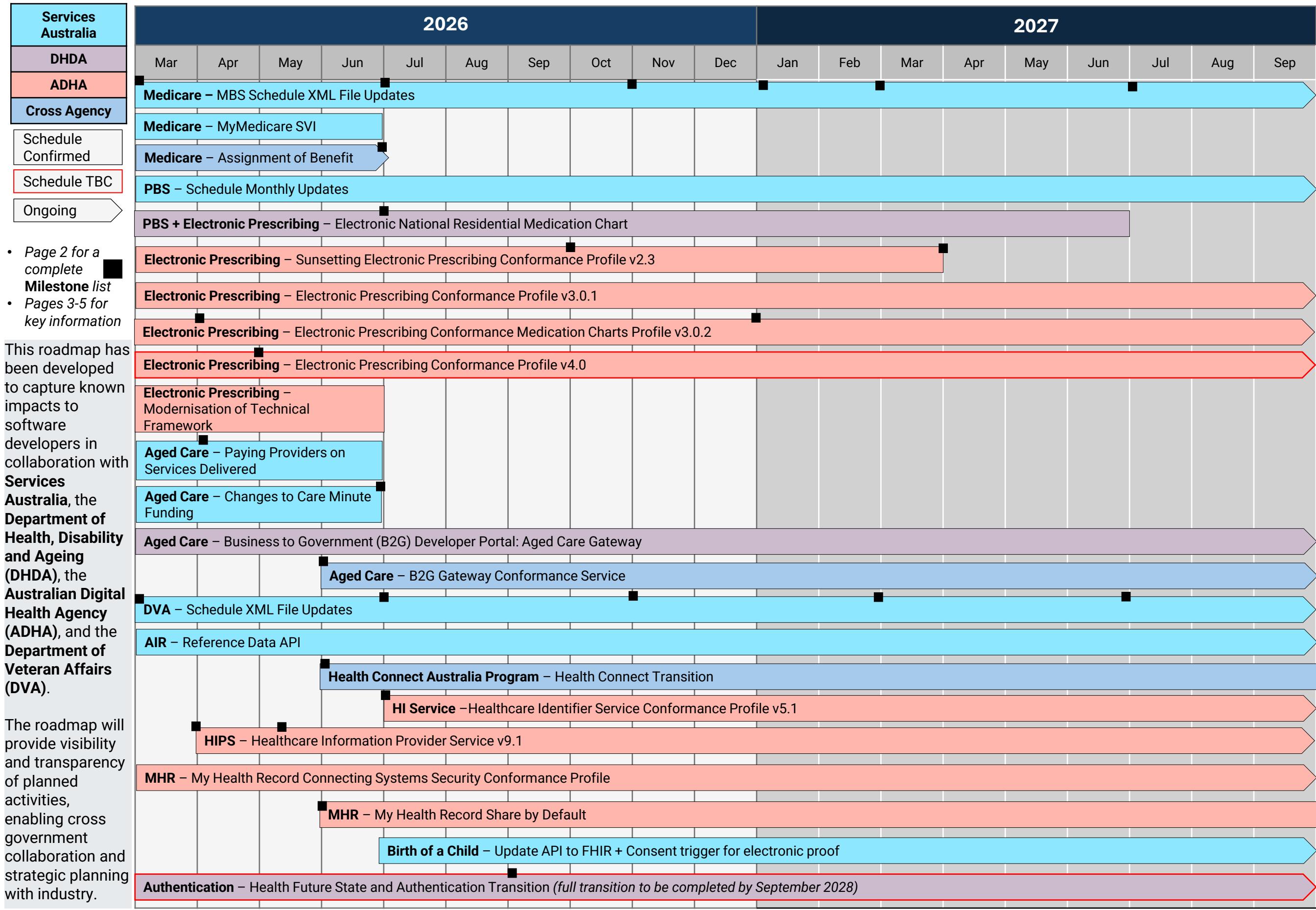


# Software Developer Impact Roadmap

Updated March 2026 *Schedule conditional and subject to change*



- Page 2 for a complete Milestone list
- Pages 3-5 for key information

This roadmap has been developed to capture known impacts to software developers in collaboration with Services Australia, the Department of Health, Disability and Ageing (DHDA), the Australian Digital Health Agency (ADHA), and the Department of Veteran Affairs (DVA).

The roadmap will provide visibility and transparency of planned activities, enabling cross government collaboration and strategic planning with industry.

# Software Developer Impact Roadmap

Milestone summary list



Updated March 2026

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Program	Initiative	New Milestones	Date of Milestones	Event	Impacted Developers
Medicare	MBS XML File Updates	No	Updates published on the 1st of every January, March, July and November		<ul style="list-style-type: none"> <li>Medicare Online</li> <li>Private Health Insurance</li> </ul>
	Assignment of Benefits (AOB)	No	2026-07-01	Legislation start date for minimum legislative requirements	<ul style="list-style-type: none"> <li>Medicare Online</li> <li>ECLIPSE</li> </ul>
PBS & Electronic Prescribing	Electronic National Residential Medication Chart (eNRMC)	No	2026-07-01	Implementation of electronic medication charts to be used in expanded clinical settings.	<ul style="list-style-type: none"> <li>Transitional eNRMC</li> <li>Electronic prescribing</li> </ul>
Electronic Prescribing	Sunsetting of Electronic Prescribing Conformance Profile v2.3	No	2026-09-30	Developers must upgrade from v2.3 to v3.0.1 eRx RESTful API	Electronic prescribing
			2027-03-27	All clients must be transitioned	
	Electronic Prescribing Conformance Medication Charts Profile v3.0.2	Yes	2026-04-01	Developers must obtain conformance	Electronic prescribing
			2026-12-31	Residential Aged Care Homes must demonstrate conformance	
Electronic Prescribing Conformance Profile v4.0	Yes	2026-04-29 2026-04-30	ADHA to host workshops for consultation and feedback	Electronic prescribing	
Aged Care	Paying Providers on Services Delivered	No	2026-04-01	Changes to additional supplement payment to encourage nursing face-to-face time for aged care recipients.	Aged Care
	Changes to Care Minute Funding	No	2026-07-01	Changes to transition the payment of residential care subsidies and supplements from advance payments to payments in arrears over a period of 4 years.	Aged Care
	B2G Gateway Conformance Service	Yes	2026-06-01	Conformance for introduction of Client Management API	Aged Care
DVA	DVA Schedule XML File Updates	No	Updates published on the 1st of every January, March, July and November		DVA Healthcare Providers
Health Connect Australia	Health Connect Transition	Yes	2026-06-01	Health Connect Provider Directory limited Production release	Clinical system
HI Service	HI Service Conformance Profile v5.1	Yes	2026-07-01	HI Service Conformance Profile v5.1 scheduled to be released	HI system
HIPS	HIPS Service v9.1	Yes	2026-03-30	HIPS v9.1 published	Clinical system
			2026-05-11	HealthViewer SMART available on FHIR	
MHR	Share by Default	Yes	2026-07-01	Legislation comes into effect	MHR system
Authentication	Health Future State and Authentication Transition	No	2026-09-01	Software developers will have 12 months to upgrade	All developers
			2028-09-01	Transitions must be complete. NASH will cease and there is no extension.	

# Software Developer Impact Roadmap

Initiative information



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Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
Medicare	Medicare Benefits Schedule (MBS) XML File Updates	Services Australia	<p>The XML file includes information such as annual indexation of MBS items schedule fees and particular changes made to MBS items, as approved by Government.</p> <p>The XML file is primarily used by practice software to update relevant information and contains values and tags relevant to certain MBS item rules.</p>	Yes	<a href="#">Schedule available via MBS website</a>	No
	MyMedicare – Software Vendor Integration (SVI)	Services Australia	<p>The MyMedicare SVI project establishes a new secure, online channel directly to MyMedicare registered practices and providers through their practice management software.</p> <p>SVI Stage 2 is focused on enhancing the health provider authentication capability via PRODA and enabling increased functionality (18 Patient registration web services) to be integrated in practice management systems</p>	No		No
	Assignment of Benefits (AOB)	Services Australia & Department of Health, Disability and Ageing	<p>AOB reforms are designed to support digital consent mechanisms, strengthen record-keeping requirements, and enhance the overall integrity of the Medicare system.</p> <p>By introducing more flexible and secure ways for patients to assign their benefits, the changes aim to improve access to care and simplify billing processes for both patients and providers. These changes will be enacted on 1 July 2026.</p>	Yes	<a href="#">Services Australia: Developer Liaison</a> <a href="#">More information via DHDA website</a>	No
PBS	Pharmaceutical Benefits Scheme (PBS) Schedule Monthly Updates	Services Australia	The PBS schedule is updated on the first day of every month and contains changes to listings.	No	<a href="#">Schedule available via PBS website</a>	No
PBS & Electronic Prescribing	Electronic National Residential Medication Chart (eNRMC)	Department of Health, Disability and Ageing	<p>Development of a framework for electronic medication charts to be used in expanded clinical settings. A standard chart will be developed with specialised charts for clinical settings with specific clinical needs (like chemotherapy).</p> <p>Implementation of electronic medication charts to be used in expanded clinical settings, as developed in the National Electronic Medication Chart Framework.</p>	Yes	<a href="#">More information via DHDA website</a>	No
Electronic Prescribing	Sunsetting of Electronic Prescribing Conformance Profile v2.3	Australian Digital Health Agency	As announced on 25 March 2025, following consultation with the software industry, the sunset date for has been extended to 30 September 2026.	Yes		No
	Electronic Prescribing Conformance Profile v3.0.1	Australian Digital Health Agency	Implementation of the full suite of enhanced electronic prescribing functionalities includes additional cyber security requirements, additional HI requirements, and enhanced capabilities for consumers to manage their Active Script List (ASL) via conformant mobile apps.	No		No
	Electronic Prescribing Conformance Medication Charts Profile v3.0.2	Australian Digital Health Agency	A limited conformance assessment for software vendors serving residential aged care, specifically eNRMC providers. This includes the uptake of Electronic Prescribing Conformance Profile v3.0.1.	Yes	<a href="#">More information for ADHA initiatives and programs via Implementation Hub</a>	Yes
	Electronic Prescribing Conformance Profile v4.0	Australian Digital Health Agency	The draft for consultation was released on 27 January 2026 for industry review and feedback by 20 March 2026. Optional drop-in sessions have been scheduled throughout the feedback period to facilitate transparent and productive feedback ahead of the final versions of the Conformance Profiles.	Yes		Yes
	Modernisation of Technical Framework	Australian Digital Health Agency	To support the Strengthening Electronic Prescribing and Targeted Digital Medicines Enhancements Budget Initiative, the modernisation to co-design new, modular Conformance Profiles and Test Specifications; and to review and update the Conformance Assessment Scheme, and the Solution Architecture.	No		No

# Software Developer Impact Roadmap

Initiative information



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Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
Aged Care	Paying Providers on Services Delivered	Services Australia	<p>This proposal will change the payment of residential care subsidies and supplements from advance to arrears over a two-to-four-year transition period commencing 1 July 2026.</p> <p>During the transition period, the advance payments of subsidy paid to the majority of providers of residential services are to be reduced by 4.17% per month over two years until the final advance payment is zero. Providers deemed at risk by DHDA will have the transition period extended to four years, with their advance payments reduced by 2.08% per month.</p>	Yes		No
	Changes to Care Minute Funding	Services Australia	<p>This proposal will create a financial incentive for providers in metropolitan areas to meet their mandatory care minutes target by linking care minutes funding to care minutes delivery.</p> <p>From 1 April 2026, non-specialised providers in MMM1 regions will be paid the new supplement based on their compliance against the care minute target. The rate of payment will be based on a sliding scale. DHDA will determine the provider's eligibility and rate of payment.</p>	Yes		No
	Business to Government (B2G) Developer Portal – Aged Care Gateway	Department of Health, Disability and Ageing	<p>The B2G project aims to develop aged care provider and ICT vendor capability. To establish API technology providing a direct link from aged care software to DHDA. API technology streamlines reporting increases efficiency and accuracy giving additional time to focus on delivering quality care to older Australians. This will enable information and data to be shared directly between provider system and DHDA.</p>	No	<a href="#">More information for DHDA Aged Care initiatives via B2G Developer Portal</a>	No
	B2G Gateway Conformance Service	Department of Health, Disability and Ageing & Australian Digital Health Agency	<p>DHDA has developed the B2G Gateway system to facilitate the efficient exchange of information with the government. ADHA is responsible for the establishment and operation of this Scheme. ADHA delivers a conformance service that seeks to ensure the safe and secure use of the B2G Gateway system by all participating software products and systems, through conformance assessment against the B2G Gateway systems, by June 2026.</p>	Yes	<a href="#">More information for DHDA Aged Care initiatives via B2G Developer Portal</a>	Yes
DVA	Department of Veteran Affairs (DVA) Schedule XML File Updates	Services Australia	<p>The XML file includes information such as annual indexation of MBS and DVA items schedule fees and particular changes made to MBS/DVA items, as approved by Government.</p> <p>The XML file is primarily used by practice software to update relevant information and contains values and tags relevant to certain MBS and DVA item rules.</p>	Yes	<a href="#">Schedule available via DVA website</a>	No
AIR	Australian Immunisation Register (AIR) Reference Data API	Services Australia	<p>AIR software developers should utilise AIR Reference Data API to access all vaccine details and receive updates to listings.</p>	No		No
Health Connect Australia	Health Connect Transition	Services Australia & Australian Digital Health Agency	<p>As part of the Intergovernmental Agreement (IGA) on National Digital Health 2023-27, the Health Connect Australia program will uplift the healthcare information sharing ecosystem in Australia. The Health Connect program aim is to establish a national health information exchange capability to enable connected healthcare in Australia by supporting information sharing.</p>	Yes	<a href="#">More information for ADHA initiatives and programs via Implementation Hub</a>	No
HI Service	Healthcare Identifier (HI) Service Conformance Profile v5.1	Australian Digital Health Agency	<p>The new HI Service Conformance Profile version 5.1 is targeted for release by July 2026. The HI Roadmap identified the need for a review and update to the HI Service conformance profile to support legislation changes to the HI Act.</p>	Yes	<a href="#">More information for ADHA initiatives and programs via Implementation Hub</a>	Yes

# Software Developer Impact Roadmap

## Initiative information



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Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
HIPS	Healthcare Information Provider Service (HIPS) Service v9.1	Australian Digital Health Agency	<p>HIPS enables healthcare providers to upload and view key health information. HIPS is a middleware product offering seamless integration with systems including patient administration systems, clinical information systems, and laboratory and radiology information systems.</p> <p>HIPS is designed primarily to support large-scale digital health environments typically found in organisations such as hospitals and diagnostic service providers.</p>	Yes	<a href="#">More information for ADHA initiatives and programs via Implementation Hub</a>	Yes
MHR	My Health Record (MHR) Connecting Systems Security Conformance Profile	Australian Digital Health Agency	<p>The MHR Connecting Systems Security Conformance Profile, along with supporting artefacts, guide MHR software implementation.</p> <p>A 12-month implementation period commenced on 23 February 2026 for all vendors who have existing My Health Record Conformance. Conformance with the Security Conformance Profile is required for new My Health Record Connecting Systems prior to being granted My Health Record Production Access.</p>	No	<a href="#">More information for ADHA initiatives and programs via Implementation Hub</a>	No
	Share by Default – Requirement to upload pathology and diagnostic imaging reports to MHR by default	Australian Digital Health Agency	The Share by Default program aims to improve access to health information for Australians and their healthcare providers. Initially, the requirements will apply to pathology and diagnostic imaging reports, meaning these reports must be uploaded to My Health Record unless an exception applies or an extension to comply has been granted. These rules support the primary legislation and will come into effect on 1 July 2026 (subject to parliamentary processes).	Yes	<a href="#">More information for ADHA initiatives and programs via Implementation Hub</a>	Yes
Birth of a Child (BoC)	Consent trigger to send electronic proof of birth from hospitals to Services Australia	Services Australia	<p>The Birth of a Child service is a consent-based model, requiring the birth mother to consent prior to sending electronic proof of birth data from the hospital to Services Australia. Currently, consent collection is paper-based and requires the hospital staff to input the consent outcome into the payload prior to sending to Services Australia.</p> <p>The future consent model would remove the need for the midwife to collect paper-based consent prior to discharge and have the consent recorded in advance of the birth mother entering the hospital to have the baby. This would require a consent flag to be stored in the patient administration system (or similar) as well as an automatic trigger of the payload to send to Services Australia.</p>	No		Yes
	Update API to meet Fast Healthcare Interoperability Resources (FHIR) standards	Services Australia	<p>The Birth of a Child program has an API named the 'BoC API' webservice that is currently in the Services Australia Developers Portal. The service has been tested up to the pre-prod environment, where it currently remains awaiting a hospital to onboard before moving into production.</p> <p>The BoC API will need an uplift to meet the FHIR requirements. This will ensure support from jurisdictions to onboard and support a National Rollout of the BoC service.</p> <p>This initiative will also support replacement of the hospital's integration from the Services Australia Developer Portal to the Health Systems Developer Portal.</p>	No		Yes
Authentication	Health Future State and Authentication Transition	Department of Health, Disability and Ageing	<p>End of life for NASH PKI which will transition to a future state model for Health. Consultation and planning is currently underway to develop a future state authentication solution.</p> <p>Full transition to be completed by September 2028.</p>	Yes	<a href="#">DHDA: DH Interfaces</a>	No