 Source and utilise reference data sources to verify, validate and update HPI-Is, HPI-Os and associated information;
- BR.2009.08.085 Develop and implement business services to monitor and maintain the integrity and quality of information used, stored and disclosed by the HI Service; and
- BR.2009.08.090 Issue business and technical reports to support the service, and to identify future enhancements.

Integration, Implementation and Adoption

The HI Service will:-

- BR.2009.08.095 Develop and implement a national system, processes and services associated with the management of HPI-Is and HPI-Os (including but not limited to collection, disclosure, access, use, maintenance and retirement);
- BR.2009.08.096 Promote and communicate the requirements and processes for healthcare provider participation including assignment, collection, disclosure, access, use, maintenance and retirement of HPI-Is and HPI-Os and associated information.
- BR.2009.08.100 Support the healthcare sector by providing identifier services which are highly available;
- BR.2009.08.105 Increase opportunities for efficiency and reduction in errors in software systems of healthcare providers;
- BR.2009.08.110 Facilitate long term data management of records and access to support e-health with the inclusion of data recovery, and highly available facilities;
- BR.2009.08.115 Use appropriate test, compliance, certification and accreditation services to support integration with healthcare provider systems;
- BR.2009.08.120 Be designed for separability and portability for transfer of the HI Service to different service operator(s); and
- BR.2009.08.125 Provide services and associated infrastructure to integrate and interact with Trusted Data Sources across the public and private sectors.

Robust Access and Authentication Processes

The HI Service will:-

- BR.2009.08.130 Establish a privacy/security framework to guide healthcare provider individuals and organisations in their use of the HI Service that complies with relevant policies and legislation;
- BR.2009.08.135 Provide a service and associated infrastructure to support authorised users;
- BR.2009.08.140 Create new HPI-Is and HPI-Os, and populate HPI-Is and HPI-Os with associated (and permitted) data; update and maintain existing HPI-Is and HPI-Os and their associated attributes; and retire HPI-Is and HPI-Os;
- BR.2009.08.145 Provide highly assured national healthcare provider information to facilitate the generation of trusted digital certificates for HPI-Is and HPI-Os; and
- BR.2009.08.150 Provide appropriate privacy protections for healthcare provider individuals.

3 Stakeholder Representation

The HI HPI High Level Business Requirements were developed in conjunction with the key stakeholder organisations.

Organisation - HPI & IHI HLBR Workshop - July 20th
Victorian Department of Human Services Consumer Health Forum Clinical Leads Program Australian Association of Practice Managers Department of Health & Ageing ACT Health Medicare Australia Northern Territory Department of Health & Community Services Queensland Department of Health Victorian Department of Human Services National E-Health Transition Authority
Organisation - HPI & IHI HLBR Tiger Teams Workshop- August 10th
Australian Association of Practice Managers Department of Health & Ageing ACT Health Northern Territory Department of Health & Community Services Queensland Department of Health National E-Health Transition Authority
Organisation - HPI & IHI HLBR Tiger Teams Workshop - August 28th
Consumer Health Forum Clinical Leads Program Australian Association of Practice Managers Department of Health & Ageing South Australia Health Northern Territory Department of Health & Community Services Queensland Department of Health National E-Health Transition Authority
Organisation - HPI & IHI HLBR Tiger Teams Workshop- September 4th
Consumer Health Forum Clinical Leads Program Australian Association of Practice Managers Northern Territory Department of Health & Community Services National e-Health Transition Authority
Organisation - HPI & IHI HLBR Tiger Teams Workshop- September 25th & 26th
Consumer Health Forum Clinical Leads Program Australian Association of Practice Managers

Northern Territory Department of Health & Community Services
 Queensland Department of Health
 Department of Health & Ageing
 National e-Health Transition Authority

Organisation - HPI & IHI HLBR Tiger Teams Workshop – October 8th to 10th

Consumer Health Forum
 Clinical Leads Program
 Australian Association of Practice Managers
 Northern Territory Department of Health & Community Services
 Queensland Department of Health
 Department of Health & Ageing
 National e-Health Transition Authority

Organisation - HPI & IHI HLBR Tiger Teams Workshop – October 15th

Clinical Leads Program
 Australian Association of Practice Managers
 Queensland Department of Health
 Department of Health & Ageing
 National e-Health Transition Authority

Organisation - CONOPS Tiger Teams Workshop – November 12th

Victorian Department of Human Services
 Clinical Leads Program
 Australian Association of Practice Managers
 Department of Health & Ageing
 Northern Territory Department of Health & Community Services
 National e-health Transition Authority