

29 November 2021

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Dear Jeremy,

Thank you for the opportunity to provide feedback on a proposed further extension to the *National Health (COVID-19 Supply of Pharmaceutical Benefits) Special Arrangement 2020* known as 'imaged-based prescribing'.

The previous extensions to imaged-based prescribing, which we supported, were necessary to provide an opportunity for broader uptake of token based electronic prescribing (ePrescribing). Statistics for November 2021 from the Australian Digital Health Agency show 82% of GPs are generating ePrescriptions, with the vast majority of general practice software enabled for ePrescribing. The need to email, text or fax a digital image of a paper script to a patient's pharmacy has dramatically reduced from a general practice perspective. Therefore, we do not believe there is a need to extend imaged-based prescribing beyond December 31 2021.

While we recognise uptake and adoption of ePrescribing outside of general practice may not be as strong, ending imaged-based prescribing is an opportunity to drive ePrescribing uptake across the healthcare sector more broadly. This would be a positive step forward as part of the overall digital health strategy.

A key feature of ePrescribing we would like to see progressed, to minimise the impact of image based prescribing ending, is the Active Script List (ASL). As a list of all active prescriptions and repeats available to be dispensed an ASL provides a way for patients to better manage multiple electronic prescriptions. The ASL is yet to be implemented widely and it needs urgent wider roll out through pharmacies to support the end of image-based prescribing.

We recommend providing support for prescribers to email ePrescribing tokens directly to pharmacy to assist patients who do not use smart phones, have limited digital literacy or are isolating at home. This would further reduce the need for the continuance of imaged-based prescribing.

To ensure the continued success of ePrescribing, the RACGP believes further work needs to be undertaken to establish an ongoing funding model that is effective, sustainable and does not impose any direct or indirect cost to general practice or other prescribers. We welcome the opportunity to continue to work with the Federal Department of Health and the Australian Digital Health Agency, to ensure ongoing funding models support uptake and provision of electronic prescriptions.

If you require any further information please contact Joanne Hereward, Program Manager, Practice Technology and Management at [joanne.hereward@racgp.org.au](mailto:joanne.hereward@racgp.org.au) or on 03 8699 0338.

Yours sincerely



Dr Karen Price  
President