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Medicare Overview PCEHR Conformance Profile

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Owner	Director, Conformance and Assurance
Contact for enquiries	Australian Digital Health Agency Help Centre
	Phone 1300 901 001
	Email help@digitalhealth.gov.au

Product or document version history

Product or document version	Date	Release comments
1.1	30 Apr 2013	Initial release
1.2	31 Dec 2014	Updated to reflect new section title rendering requirement.
1.2	04 June 2025	The document presentation has been enhanced to align with current branding guidelines, however the content has not been changed.

Transition of terms

Certain terms used within the context of this document have changed. The table provides a clear comparison of the historical terms used in text and their current equivalents for your reference.

Historical term	Current term
National eHealth Transition Authority (NEHTA)	The Australian Digital Health Agency (ADHA)
Personally controlled electronic health record (PCEHR)	My Health Record (MHR)

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1 Introduction

1.1 Purpose

This document summarises the requirements for producers and consumers of Medicare Overview documents produced by the national personally controlled electronic health record (PCEHR) system.

This document lists the specific conformance requirements that are in addition to the *Common Conformance Profile for Clinical Documents* [NEHTA2012a]. Together, the documents represent the complete conformance requirements for producers and consumers of Medicare Overview documents.

1.2 Intended audience

This document is intended for all interested stakeholders including:

- healthcare providers;
- vendors and developers of connecting systems, and
- software test laboratories.

1.3 Scope

The scope of this conformance profile is the use of Medicare Overview documents in the context of the national PCEHR system, that is, in a “point-to-share” environment.

2 Abbreviations and terminology

Term	Description
CDA	Clinical Document Architecture; an XML-based markup standard intended to specify the encoding, structure and semantics of clinical documents exchanged between health software systems.
clinical information system	Within the context of the PCEHR programme, a clinical information system (CIS) is defined as a system that may deal with the collection, storage, retrieval, communication, or use of health related data, information and knowledge pertaining to subjects of care [AS5021]. The system may comprise one or more applications or components.
conformance	Conformance is a measurement (by testing) of the adherence of an implementation to a specification or standard.
consumer	In this document, 'consumer' refers to a software system that has the role of being a consumer of Medicare Overviews.
contracted service provider	Contracted service providers may offer health software as a service and support access to the PCEHR system on behalf of healthcare organisations.
HL7	Healthcare Level 7
MAY	This verb MAY when appearing in a conformance requirement indicates an optional requirement.
PCEHR	personally controlled electronic health record
producer	In this document, 'producer' refers to a software system that has the role of being a producer of Medicare Overviews.
registered consumer portal	A third-party ¹ portal used by healthcare recipients to access information on the PCEHR system.
registered provider portal	A third-party portal used by healthcare providers to access information on the PCEHR system.
registered repository	A third-party repository used to store clinical documents and other clinical data that connects to the PCEHR system.
SHALL	This verb SHALL when appearing in a conformance requirement indicates a mandatory requirement. Its negative form SHALL NOT indicates a prohibition.
SHOULD	The verb SHOULD when appearing in a conformance requirement indicates a recommendation. Its negative form SHOULD NOT indicates an option that is not recommended.

¹ Third-party refers to a software system developed independently of the national PCEHR system and intended to connect to the national PCEHR system. The portals provided by the national PCEHR system are not registered consumer or registered provider portals.

3 Conformance requirements

3.1 Introduction

This section describes the conformance requirements specific to Medicare Overview documents.

3.2 Relevant specifications

The detailed conformance requirements are listed in Table 1.

Table 1: Specifications for Medicare Overview

Specification	Notes
<i>PCEHR Medicare Overview - Structured Content Specification v1.1</i> [NEHTA2013a]	Specifies the data elements and constrained values for a Medicare Overview at a logical level.
<i>PCEHR Medicare Overview - CDA Implementation Guide v1.1</i> [NEHTA2013b]	Specifies the mapping from the structured content specification into a Medicare Overview document using an HL7 CDA structure.

3.3 Conformance requirements for producers

3.3.1 Objects of conformance

Medicare Overview documents **SHALL** only be produced by the national PCEHR system.

3.3.2 Conformance levels

Medicare Overview documents **SHALL** conform to the requirements for CDA Level 3A [NEHTA2012a] and to the requirements in the *PCEHR Medicare Overview Structured Content Specification* [NEHTA2013a] and *PCEHR Medicare Overview CDA Implementation Guide* [NEHTA2013b].

3.3.3 Digital signature

Medicare Overview documents **SHALL** be digitally signed by the PCEHR system.

3.3.4 Authoring requirements

The following requirements apply to the producer (i.e. the PCEHR system) of Medicare Overview documents. They replace requirement CDA_RS 42 in the *CDA Rendering Specification* [NEHTA2012b] only in the context of producing the Medicare Overview documents. They replace the requirements in the *PCEHR Medicare Overview CDA Implementation Guide* [NEHTA2013b] mandating the inclusion of the section title:

- 1 The producer of a Medicare Overview document **SHALL NOT** include section title elements in nested sections of the CDA structured body.
- 2 The producer of a Medicare Overview document **SHALL NOT** include narrative block elements in nested sections of the CDA structured body.

3.4 Conformance requirements for consumers

3.4.1 Objects of conformance

The objects of conformance requirements include that Medicare Overview documents **MAY** be consumed by:

- clinical information systems;
- contracted service providers;
- registered consumer portals; and
- registered provider portals.

3.4.2 Links

3.4.2.1 Presentation of links

If the software retrieves a Medicare Overview containing narratives with clinical document links, then the software **SHALL** either present the clinical document link text as a selectable link, or display the link text as plain text (that is, without the appearance of a selectable link).

3.4.2.2 Selecting a link to a clinical document

If the software allows a user to select a link to a clinical document, the clinical document **SHALL** be retrieved from the repository, and rendered according to the requirements for downloading and displaying that type of clinical document

3.4.3 Other requirements

Consumers of Medicare Overview documents **SHALL** conform to the requirements for consumers of clinical documents listed in the *Common Conformance Profile for Clinical Documents* [NEHTA2012a].

Appendix A Change log

This appendix lists the major changes and fixes applied to this document. Changes from Version 1.1 (30 Apr 2013) to 1.2 (31 December 2014).

A.1 Changes from v1.1 to v1.2

ID	Section	Change detail	Rationale
1	3.3.4	Introduced 2 new conformance requirements for producers that restrict the rendering of section title elements in nested sections as well as narrative block elements in nested sections.	Addresses a problem with duplicated content being rendered.

References

- [AS5021] AS 5021:2005 - The language of health concept representation, Standards Australia, 2005. Available from, https://www.intertekinform.com/en-au/standards/as-5021-2005-121393_saig_as_as_254729/
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