



**Australian Government**

**Department of Health**

# **Electronic Prescriptions: Active Script List Release 1 – Privacy Framework**

**Version 1.0**

**Active Script List release 1 – Privacy Framework  
May 2021**

## Change history

<b>Date created</b>	<b>February 2021</b>
Document owner	Digital Health and Services Australia Branch, Provider Benefits Integrity Division
Date of approval	May 2021
Version	1.0

## Active Script List – Release 1

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The following privacy, identity and consent processes relate to release 1 of the implementation of Active Script List functionality.

### Active script list

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Since the introduction of electronic prescribing, patients now have the choice to receive their prescriptions electronically as an alternative to a paper prescription.

If a patient chooses to receive their prescription electronically, they have the choice of how they wish to manage their prescriptions. The patient can choose to receive a token (barcode/QR code) for their prescription, provided either on paper, via SMS, email or via a mobile app. Or the patient can instead choose to manage their prescriptions using an Active Script List (ASL).

An ASL allows a patient to manage their prescriptions by safely storing their tokens for their active electronic prescriptions. This removes the need for the patient to present their token (barcode/QR code) to have their medicines supplied. Following registration for an ASL, the patient will be able to share their list of active prescriptions with their chosen Prescribers and Dispensers.

### For Patients

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#### **1. Registering for an Active Script List**

If you choose to use an Active Script List, you will need to register via assisted registration with your Dispenser or Prescriber.

Assisted registration, where a Dispenser or Prescriber help you to set up your ASL registration, will be available through your pharmacy in the first instance and may be available later through your doctor as well. You will need to provide identification documents to meet the required identification check. The identification documents need to be current and on most occasions, will include a government issued photo identification and your Medicare or Department of Veterans' Affairs (DVA) card. However, other documentation can satisfy the identification check if you do not have photo identification.

The healthcare provider will either confirm your details if they are already in their clinical software or enter your details into their clinical software. In order for an ASL to be registered, the clinical software needs to obtain your Individual Healthcare Identifier (IHI) via the Healthcare Identifiers (HI) Service and will use the identifying details you have provided. You will already have an IHI if you are enrolled in Medicare or DVA. If you are not eligible for Medicare or a DVA pension or benefit, you can still register for an IHI by submitting an application to [Services Australia](#).

The clinical system will then complete the ASL registration form with your details. The details the healthcare provider will need to record in their system to register an ASL are:

- Family name
- Given name
- Date of birth
- Gender
- Medicare number or DVA number

As part of registration, you will also be able to identify a carer and/or an agent, who can manage or collect your medicines on your behalf. To register a carer/agent you will need to provide:

- Family name
- Given name (optional if the carer or agent has only one name)
- Address (optional)
- Relationship to the patient (optional)
- Telephone number (optional)
- Email address (optional)
- Status as either a carer or an agent for the patient

An agent can collect medicines supplied from a pharmacy on your behalf.

A carer can operate your ASL on your behalf. A carer will have the same capability to manage an ASL as the patient. For example, a parent can register and operate an ASL on behalf of their child, until the child turns 15 years old and can manage their own ASL. An organisation can also be added as a carer.

When adding an agent or carer, the healthcare provider will ask the carer or agent whether they consent to their details being added to the ASL. The healthcare provider will capture any consent in their clinical system.

You or your carer will receive a SMS or email prior to completing the registration process, to confirm that you wish to register. A parent or guardian can register an ASL as the carer for their child. In release 1, only one carer or agent can be associated to an ASL.

The electronic notification will include a link to the Terms & Conditions (see [Appendix](#)) and privacy policy relating to your ASL.

## ***2. Receiving a prescription***

When you receive an electronic prescription from your Prescriber, the active prescription data will be visible in your ASL to Prescribers and Dispensers unless you withdraw consent. If there are jurisdictional legislative or patient safety requirements to not send a prescription to your ASL, then your prescription will not be sent to your ASL.

If a Prescriber issues you an electronic prescription and you have registered for an ASL, by default, your prescription data will be visible in your ASL. You will

need to inform the Prescriber if you wish for your prescription not to be visible in your ASL. If you withdraw your consent, then the Prescriber will set a 'Consent flag' to 'No', which will prevent the prescription data from being visible in your ASL. You can still receive an electronic prescription by using a token to have your medicines supplied.

### **3. Supply of medicines**

When you/your agent or carer present at your pharmacy of choice and request a dispensing from your ASL, the Dispenser will verify your identity using one of two methods:

- if you/your agent or carer are known to the Dispenser, they will verify your identity using their existing known patient policy; or
- if you/your agent or carer are not known to the Dispenser, they will ask you to provide photo identification and your Medicare card or DVA card.

If the Dispenser already has access to your ASL, they will search your ASL via their electronic dispensing system and choose from the list of your active prescriptions. Your Dispenser will download the relevant prescription from the prescription delivery service via the token they received from your ASL to dispense the medicine that has been prescribed to you.

If the pharmacy does not have access to your ASL, the Dispenser can request access. You will need to provide your consent via SMS or email confirmation, agreeing to the terms and conditions in order to allow the Dispenser to view your ASL and dispense your prescription.

If the prescription you have just had dispensed has repeats, your repeats will be sent to your ASL unless you ask your pharmacist to withdraw your consent.

### **4. Deactivation**

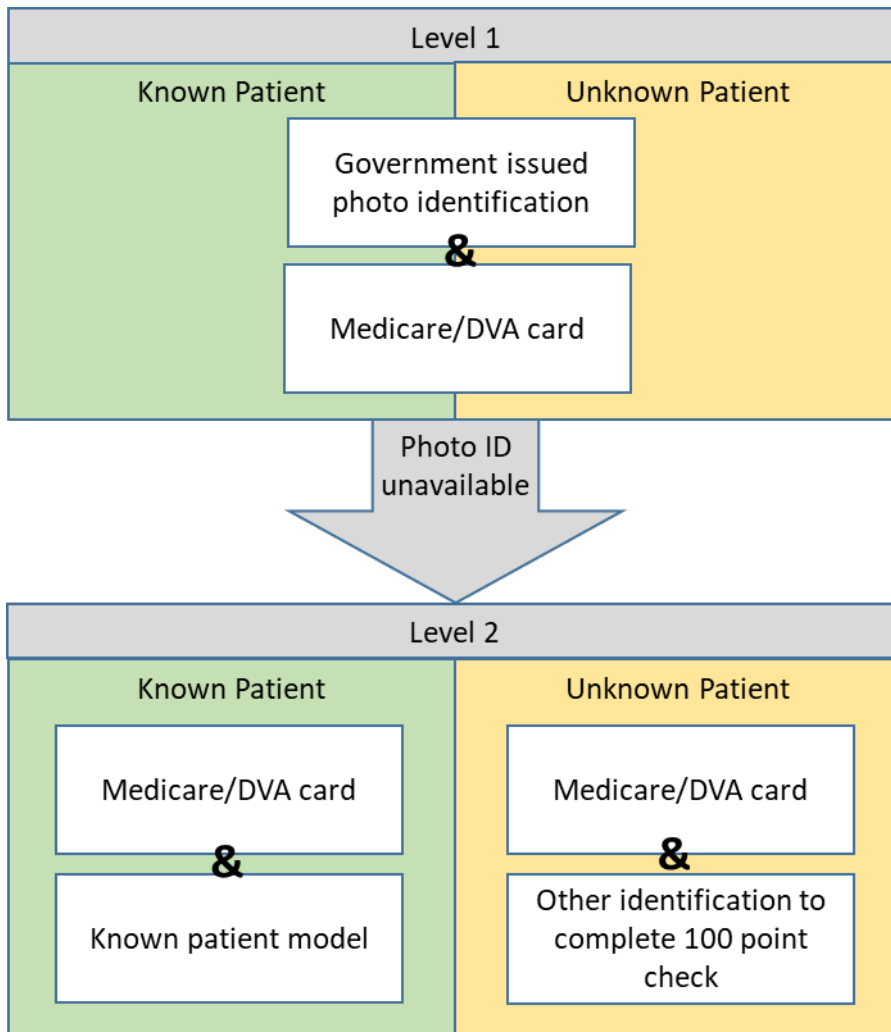
Your ASL can be deactivated by contacting the ASL registry provider. Prior to deactivation, you will need to ensure that you have tokens for any active prescriptions in your ASL so that you can still have these medicines supplied using these tokens.

# For Prescribers

## 1. Registering a patient for an Active Script List

In future, you may be able to register an Active Script List (ASL) for a patient (assisted registration) using your clinical software. Registering a patient for an ASL is only completed once.

You will need to verify the patient's identity by viewing appropriate identification documents outlined below. The identification documents required will align with a tiered model, as per the below diagram. The '[known patient model](#)' is outlined below.



### Level 1

At the time of registration, if the patient has a current government issued photo identification and a Medicare or DVA card (with the individual's name), then this is sufficient to identify them and register their ASL.

### Level 2

At the time of registration, if the patient does not have photo identification, then level 2 identification will be required.

If the patient is unknown to you, you will need to view their Medicare or DVA card and any other identification documents required to complete the 100 point check, as per the ['Documentary evidence of identity'](#) at the end of this document.

However, if the patient is known to you and you can confidently and effectively identify them, you will need to view the patient's Medicare or DVA card and use the ['Known patient model'](#) outlined below, with the exception of patients who are currently taking Schedule 8 medicines (please note that this exception does not apply to residential aged care facility residents). Any patient that is regularly taking a Schedule 8 medicine, to your knowledge, will need to satisfy the 100 point check. Any patient that is prescribed a Schedule 8 medicine will need to satisfy the 100 point check.

The organisation should sight the relevant documents but generally should not take copies of the documents or record the document numbers unless it is necessary for another purpose.

### Known patient model

A 'known patient' is an individual that:

- you can confidently and effectively identify; and
- the individual has presented the healthcare provider organisation on at least four occasions within the last 12 months (inclusive of presentation at which assisted registration is being provided); or
- is a resident of an aged care facility at which the assisted registration is being provided.

**Note:** If you are not satisfied that you can confidently and effectively identify the person, you must not register that individual under the known patient model.

### **Registering a patient**

The ASL registration form will be pre-populated with data held in your clinical software. In order for an ASL to be registered, the clinical software needs to obtain or verify the patient's Individual Healthcare Identifier (IHI) via the Healthcare Identifiers (HI) Service. The details required to register an ASL are:

- Family name
- Given name (if available)
- Date of birth
- Gender
- Medicare number or DVA number

As part of registration, you will also be able to identify a carer and/or an agent for the patient by inputting their:

- Family name
- Given name (optional if no given name)
- Address (optional)
- Relationship to the patient (optional)

- Telephone number (optional)
- Email address (optional)
- Status as either a carer or an agent for the patient

An agent can collect medicines supplied from a pharmacy on behalf of the patient.

A carer can operate an ASL on the patient's behalf. A carer will have the same capability to manage an ASL as the patient. For example, a parent can register and operate an ASL on behalf of their child until the child turns 15 years old and can manage their own ASL. An organisation can also be added as a carer.

The patient will receive a SMS or email prior to completing the registration process, to confirm that they wish to register.

The electronic notification will include a link to the Terms & Conditions (see [Appendix](#)) relating to the patient's ASL.

## ***2. Issuing a prescription***

When you issue a prescription to a patient, you will ask the patient whether they wish to receive an electronic prescription. If the patient has an ASL, then their electronic prescriptions will be visible in their ASL by default. If the patient chooses to withdraw consent and not send a prescription to their ASL then you will set a 'Consent flag' to 'No', which will prevent the prescription data from being visible in the patient's ASL. You can still issue an electronic prescription by sending a token for the patient to use to have their medicines supplied. There are certain type of prescriptions, such as authority prescriptions where a dosing point is required, which will not go to the ASL as they will be sent directly to a pharmacy.

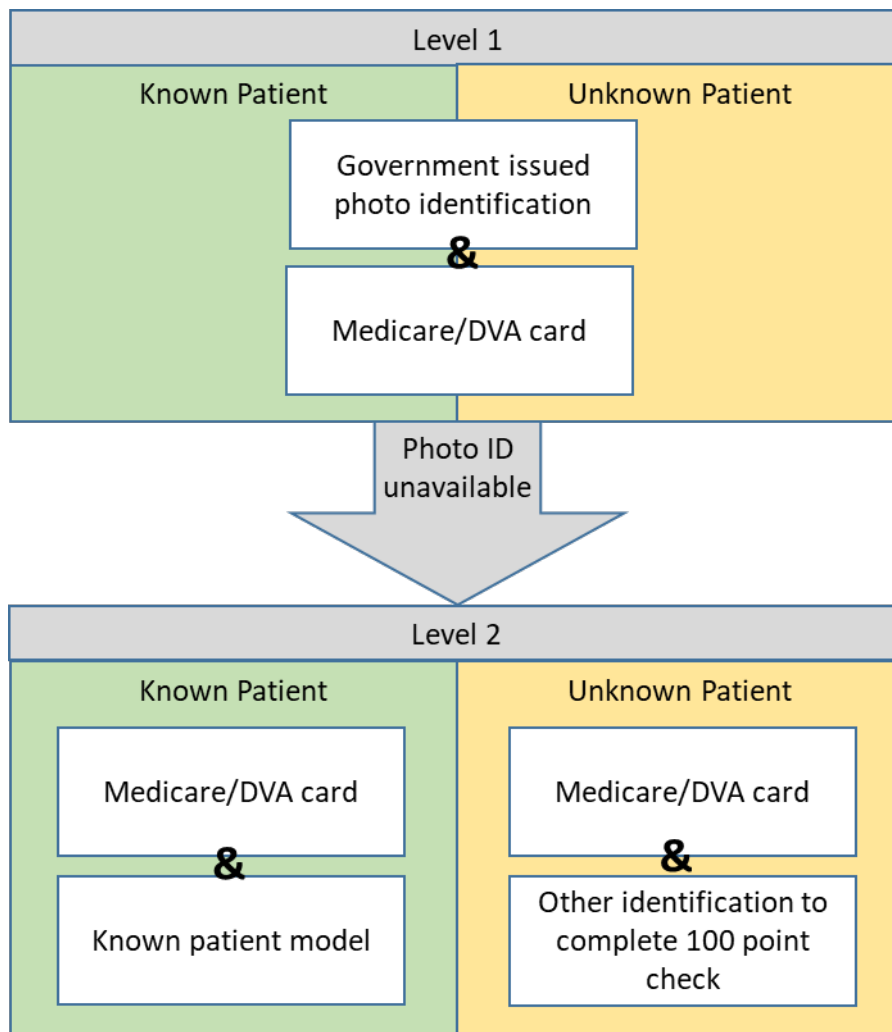


## For Dispensers

### 1. Registering a patient for an Active Script List

You will be able to register an Active Script List (ASL) for a patient (assisted registration) using your clinical software. Registering a patient for an ASL is only completed once.

You will need to verify the patient's identity by viewing appropriate identification documents outlined below. The identification documents required will align with a tiered model, as per the below diagram. The '[known patient model](#)' is outlined below.



#### Level 1

At the time of registration, if the patient has current government issued photo identification and a Medicare or DVA card (with the individual's name), then this is sufficient to identify them and register their ASL.

#### Level 2

At the time of registration, if the patient does not have photo identification, then level 2 identification will be required.

If the patient is unknown to you, you will need to view their Medicare or DVA card and any other identification documents required to complete the 100 point check, as per the ['Documentary evidence of identity'](#) at the end of this document.

However, if the patient is known to you and you can confidently and effectively identify them, you will need to view the patient's Medicare or DVA card and use the ['known patient model'](#) outlined below, with the exception of patients who are currently taking Schedule 8 medicines (please note that this exception does not apply to residential aged care facility residents). Any patient that is regularly taking a Schedule 8 medicine, to your knowledge, will need to satisfy the 100 point check. Any patient that is prescribed a Schedule 8 medicine will need to satisfy the 100 point check.

The organisation should sight the relevant documents but generally should not take copies of the documents or record the document numbers unless it is necessary for another purpose.

### **Known patient model**

A 'known patient' is an individual that:

- you can confidently and effectively identify; and
- has had at least four prescriptions in their name filled at the pharmacy on four separate occasions within the last 12 months (inclusive of the occasion on which assisted registration is being provided); or
- is a resident of an aged care facility at which the assisted registration is being provided.

**Note:** If you are not satisfied that you can confidently and effectively identify the person, you should not register that individual under the known patient model.

### **Registering a patient**

The registration form will be pre-populated with data held in your clinical software. In order for an ASL to be registered, the clinical software needs to obtain or verify the patient's Individual Healthcare Identifier (IHI) via the Healthcare Identifiers (HI) Service. The details required to register an ASL are:

- Family name
- Given name
- Date of birth
- Gender
- Medicare number or DVA number

As part of registration, you will also be able to identify a carer and/or an agent for the patient by inputting their:

- Family name
- Given name (optional)
- Address (optional)
- Relationship to the patient (optional)

- Telephone number (optional)
- Email address (optional)
- Status as either a carer or an agent for the patient

An agent can collect medicines supplied from a pharmacy on behalf of the patient. A carer can operate the ASL on the patient's behalf. A carer will have the same capability to manage an ASL as the patient. For example, a parent can register and operate an ASL on behalf of their child, until the child turns 15 years old and can manage their own ASL. An organisation can also be added as a carer.

The patient will receive a SMS or email prior to completing the registration process, to confirm that they wish to register.

The electronic notification will include a link to the Terms & Conditions (see [Appendix](#)) relating to the patient's ASL.

## **2. Supply of medicines to patient**

When a patient/their agent or carer presents at your pharmacy and requests a medicine be dispensed from their ASL, you will verify their identity using one of following two methods:

- if the patient or their agent or carer is known to you, you can verify their identity using your existing known patient policy; or
- if the patient or their agent or carer is not known to you, you will ask them to provide photo identification and their Medicare card or DVA card.

If you do not have access to the patient's ASL, you can request access via the clinical software, and the patient will need to provide their consent via SMS or email confirmation, agreeing to the terms and conditions, in order for you to be granted access to the ASL.

If you already have access to the patient's ASL, you will search the ASL via the electronic dispensing system and choose from the list of active prescriptions. You will download the relevant prescription from the prescription delivery service via the token received from the ASL to dispense the medicine that has been prescribed.

If the patient has an ASL, then any electronic prescription repeat authorisations will be sent to their ASL by default. If the patient chooses to withdraw consent and not send a repeat to their ASL, then you will set a 'Consent flag' to 'No', which will prevent the repeat data from going to the ASL. You can still issue an electronic prescription repeat by sending a token for the patient to use to have their medicines supplied.

## More information

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You can obtain further information about electronic prescriptions and the Active Script List by contacting your healthcare provider or clinical software vendor, or by contacting the Commonwealth via one of the methods described below:

Department of Health: [ePrescribing@health.gov.au](mailto:ePrescribing@health.gov.au)

Australian Digital Health Agency: [help@digitalhealth.gov.au](mailto:help@digitalhealth.gov.au)

Services Australia: [otsliaison@humanservices.gov.au](mailto:otsliaison@humanservices.gov.au)

## Documentary evidence of identity

For individuals who cannot provide photo identification and who do not meet the known patient model (or if a health professional has any doubt as to the identity of an individual), the following table should be used to determine which documentary evidence of identity should be sought for the purposes of registering an ASL.

Documentary evidence of identity <sup>1</sup>	Required on document N = name, P = photo, A = Address, S = signature	Points
<b>Primary documents - you must supply at least ONE primary document</b>		
Foreign Passport (current)	N - P	70
Australian Passport (current or expired within last 2 years but not cancelled)	N - P	70
Australian Citizenship Certificate	N	70
Full Birth certificate (not birth certificate extract)	N	70
Certificate of Identity issued by the Australian Government to refugees and non-Australian citizens for entry to Australia	N	70
Australian Driver License/Learner's Permit	N - A - P	40
Current (Australian) Tertiary Student Identification Card	N - P	40
Photo identification card issued for Australian regulatory purposes (e.g. Aviation/Maritime Security identification, security industry etc.)	N - P	40
Government employee ID (Australian Federal/State/Territory)	N - P	40
Defence Force Identity Card (with photo or signature)	N - P	40
<b>Secondary documents</b>		
Department of Veterans Affairs (DVA) card	N - A	40
Centrelink card (with reference number)	N - A	40
Birth Certificate Extract	N	25

<sup>1</sup> The healthcare provider organisation must ensure that the details of the individual as contained in their identity document(s) correspond with the individual's details as recorded by the organisation's system and as included in the individual's application. The organisation should sight the relevant documents but generally should not take copies of the documents or record the document numbers unless it is necessary for another purpose.

Birth card (NSW Births, Deaths, Marriages issue only)	N	25
Medicare card	N	25
Credit card or account card	N	25
Australian Marriage certificate (Australian Registry issue only)	N – S	25
Decree Nisi/Decree Absolute (Australian Registry issue only)	N – S	25
Change of name certificate (Australian Registry issue only)	N – S	25
Bank statement (showing transactions)	N – A	25
Property lease agreement – current address	N – A	25
Taxation assessment notice	N – A	25
Australian Mortgage Documents – current address	N – A	25
Rating Authority – current address e.g. Land Rates	N – A	25
Utility Bill – electricity, gas, telephone – current address (less than 12 months old)	N – A	20
Reference from Indigenous Organisation	N – P	20
Documents issued outside Australia (equivalent to Australian documents). Must have official translation attached	N – P	20

## Glossary

<b>Term (and acronym)</b>	<b>Definition</b>
<b>Active electronic prescription</b>	An electronic prescription which is not expired (due to the expiry date passing), not exhausted (i.e. has at least one repeat remaining) and not cancelled.
<b>Active script list</b>	An Active Script List (ASL) allows a patient to manage their active electronic prescriptions without a token.
<b>Dispenser</b>	A clinician who is permitted to dispense medicines under state regulations. These include Dispensers (e.g. pharmacists) that work in the community, hospitals, and contracted pharmacies. Dispensers are an approved supplier under the National Health Act 1953.
<b>DVA</b>	Department of Veterans Affairs
<b>Individual Healthcare Identifier (IHI) number</b>	A unique number granted to an individual by the Healthcare Identifiers Service managed by the Chief Executive Medicare. An IHI is connected to an individual's Medicare or Department of Veteran's Affairs (DVA) card number.
<b>PBS</b>	Pharmaceutical Benefits Scheme.
<b>Prescriber</b>	Clinicians who are permitted under Commonwealth and state regulations to prescribe a medicine. These may include but are not limited to: general practitioners, specialists, dentists and allied health professionals based in community, residential care and hospital settings.
<b>Token</b>	An electronic prescription token refers to a representation of the DSPID (in the form of a barcode, QR code or alphanumeric string). A token may or may not be provided with other prescription information.

## Appendix: Terms & Conditions

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Assisted registration terms and conditions and privacy policy will contain the following consent points:

1. In its role facilitating the fulfilment and management of electronic prescriptions and electronic copies of paper prescriptions by medical practitioners, pharmacists and third parties (each a **Partner**, collectively **Partners**), the Active Script List Registry provider provides a service which enables eligible Partners who are authorised by a patient (the **Patient**) or their authorised representative such as an agent or carer (**Authorised Representative**) to view the Patient's active prescription data (the **Service**).
2. In order for the Active Script List Registry provider to provide the Service, the Active Script List Registry provider needs to access the Patient's active electronic prescriptions and electronic copies of paper prescriptions which are held by the Prescription Delivery Services and decrypt, aggregate and display a subset of the data they hold so that they can be viewed and accessed by the Partners. The aggregated view will only include prescription data for active prescriptions for which the patient did not withdraw their consent at the point of prescribe. The aggregated view of decrypted active scripts of a Patient is referred to in these Terms as the Patient's **Active Script List**.
3. Once the Patient's Active Script List has been created, the Patient (or the Patient's Authorised Representative) may permit certain Partners (e.g., the Patient's doctor or pharmacist) to access and use the Patient's active prescription data via the Active Script List. For example:
  - 3.1. a Partner who is a pharmacy may view or initiate a dispense of the items requested by the Patient (for a copy of a paper prescription, the paper prescription will still be required);
  - 3.2. a Partner who is a physician may view the Active Script List to understand what prescriptions are currently active; and
  - 3.3. another third party (e.g., a person or organisation who provides a service, such as mobile applications which enable the Patient to view and manage their active scripts) may access and use the Active Script List.
4. These Terms may be accessed by a Patient:
  - 4.1. when the link to such Terms is sent via SMS to the Patient's mobile phone number by the Active Script List Registry provider at the request of a Partner; and
  - 4.2. via the Active Script List Registry provider website.
5. The relevant Partner is solely responsible for:



- 5.1. verifying the Patient's identity and ensuring that the correct mobile phone number for the Patient is used for the purposes of the SMS; and
  - 5.2. its access to and use of the Patient's active prescription data via the Active Script List.
6. You are viewing these Terms because you are a Patient for the purposes of these Terms (or you are an Authorised Representative) and:
    - 6.1. you would like to use the Service to have your prescriptions added to an Active Script List, to manage your Active Script List and to have the prescriptions specified on your Active Script List dispensed to you;
    - 6.2. you would like the Active script list Registry provider to create an Active Script List of your Prescriptions which can be accessed by authorised Partners; and/or
    - 6.3. if the Active Script List Registry provider has already created an Active Script List of your Prescriptions, you would like to give your consent for a Partner to access your Active Script List.
7. By responding affirmatively to the SMS sent from the Active Script List Registry provider in accordance with the instructions given in that SMS, you provide your express consent and authority to:
    - 7.1. the creation of an Active Script List of your active electronic prescriptions by the Active Script List Registry provider, and:
      - 7.1.1. the collection, use and disclosure of your personal information by the Active Script List Registry provider in the manner contemplated by these Terms;
      - 7.1.2. access by the Active Script List Registry provider to the Prescription records held by the Prescription Delivery Service; and
      - 7.1.3. all future electronic prescriptions and electronic copies of paper prescriptions being visible in your Active Script List unless:
        - 7.1.3.1. you withdraw consent at the point of the prescription or repeat authorisation being issued by a Healthcare Provider; or
        - 7.1.3.2. the prescription is of a type not authorised under Commonwealth or State and Territory legislation to be visible in an Active Script List; and
    - 7.2. your active Prescription data being accessed and viewed by the relevant Partner who arranged for you to receive the SMS.

8. If you do not wish for Partners to access your Active Script List you must not provide your consent in accordance with the instructions given in the relevant SMS.
9. To withdraw your consent, you may:
  - 9.1. request the Active Script List Registry provider to remove a Partner's ability to access your Active Script List at any time; or
  - 9.2. request the Active Script List Registry provider to discontinue your Active Script List so that your active Prescription data can no longer be accessed and used by Partners (in which case your Electronic prescriptions themselves will remain intact).

Once a Partner's access to your Active Script List is withdrawn, the Partner will not be able to access your Active Script List unless you provide your consent again in accordance with the process outlined in these Terms.

Similarly, once your Active Script List is discontinued by the Active Script List Registry provider it will not be able to be accessed by any Partner unless you provide your consent for the Active Script List Registry provider to create a new Active Script List in accordance with the process outlined in these Terms.

10. If you are viewing these Terms as an authorised representative of a Patient, then:
  - 10.1. these Terms also apply in respect of that Patient. For example, references to your consent under these terms will apply in respect of the Patient's Active prescription data and the Patient's Active Script List; and
  - 10.2. you represent and warrant that you have sufficient authority to represent them in this way.
11. The Active Script List Registry provider will only use your registration data and active Prescription data for the purposes of creating and managing your ASL and will not disclose your data other than as described in these Terms.