

Transforming the way Australia's health sector does business.





20th Global GS1 Healthcare Conference

4 October 2011, Amsterdam

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Australia at a Glance

- 22.6 million people currently live in Australia
- Life expectancy continues to increase, so an Australian male born today can expect to live to 79.2 years and a female to 83.7 years
- Australians aged 80 years or over is about 800,000 (3.7% of the total population); nearly 2/3 are female
- 64% of people live in capital cities, numbering 14 million in June 2009
- Expenditure on health was 9.1% of GDP in 2007-08, amounting to over \$103 billion or \$4,874 per person (just \$10 billion in 1980) AUD\$130 billion in 2010-11 (9.8% GDP)
- 70% is publically funded & 30% privately funded
- 8 State & Territory Governments (State Health Departments) and Federal Department of Health and Ageing







STATE	2009		
ACT	354,900		
NSW	7,191,500		
NT	227,700		
QLD	4,473,000		
SA	1,633,900		
TAS	505,400		
VIC	5,496,400		
WA	2,270,300		
Total	22+M		

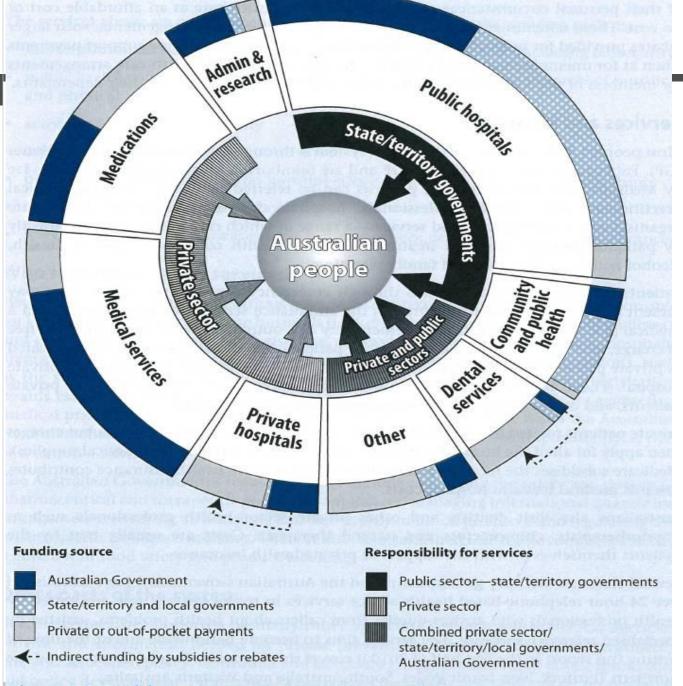


Figure 1.3: Health services—funding and responsibility

NEHTA's Purpose: Establishing the Foundations for e-Health



nehta
National E-Health Transition Authority
www.nehta.gov.au



Lead the uptake of e-health systems of national significance; and coordinate the progression and accelerate the adoption of e-health by delivering urgently needed integration infrastructure and standards for health information.

NEHTA's Structure

The National E-Health Transition Authority (NEHTA) is a company established by the Australian, State and Territory governments in 2005 to develop better ways of electronically collecting and securely exchanging health information.

Independent company – state and federally government funded, including:

- Board of Directors (CEOs of Health Jurisdictions, an Independent Director and an Independent Chair)
- Board Committees
- The Chief Executive Officer
- The Company Secretary
- The NEHTA Organisation





National E-Health Transition Authority www.nehta.gov.au

The nehta Supply Chain Work Program

Personally Controlled Electronic Health Record	Clinical Information	Individual Information	Shared Information	(Others)
E-Health Services	Shared Health Profile	Event Summaries	Self Managed Care	Complex Care Management
E-Health Solutions	ePathology	eDischarge eProcu	eReferral rement	eMedications
National Infrastructure Components	Terminology	Secure Messaging National Produ	Identifiers Ict Catalogue	Authentication





Supply Chain Reform can address:

- Lack of standardised product identification
- Lack of standardised location identification
- Multiple product data catalogues being maintained per hospital, per hospital network and per state
- Poor supply chain costs the health system money:
 - Wrong product ordered/delivered
 - Wrong quantity/poor forecasting and inventory management
 - Reduction of redundant purchasing tasks, inefficient work practices and greater accuracy through automation





Information is the enemy of disease

70yr old woman goes to hospital for a hip replacement...

Wrong prosthesis turns up...



No surgery =

- 1. Cost to patient pain, increased iatrogenesis, stress, time, financial
- 2. Cost to health system theatre, staff, bed, medications, other patients







Accurate Identification is Critical

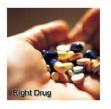
eHealth is about:

- ✓ the right information,
- ✓ at the right place,
- ✓ at the right time,
- ✓ for the right person.

















The Solution: National Product Catalogue

- The National Product Catalogue (NPC) is a GDSN compliant data pool containing healthcare procurement data (item and price) + clinical data (regulatory numbers, GMDN, poisons schedule)
- Is a way of suppliers providing standardised and accurate product and price data electronically to the Australian health departments and private hospital providers (one to many)
- The NPC enables synchronisation of product and pricing data for accuracy in electronic procurement







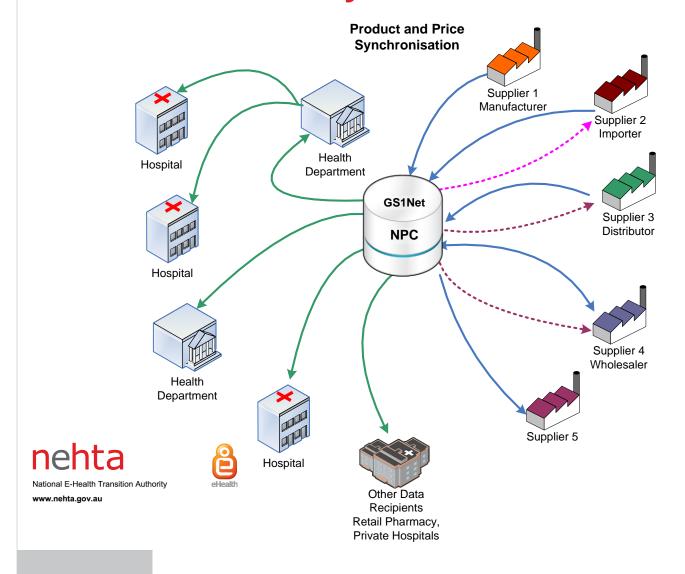








The NPC – Data Synchronisation



NPC Progress

National Product Catalogue

- 210,000+ items, 360+ suppliers
- All jurisdictions accessing data
- Clean, standardised data in all systems
- All major wholesalers signed up
- Most large **pharma** companies have populated
 - Large medical devices companies either populated or getting data organised

Private Sector

- Private Hospitals
- Community Pharmacies / pharmacy software providers
- Accurate reference of Prosthesis Rebate Code for billing benefits



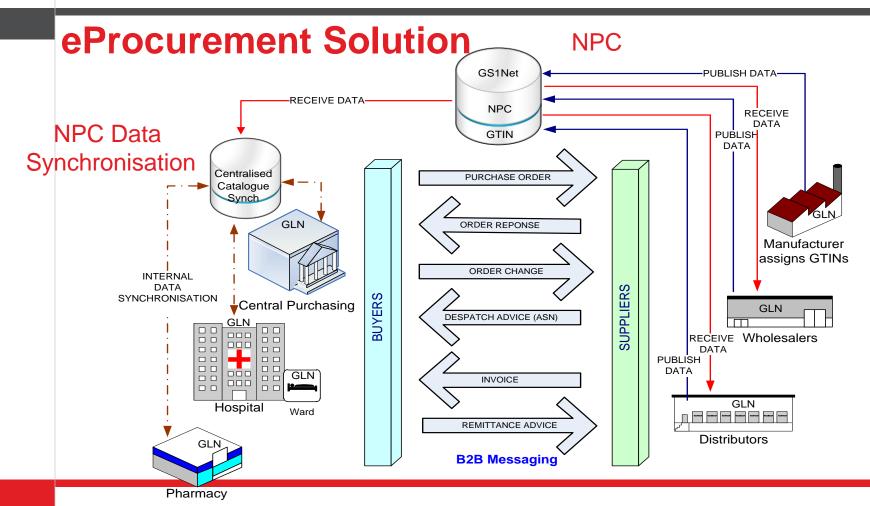
Clinical Outcomes Focus

- Clinical Terminologies Australian Medicines Terminology (AMT)
- Product tracking and recall
- Bedside scanning (incl. batch, exp., serialisation, etc) => patient record
- TGA approval of pharmaceuticals













eProcurement

NPC – Public Health Organisation Usage

- VIC understanding use patterns; not having to ask suppliers what the State has bought from them
- NSW data maintenance work effort/invoices on hold and delayed payment time (> 90 days and no discount)
- WA want to get to eProcurement (too much paper); can't do this without accurate data
- SA warehousing and dimensions; process change for overall supply chain reform
- TAS/ACT/QLD data maintenance work effort and data accuracy; scan the bar code at the pharmacy, but have no record in internal systems
- NT standardising a single catalogue (multiple product identifiers) and moving to eProcurement in next phase





NPC – Private Health Organisation Drivers

- Prosthesis rebate codes linkage reimbursement from the insurers (also now identified as an issue for public hospitals as well) = 1 hour/hospital/day on phone
- Accurate data maintenance and collection effort
- Better visibility understanding spend trends (EBITDA)
- eProcurement but need accurate data first
- Not just health data also food service, medical grade
 PCs and hand held devices + hotel services sectors





NPC – What do suppliers see

- Development data maintenance processes and ownership for data within their businesses – a single source
- Sales of products that they haven't promoted to jurisdictions
- Criteria in tender submissions = NPC compliance
- Ability to move to eMessaging/eProcurement
- Trading advantage our business is easier for the jurisdictions to work with





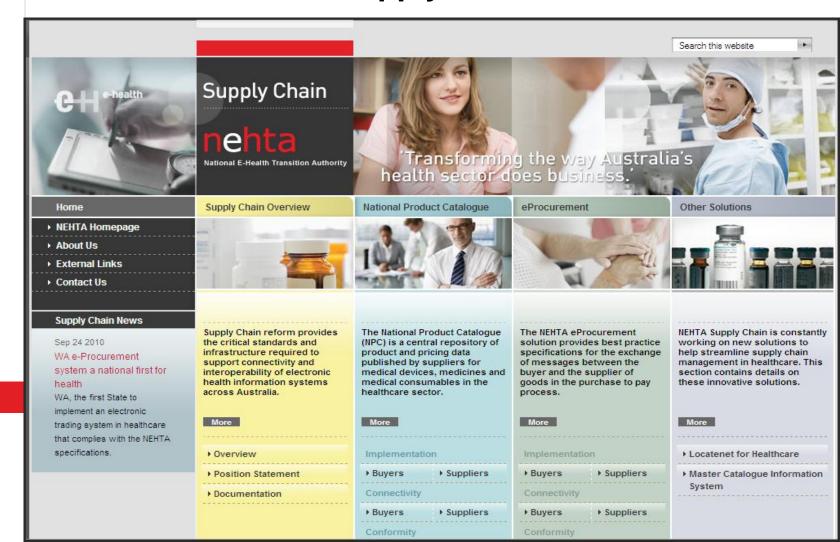
NEHTA – The Road Ahead...

- 1. Continue to **provide a single NPC** for the procurement of medicines, medical devices and healthcare products
- 2. Accelerate organisations' **eProcurement readiness** to trade electronically, utilising data loaded onto the NPC
- 3. Support business process improvement and standardised tender process for tender submission, utilising data loaded onto the NPC across organisations
- 4. Increase the **evidence base** in healthcare supply chain and develop **industry-level KPI framework**
- Establish action plan for jurisdictions increased utilisation; and NPC data quality and synchronisation capability
- 6. Create an **eProcurement flagship**; and recognise healthcare supply chain industry excellence through **best-practice awards**





The NEHTA Supply Chain Web Site www.nehtasupplychain.com.au



Summary

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Thursday 22nd March (pm) NEHTA Global Government ThinkTank

The ThinkTank will provide invited participants with:

- A global healthcare leaders forum to explore synergies in Supply Chain innovation and reform
- Specialist understanding of the importance of standards-based Supply Chain initiatives and their link to patient safety
- Sharing of benefits and learnings from international best-practice

ThinkTank Format

- Invited country showcase presentations
- Round-table executive discussions
- Potential global alliances and synergies formed







Contact and Questions

Mark Brommeyer

Manager Supply Chain **NEHTA**

e-mail: mark.brommeyer@nehta.gov.au



See you in Sydney 20-22 March 2012