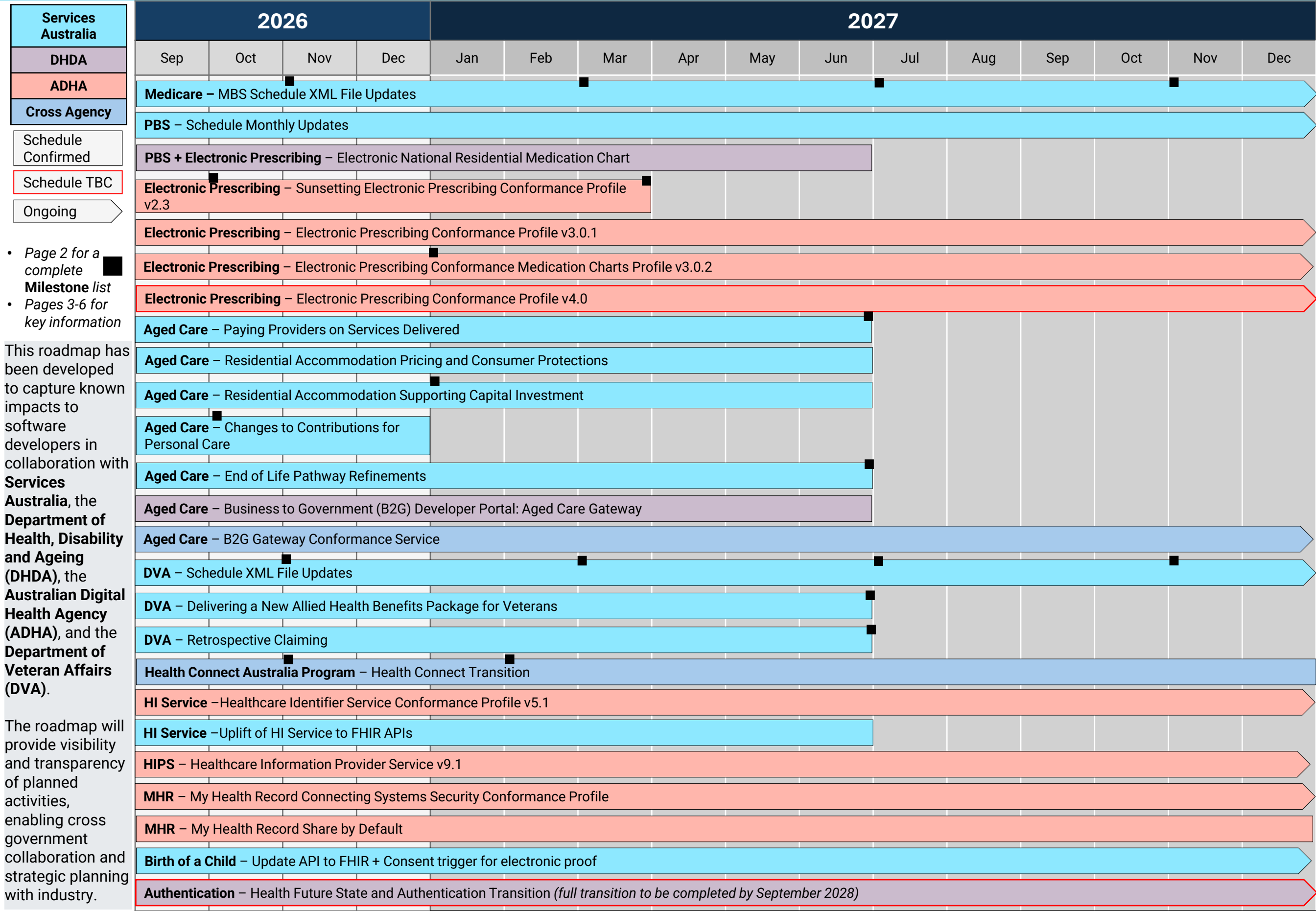


Software Developer Impact Roadmap

Updated September 2026 *Schedule conditional and subject to change*



Schedule Confirmed

Schedule TBC

Ongoing

- Page 2 for a complete Milestone list
- Pages 3-6 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 September 2026 Schedule conditional and subject to change  					
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		- Medicare Online - Private Health Insurance
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	No	2026-12-31	Residential Aged Care Homes must demonstrate conformance	Electronic prescribing
Aged Care	Changes to Contributions for Personal Care	Yes	2026-10-01	Personal care services will be categorised under the Clinical Supports category.	Aged care
	Paying Providers on Services Delivered	Yes	2027-07-01	Payment of residential care subsidies and supplements transition to payments in arrears over a period of two years.	Aged care
	Residential Accommodation Supporting Capital Investment	Yes	2027-01-01	Payment of new capital subsidy payments to eligible residential aged care homes	Aged Care
	End of Life Pathway Refinements	Yes	2027-07-01	Implementation for eligible participants of extended pathway duration and automatic allocation of a second funding tranche.	Aged Care
DVA	DVA Schedule XML File Updates	No	Updates published on the 1st of every January, March, July and November		DVA Healthcare Providers
	Delivering a New Allied Health Benefits Package for Veterans	Yes	2027-07-01	Annual monetary limited applies to allied health treatments and private expenditure with date of service	DVA Healthcare Providers
	Retrospective Claiming	Yes	2027-07-01	Allowable claim limit period reduced from 24 months to 12 months	DVA Healthcare Providers
Health Connect	Health Connect Australia Program	Yes	2026-11-01	Limited Production release of the Health Connect Provider Directory	HI system
			2027-02-01	National roll out of the Health Connect Provider Directory until end of June 2027	
Authentication	Health Future State and Authentication Transition	No	2026-09-01	Software developers will have 12 months to upgrade	All developers
	More information will be provided		2028-09-01	Transitions must be complete. NASH will cease and there is no extension.	

Software Developer Impact Roadmap

Initiative information



Updated September 2026

Schedule conditional and subject to change



Services Australia

Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
Medicare	Medicare Benefits Schedule (MBS) XML File Updates	Services Australia	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. The XML file is primarily used by practice software to update relevant information and contains values and tags relevant to certain MBS item rules.	Yes	Schedule available via MBS website	No
	Assignment of Benefits (AOB)	Services Australia & Department of Health, Disability and Ageing (DHDA)	AOB reforms are designed to support digital consent mechanisms, strengthen record-keeping requirements, and enhance the overall integrity of the Medicare system. 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.	No	Services Australia: Developer Liaison More information via DHDA website	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	Schedule available via PBS website	No
PBS & Electronic Prescribing	Electronic National Residential Medication Chart (eNRMC)	DHDA	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). Implementation of electronic medication charts to be used in expanded clinical settings, as developed in the National Electronic Medication Chart Framework.	Yes	More information via DHDA website	No
Electronic Prescribing	Sunsetting of Electronic Prescribing Conformance Profile v2.3	Australian Digital Health Agency (ADHA)	As announced on 25 March 2025, following consultation with the software industry, the sunset date for has been extended to 30 September 2026.	Yes	More information for ADHA initiatives and programs via Implementation Hub	No
	Electronic Prescribing Conformance Profile v3.0.1	ADHA	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	ADHA	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		No
	Electronic Prescribing Conformance Profile v4.0	ADHA	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		No

Software Developer Impact Roadmap

Initiative information



Updated September 2026

Schedule conditional and subject to change



Services Australia

Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
Aged Care	Paying Providers on Services Delivered	Services Australia	This will change the payment of residential care subsidies and supplements from advance to arrears over a two-year transition period commencing 1 July 2026. During the transition period, the advance payments will be reduced by 4.17% per month (cumulatively) over two years until the final advance payment is zero.	Yes	More information via DHDA website	Yes
	Residential Accommodation Pricing and Consumer Protections	Services Australia	Changes to accommodation pricing arrangements will be identified in the Aged Care Provider Portal if a care recipient is eligible for the Refundable Accommodation Deposit (RAD) retention and Daily Accommodation Payment (DAP) indexation. Updates will be made to the entry record in the portal to enable providers to report the DAP amount and conversion factor as requested by DHDA.	No		Yes
	Residential Accommodation Supporting Capital Investment	Services Australia	Capital subsidy payments will be paid to eligible residential aged care homes: - New Home Payment (\$30 per supported resident per day) for 25 years - Significant Improvement Payment (\$15 per supported resident per day) for 15 years DHDA will notify Services Australia of a home’s eligibility for each payment; and the payment/s will be paid as part of the monthly claim process. Information will be included in the Aged Care Provider Portal and Payment Statement.	Yes		Yes
	Changes to Contributions for Personal Care	Services Australia	From 1 October 2026, personal care services under Support at Home will move from the Independence category to the Clinical Supports category, meaning approved participants will no longer pay contributions for personal care. This means older people will not be out-of-pocket and can access the personal care services if they are approved to access personal care as outlined in their care plan and have available Support at Home funding: - All Personal care services will move from the Independence category to the Clinical Supports category for contribution purposes. - Participants will no longer pay contributions for approved personal care on or after 1 October 2026, where they are approved and have available funding. ICT systems will need updating to reflect new contribution treatment. Claiming and payment arrangements must align to new contribution settings.	Yes		
	End of Life Pathway Refinements	Services Australia	The implementation of the End of Life (EoL) Pathway Enhancements, including extension of the EoL pathway duration, with allocation of a second unit of funding upon completion of the initial 12-week period. ICT systems will need updating to support extended EoL pathway including additional funding allocation, care recipient transition to changes, recalculation of EoL approval cessation dates, recalculation of related supplements applying to EoL and places management. This will improve participant outcomes, streamline processes, and enhance system consistency	Yes		
	Business to Government (B2G) Developer Portal – Aged Care Gateway	DHDA	To build capability across aged care providers and ICT vendors by establishing APIs that enables a direct, secure connection between aged care software systems and DHDA. This streamlines reporting processes, improving efficiency, data accuracy, and timeliness, while reducing administrative burden. It enables the seamless exchange of information and data between provider systems and DHDA.	No	More information for DHDA Aged Care initiatives via B2G Developer Portal	No
	B2G Gateway Conformance Service	DHDA & ADHA	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.	No	More information for DHDA Aged Care initiatives via B2G Developer Portal	No

Software Developer Impact Roadmap Initiative information  Updated September 2026 Schedule conditional and subject to change  						
Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
DVA	Department of Veteran Affairs (DVA) Schedule XML File Updates	Services Australia	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. 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.	Yes	Schedule available via DVA website	No
	Delivering a New Allied Health Benefits Package for Veterans	Services Australia	The project will implement an annual monetary limit on the value of allied health services claimed by eligible Veteran Card holders each financial year. The initiative aims to address sustainability risks within Department of Veterans' Affairs (DVA) health funding arrangements and improve the overall integrity of DVA payments through better system design. The measure will impose an aggregate claiming limit of \$5000 (incl. GST) on all DVA-only fee items from 1 July 2027. This includes approximately 460 fee items across identified allied health professions.	Yes	More information available via the DVA website	Yes
	Retrospective Claiming	Services Australia	DVA’s provisions in the Treatment Principles requires health providers to lodge claims for treatment within 2 years. This project seeks to amend the time period for the lodgement of claims from 2 years to 1 year in line with that of bulk-billed Medicare claims for the same reasons. This change will require regulatory change to implement, via an amendment to the Treatment Principles. This will apply to all claims lodged on or after 1 July 2027. The change will be announced in advance of the commencement date to enable time for providers to lodge older claims before the 1-year window takes effect. DVA will undertake communication activities with health providers and professional associations to advise them of the change to the time period for lodgement of claims. Communication activities will be undertaken well in advance of the commencement date, to ensure providers have time to adhere to the new requirements.	Yes		Yes
AIR	Australian Immunisation Register (AIR) Reference Data API	Services Australia	AIR software developers should utilise AIR Reference Data API to access all vaccine details and receive updates to listings.	No		No
Health Connect Australia	Health Connect Transition	Services Australia & ADHA	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.	Yes	More information for ADHA initiatives and programs via Implementation Hub	No
HI Service	Healthcare Identifier (HI) Service Conformance Profile v5.1	ADHA	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.	Yes	More information for ADHA initiatives and programs via Implementation Hub	No
	Uplift of HI Service to Fast Healthcare Interoperability Resources (FHIR) APIs	Services Australia	This initiative is to update the current HI webservices from SOAP API’s to the FHIR standard to support healthcare interoperability. Services Australia will prioritise the build and implementation of FHIR based HI Service web services for: - TECH.SIS.6 - IHI Inquiry Search via B2B - TECH.SIS.12 - Consumer Search IHI Batch Synchronous - TECH.SIS.30 - Consumer Search IHI Batch Asynchronous Services Australia will continue to support and maintain existing SOAP APIs until all users have transition to FHIR.	No		Yes

Software Developer Impact Roadmap

Initiative information



Updated September 2026

Schedule conditional and subject to change



Services Australia

Program	Initiative	Lead	Summary	Milestones	Contact / Website	New
HIPS	Healthcare Information Provider Service (HIPS) Service v9.1	Australian Digital Health Agency	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.	Yes	More information for ADHA initiatives and programs via Implementation Hub	No
			HIPS is designed primarily to support large-scale digital health environments typically found in organisations such as hospitals and diagnostic service providers.			
MHR	My Health Record (MHR) Connecting Systems Security Conformance Profile	Australian Digital Health Agency	The MHR Connecting Systems Security Conformance Profile, along with supporting artefacts, guide MHR software implementation.	No	More information for ADHA initiatives and programs via Implementation Hub	No
			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.			
	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	More information for ADHA initiatives and programs via Implementation Hub	No
Birth of a Child (BoC)	Consent trigger to send electronic proof of birth from hospitals to Services Australia	Services Australia	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. 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.	No		No
	Update API to meet Fast Healthcare Interoperability Resources (FHIR) standards	Services Australia	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 move from the current SFTP process or to onboard a new hospital before moving into production. 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. This initiative will also support replacement of the hospital's integration from the Services Australia Developer Portal to the Health Systems Developer Portal.	No		No
Authentication	Health Future State and Authentication Transition	Department of Health, Disability and Ageing	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. Full transition to be completed by September 2028.	Yes	DHDA: DH Interfaces	No
NASH	NASH PKI – New certificates	Services Australia	All healthcare organisation will commence transitioning to the new NASH PKI certificate from August 2026. A testing window is now open to test the new NASH PKI certificate. Testing must be completed by August 2026 to ensure transition.	Yes	NASH PKI Business	Yes