



Australian Government

National Archives of Australia

Records Authority
Medicare Australia

Job no 2009/00181784

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INTRODUCTION

Medicare Australia and the National Archives of Australia have developed this Records Authority to set out the requirements for keeping or destroying records for the core business areas of Business Development and Service Delivery, Health and Medical Payments Services, Health and Medical Register Services and Medical Indemnity. It represents a significant commitment on behalf of Medicare Australia to understand, create and manage the records of its activities.

This Authority is based on the identification and analysis of the business of Medicare Australia. It takes into account the agency's legal and organisational records management requirements, and the interests of stakeholders, the agency and the National Archives of Australia.

This Authority gives Medicare Australia permission under the *Archives Act 1983*, for the destruction, retention or transfer to the National Archives of Australia of the records described. The Authority sets out those records that need to be retained as national archives and the minimum length of time that temporary records need to be kept. Retention periods for these temporary records are based on: an assessment of business needs; broader organisational accountability requirements; and community expectations, and are approved by the National Archives of Australia on the basis of information provided by the agency.

Medicare Australia may use the following tools to dispose of their records:

- this Records Authority covering its agency specific records;
- general records authorities, such as the Administrative Functions Disposal Authority (AFDA), covering business processes and records common to Australian Government agencies; and
- normal administrative practice (NAP) which allows for the destruction of records where the records are duplicated, unimportant or for short-term use only.

As changes in circumstances may affect future records management requirements, the periodic review of this Authority is recommended. All amendments must be approved by the National Archives.

Advice on using this Authority and other records management matters is available from the National Archives' website at www.naa.gov.au or by contacting the Agency Service Centre at recordkeeping@naa.gov.au or (02) 6212 3610.

APPLICATION OF THIS AUTHORITY

1. Upon issue of this Authority, Records Disposal Authorities (RDAs) 1177 (1995) and 1240 (1996) can no longer be used by Medicare Australia to sentence records. RDAs 1233 (1996), 1252 (1996), 1270 (1996) are superseded by the Authority and cannot be used for sentencing after the date of issue of the Authority.
2. The core business of Business Development and Service Delivery includes Medicare Australia's input into policy development. High level policy related to health and medical services, including medical indemnity, is determined by the Minister of the relevant lead agency such as the Department of Health and Ageing and the Department of Human Services or agencies contracting Medicare Australia to provide agreed services.
3. This Authority should be used in conjunction with the Administrative Functions Disposal Authority (AFDA) issued by the National Archives to cover administrative records common to Australian Government agencies.
4. This Authority should be used in conjunction with general disposal authorities issued by the National Archives that cover other types of records that may be created by Medicare Australia, such as encrypted records and source records that have been copied.
5. This Authority is to be used to sentence records. Sentencing involves the examination of records in order to identify the individual disposal class to which they belong. This process enables sentencers to determine how long records need to be kept. Advice on sentencing is available from the National Archives.
6. Where the method of recording information changes (for example from a manual system to an electronic system, or when information is migrated from one system to a new system) this Authority can still be used to sentence the records created, providing the records document the same core business. The information must be accessible for the period of time prescribed in this Authority. Medicare Australia will need to ensure that any software, hardware or documentation required to enable continuing access to the information is available for the periods prescribed.
7. In general, retention requirements indicate a minimum period for retention. Medicare Australia may extend minimum retention periods if it considers that there is an administrative need to do so, without further reference to the National Archives. Where Medicare Australia believes that its accountability will be substantially compromised because a retention period or periods are not adequate, it should contact the National Archives for review of the retention period.
8. Medicare Australia may destroy certain records without formal authorisation as a normal administrative practice. This usually occurs where the records are duplicated, facilitative or for short-term use only. NAP does not replace the arrangements agreed to in records authorities. Advice and guidance on destroying records as a normal administrative practice is available from the National Archives' website at www.naa.gov.au.
9. From time to time the National Archives will place a freeze on some groups of records to prevent their destruction. Further information about disposal freezes and whether they affect the application of this Authority is available from the National Archives website at www.naa.gov.au.
10. Records in the care of Medicare Australia should be appropriately stored and preserved. Medicare Australia needs to meet this obligation to ensure that the records remain authentic and accessible over time. Under section 31 of the Archives Act 1983, access arrangements are

required for records that are in the open access period (currently after 30 years).

11. Appropriate arrangements should be made with the National Archives when records are to be transferred into custody. The National Archives accepts for transfer only those records designated as national archives.
12. Advice on how to use this Authority is available from Medicare Australia's records manager. If there are problems with the application of the Authority that cannot be resolved, please contact the National Archives.

CONTACT INFORMATION

For assistance with this authority or for advice on other records management matters, please contact National Archives' Agency Service Centre.

Queen Victoria Terrace
Parkes ACT 2600
PO Box 7425
Canberra Mail Centre ACT 2610

Tel: (02) 6212 3610
Fax: (02) 6212 3989
Email: recordkeeping@naa.gov.au
Website: www.naa.gov.au

AUTHORISATION

RECORDS AUTHORITY

Person to whom notice of authorisation is given:

Chief Executive Officer
Medicare Australia
134 Reed Street
Tuggeranong ACT 2901

Purpose:

Authorises arrangements for the disposal of records in accordance with Section 24(2)(b) of the Archives Act 1983

Application:

Business Development and Service Delivery
Health and Medical Payments Services
Health and Medical Register Services
Medical Indemnity

This authorisation gives permission for the destruction, retention or transfer to the National Archives of Australia of the records described. The authority will apply only if these actions take place with the consent of the agency responsible for the core business documented in the records.

Authorising Officer

Date of issue:



3 June 2009

Ross Gibbs
Director-General
National Archives of Australia

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BUSINESS DEVELOPMENT AND SERVICE DELIVERY

The core business of providing agreed services such as family assistance and aged care payments and health screening programs, on behalf of government agencies or commercial enterprises for an agreed fee, and research and development of new business opportunities on behalf of the Commonwealth Government. Also includes Medicare Australia's involvement in government policy, program development and business activities such as international consultancies, where Medicare Australia successfully tenders for, or is asked to provide services.

These opportunities may leverage Medicare Australia's current capability such as the use of Medicare Australia's network of branch offices for depositing forms for other government programs or build on this capability for the future where the agency acts as a test-bed for government initiatives in particular areas such as e-commerce including e-signatures, public key infrastructure (PKI) and a unique health identifier (UHI). It may also involve service delivery improvements such as online claiming. Also includes consulting for other countries in Medicare Australia's areas of expertise.

Includes:

- Identification of the business opportunity either by Medicare Australia or a potential business partner
- Research and development of the capability required to support the business opportunity including testing
- Provision of advice in relation to government policy, programs and initiatives that impact on Medicare Australia's business
- Documentation of the capability including business case development, commercialisation and production/implementation plans and registration of any intellectual property
- Stakeholder engagement and liaison with business partners and potential business partners on implementation of the program, policy initiative, business or service capability
- Reporting to government on the potential for use and business benefit across government
- Competing to deliver a new piece of business or consulting service such as international consultancies
- Negotiation of the service to be provided including the nature of the service, agreed performance criteria, service delivery mechanisms, reporting and fees payable for the service
- Reporting on the service for management purposes such as auditing, monitoring of performance and to customer agencies or businesses on services delivered
- Education of stakeholders such as potential business partners, agency management and staff about the application of the business or service capability.

For the financial management of the contracted services (including service initiatives and incentive payments) such as invoicing and payment records use *FINANCIAL MANAGEMENT – Agreements*

Entry	Description of records	Disposal action
20157	<p>Records relating to the planning, research, scoping and project management of business and service development opportunities and projects where the opportunity or project makes a significant contribution to health services delivery, arouses extensive debate or wide interest, employs new or innovative techniques, employs 'first of a kind' processes or products or significantly improves on an existing product or application including:</p> <ul style="list-style-type: none"> • expansion or redevelopment of Medicare Australia's business such as locations for Medicare offices and the introduction of innovative technology or business processes to support the business • involvement of Medicare Australia in government policy and program initiatives 	Retain as national archives

BUSINESS DEVELOPMENT AND SERVICE DELIVERY

Entry	Description of records	Disposal action
20157 cont'd	<ul style="list-style-type: none"> • stakeholder engagement including consultation committees • tasking by government or identification of opportunities by an agency or Medicare Australia • research of industry best practice and the business needs of government agencies including project scoping documentation. <p>Project management records including: service and system planning, design and testing; technology and equipment design and testing; privacy impact assessments; risk management assessments; business cases; industry and stakeholder consultation and liaison; change management activities; project progress and evaluation reports; project closure.</p>	
20158	<p>Records relating to the planning, research, scoping and project management of routine business and service development opportunities and projects including:</p> <ul style="list-style-type: none"> • expansion or redevelopment of Medicare Australia's business such as introduction of technology or business processes to support the business • stakeholder engagement including consultation committees • tasking by government or identification of opportunities by an agency or Medicare Australia • research of industry best practice and the business needs of government agencies including project scoping documentation. <p>Project management records including: service and system planning, design and testing; technology and equipment design and testing; privacy impact assessments; risk management assessments; business cases; industry and stakeholder consultation and liaison; change management activities; project program and evaluation reports; project closure.</p>	Destroy 10 years after last action
20160	<p>Records relating to agreements with customer agencies, provider representative organisations and businesses including:</p> <ul style="list-style-type: none"> • final versions of agreements • signed deeds of release and deeds of indemnity and other similar agreements and supporting documents • signed agreements and contracts under seal and supporting records • simple signed contracts and agreements resulting from tenders and supporting records • progress and final reports • communication and liaison with customers • research and related activity. 	Destroy 15 years after completion or other termination of contract or indemnity expires

BUSINESS DEVELOPMENT AND SERVICE DELIVERY

Entry	Description of records	Disposal action
20159	Records relating to the supporting administration of contracted services including: <ul style="list-style-type: none">• tendering or proposals for consultancies or new businesses• the negotiation, planning, development, testing and implementation of service design, guidelines, procedures and service performance• monitoring, evaluation and reporting on service quality in relation to agreed performance and compliance requirements including feedback and complaints forms and survey results• administration of committees and working groups related to business development and service delivery.	Destroy 7 years after expiry or other termination of the agreement

HEALTH AND MEDICAL PAYMENTS SERVICES

The core business of making payments to eligible claimants in the form of government approved health and medical related benefits, incentives, reimbursements and rebates.

Includes:

- Supporting administration for health and medical payment services
- Determination of eligibility under the relevant legislation or through an agreement with another agency; eligible enrollees include Australian residents, medical practitioners, pharmacists, hospitals, mental health providers, aged care providers, pharmaceutical associations, medical practices, medical graduates and pathology laboratories; notification of eligibility or otherwise
- Enrolment and registration of eligible applicants for payments for a range of schemes such as Medicare, pharmaceutical benefits, hearing services, pathology, private health insurance rebate, rural retention program and immunisation incentive payments for general practitioners and reimbursements of fees for medical students
- Receipt of claims for payment from claimants for approved schemes and services
- Processing of claims for payment including assessment of eligibility for the claim according to the business rules of the relevant scheme and including compensation recovery; notification of payment or non-payment to claimant where appropriate
- Making the appropriate payment to the claimant
- Investigating overpayment and fraud including receipt of information, monitoring of excessive and non-compliant claims, investigation activities such as document checks, compliance audits and other methods of establishing overpayment or non-compliance; also includes referral for prosecution
- Practitioner review including requests to review a practitioner, the review process including notification of the outcomes from a professional services review, action following from a review such as the revocation or suspension of approval to supply under the Pharmaceutical Benefits Scheme or suspension of access to Medicare
- Recovery of overpayment based on information establishing amount of overpayment and calculation of repayment amount and method of repayment
- Preparation of reports for management purposes such as auditing, monitoring and investigations for fraud and overpayment and other service performance reporting
- Education of providers and potential providers in how to participate in the health and medical payment schemes
- Responding to appeals relating to ineligibility for registration or payment
- Provision of reports and data from health and medical payments databases for government policy development, epidemiological studies and personal information for individual clients, their families and carers.

Entry	Description of records	Disposal action
20169	<p>Records relating to investigations of non-compliant and fraudulent activity and recovery of overpayments, relating to Medicare and other health and medical payment services, from the commencement of the Health Insurance Commission (1974) to the formation of the Professional Services Review Scheme (1994), where the investigation led to changes in legislation, set legal precedents or relates to long-term health issues. Records include:</p> <ul style="list-style-type: none"> • reports and recommended action following investigations • reports relating to compliance with relevant legislation • briefs for prosecution or legal action or professional review. 	Retain as national archives

HEALTH AND MEDICAL PAYMENTS SERVICES

Entry	Description of records	Disposal action
20203	<p>De-identified datasets from the national health and medical payments databases used to generate health and wellbeing statistics. Datasets here are understood as periodic snapshots of data exported from the databases. The datasets covered are limited to those used to generate health and wellbeing statistics. Data relevant to generating health and wellbeing statistics is understood as that relating to the provision of services to promote the health and wellbeing of Australians, for example the data generated in the delivery of aged care services, Medicare and the Pharmaceutical Benefits Scheme.</p> <p>Suitable formats for data exports for transfer under this class should be discussed with National Archives before exports occur.</p> <p>Records include:</p> <ul style="list-style-type: none"> • master datasets • metadata supporting the datasets including data dictionaries • records documenting the development and maintenance of the databases used to generate the datasets. 	Retain as national archives
20204	Health and medical payments databases, such as Consumer Directory Maintenance System and Provider Directory System.	Disposal not authorised
20161	<p>Records relating to policy interpretation for Medicare assessing, benefits and claims advice and review, and decisions related to item number and client information including:</p> <ul style="list-style-type: none"> • policy advice and interpretation • problem resolution documentation. 	Disposal not authorised
20162	<p>Records relating to the routine supporting administration of Medicare and other health and medical payment services including:</p> <ul style="list-style-type: none"> • the planning, development and implementation of services • monitoring, evaluation and reporting of service quality in relation to agreed standards and compliance requirements includes feedback register and complaints response • liaison with business partners and other stakeholders such as health and medical groups and government customers, regarding health and medical payment services • administration of committees and working groups related to health and medical payments services. 	Destroy 7 years after last action
20163	<p>Records relating to the eligibility and enrolment for Medicare health and medical payment services including:</p> <ul style="list-style-type: none"> • applications for Medicare, amendment of details and replacement/duplicate Medicare cards • determination of eligibility for Medicare • notification of eligibility or otherwise including Medicare Levy Exemption Certificates • enrolment and registration for Medicare. 	Destroy 2 years after last action

HEALTH AND MEDICAL PAYMENTS SERVICES

Entry	Description of records	Disposal action
20164	<p>Records relating to the eligibility and enrolment for specific initiatives and special assistance programs involving health and medical payment services such as the Cleft Palate Scheme, the Mental Health Nurse Incentive Program, Bali 2005 Special Assistance. Records include:</p> <ul style="list-style-type: none"> • applications for program • determination of eligibility • notification of eligibility or otherwise • enrolment and registration for health and medical payment services. 	Destroy 7 years after cessation of the program or eligibility for the program ceases
20166	<p>Records relating to aged care related registration and eligibility including:</p> <ul style="list-style-type: none"> • applications for aged care • resident classification • notification of eligibility or otherwise • resident admission to nursing homes and other aged care programs. 	Destroy 5 years after action completed
20167	<p>Records relating to the eligibility and registration of providers for Medicare and other health and medical payment services such as the Pharmaceutical Benefits Scheme, including:</p> <ul style="list-style-type: none"> • applications from medical and health practitioners, pharmacies etc for registration in provider payment, services and incentive schemes and initiatives • determination of eligibility as a provider for Medicare and other health and medical payment services • notification of eligibility or otherwise • registration for health and medical payment services including requests and certificates for electronic payment schemes and methods • receipt of appeals application and preparation of appeals documentation relating to non-registration of providers. 	Destroy 25 years after last action
20168	<p>Records relating to the eligibility and registration of providers for provider schemes introduced to support health and medical initiatives and incentives including:</p> <ul style="list-style-type: none"> • applications for registration in incentive schemes and initiatives • determination of eligibility • notification of eligibility or otherwise • registration including requests and certificates for electronic payment schemes and methods • preparation of appeals documentation relating to non-registration of providers. 	Destroy 15 years after last action

HEALTH AND MEDICAL PAYMENTS SERVICES

Entry	Description of records	Disposal action
20170	<p>Records relating to the eligibility and registration of pharmacies, pathology laboratories and collections centres as providers for Medicare and other health and medical payment services including:</p> <ul style="list-style-type: none"> • applications from potential providers • determination of eligibility as a provider • notification of eligibility or otherwise • registration for payment services including requests and certificates for electronic payment schemes and methods • preparation of appeals documentation relating to non-registration of providers. 	<p>Destroy 7 years after change of ownership, relocation or closure of a pharmacy or approved pathology laboratory or collection centre</p>
20171	<p>Records relating to the making of payments to eligible payees such as aged care providers, including:</p> <ul style="list-style-type: none"> • receipt of claim forms • processing of approved claims for payment • payment action including electronic funds transfer, cheques and cash payments • notification of payment • preparation of appeals documentation relating to claims and associated payments. 	<p>Destroy 7 years after last action</p>
20172	<p>Records relating to the recovery of compensation payments including:</p> <ul style="list-style-type: none"> • notification of payments • notification of judgments • approval of claims including compensation recovery determination • payment action including electronic funds transfer, cheques and cash payments • notification of payment or recovery action to payee • garnishees to recover money from providers. 	<p>Destroy within 5 years of receipt of claim unless recovery action is still active then destroy when recovery action finalised</p>
20173	<p>Claim forms for health and medical payments including:</p> <ul style="list-style-type: none"> • Medicare claim forms • bulk billing forms • pharmaceutical benefits claim forms • authority prescriptions. 	<p>Destroy 2 years after date of claim if not required for investigation</p>
20174	<p>Records relating to investigations of non-compliant and fraudulent activity and recovery of overpayments relating to Medicare and other health and medical payment services, such as the Pharmaceutical Benefits Scheme, the 30% rebate on private health insurance or special assistance programs such as the Cleft Palate Scheme, the Mental Health Nurse Incentive Program, Bali 2005 Special Assistance. Records include:</p> <ul style="list-style-type: none"> • receipt of information from the general public, police and other sources about non-compliance, overpayment or fraudulent activity 	<p>Destroy 10 years after investigation and/or court action or professional review and case officially closed</p>

HEALTH AND MEDICAL PAYMENTS SERVICES

Entry	Description of records	Disposal action
20174 cont'd	<ul style="list-style-type: none"> • reports identifying potential non-compliance and fraudulent and overpayment activity from internal and external sources • investigation activities including auditing, data detection, data analysis, monitoring, evidence collected, reports of interviews and correspondence with practitioners • reports and recommended action following investigations • briefs for prosecution or legal action or professional review • reports relating to compliance with relevant legislation • documentation and correspondence from professional review authorities and findings of the determining authority • reports relating to compliance with relevant legislation • evidence of recovery of overpayment. 	
20175	<p>Records relating to the education of providers and potential providers in Medicare and other health and medical payment services including:</p> <ul style="list-style-type: none"> • attendance at meetings and presentations to community and target groups • liaison with community and target group stakeholders • presentations and participation at conferences of health and medical professionals, practitioners and other service providers • development and implementation of advertising, media and other promotion campaigns supporting health and medical payment services • mailouts to providers eg dentists. 	Destroy 5 years after last action
20176	<p>Records relating to the provision of information and data from the agency's medical and health databases for research and related purposes including:</p> <ul style="list-style-type: none"> • data provided routinely to services such as the national prescribing services • applications for data and supporting documentation provided to related evaluation committees. 	Destroy 10 years after last action
20177	<p>Records relating to the provision of individual Medicare histories including:</p> <ul style="list-style-type: none"> • requests for Medicare histories • provision of Medicare histories. 	Destroy 2 years after date of request

HEALTH AND MEDICAL REGISTER SERVICES

The core business of establishing, updating and maintaining national registers relating to health and medical matters such as childhood immunisation, organ donation and bowel cancer screening. This core business provides de-personalised data from the health and medical registers to organisations and agencies for research purposes.

Includes:

- Supporting administration in relation to the health and medical registers
- Receipt and acknowledgement of requests for registration
- Creation, updating and monitoring of registers
- Provision of reports and data from registers for government policy development, eligibility for payments to providers, epidemiological studies and personal information for registrants, their families and carers.

For authorisation and making of payments relating to health and medical registers use *HEALTH AND MEDICAL PAYMENT SERVICES*

Entry	Description of records	Disposal action
20179	National health and medical registers including: <ul style="list-style-type: none"> • masters of the registers • metadata supporting the registers including data dictionaries • records documenting the development and maintenance of the registers. 	Retain as national archives
20180	Records relating to the supporting administration of health and medical register services including: <ul style="list-style-type: none"> • requests for registration • notification of objection to a registration • identification of target groups • determination of eligibility for registration on a health and medical register • notification of eligibility for registration or otherwise • lodgement of details of registrants onto the register • automatic population of registers from Medicare enrolment action • revision and updating of details where required • the development and implementation of procedures including creation of the registration process using online or physical forms • reporting, monitoring and evaluation of service quality in relation to agreed standards and compliance requirements • planning processes for service improvements • liaison with stakeholders such as health and medical groups and government customers, regarding health and medical register services • administration of committees and working groups related to health and medical register services. 	Destroy 7 years after last action

HEALTH AND MEDICAL REGISTER SERVICES

Entry	Description of records	Disposal action
20181	Records relating to the provision of routine requests for and provision of information from registers including a person's individual immunisation history including: <ul style="list-style-type: none">• requests for personal histories and related information• provision of histories.	Destroy 5 years after date of request
20182	Records relating to the provision of information and data from the agency's medical and health registers for research and related purposes including: <ul style="list-style-type: none">• data provided for research purposes• applications for data and supporting documentation provided.	Destroy 10 years after last action

MEDICAL INDEMNITY

The core business of administering medical indemnity insurance to reduce the impact of large claims against medical practitioners. The aim is to make medical indemnity insurance more affordable for medical practitioners.

Also includes:

- Handling enquiries in relation to medical indemnity
- Development of procedures and service delivery guidelines and business rules
- Invoicing and receipt of payments for medical indemnity cover from medical practitioners and United Medical Protection (UMP)
- Determination of eligibility for a scheme under the medical indemnity legislation, notification of eligibility or otherwise
- Enrolment and registration of eligible applicants for payments and subsidies relating to medical indemnity schemes
- Receipt of claims for payment or subsidy from claimants for approved schemes
- Investigating overpayment and fraud including receipt of information, monitoring of non-compliant claims, investigation activities such as data and document checks, compliance audits and other methods of establishing that offences have been committed under the relevant legislation; also includes referral for prosecution, where appropriate
- Recovery of overpayment based on information establishing amount of overpayment and calculation of repayment amount and method of repayment
- Preparation of reports for management purposes such as auditing and monitoring and other service performance reporting.

Entry	Description of records	Disposal action
20178	Records relating to investigations of fraudulent activity and recovery of overpayments relating to medical indemnity payments including: <ul style="list-style-type: none"> • reports identifying potential fraudulent and overpayment activity from internal and external sources • investigation documentation including audit reports and evidence collected • reports and recommended action following investigations • briefs of evidence for professional review, prosecution and/or legal action including evidentiary certificates • court or review decision and resulting action • evidence of recovery of overpayment. 	Destroy 10 years after investigation and/or court action and case officially closed
20165	Records relating to the administration of medical indemnity schemes including: <ul style="list-style-type: none"> • applications for schemes • determination of eligibility • notification of eligibility or otherwise • invoices for payment • payments receipts • enquiries relating medical indemnity 	Destroy 7 years after last action

MEDICAL INDEMNITY

Entry	Description of records	Disposal action
20165 cont'd	<ul style="list-style-type: none">• correspondence and evidence of meetings and other liaison or contact with medical indemnity providers• service planning and procedures and service delivery reference documents• reports monitoring and evaluating service quality in relation to agreed performance standards and compliance requirements• reports as specified under the relevant legislation• administration of committees and working groups related to medical indemnity matters.	