

## **Submission to the Inquiry into Human Services (Enhanced Service Delivery) Bill 2007**

**Senate of Australia (Finance and Public Administration Committee)**

**February 2007**

The Consumers' Health Forum of Australia (CHF) has made a major contribution to the understanding of e-health among consumer networks and informed debate on key e-health issues. Based on its e-health work, CHF is pleased to provide a health consumer perspective on the Human Services (Enhanced Service Delivery) Bill 2007.

### **Intended scope and purpose**

The value of the access card to consumers is determined by the level of confidence that consumers have in it. Health consumers who use many entitlement cards see value in streamlining claims and updates. Consumer confidence in the card is limited by uncertainty surrounding its scope and function, including confusion among some consumers about the distinction between the access card and shared electronic health records. Consumer confidence in the access card needs to be increased by explicitly outlining and communicating the scope of the register and access card in a clear and transparent manner.

### **Information to be included on the card**

Consumers expect that information to be included on the surface and the chip of the card is restricted to information that is needed for the provision of Australian Government benefits. It is also expected that the use and implications of including information on the card will be clearly communicated to consumers, and that the ownership of this information is vested in the consumer.

CHF welcomes clarification in Clause 38 that the Commonwealth's ownership of information on the card is only in relation to intellectual property or information on the surface or chip that the consumer would not otherwise own.

CHF continues to have concerns about storing personal and voluntary information on the card. Consumers need to be aware of the implications of storing personal information on the card as misunderstandings could cause a loss of confidence in the security of the Register and Access Card.

Consumers can request certain information, including their Indigenous status, to be included on the Register and surface and chip of their access card. It needs to be made clear to consumers, especially those of Aboriginal and Torres Strait Islander origin, that providing this information is voluntary. Consumers must not be penalised for choosing not to include it.

A photograph will be stored on the Register and the chip and surface of the access card, but this may not be culturally appropriate for some groups, such as Aboriginal groups and Muslim women. Although the Bill says that some groups will be exempt from the photograph, it needs to clearly detail how groups and individuals will become exempt.

### **Information to be included on the register**

CHF and consumers expect that the way that the register is kept will be transparent and communicated to consumers in a clear manner. This is important for consumer confidence in the register and card. CHF welcomes clarification in Clause 19 that temporary information on the Register will be removed once it has been transferred to the Access Card.

There is a lack of transparency in the way in which the register is kept (Clause 16) which hinders consumer confidence in the card. Consumers have had particular concerns with off shore holdings of de-identified e-health data in the past. Consumers must be informed about the way the register will be kept and of any major changes to it.

### **Protection against use as an identification card**

It is expected that the access card will not be used for any other purpose than the facilitation of Australian Government benefits and not as an identification card.

CHF commend the strategies in place for offences and penalties for requiring an access card for identification. CHF, however, is concerned that reporting offences (Clause 45 and 46) will be difficult for consumers, and seeks further clarification to support this consumer right. An extensive and ongoing communication strategy is needed to ensure that this clause is effective and that consumers and industries are well informed about it. A commitment to proactive monitoring and audit of the use of the card is also necessary.

The Bill states the card number is to be used for consumer identification and will be included on the surface of the card. This is of concern as it increases the possibility of identity fraud.

### **Protecting against other improper uses**

CHF maintains that strong support measures must be in place to protect the card against any other improper uses, and are concerned that that the Bill allows for the card to be required for proof of concession status for goods and services discounts.

This is a concern as it is function creep beyond the purpose of only receiving Government benefits. Consumers must have other means of proving concession status. Further information is needed as to how organisations will obtain concession details from cards, and how privacy will be maintained. For example, if details are obtained through a card reader, it is a concern that organisations without readers may stop providing discounts which penalises consumers.

### **Other immediate concerns not addressed**

CHF and consumers expect that the access card will minimise disadvantage for vulnerable groups and are concerned that children and people with disabilities may be further disadvantaged by the access card.

Children may go on their parents' access card however confidentiality of individuals on family cards may be a risk. This is a particular concern for children as they begin to gain their independence before the age of 18. The Bill states that the issue of dependants and their carers will be addressed in subsequent legislation. Future legislation must address whether children will go on one or all parents/guardians cards, what their card number will be, and how the confidentiality of individuals on a family card would be protected.

It is a concern that the Bill does not outline any measures to ensure consumers with disabilities will not be disadvantaged such as audio output, Braille options to ensure that people are supported to make informed decisions if needed.

### **Conclusion**

CHF appreciates the opportunity to provide input into the development of the access card through this submission and calls on the Inquiry to ensure that health consumers' concerns are addressed.



## **Background**

The Consumers' Health Forum of Australia Inc (CHF) is the national voice for health consumers. It helps shape Australia's health system by representing and involving consumers in health policy and program development.

CHF, established in 1987, is an independent member-based non-government organisation for health consumers. It receives funding from the Australian Government Department of Health and Ageing, membership and specially-funded projects.

CHF is the only national organisation that can reach nearly 1 million Australians across a wide range of health interests and health system experiences. It provides government and policy makers with a consumer perspective on health issues and balances the view of health care professionals, service providers and industry.

Health consumers have a unique and important perspective on health. They include patients and potential patients, carers and organisations representing consumers' interests.

CHF voting members are from all areas of the community and health sectors. They include illness-based and self-help groups, population groups, health interest groups and special interest groups. Non-voting members include individuals, organisations and corporations interested in health consumer issues.

CHF health policy is developed through extensive consultation with members. This ensures a broad representative health consumer perspective, rather than a narrow political or sectional interest.

CHF is working on priority consumer health issues including safety and quality in health care, e-health for consumers, safe and appropriate use of medicines and effective health care for people with chronic conditions.

Consumers' Health Forum of Australia Inc  
PO Box 3099 Manuka ACT 2605  
Telephone (02) 6273 5444  
Fax (02) 6273 5888  
Email [info@chf.org.au](mailto:info@chf.org.au)  
Web: [www.chf.org.au](http://www.chf.org.au)

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