

EXPLANATORY STATEMENT

Healthcare Identifiers Act 2010

Healthcare Identifiers Amendment (Directories and Other Matters) Regulations 2026

Purpose and operation

The *Healthcare Identifiers Amendment (Directories and Other Matters) Regulations 2026* (the instrument) amend the *Healthcare Identifiers Regulations 2020* (Healthcare Identifiers Regulations) to support the secure and appropriate use of healthcare identifiers in connection with government-funded healthcare directory services and certain related functions.

The instrument authorises certain operators of healthcare directory services, as defined in the instrument, to collect, use and disclose healthcare identifiers and associated identifying information of healthcare providers for limited purposes related to facilitating the provision of adequate and appropriate healthcare. These authorisations support the inclusion of accurate and up-to-date information about available healthcare services in directories and enable the verification and consistent linking of healthcare provider information across directory services.

The authorisations are enabling only and apply only where a healthcare provider has agreed to participate in a healthcare directory service. The instrument also authorises the use of healthcare identifiers for authentication purposes to ensure information in the directories is accurately associated with the correct healthcare provider, reducing the risk of misidentification.

The authorisations in this instrument do not apply to the national Healthcare Provider Directory which is established and authorised under Part 5 of the *Healthcare Identifiers Act 2010* (Healthcare Identifiers Act).

The instrument further authorises the collection, use and disclosure of healthcare identifiers and identifying information for the purposes of Clinical Learning Australia, a national ePortfolio system operated by the Australian Digital Health Agency, to support the training, assessment and credentialling of healthcare providers. These authorisations enable training and credentialling records to be accurately linked to the correct healthcare provider.

The instrument also makes other amendments, including:

- prescribing the Aged Care Quality and Safety Commission and the National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission to assist with assigning healthcare identifiers to the healthcare support service organisations they regulate, and
- permitting gender identity to be included as identifying information of a healthcare provider where relevant and voluntarily provided.

Background

The Healthcare Identifiers Act establishes a national system for assigning unique healthcare identifiers to healthcare recipients, healthcare providers, healthcare provider organisations, and healthcare support service provider organisations, and regulates the collection, use and disclosure of those identifiers for authorised purposes. The Healthcare Identifiers Regulations prescribe additional matters necessary for the operation of the Act, including authorisations for the handling of healthcare identifiers and associated identifying information for specified entities and purposes.

Healthcare identifiers are intended to support the accurate identification of participants in the healthcare system to underpin the safe and accurate exchange of health information between those participants to facilitate efficient and effective delivery of appropriate healthcare services.

Since the Healthcare Identifiers Act commenced, digital health systems and information sharing capabilities have continued to emerge and evolve. Government-funded healthcare directory services play an increasingly important role in enabling healthcare recipients and healthcare providers to locate appropriate healthcare services and providers. These services rely on accurate, consistent and up-to-date information about healthcare providers and the services they offer. The use of healthcare identifiers in these services can assist to reliably distinguish between providers, link information across systems and reduce the risk of misidentification.

Similarly, Clinical Learning Australia, which is the national ePortfolio system for enabling a harmonised approach to recording learning outcomes and credentialling information for healthcare professionals, requires the ability to accurately associate training and credentialling information with the correct healthcare provider across jurisdictions and over time. The use of healthcare identifiers supports this objective by providing an unchanging and unique means of identification.

The amendments in this instrument help to ensure the healthcare identifiers legislative framework continues to support contemporary digital health systems while maintaining appropriate privacy and security protections.

Authority

Section 39 of the Healthcare Identifiers Act provides that the Governor-General may make regulations prescribing matters required or permitted to be prescribed by the Act, or necessary or convenient to be prescribed for carrying out or giving effect to the Act.

Section 25D of the Act provides that regulations may authorise the collection, use or disclosure of identifying information or the healthcare identifier of a healthcare provider and for the adoption of the healthcare identifier of a healthcare provider. Subsection 25D(3) limits the regulation-making power to the collection, use, disclosure or adoption for certain purposes, including to determine whether adequate and appropriate healthcare is available, or to facilitate the provision of adequate and appropriate healthcare, to healthcare recipients, or a class of healthcare recipients.

Subsection 7(1), table items 6 and 7 of section 21 and table item 4 of section 22 of the Healthcare Identifiers Act also provide authority for certain amendments in this instrument, as detailed further in **Attachment A**.

Reliance on subsection 33(3) of the *Acts Interpretation Act 1901*

Subsection 33(3) of the *Acts Interpretation Act 1901* provides that where an Act confers a power to make, grant or issue any instrument of a legislative or administrative character (including rules, regulations or by-laws), the power shall be construed as including a power exercisable in the like manner and subject to the like conditions (if any) to repeal, rescind, revoke, amend, or vary any such instrument.

Commencement

This instrument commences the day after registration on the Federal Register of Legislation.

Consultation

Extensive public and targeted consultation on reform of the healthcare identifiers legislative framework supported a broader principles-based approach to their use in healthcare delivery and the administration of health services. The amendments in this instrument support this approach.

There is broad support from Australian governments, healthcare providers and peak bodies for healthcare identifiers to support the unique identification of healthcare providers and recipients in the provision of healthcare and for healthcare identifiers to be used across digital health programs and infrastructure that support the delivery of health and health-related care.

All state and territory Health Ministers have been consulted on an exposure draft of the proposed Regulations in accordance with section 33 of the Healthcare Identifiers Act.

General

This instrument is a legislative instrument for the purposes of the *Legislation Act 2003*.

Details of this instrument are set out in **Attachment A**.

This instrument is compatible with the human rights and freedoms recognised or declared under section 3 of the *Human Rights (Parliamentary Scrutiny) Act 2011*. A full statement of compatibility is set out in **Attachment B**.

Details of the *Healthcare Identifiers Amendment (Directories and Other Matters) Regulations 2026*

Section 1 – Name

Section 1 provides that the name of the instrument is the *Healthcare Identifiers Amendment (Directories and Other Matters) Regulations 2026*.

Section 2 – Commencement

This instrument commences on the day after it is registered on the Federal Register of Legislation.

Section 3 – Authority

Section 3 provides that the instrument is made under the Healthcare Identifiers Act.

Section 4 – Schedules

This section provides that each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned. Any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1 - Amendments

Healthcare Identifiers Regulations 2020

Item [1] – Section 5

This item inserts the definition of *Clinical Learning Australia* into section 5. Clinical Learning Australia is a national ePortfolio system launched in March 2025, approved by the Medical Board of Australia and operated by the Australian Digital Health Agency. The national ePortfolio is a central place for the recording and management of information relating to the development, training and assessment of postgraduate interns in their two-year pre-vocational training program, and may expand to cover other types of training and professional development over time. This information supports the credentialling of health professionals.

This item also includes reference to *healthcare directory service* which is defined in section 5A (refer to item 2).

Item [2] – After section 5

Section 5A introduces the term *healthcare directory service*. Subsection 5A(1) defines healthcare directory service as a service operated or funded by one or more government bodies to help healthcare recipients and healthcare providers find information about available healthcare services. “Healthcare provider” takes its meaning from the definition in section 5 of the Healthcare Identifiers Act, which includes individual healthcare providers, healthcare provider organisations and healthcare support service providers.

However, the term *healthcare directory service* does not include the Healthcare Provider Directory which is established and authorised to handle healthcare identifiers in Part 5 of the Healthcare Identifiers Act. Rather, the definition covers existing and emerging national, state and territory healthcare directory services that operate outside the Healthcare Identifiers Act

and help healthcare providers and recipients find information about available services appropriate to their needs offered by participating healthcare providers.

An example of a healthcare directory service that would be covered by the definition is the National Health Services Directory, which is a public-facing directory operated by Healthdirect Australia and jointly funded by the Commonwealth, states and territories.

Subsection 5A(2) makes it clear that the definition of healthcare directory service in subsection 5A(1) applies not only to services that make healthcare provider information available directly to healthcare consumers and/or providers, but also to services that collect and supply information about healthcare providers and available services to other service directories that then make that information available to healthcare consumers or healthcare providers.

For example, the definition of healthcare directory service extends to information management-type services, such as Provider Connect Australia operated by the Australian Digital Health Agency. That service collects information from participating healthcare providers and then distributes it to other directory services such as the National Health Services Directory. Healthcare providers who choose to participate in Provider Connect Australia may add, manage and update information about the healthcare services they provide and select the directories they wish that information to appear in.

It is the intention that healthcare directories that make information about healthcare providers available directly to providers and/or consumers should be able to attach the healthcare identifiers of healthcare providers to their business and professional information in the directories. Correspondingly, it is the intention that the information management systems that feed that information to those services should also be covered by the definition of healthcare directory service so they can be similarly authorised to handle healthcare identifiers and identifying information of healthcare providers.

Subsection 5A(3) contains a non-exhaustive list of the types of information about healthcare providers that a directory service using healthcare identifiers may contain, such as:

- a) location and operating hours of a healthcare provider's business
- b) contact information for healthcare providers, whether for general enquiries or secure communications
- c) types of health and care services offered
- d) healthcare providers' training, accreditations, qualifications, and areas of specialisation, e.g. dermatology, oncology, and
- e) information useful to certain groups of healthcare recipients, such as whether facilities are wheelchair accessible or if providers speak languages other than English.

Information in healthcare directory services should be relevant to the provision of adequate and appropriate health and care services to healthcare consumers.

Item [3] – At the end of subsection 8(1)

Subsection 8(1) is amended to add paragraph 8(1)(f), which prescribes the inclusion of an individual healthcare provider's gender identity as part of their identifying information.

Paragraph 7(1)(d) of the Healthcare Identifiers Act already lists the sex of an individual healthcare provider as identifying information if the Healthcare Identifiers service operator or the Healthcare Provider Directory operator requires it for the purpose of performing their functions.

Consultation feedback has suggested that gender identity should also be included as identifying information. Gender identity is a broader construct than biological sex and may be relevant in situations where healthcare consumers are looking for healthcare providers that best meet their needs, or where, for example, a healthcare provider is seeking to refer their patient to a specialist appropriate to their needs.

This means, for example, that the gender identity of individual healthcare providers could be included in healthcare directory services if participating healthcare providers choose to provide that information.

Item [4] – At the end of Part 2

Section 10C – Collection, use and disclosure—assigning a healthcare identifier to a healthcare provider

Section 21 table items 6 and 7 of the Healthcare Identifiers Act enables:

- the Aged Care Department, the National Disability Insurance Agency and any other entity prescribed by the regulations to use and disclose to the Healthcare Identifiers service operator identifying information and healthcare identifiers of healthcare support service provider organisations (table item 6), and
- the Healthcare Identifiers service operator to collect that information from the Aged Care Department, the National Disability Insurance Agency and any other entity prescribed by the regulations (table item 7)

for the purpose of assisting in the assignment of those identifiers, and for Healthcare Provider Directory purposes.

New section 10C prescribes the Aged Care Quality and Safety Commission and the National Disability Insurance Scheme (NDIS) Quality and Safeguards Commission for the purposes of items 6 and 7 of section 21 of the Healthcare Identifiers Act. As regulators of aged care and NDIS service providers respectively, it is appropriate that the Commissions be authorised to handle the healthcare identifiers and identifying information of the health support service provider organisations they regulate to assist the Healthcare Identifiers service operator to assign those identifiers.

Section 10D – Collection, use and disclosure—establishing and maintaining a record of healthcare identifiers for healthcare providers

Section 22 table item 4 of the Healthcare Identifiers Act enables the Healthcare Identifiers service operator to collect from the Aged Care Department, the National Disability Insurance Agency and any other entity prescribed by the regulations, and use, the healthcare identifiers and identifying information of healthcare support service provider organisations for the purpose of assisting the service operator to establish and maintain a record mentioned in section 10 of the Act. Section 10 of the Act requires the service operator to establish and maintain an accurate record of the healthcare identifiers that have been assigned and information that relates to those identifiers, including requests made to the service operator to disclose them.

Since the Aged Care Quality and Safety Commission and the NDIS Quality and Safeguards Commission are to be prescribed to assist in assigning healthcare identifiers to the services they regulate, it follows that they should also be prescribed to assist the service operator to maintain an accurate record about the healthcare identifiers that have been assigned.

Section 10E – Collection, use and disclosure—healthcare provider information in relation to healthcare directory services

New section 10E authorises the healthcare directory services defined in new section 5A (refer to item 2 above) to collect, use and disclose the healthcare identifiers and identifying information of healthcare providers for certain purposes. This provision is made pursuant to subsection 25D(1) of the Healthcare Identifiers Act.

Subsection 10E(2) details the authorisations. Specifically, the operator of a healthcare directory service may collect, use and disclose the healthcare identifier and identifying information of a healthcare provider for the purpose of:

- including information in a database about the healthcare available for provision to healthcare recipients (table item 1), and
- ensuring that information held by the operator is accurate, up to date and complete (table item 2).

Items 1 and 2 of subsection 10E(2) do not specify the entities that the information may be collected from or disclosed to. Therefore, healthcare directory service operators would be permitted to collect and disclose healthcare provider healthcare identifiers and identifying information from any entity. However, because the Healthcare Identifiers Act and Regulations tightly control the handling of healthcare identifiers and identifying information of healthcare providers, this is to be interpreted as authorising a healthcare directory service operator to collect from and disclose to any person or organisation with lawful authority under the Healthcare Identifiers Act or Regulations, or any other law, to handle that information. For example, this would include the Healthcare Identifiers service operator, the Healthcare Provider Directory Operator, individual healthcare providers, healthcare provider organisations and healthcare support service provider organisations, health administration entities and other entities that are authorised to collect, use and disclose this information, such as registration or regulation bodies.

Complementary authorisations in subsection 10E(2), table item 3 enable any entity that has access to the healthcare identifier or identifying information of a healthcare provider to disclose that identifier and identifying information to a healthcare directory service operator for the above purposes.

These authorisations also enable healthcare directory services to disclose information to other healthcare directory services to include in their directories or databases to ensure accuracy and consistency. For example, participating healthcare providers would be able to add and update their information in Provider Connect Australia. Provider Connect Australia would then be able to share that information with other directories such as the National Health Services Directory.

Healthcare directory service operators are further authorised to disclose (to any authorised entity) the healthcare identifiers and identifying information of healthcare providers for the purpose of facilitating the provision of adequate and appropriate healthcare to healthcare recipients, or a class of healthcare recipients (table item 4).

Finally, an operator of a healthcare directory service may collect the healthcare identifier of a healthcare provider from the Healthcare Identifiers service operator for the purpose of enabling the healthcare provider's identity to be authenticated (table item 5). This is to ensure that the correct information is connected to the right healthcare provider for accuracy and privacy purposes.

Together, the authorisations in subsection 10E(2) enable a seamless flow of consistent and accurate information about available health and health support services between directories, providers and consumers to help facilitate choice about appropriate health and care options.

These authorisations are enabling only and do not require any entity to take any action.

Subsection 10E(3) qualifies the authorisations in subsection 10E(2) by providing that they only apply if the healthcare provider to whom the healthcare identifier or identifying information relates has consented to making information regarding their provision of healthcare accessible through healthcare directory services.

The intent of subsection 10E(3) is not to require healthcare providers to consent to every collection, use or disclosure of their healthcare identifier and identifying information by healthcare directory service operators. Rather, it means the healthcare provider must have agreed to participate in that directory service. This means healthcare directory service operators can handle healthcare identifiers and identifying information for any provider listed in their directory, but they cannot collect, use and disclose information about providers who have not chosen to participate.

10F -- Collection, use and disclosure—healthcare provider information in relation to Clinical Learning Australia

Section 10F details the authorisations that apply to the operator of Clinical Learning Australia, as defined in section 5 of the amended Regulations (refer to item 1 above). These authorisations are established under subsection 25D(1) of the Healthcare Identifiers Act.

Under subsection 10F(2), the operator of Clinical Learning Australia may collect, use and disclose the healthcare identifier and identifying information of a healthcare provider for the purposes of Clinical Learning Australia.

Where the operator of Clinical Learning Australia is authorised under subsection 10F(2) for a purpose, the Healthcare Identifiers service operator or another authorised entity is authorised to:

- disclose the identifying information or healthcare identifier to the operator of Clinical Learning Australia for that purpose under subsection 10F(3), and
- collect the identifying information or healthcare identifier from the operator of Clinical Learning Australia for that purpose under subsection 10F(4).

For example, where a hospital or health administration entity discloses a doctor's healthcare provider identifier to Clinical Learning Australia to establish and manage a doctor's training record, subsection 10F(3) authorises that disclosure because it is for a purpose of Clinical Learning Australia and therefore authorised under subsection 10F(2). Subsection 10F(4) authorises the hospital or health administration entity to collect the same information back from Clinical Learning Australia to validate the doctor's training credentials as that purpose is also authorised under subsection 10F(2).

Similarly, the above subsections would authorise Clinical Learning Australia to validate a healthcare provider's healthcare identifier with the Healthcare Identifiers service operator for the purpose of establishing and maintaining a doctor's training record. It would also authorise the service operator to disclose the healthcare provider's healthcare identifier to Clinical Learning Australia for that purpose.

Being able to attach a healthcare provider's healthcare identifier to their record of training and credentials means that this information will be correctly associated with the right healthcare provider regardless of when or where in Australia that training was performed or

those credentials were obtained. This is because healthcare identifiers uniquely identify individual healthcare providers and organisations within the healthcare system. Other numbers, such as registration numbers allocated by the Australian Health Practitioner Regulation Agency (Ahpra), are not unique, given that healthcare practitioners may be assigned multiple Ahpra registration numbers for different specialties.

Statement of Compatibility with Human Rights

Prepared in accordance with Part 3 of the Human Rights (Parliamentary Scrutiny) Act 2011

Healthcare Identifiers Amendment (Directories and Other Matters) Regulations 2026

This Disallowable Legislative Instrument is compatible with the human rights and freedoms recognised or declared in the international instruments listed in section 3 of the *Human Rights (Parliamentary Scrutiny) Act 2011*.

Overview of the Disallowable Legislative Instrument

The *Healthcare Identifiers Act 2010* (the Act) establishes a system for the assignment of national identifiers to uniquely identify healthcare recipients, providers and provider organisations and healthcare support service provider organisations. The Act and the *Healthcare Identifiers Regulations 2020* authorise the collection, use, disclosure and adoption of identifiers for particular purposes.

Healthcare providers may be assigned many identifiers throughout their career, e.g. provider numbers, prescriber numbers, registration numbers for each specialty they practice. However, healthcare identifiers are the only identifiers that uniquely identify individual practitioners and organisations within the healthcare system. It is therefore critical to embed healthcare identifiers into health workflows to ensure the accurate linking of the right information with the right healthcare provider. This instrument furthers the intent of the healthcare identifiers framework by supporting the secure and appropriate use of healthcare identifiers for authorised purposes in connection with approved digital health capabilities.

The *Healthcare Identifiers Amendment (Directories and Other Matters) Regulations 2026* (the instrument) extends authorisations to enable operators of government-funded healthcare directory services and the operator of the new national ePortfolio system for credentialling healthcare professionals to handle the healthcare identifiers of healthcare provider individuals and organisations, along with identifying information of healthcare providers.

The instrument authorises the collection, use and disclosure of individual healthcare provider identifiers (HPI-Is), healthcare provider identifiers for organisations (HPI-Os) and identifiers for healthcare support service organisations (HSPOs), and identifying information of those providers, by operators of government-funded healthcare directory services, and by other entities that interact with those services. These authorisations only apply to information about healthcare providers who choose to participate in the directory services. These amendments are intended to support the operation of authoritative, accurate and up-to-date directories of healthcare and support service providers to facilitate the provision of adequate and appropriate healthcare to healthcare recipients, or classes of healthcare recipients.

The types of government-funded healthcare directory services authorised to handle healthcare identifiers under this instrument include:

- directories that make information about healthcare providers available directly to healthcare consumers and other providers, e.g. the National Health Services Directory, which is a public-facing directory operated by Healthdirect Australia and jointly funded by the Commonwealth and states and territories

- information management services that collect information about healthcare providers and services and supply that to other service directories that then make it available to healthcare providers and/or consumers.

The authorisations in this instrument do not apply to the national Healthcare Provider Directory which is established and authorised under Part 5 of the Healthcare Identifiers Act.

The instrument will also authorise the collection, use and disclosure of healthcare provider healthcare identifiers and identifying information for the purposes of Clinical Learning Australia, which operates the national ePortfolio system for credentialling healthcare professionals.

The instrument also makes the following changes:

- including gender identity of a healthcare provider as identifying information where this may be relevant in helping a healthcare consumer or provider choose a healthcare provider that is best suited to the consumer's needs, and
- prescribing the Aged Care Quality and Safety Commission and the National Disability Insurance Scheme Quality and Safeguards Commission for the purposes of section 21, items 6 and 7 of the Healthcare Identifiers Act to handle the healthcare identifiers and identifying information of support service providers to assist with assigning those identifiers to the providers they regulate.

The amendments in this instrument will help to ensure that healthcare identifiers continue to support and underpin contemporary digital health systems while maintaining appropriate privacy and security protections.

Human rights implications

The instrument engages the following rights:

- Article 12(1) of the International Covenant on Economic, Social and Cultural Rights (ICESCR) being the right to the enjoyment of the highest attainable standard of physical and mental health; and
- The right to privacy under Article 17 of the International Covenant on Civil and Political Rights (ICCPR).

The Right to Health

The amendments in this instrument authorise the handling of healthcare identifiers and associated identifying information by operators of government-funded healthcare directory services and the operator of the new national ePortfolio system for credentialling healthcare professionals.

Article 12(1) of the ICESCR provides that everyone has the right to the enjoyment of the highest attainable standard of physical and mental health.

The amendments promote the right to health by supporting the operation of authoritative and up-to-date healthcare directory services that enable healthcare recipients, healthcare providers and other authorised entities to identify and facilitate access to appropriately qualified healthcare providers. By authorising the use of unique healthcare provider identifiers, the instrument supports accurate provider identification, reduces the risk of misidentification, and facilitates efficient service discovery, contributing to the delivery of safe, appropriate and effective healthcare services.

Authorisations to use healthcare provider identifiers in healthcare directory services and for healthcare provider training and credentialing purposes will help to facilitate information about appropriate and adequate care available for healthcare recipients, delivered by suitably qualified professionals.

Overall, it will mean healthcare providers (and the consumers they are supporting) can more easily locate available healthcare and support services and communicate more efficiently with other healthcare providers. In supporting the greater visibility of healthcare provider information that will facilitate the delivery of health services, the instrument positively affects the right to health.

The Right to Privacy

Protection against arbitrary or unlawful interference with privacy is contained in Article 17 of the ICCPR. Article 17 provides that no one shall be subjected to arbitrary or unlawful interference with their privacy, family, home or correspondence, nor to unlawful attacks on their honour or reputation, and that everyone has the right to the protection of the law against such interference or attacks.

The right to privacy includes respect for informational privacy, including in respect of storing, using and sharing private information and the right to control the dissemination of personal and private information. The right to privacy also includes the right to the protection of one's personal data. The right to privacy under Article 17 can be permissibly limited to achieve a legitimate objective and where the limitations are lawful and not arbitrary. The term 'unlawful' in Article 17 of the ICCPR means that no interference can take place except as authorised under domestic law.

The amendments in this instrument engage the right to privacy because they authorise the use of healthcare identifiers as a secure and reliable means of accurately identifying healthcare providers, reducing the need to use less reliable or duplicative personal information. Using a unique identifier enables government-funded healthcare directory service operators and Clinical Learning Australia to accurately distinguish between providers with similar names, shared practice locations or multiple professional roles. Other identifiers such as provider or prescriber numbers, or even numbers provided by the Australian Health Practitioner Regulation Agency, are less reliable as they are intended to serve different purposes and healthcare providers may have more than one of these numbers if they work in different locations or practice in more than one specialty area. Healthcare identifiers promote data integrity and reduce the risk that personal or professional information is incorrectly attributed to the wrong individual, which is a key privacy risk in directory-based systems.

Enabling directory operators and Clinical Learning Australia to collect the healthcare identifiers of healthcare providers from the Healthcare Identifiers service operator, which is a verified source of truth, further protects privacy by ensuring that the right information is associated with the right provider. Enabling operators of healthcare directory services to collect and disclose information from any authorised entity means that operators can exchange information with each other, facilitating safe and accurate sharing of provider information and lessening the need for directories to collect information multiple times from healthcare providers.

Importantly, the authorisations for operators of healthcare directory services only apply in respect of providers who have agreed to be listed in, or otherwise participate in, those directories, further limiting the scope of information handling.

The authorisations are limited to specific, clearly defined purposes related to the operation of healthcare directory services and operate within the existing safeguards of the Healthcare Identifiers Act and the *Privacy Act 1988* (Privacy Act). These safeguards include requirements for entities that hold healthcare identifiers to take reasonable steps to protect them from misuse, loss and unauthorised access, modification or disclosure. Significant penalties apply for unauthorised use and disclosure of healthcare identifiers. Unauthorised collection, use or disclosure will also be an interference with, or breach of, privacy under the Privacy Act.

As with all authorisations in the Healthcare Identifiers Act and Regulations, these amendments are enabling only and do not impose any mandatory obligations to collect, use or disclose healthcare provider information.

Accordingly, the limitations on the right to privacy under the instrument are reasonable, necessary and proportionate as they appropriately balance the competing objectives of facilitating the delivery of adequate and appropriate healthcare with an individual's right to privacy.

Conclusion

The proposed amendments are compatible with human rights because they promote better health outcomes for Australians by enabling efficient and effective access to health services by trusted providers. The instrument engages the right to privacy for the legitimate objective of promoting better information about available and appropriate health services. To the extent that the right to privacy is limited, this is reasonable, necessary and proportionate in the circumstances.

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