



**Senator Sue Boyce**  
Queensland

**MEDIA RELEASE**

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**MEDICARE COMPUTER FAILURE PUTS LIVES AT RISK**

The health of tens of thousands of Australians may have been seriously compromised by a computer system glitch at Medicare which the government body had tried to keep secret for eight weeks, Liberal Senator Sue Boyce said today.

Senator Boyce said Medicare became aware on Monday, February 9 of a software problem which recorded patient details incorrectly without any indication of an error.

She said industry sources had told her that there had been more than 1,000,000 uses of the Online Patient Verification (OPV), Patient Verification (PVM) and Enterprise Patient Verification (EPV) during the period the glitch had affected the system.

"The Human Services Minister Chris Bowen has refused to apologise or even acknowledge this problem exists. His silence can only be seen as confirming that he is a prisoner of Medicare and not willing to stand up for patients against a bureaucracy more concerned with protecting itself than being honest and proactive in patients' interests."

"The results of this serious failure in the system have still not been completely checked and I understand from industry sources that almost 30,000 patient records are still affected as well as some 2,700 medical practices."

"However, despite the repeated pleadings by private software vendors in meetings with Medicare officers to go public, acknowledge the problem and alert health care providers, Medicare dithered and tried to cover it up for eight weeks before issuing a letter on April 1," Senator Boyce said.

"This letter must have been Medicare's private April Fool's Day joke because it tried to gloss over the problem by claiming that system functionality had been restored within three days of its being detected. What this conveniently ignored was that tens of thousands of patients' records had been corrupted," she said.

"Medicare has claimed that only 1,300 transactions have been identified so far as being affected by the glitch but there were more than 1,000,000 uses during the glitch affected period."

"I have been told that there are about a further 30,000 transactions already identified as needing to be checked. This is being freely acknowledged in the medical software industry and the medical profession. Originally, Medicare tried to assert that the problem only related to rebate claiming and that simply wasn't true as they have now been forced to admit. "

"I understand the fault meant that some pathology test results would not have made it back to the patient's GP or could have been attached to the medical history of a different family member. This glitch meant that only the first name appearing on a family Medicare card was recognised and all pathology results for others on the card were recorded for that person."

"Obviously, this could lead to misdiagnosis, no diagnosis, unneeded and possibly dangerous medication or no medication at all, depending on the order a person's name appeared on a family Medicare card."

Senator Boyce said to add insult to injury, Medicare had tried to infer in a statement published last Tuesday that the glitch was the fault of medical software providers.

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"This is a blatant lie as all software that accesses Medicare has to have a NOI – a Notice of Integration – which means Medicare itself has tested the software and found it meets their standards. To try and suggest now that the glitch was the fault of vendors' software is an own goal. If the vendors' software was at fault, then Medicare is actually saying their own quality assurance process is useless," Senator Boyce said.

Senator Boyce said some software providers to Medicare had held several meetings with senior Medicare officers through February and March pleading with them to come clean about the ongoing problem.

"It seems that the statement Medicare issued last Tuesday is the payback for these software providers who dared to question them," Senator Boyce said.

"The medical software industry and the medical profession itself remain deeply concerned not just about the ongoing problem but Medicare's attempts to sweep it under the carpet. This does not bode well for the future when Medicare has an even more central and enhanced role in the national e-health network," she said.

"All healthcare providers including medicos are worried about the possible effects of this ongoing problem particularly the inadvertent harming of patients."

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