



Annual Report

Financial Year 2020 – 2021

healthdirect
Australia



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From the Chair

This financial year Healthdirect Australia has delivered on its core purpose of being a trusted, flexible and efficient vehicle for the governments of Australia to respond quickly to the needs of consumers and readily implement evolving health policy. COVID-19 has fundamentally changed how we deliver healthcare and I am extremely proud of the important role Healthdirect Australia continues to play to improve the delivery and linkage of health services.

Healthdirect Australia was formed by collaborative and visionary jurisdictions in 2006, and this year reached a milestone of 100 million contacts with Australians in a single year.

Key achievements this year encompassed support of the national response to COVID-19 – streamlining the consumer journey through the provision of the National Coronavirus Helpline, the COVID-19 Restriction Checker and the Vaccine Eligibility Checker through to the national listing of locations, via the National Health Services Directory, to book their appointment. These services demonstrate our capability to leverage our core infrastructure and scale as required to support our funders.

I am pleased to announce that we have developed a Strategic Plan to guide us for the next three years. On behalf of the Board, I thank our shareholders, funders, industry partners and consumer representative groups who provided critical input to help shape this strategy and our future direction.

We are delighted to welcome Victorian Department of Health as a shareholder of Healthdirect Australia, as of 1 July 2021. Building on a strong working relationship forged in FY21, Victoria's shareholder membership will enable optimisation of strategic opportunities and help us drive further value from government investment in our services.



A key strength of Healthdirect Australia's ability to deliver safe digital services is its rigorous application of health literacy principles and clinical governance across all services and modes of delivery. This year the Clinical Governance Framework was refreshed and ratified by the Clinical Governance Advisory Committee which encompasses a number of external leaders and experts across the health industry.

We acknowledge our previous CEO, Karen Borg who departed in late 2020. Karen led the company through the early stages of the unfolding COVID-19 health pandemic and during her tenure the company delivered some terrific outcomes.

In March 2021, we were pleased to welcome Bettina McMahon as CEO. Joining in a pivotal year for the organisation, her exceptional credentials as a senior leader are instrumental in navigating the next phase in delivering digital health services for the governments of Australia and empowering Australians to manage their health and access the care and support they need.

On behalf of the Board, I thank our Shareholder Committee for their continued support and guidance. We look forward to delivering on the health priorities of the jurisdictions represented on the Shareholder Committee over the next 12 months.



Jane Muirsmith
Chair, Board of Directors
Healthdirect Australia

From the CEO

As Australia has worked toward containing COVID-19 and getting the nation vaccinated, Healthdirect Australia has been a bridge between government policy makers, health services, the technology industry and consumers to achieve our shared goal to overcome this pandemic.

Our reputation for fast, reliable delivery of virtual health services saw an expansion in our COVID-19-related services in 2021 and significant growth in use of our other services to create a healthier Australia.

This financial year, we have handled over 2.7 million calls to our contact centres, had 60 million sessions on our websites, 350,000 interactions through apps, and supported 735,000 video consultations. Millions of people a day use our Vaccine Eligibility Checker, Vaccine Clinic Finder and Restriction Checker tools to get information about COVID-19 at their fingertips.

I have seen for myself the impact of our work in NSW Health's vaccination clinics. Managed with a strong focus on customer experience by the NSW Government, Healthdirect Australia provides support to the centres with our Eligibility Checker, integration with online booking systems and a helpline to answer questions from consumers. In Victoria, when on the cusp of implementing state-run vaccination clinics another outbreak sent the state back into lockdown, our team worked with the Victorian Department of Health to streamline online bookings for the clinic in a matter of days.

Alongside this urgent work, we have maintained excellent service levels on our non-COVID-19 services. Our management of the My Aged Care service has aligned with recommendations of the Royal Commission into Aged Care Quality and Safety to provide an empathetic service for all older Australians.

Healthdirect Australia has transitioned the operation of Victoria's NURSE-ON-CALL helpline as part of the healthdirect service, boosting call volumes to the contact centre by 40 per cent. With the addition of NURSE-ON-CALL, we are pleased to provide free triage, advice and information to 80 per cent of Australia's population.



With such varied and purposeful work underway, I am delighted to lead Healthdirect Australia into FY22.

I thank our Board of Directors who have been a steady guide. In particular, the Chair, Jane Muirsmith, has recognised the strengths of our team and the opportunities to us and is a strong advocate for the Company and a great support to me as incoming CEO.

From the moment I joined in March 2021, I have been impressed with the commitment and culture within the Healthdirect team. Along with the Executive Leadership Team, the sense of working towards a common goal is extraordinary and I am already very proud of what we are achieving together.

I look forward to another successful year where we provide even more value to consumers, governments and the broader health system.



Bettina McMahon
CEO
Healthdirect Australia

About Healthdirect Australia

Healthdirect Australia is a national, government-owned, not-for-profit organisation established in 2006 by the Council of Australian Governments (COAG).

As a national telephony and virtual health service provider, we help Australians actively manage and improve their health by providing trusted information and virtual services anywhere and anytime.

Our shareholders are the Australian Government and all state and territory governments, except Queensland.

Healthdirect Australia partners with government funders at national and state levels, and with local health providers, including Primary Health and Local Health Networks, to provide integrated customer-facing health information and services.

Our core infrastructure enables the delivery of trusted, nationally consistent, scalable and sustainable solutions that meet the needs of our funders and the Australian public.

Customer-centric services

Healthdirect Australia delivers virtual services that facilitate faster, easier access to health information and advice for all Australians. We help them to actively manage and improve their own health and understand how to access the Australian health system.

Connected to the health system

Healthdirect Australia's services play a key role in the health system, increasing the interconnection of information, advice, referral and virtual services with other services in the health and aged care systems.

Reliable government provider

With more than 15 years of experience designing and delivering digital health, we provide services that are cost-effective, help manage growing demand for health services and respond to government priorities.

Our services

COVID-19 services

National Coronavirus Helpline

COVID-19 Health Professionals Disability Advisory Service

COVID-19 Vaccine Online Booking System

NSW Health vaccination booking support helpline

Governance

External and internal governance processes and committees ensure Healthdirect Australia meets its legal, compliance and financial obligations while delivering high quality, secure, clinically safe services.

The Australian Health Ministers' Advisory Council established the Healthdirect Australia Shareholder Committee to provide Healthdirect Australia with policy guidance.

The Shareholder Committee comprises representatives from participating jurisdictions, ensuring appropriate governance of Healthdirect Australia.

As a not-for-profit public company, regulated under the Corporations Act 2001 and limited by shares, Healthdirect Australia has a Board of Directors.

The Board is appointed by the Shareholder Committee to deliver on the shareholders' investment and vision.

The Board oversees two internal committees which assist in carrying out its responsibilities: the Clinical Governance Advisory Group; and the Finance, Risk Management and Audit Committee.

Government shareholders

Healthdirect Australia is jointly funded by the Australian Government and the governments of the Australian Capital Territory, New South Wales, Northern Territory, Tasmania, South Australia and Western Australia.

We are pleased to welcome the Victorian Department of Health as a shareholder of Healthdirect Australia as of 1 July 2021.

Clinical governance

Healthdirect Australia refreshed its Clinical Governance and Quality Framework in 2021. The Framework applies across all services, including social media channels and marketing collateral, ensuring health information and services are safe, evidence-based and high quality.

Health information and advice across all channels adheres to Healthdirect Australia's Clinical Governance and Quality Framework, Australian health guidelines and best-practice health literacy principles to support people in making informed decisions about their health.

Our shareholders



Healthdirect Australia's Working Environment Group supports company culture.

Our people

As our organisation adapted to the needs of governments during the COVID-19 pandemic, we evolved our mix of skills and resources to enable the set-up, management, review and reporting on each new service.

In the first half of 2021, we welcomed Bettina McMahon as a CEO with deep experience in digital transformation in the health sector; Mark Easson as a Chief Financial Officer, a seasoned executive who has worked in the public and not-for-profit sector; and Dr Nirvana Luckraj as Chief Medical Officer with significant exposure to remote and virtual healthcare delivery. Andrew Bryant, Chief Customer Officer, provided consistent leadership through the fast-paced changes in FY21.

Solutions-focused internal processes

During the COVID-19 pandemic, governments across Australia have regularly requested new services with short turnaround times. Thanks to our internal capabilities, streamlined processes and deep understanding of what governments require, we provide quick-to-market solutions that are cost-efficient, commercially competitive, and contractually sound.

Data management

Data from Healthdirect Australia's services is provided to governments and health services and assists with disease surveillance and health system planning. Over the past year, data has been made available to shareholders via near real-time dashboards, allowing them to monitor service performance and trends.

Healthdirect Australia Strategic Plan 2021-24



To achieve our vision for a healthier Australia, we help Australians actively manage and improve their health by providing trusted information and virtual services anywhere and anytime.



Priorities that deliver value from our services

We improve the health of consumers

We will ensure easier and faster access to information and virtual services for all Australians so they can actively manage and improve their own health and understand how to access health services.

We provide value for governments

We will strengthen those services that are cost-effective, help manage growing demand for health services and respond to government priorities.

We are connected to industry

We are working to increase the inter-connection of our information, advice, referral and virtual services with other services in the health and aged care systems.



Priorities that enable our capabilities

Enhance our flexibility and scalability so we can rapidly respond to emerging or urgent healthcare issues.

Be an adaptive, innovative, and customer focused organisation with efficient and well governed operations.

The national COVID-19 response

As the COVID-19 pandemic continued into 2021, Healthdirect Australia transitioned from being an integral partner in the primary care response to being a critical part of the national vaccine strategy. Our role in designing a system based on eligibility, system readiness and vaccine supply continues to evolve with the dynamic nature of the vaccine rollout and with a variety of public and private sector partners.

Healthdirect Australia has supported the Australian Government's and state and territory governments' aim to maximise efficiencies and avoid duplication of effort and resources, streamlining COVID-19 vaccine information and services across jurisdictions, agencies and taskforces.

Our solutions-focused approach has helped ensure the Australian public has 24-hour access to the most up-to-date information across multiple services and channels.

Managing a range of helpline and digital services across jurisdictions as outbreaks occurred required agile responsiveness. This included delivering a multi-vendor, scalable workforce that could flex to manage demand. Maintaining a positive customer experience has remained a central focus.

Trends and insight reports provided by Healthdirect Australia are invaluable in understanding community sentiment which informs planning and key messages to the community.

Expertise in call centre management

In addition to ongoing delivery of the National Coronavirus Helpline, Healthdirect Australia established two specialist helplines on behalf of the Australian Government Department of Health and NSW Health. Our internal ability to respond to new helpline service needs leveraging our existing infrastructure, has enabled the establishment of multiple inbound and outbound services.

National Coronavirus Helpline

Established in March 2020 to provide information about COVID-19 to the Australian public, the helpline has flexed up and down to meet evolving demand for information and was extended twice in FY21 as the Australian Government continued to provide support during the ongoing pandemic. Healthdirect Australia continues to meet the requirement for rapid, scalable deployment with multiple service providers, enabling a large workforce at short notice.

The helpline is positioned as a central 'source of truth' by the Australian Government in public campaigns, alongside health.gov.au. Australians have called the line more than two million times with call volumes spiking in line with key announcements.

Call handlers are provided with the latest information — frequently prepared at very short notice — allowing them to answer callers questions about the virus, restrictions, the COVIDSafe app and the vaccine. The service is integrated with the National Health Services Directory, assisting callers to find testing and vaccination centres, and is available via the Translation and Interpreter Service.

COVID Connexion

The COVID Connexion helpline provided support for NSW Health employees during the COVID-19 pandemic. Established on behalf of NSW Health in July 2020, the 24-hour confidential wellbeing and advice helpline was staffed by mental health professionals until it was decommissioned in June 2021.

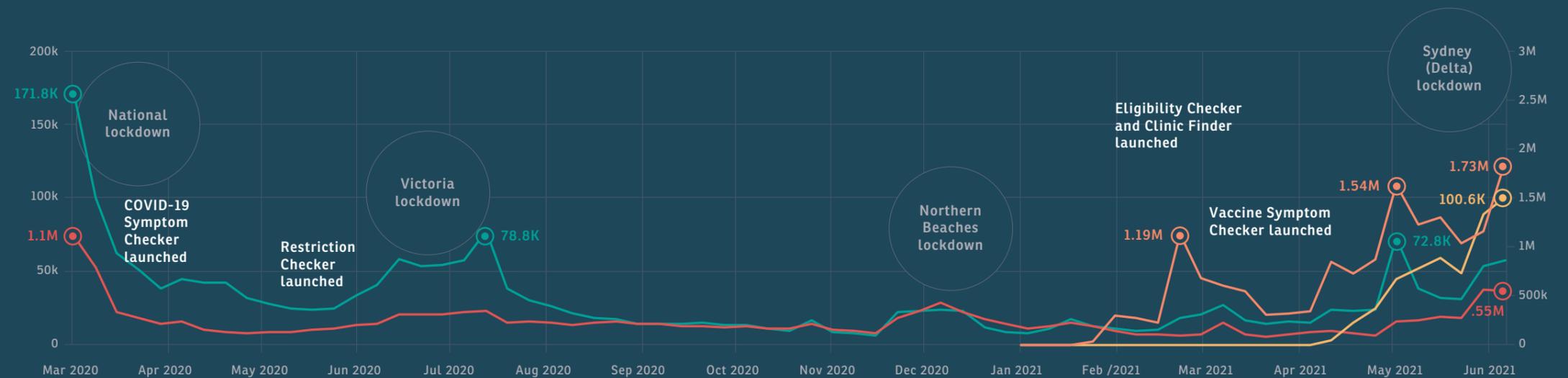
COVID-19 Health Professionals Disability Advisory Service

Healthdirect Australia established the COVID-19 Health Professionals Disability Advisory Service on behalf of the Australian Department of Health in July 2020. The advisory service supports health professionals, such as GPs and emergency department staff, to provide COVID-19 care and treatment to people with disability and facilitates escalation to a disability specialist if needed.

Healthdirect Australia supports public demand for information.

Our helplines and online support tools have continued to provide up-to-date information as the pandemic evolves.

- healthdirect website – Eligibility Checker / Vaccine Clinic Finder visits (M)
- healthdirect website – COVID-19 information visits (M)
- National Coronavirus Helpline calls (K)
- NSW Health Vaccination Booking Support calls (K)



Digital COVID-19 solutions

Healthdirect Australia has developed multiple, scalable digital solutions to help the public access trusted information and advice during the pandemic.

COVID-19 Knowledge Base

Developed for the National Coronavirus Helpline, the web-based, searchable Knowledge Base is the central source of health-related COVID-19 information used by call handlers to answer questions from the general public and health professionals.

The Knowledge Base is a critical resource shared across government departments, their contact centres and other key government-funded agencies to ensure consistent and current messaging.

The Healthdirect Australia team manages content updates around the clock as new information from the Australian government and state and territory rules and restrictions are announced. Our team proficiently and accurately translates complex cross-jurisdictional policy into easy-to-understand information for both call agents and callers.

Restriction Checker

Developed in May 2020, the digital Restriction Checker has been instrumental in keeping the Australian public informed of changing restrictions, border closures and lockdowns. From July 2020 to June 2021, there were 7.8 million sessions on the Restriction Checker web pages, with 'Domestic travel in Victoria' the most popular page visited.

The Restriction Checker is also used by call handlers on the National Coronavirus Helpline who provide callers with up-to-date travel advice and information about what they can and cannot do in their area. The tool is hosted on the healthdirect website, which has had 51 million sessions from people seeking health information and advice this financial year, up from 41 million sessions last financial year.

healthdirect Service Finder

Healthdirect Australia continued to work with the Australian Government Department of Health and state and territory health departments to maintain the currency of listings of COVID-19 testing clinics in the National Health Services Directory, which powers the healthdirect Service Finder tool.

People who required a COVID-19 test were able to find their nearest testing clinic, as well as a local GP or emergency department, as appropriate. During the extended lockdown in Victoria, the Victorian Department of Health (formerly the Department of Health and Human Services) requested and received assistance in surfacing telehealth mental health clinics for those seeking services in Victoria.



Assisting Victoria during the second wave

With the escalation of COVID-19 cases in Victoria during July and August 2020, Healthdirect Australia assisted the Victorian Department of Health (formerly Department of Health and Human Services) with varied aspects of managing the outbreak.

COVID-19 case management

As Victoria experienced a second wave and lockdown period, Healthdirect Australia played an essential role in developing the processes for contact tracing and set up a multi-vendor contact centre to manage the clinical requirements and wellbeing of people in quarantine.

Clinical call agents conducted outbound activities, including contacting people who had tested positive for COVID-19 and conducting an initial interview to determine their recent movements and contact points. They made calls to determine if negative cases could be released from quarantine, using a symptom assessment tool developed by Healthdirect Australia.

The development and management of this service involved close oversight by Healthdirect Australia's Clinical Governance team.

Victorian border permit helpline

During Victoria's State of Emergency, the Victorian Government announced a new 'traffic light' border permit policy. To assist the Victorian Government in managing the policy, Healthdirect Australia established a new contact centre, with interim processes and systems, in just 24 hours.

Implemented on the cusp of the Christmas holidays, the policy was frustrating and challenging for many travellers. The helpline instantly began operating at full workforce capacity, providing clear explanations and essential assistance to callers who were seeking border permits.

Service delivery was intense for two months between December 2020 and February 2021, after which time delivery was transitioned to the Department of Health.

Vaccine adverse reactions data-capture

Healthdirect Australia was engaged by Surveillance of Adverse Events Following Vaccination in the Community (SAEFVIC) — Victoria's central reporting service for any significant side effects following immunisation — to capture data on Victorians who reported side effects of a COVID-19 vaccine.

The service leverages the National Coronavirus Helpline to log event data in SAEFVIC systems. This ensures critical event notifications are prioritised for immediate attention, enabling a rapid response to any vaccine event incidents and tracking of side effects.

Victorian health alert line

Launched in October 2020, this inbound clinical response helpline provided a central point of information for those in the Victorian hotel quarantine program who were impacted by a breach in health protocols.

The helpline was supplemented with an outbound campaign to reach as many contacts as possible. The assistance provided by Healthdirect Australia ensured that clinical call handlers were available to work with callers and alleviate their concerns.

COVID-19 Vaccine Online Booking System

Healthdirect Australia has been a consistent, reliable government partner throughout the pandemic, supporting Australians to get vaccinated through the online booking system.

The online booking system consists of the seamless integration of component technology, including the Vaccine Eligibility Checker, a Vaccine Clinic Finder and online booking vendors.

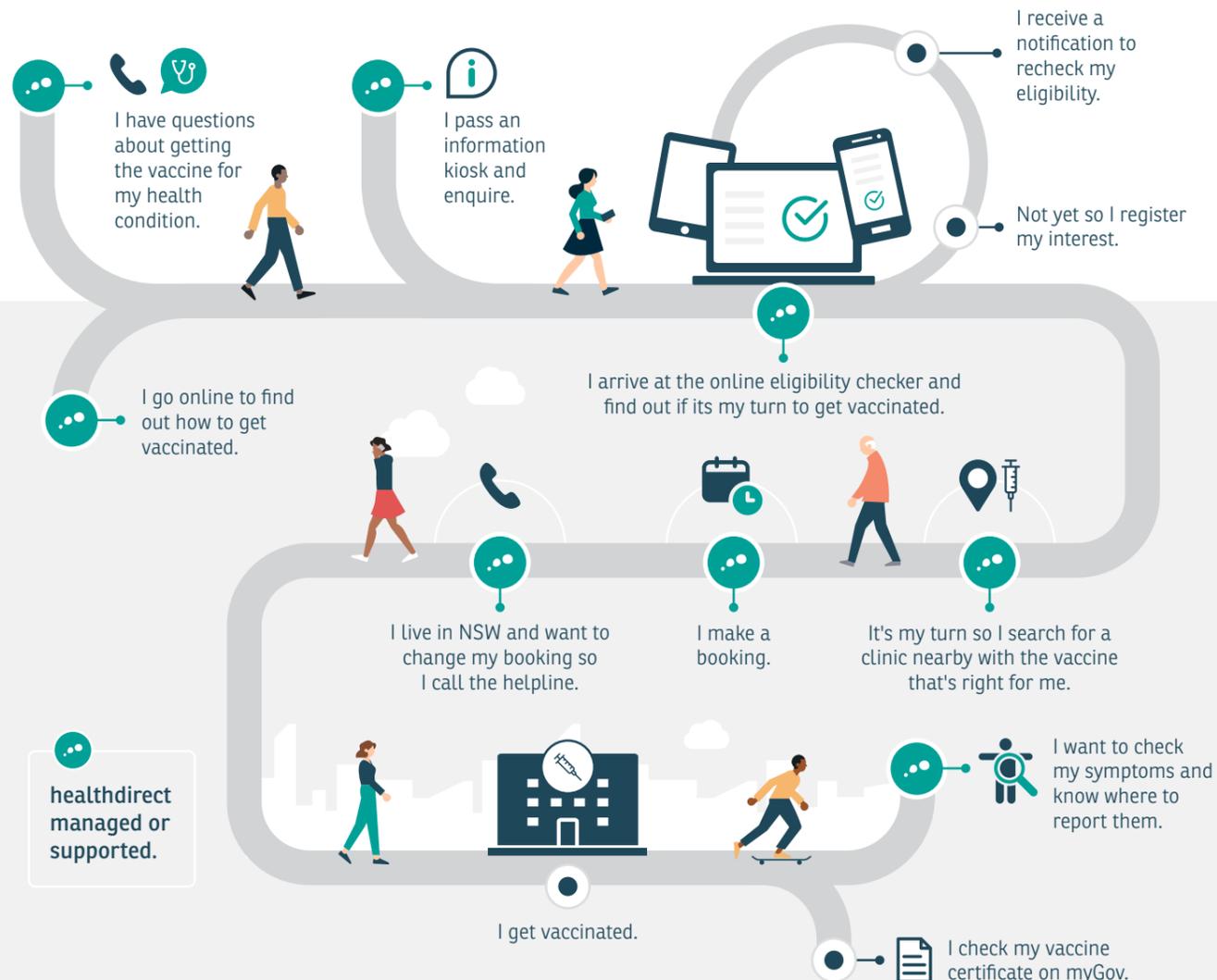
Healthdirect Australia's systems, technology and expertise are the backbone of the digital ecosystem guiding people to an online booking. We provided solutions to help achieve the goal of getting the nation vaccinated. This is evident from our Vaccine Eligibility Checker which has up to half a million sessions on any given day.

Healthdirect Australia bridges the gap between the health technology industry and government, in particular, optimising the National Health Services Directory to support seamless online bookings of vaccination appointments.

"It's amazing to have had 4m+ visits to the Eligibility Checker, making it one of the Australian Government's most visited websites, 2m+ to the Vaccine Clinic Finder, and highly responsive non-digital channels that ensure people without access to digital solutions can have the same, high quality and accessible experience."

Dr Luca de Toca, Australian Government, Department of Health, First Assistant Secretary, COVID-19 Primary Care Response, Vaccine Taskforce (7 May 2021)

Healthdirect Australia built and maintains key digital waypoints on the journey to get vaccinated.



COVID-19 vaccine services

Healthdirect Australia has launched a new COVID-19 vaccine service almost every month since January 2021 across multiple jurisdictions, while maintaining operation of existing COVID-19 services. This fast-paced onboarding of services has informed Healthdirect Australia's FY21-24 Strategic Plan and business operations.

Tool	What it does	Who we worked with	Value
Vaccine Eligibility Checker	<ul style="list-style-type: none"> Consumer 'front door' to an online vaccination booking Updated with evolving Commonwealth and state and territory eligibility policy and vaccine rollout Multi-language Detailed explanations to help users understand terms Link to Register Your Interest Specific logic for Aboriginal and Torres Strait Islander peoples Widget provided to third-party booking providers for nationwide consistency 	<ul style="list-style-type: none"> Commonwealth All states and territories Digital Transformation Agency 	<ul style="list-style-type: none"> Seamless user experience streamlines multiple component systems and complex policy information Most visited Commonwealth digital tool Reports used for trend analysis and to inform public messaging Safe and secure protection and management of personal health information
Vaccine Clinic Finder / National Health Services Directory	<ul style="list-style-type: none"> Information passed through from eligibility outcome – customers only see which clinics are relevant, including availability, location and appropriate type of vaccine appointment Seamless link to online booking providers Receives, cleans and categorises vaccination providers' data and maintains accuracy throughout rollout 	<ul style="list-style-type: none"> Commonwealth State and territory health departments Primary Health Networks Medical Software Industry Association Booking engine providers 	<ul style="list-style-type: none"> Single database for customers The most up-to-date source of vaccine clinic information Offered to all interested parties – GPs, pharmacies, state and community clinics Core infrastructure for national booking system – transfer of secure, accurate data
Vaccine Side Effects Symptom Checker	<ul style="list-style-type: none"> Digital self-help tool to check symptoms post-vaccination Provides health information and advice, including health service listings and directions to report symptoms 	<ul style="list-style-type: none"> Therapeutic Goods Administration Australian Technical Advisory Group on Immunisation 	<ul style="list-style-type: none"> Peace of mind for users Users know where to report symptoms
NSW Health vaccination booking support	<ul style="list-style-type: none"> Creates logic in Eligibility Checker for people in NSW based on age to help them find a vaccination clinic Surfaces clinic information in service finder, connects to NSW booking system Non-clinical helpline to support people with their bookings 	<ul style="list-style-type: none"> NSW Health 	<ul style="list-style-type: none"> Helps NSW to fast-track vaccinations Streamlined consumer experience to maximise bookings
Knowledge Base	<ul style="list-style-type: none"> Centralised repository of accurate and up-to-date information for public enquiries 	<ul style="list-style-type: none"> Commonwealth All states and territories 	<ul style="list-style-type: none"> Multiple government jurisdictions and agencies all access single 'source of truth' for key information
Disability Provider support	<ul style="list-style-type: none"> Collation of disability provider data to be used by the disability stream of the Commonwealth vaccine taskforce. 	<ul style="list-style-type: none"> Commonwealth 	<ul style="list-style-type: none"> Quick delivery Accurate vaccination data for 7,000 disability residential facilities providing residents' vaccinations
Vaccine information kiosks	<ul style="list-style-type: none"> Provide clinical helpline for support staff in vaccine information kiosks so they can assist walk-ins with making a booking 	<ul style="list-style-type: none"> Commonwealth 	<ul style="list-style-type: none"> Provide information support for kiosk staff in high-culturally and linguistically diverse, low-tech literate communities

Scalable health services

A core purpose of Healthdirect Australia is to support the effective and efficient management of health service demand. Our national infrastructure enables the rapid scale-up and delivery of services to support health priorities and emergencies.

healthdirect Video Call scales up

healthdirect Video Call is a video consulting platform purpose-built for the Australian healthcare environment. It is easy to use, rapidly scalable. Most patients, clinicians and administrators already have the technology required to use it.

Temporary and permanent changes to telehealth policy, made by the Australian Government Department of Health and jurisdictions, underpinned healthdirect Video Call's 245 per cent growth this year. Victorian primary care providers have been the highest users of this service.

Victorian adoption supports access to health during lockdowns

The Victorian Department of Health started using healthdirect Video Call as its preferred video platform in 2015 at the Royal Children's Hospital. This early adoption and subsequent roll-out across the health system meant that during multiple COVID-19 lockdown periods, the infrastructure, training and processes were in place to enable a rapid scale-up of healthdirect Video Call to meet the surge in demand for remote service delivery.

To assist Victoria at this time, Healthdirect Australia provided onboarding and configuration of workflows for more than 100 new organisations and more than 2,000 clinics. This included:

- weekly training sessions for clinicians and support staff
- fortnightly software updates to enhance the user experience for clinicians and patients — improved patient audio, text notifications, additional support for interpreters, clinic invitation reminders via SMS, wider browser support and improved screenshare functionality
- technical and customer support for troubleshooting advice, account set-up and bug-fixing



"During the lockdowns, healthdirect Video Call enabled the continuation of healthcare services to many Victorian patients who could consult with hospital and community healthcare providers in the safety of their own homes during a stressful and uncertain time."

Neville Board, Chief Digital Health Officer
— Victorian Department of Health

Potential savings from the Victorian health system's adoption of Video Call in FY21



Calculation notes: Trips around Australia: 25,780km per trip is assumed. Fuel saved: 11.1litres per 100kms travelled is assumed. CO₂ emissions saved: 2.3kilograms of CO₂ is assumed to be produced for each litre of petrol consumed. Planting trees to counter CO₂ emissions: 6 kilograms of CO₂ per tree per year is assumed.



The Queen Elizabeth Centre

The Queen Elizabeth Centre provides crucial early parenting services and support to Victorian families with children up to four years of age. Prior to the pandemic, the Queen Elizabeth Centre's service delivery was almost completely face-to-face, with home visits, residential stays and on-site hands-on programs comprising the majority of their models of care.

With support from the Victorian Department of Health, the Centre embraced video consulting, redesigning services for delivery via healthdirect Video Call.

“We've learnt that some services or parts of programs are highly appropriate for delivery via video, such as initial interviews or follow-up conversations, saving people time and streamlining our workflows. Some people prefer to access services via video and we can now offer the choice. This is a permanent legacy of COVID-19 that really adds value to what we do.”

Samantha Corrigan, Director of Finance and ICT — The Queen Elizabeth Centre

Streamlining digital journeys

Healthdirect Australia supports the National Health Reform Agreement agenda by providing infrastructure and services that are consumer-centric and designed to improve health literacy.

healthdirect helps callers take the next step

Callers to the healthdirect helpline are now offered an SMS at the end of the call which contains the nurse's advice. The SMS also includes a link to a personalised webpage which is compiled based on the telephone discussion. The webpage features additional care information, including what to do if the caller's symptoms change and details of relevant health services.

Providing this information takes the burden off callers to remember advice, particularly in times of stress when illness might impact their memory, helping them take the next steps towards better health. It also assists with clinical continuity, bridging the gap in their health journey from calling the helpline to seeing their GP or other health provider.

Callers are very receptive to the opt-in SMS service, with 98 per cent consenting to receive the post-call summary. Those who receive an SMS show increased confidence in managing their health issue and in recalling the nurse's advice compared with callers who did not receive the SMS. This is noticeably higher among non-English speaking callers, according to survey data commissioned by Healthdirect Australia.

Launched in September 2020, the SMS is an important development for the healthdirect helpline and follows the implementation of the SMS follow-up as an option on the healthdirect Symptom Checker.

An audio service finder option for callers

An analysis of caller requirements on the healthdirect helpline found that four per cent of callers are seeking health service information and do not require nurse triage.

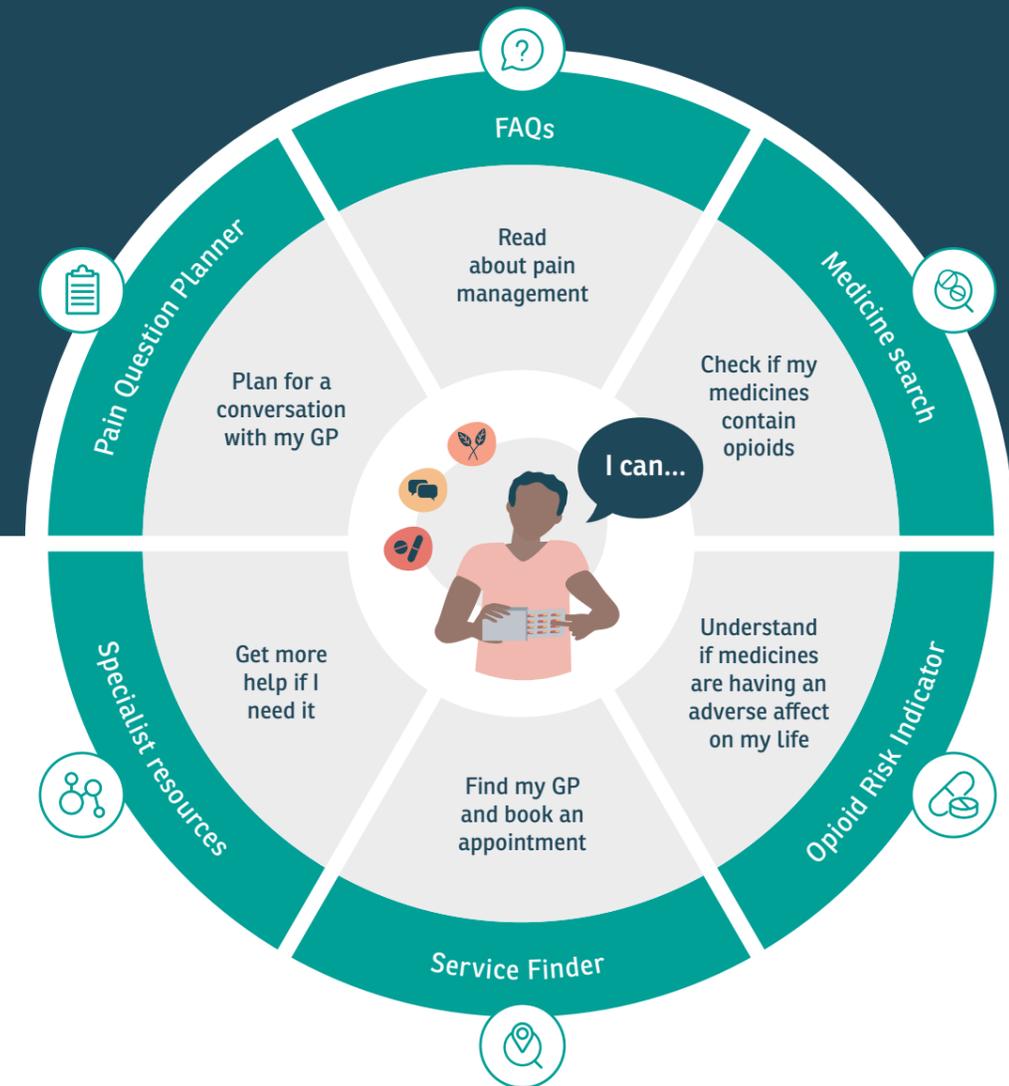
Healthdirect Australia developed conversational technology to allow callers to find health services without having to speak to a person, freeing up nurses to assist callers with health concerns.

The option was launched as a pilot in NSW in September 2020 and will be extended to other jurisdictions in late 2021.

Informing decision making in chronic pain management

This year, Healthdirect Australia collaborated with the Therapeutic Goods Administration on an Australian Government public education campaign for the appropriate use of opioid medicines in chronic pain management. Our role was to develop an online opioid and pain management hub, hosted on the healthdirect website, with a range of digital self-help tools to help people make informed decisions about their health.

Healthdirect's Pain Management Hub empowers people to make informed decisions and take the next steps toward better health.



Supporting a better-connected health system

Improving interoperability across the healthcare community is a key priority of the National Digital Health Strategy. The National Health Services Directory, run by Healthdirect Australia contributes significantly to this goal. The Directory is a crucial piece of national infrastructure which supports the flow of secure data and information across health networks.

The National Health Services Directory — a core component to e-referral

The National Health Services Directory, managed by Healthdirect Australia, aggregates practitioner and health services information from a range of sources and makes this information available to consumers and the health system through Application Programming Interfaces (APIs) and publicly available search tools.

Data standards which enable seamless information exchange between systems are integral to interoperability. In 2020, the Directory adopted the HL7 Fast Healthcare Interoperability Resources (FHIR) Standard and developed a FHIR-compliant API. The API is designed to enable clinical systems to integrate Directory data in a standardised way.

Healthdirect Australia has been defining requirements and implementing enhancements to the Directory data model and FHIR API to support e-referral systems. New capability is being developed to automate data exchange in the FHIR standard format for use by external organisations.

Supporting NSW and Victorian health departments

The National Health Services Directory has been selected as the directory platform for an e-referral prototype and implementation in NSW and a proof-of-concept e-referral program in Victoria.

eHealth NSW approached Healthdirect Australia to participate in a prototype for an e-referral system to support outpatient services. The project involves integration between multiple software systems, including internal hospital Patient Administration Systems, NSW Health's Electronic Medical Record, GP clinical information and secure messaging systems.

The Directory aggregates and synchronises outpatient clinic and practitioner information extracted from NSW Health databases and its FHIR API is used by the e-referral platform to enable users to find practitioners or services to refer to, in real-time.

The e-referral system will enable a range of health practitioners across primary and acute care to make referrals and notify referrers and patients of their referral outcome. At present, this process is complex and relies heavily on time consuming non-automated practices. An e-referral system will not only save practitioner time but will assist consumers to get timelier access to the care they need.

The FHIR API has been developed to enable users of the e-referral system to search complex organisational structures using the Directory. Close engagement and co-design with NSW Health stakeholders will ensure that the data model and API continues to support referral workflows as they change and adapt.

The prototype e-referral system is planned to launch in 2021-2022, initially operating in two NSW Local Health Districts.

A similar project is underway in Victoria. Preliminary work on a proof-of-concept e-referral system is complete and further development is expected to occur in late 2021.

Improving access to care

Healthdirect Australia supports digitally-enabled models of care that improve accessibility, quality, safety and efficiency across key population groups.

e-referral pathway streamlines access to pregnancy support

Commissioned by NSW Ministry of Health and managed by Healthdirect Australia, Get Healthy in Pregnancy (GHiP) is an extension of the Get Healthy Information and Coaching Service. GHiP supports women in adopting and maintaining healthy lifestyles during pregnancy and post-birth.

Referrals to GHiP are routinely offered as part of maternity services provided by Local Health Districts (LHDs) in NSW. Since NSW Ministry of Health launched GHiP in 2016, nearly 40,000 women have been referred to the program.

This year, Healthdirect Australia collaborated with the Centre for Population Health at the NSW Ministry of Health to assist in the development of an e-referral pathway to GHiP from eMaternity, the online platform for managing patient information in maternity services across 13 of the 15 LHDs in NSW.

Enabling e-referrals and moving away from paper, fax and email referrals for maternity services aligns with two strategic priorities for Ministry of Health — supporting healthy pregnancy and the first 2,000 days of a child's life, and digital innovation and integration across the health system.

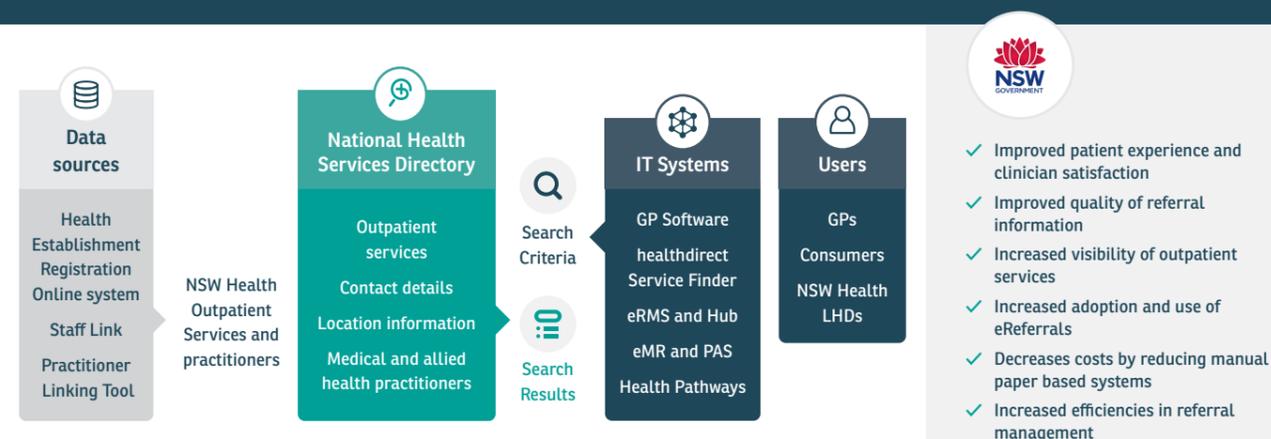
The first e-referral was sent in November 2020. Enrolments in the program increased by a quarter with the new referral system.

“When a patient is referred to GHiP through the new e-referral pathway, the automated process is so quick and efficient that the service is ready to call them and begin the program the very next day. You really need to strike while the iron is hot with programs like this, as the earlier we can intervene in pregnancy to support people to adopt healthy lifestyles the greater the impact on their health.”

Tahlia Reynolds, Senior Project Officer
— NSW Centre for Population Health

eHealth NSW e-referral system

The National Health Services Directory plays a central role in the eHealth NSW e-referral system, helping to provide an integrated, digital approach that supports safe, effective and appropriate patient care.



Enhancing rural and remote access to primary care

The after hours GP helpline is an extension of the healthdirect helpline, providing people in rural and remote areas with access to primary care when their own GP may not be available. Usually a phone call-back service, this important safety-net now also offers a video call-back option.

Implemented during a six-month pilot, this service enhancement brings together two services managed by Healthdirect Australia: the after hours GP helpline and the healthdirect Video Call service, a video technology purpose-built for clinical settings.

A critical aspect of the integration project involved retaining existing clinical workflows and ensuring that third parties, such as emergency services and interpreters, can join video calls without compromising security or clinical integrity.

Service design and implementation were managed in-house by Healthdirect Australia, with extensive clinical governance review and collaboration between government and service providers to ensure the video-enabled experience is safe, high quality, efficient and seamless.

Now a permanent part of the service, 20 per cent of eligible callers choose a video call-back from a GP – much higher than the national trend for GP video consultations.

“Due to the pandemic, we are moving towards more telehealth consults across the health system. Video calling on the after hours GP helpline enables people who can’t access a GP in person to still have that visual connection. It can also improve communication, build rapport and help GPs with assessment and demonstration. These are big wins for us and our patients.”

Dr Nelson Lau (MBBS, FRACGP), Senior Medical Advisor — Medibank Health Solutions, General Practitioner on the after hours GP helpline since 2011

My Aged Care aligns with Royal Commission recommendations

Envisioned as the gateway to accessing aged care services, My Aged Care was established in 2013 to support the aged care system in delivering quality services that are accessible and efficient.

In 2021, the Royal Commission into Aged Care Quality and Safety made 148 recommendations to improve the health and wellbeing of Australians who receive a wide range of aged care services.

While major changes to the My Aged Care contact centre were not at the forefront of the Royal Commission’s recommendations, in collaboration with the Australian Government Department of Health, Healthdirect Australia actively designed and implemented several service enhancements which addressed the recommendations to improve the My Aged Care service.

Supporting the vulnerable elderly

In 2020, a dedicated case coordination team piloted a system that focuses on providing more tailored support for highly vulnerable callers. The caller is assigned a dedicated case manager to assist in their use of My Aged Care, to monitor their progress, make outbound calls to enquire about their situation, and to guide them through any difficulties in accessing the support they need. The team can also refer people to appropriate services run by private organisations and charities to ensure their aged care needs are met. Following a successful eight-month pilot, the case coordination team became a permanent part of the My Aged Care service in December 2020.

Demonstrating empathy while providing a consistent service

This year, management of the contact centre has focused heavily on embedding the customer-centric approach ‘Be kind, be helpful’ into formal processes. The aim is to actively demonstrate to callers in every interaction that they are being heard and supported as individuals, while still being provided with consistent, accurate information.

Video vs phone consultations on the after hours GP helpline

Survey data demonstrates the value in providing video access to helpline callers. (Survey data commissioned by Healthdirect Australia)

	 Video consultation	 Phone consultation
Caller correctly recalls information	94%	86%
Caller complies with GP recommendation	89%	83%
Caller likely to use service again	85%	72%
Caller confident with information provided	85%	76%



Improved scripting

Key information used by call handlers was rewritten to allow for a more natural conversation with callers while ensuring consistency in message.



New quality measures

A customer-centric evaluation focuses on the call handlers’ ability to actively listen, tailor their conversation to the caller and apply an advanced level of empathy.



Speech analytics

New real-time speech analytics technology helps Healthdirect Australia monitor a caller’s interaction with My Aged Care, informing overarching service quality improvements.



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These financial statements are the financial statements of Healthdirect Australia Limited as an individual entity. The financial statements are presented in Australian dollars.

The financial statements were authorised for issue by the Directors on 14 October 2021. The Directors have the power to amend and reissue the financial statements.

Financial statements

Directors' report

Your Directors present their report on Healthdirect Australia Limited trading as Healthdirect Australia (referred to hereafter as the Company) for the year ended 30 June 2021.

Directors

The following persons were Directors of the Company during the whole of the financial year and up to the date of this report:

J Muirsmith
D Ashbridge
G Ginnane
H Nott
L McElvogue
P Jurd

Information on Directors as at the date of this report

Mrs Jane Muirsmith, Chair

Appointed Director January 2016 – December 2019
Reappointed Director January 2020 – December 2022
Appointed Chair February 2020

Mrs Muirsmith is an accomplished digital and marketing strategist, having held several executive positions in Sydney, New York, Melbourne, Singapore and Perth. Mrs Muirsmith is Managing Director of Lenox Hill, a digital strategy and advisory firm, and is a Non-Executive Director of Cedar Woods Properties Ltd, the Australian Finance Group (AFG) and the Telethon Kids Institute.

Mrs Muirsmith is the WA representative on the Business Advisory Committee at Chartered Accountants in Australia and New Zealand, a member of the UWA Business School's Ambassadorial Council and a former President of the Western Australian Women's Advisory Council.

Qualifications

Bachelor of Commerce with Honours (BCom (Hons))
 Fellow of Chartered Accountants Australia and New Zealand (FCA)
 Graduate of the Australian Institute of Company Directors (GAICD)

Special responsibilities

Chair of the Board of Directors (appointed February 2020)

Professor David Ashbridge, Director

Appointed July 2018 – June 2021
Reappointed July 2021 – June 2024

Professor Ashbridge has held senior roles in health in both State and Commonwealth governments. Professor Ashbridge was CEO of Barwon Health and previously worked for 22 years in the Northern Territory, where he practised initially as a remote area medical officer in Aboriginal communities.

Professor Ashbridge moved into health administration and was CEO of the Northern Territory Department of Health from 2006 to 2010. Most recently, Professor Ashbridge was an advisor to the National Disability Insurance Agency. Professor Ashbridge is a Member of the Royal College of General Practitioners (MRCGP).

Qualifications

Bachelor of Medicine, Bachelor of Surgery (MBBS)
 Diploma in Child Health (DipChildHealth)
 Diploma in Tropical Medicine (DipTropMed)
 Master of Public Health (MPH)
 Graduate of the Australian Institute of Company Directors (GAICD)

Special responsibilities

Chair of the Clinical Governance Advisory Group (appointed Member July 2018, appointed Chair February 2020)

Ms Gayle Ginnane, Director

Appointed January 2020 – December 2022

Ms Ginnane has considerable experience on boards, spanning commercial and not-for-profit, voluntary, government and private sectors. She is currently an Independent Director on the Board of Police Health and the UNSW Canberra Advisory Council, and was Chair of the National Blood Authority for eight years. Ms Ginnane also serves on several audit committees including the Department of Veterans' Affairs, the Organ and Tissue Authority, the National Health and Medical Research Council, and Cancer Australia.

Ms Ginnane was CEO of the Private Health Insurance Administration Council (PHIAC), reporting to the Minister for Health and Ageing, with financial and regulatory responsibility for the private health insurance industry. Ms Ginnane has an in-depth understanding of governance, risk management and finance. Ms Ginnane has previous government experience in the Departments of Health and Defence, including the Defence Intelligence Organisation.

Qualifications

Bachelor of Arts (BA)
 Bachelor of Economics (BEC)
 Master of Defence Studies (MDS)
 Graduate Diploma Strategic Studies (GradDipStratStudies)
 Fellow of the Australian Institute of Company Directors (FAICD)
 Affiliate Member of the Actuaries Institute

Special responsibilities

Chair of the Finance, Risk Management and Audit Committee (appointed Member and Chair February 2020)

Financial statements

Dr Helen Nott, Director

Appointed January 2020 – December 2022

Dr Nott is currently a Non-Executive Director of QBE Australia Pacific, Paralympics Australia and the NZ Accident Compensation Corporation. At QBE, Dr Nott is Chair of the Investments Committee. Dr Nott is Vice-President (Vice-Chair) of the Paralympics Australia Board and Chair of the Audit Committee.

Dr Nott has previously held senior leadership roles at Insurance Australia Group (IAG) and QBE Australia and New Zealand. Dr Nott has created InsureTech businesses and supported new investment to meet emerging customer needs. Prior to this, Dr Nott spent many years in leading advisory roles, such as with Booz Allen Hamilton (now Strategy&), PwC Corporate Finance and with CSIRO Mathematics and Information Sciences (now Data61).

Qualifications

Bachelor of Science (BSc Hons I, Mathematics and Computer Science)
Doctor of Philosophy (PhD Engineering)
Graduate of the Australian Institute of Company Directors (GAICD)

Special responsibilities

Member of the Finance, Risk Management and Audit Committee (appointed February 2020)

Ms Louise McElvogue, Director

Appointed January 2020 – December 2022

Reappointed January 2022 – June 2024

Ms McElvogue is an experienced board director and an advisor in strategy and digital technology. Current board roles include Cluey Learning, fintech Halo Technologies, the Australian Physiotherapy Association and NSW Council of the Australian Institute of Company Directors. Louise was Industry Professor, UTS Business School where she curated the faculty's first online degree, the Master of Digital Marketing.

Ms McElvogue is a transformation and strategy advisor with companies in health, media, financial services and government. She worked in the US and Europe for 18 years and led more than 30 digital products for companies including McDonald's, the NHS, British Gas and the first video streaming services for the BBC and Channel 4. Ms McElvogue previously worked as a journalist in Australia, the US and UK.

She was appointed by the Australian Government as one of three members of the Convergence Review Committee which reviewed media and technology regulation. Previous board roles include the US cybersecurity company WhiteHawk; NSW Government's Sydney Living Museums; and Nominet (UK) Specialist Domain Name Board.

Ms McElvogue took a leave of absence from 31 March to 22 June 2021.

Qualifications

Bachelor of Arts (BA)
Master of Arts (MA)
Fellow of the Australian Institute of Company Directors (FAICD)

Special responsibilities

Member of the Clinical Governance Advisory Group (appointed February 2020)

Ms Peta Jurd, Director

Appointed July 2018 – June 2021

Reappointed July 2021 – June 2024

Ms Jurd is the Chief Commercial Officer and Company Secretary of digital health technology company Simavita Limited. Prior to this, Ms Jurd was Executive Director at Technology Enabling Healthcare and Head of Hills Health Solutions at Hills Limited. Ms Jurd has also held senior management positions at Telstra, Veolia Environmental Services and Mayne Nickless Health Care.

Ms Jurd has more than 18 years' experience in healthcare and has substantial board experience in a variety of roles, including nine years as a Board Director for the National Breast Cancer Foundation.

Qualifications

Bachelor of Commerce (BCom)
Diploma in Law (Legal Practitioners Admission Board)
Diploma in Corporate Management (Institute of Corp. Managers, Secretaries & Administrators)
Stanford University Executive Program in Strategy and Organisation
Fellow of the Australian Institute of Company Directors (FAICD)
Member of Certified Practising Accountants Australia (CPA)

Special responsibilities

Member of the Finance, Risk Management and Audit Committee (appointed February 2020)

Financial statements

Information on Chief Executive Officer and Company Secretary

Ms Bettina McMahon, Chief Executive Officer

Appointed March 2021

Ms McMahon has considerable experience in digital transformation in the health sector and an extensive record of accomplishment in delivering major reforms in complex regulatory and stakeholder environments. Prior to joining Healthdirect Australia, Bettina was the Interim Chief Executive Officer at the Australian Digital Health Agency, where she had also held roles as the Chief Operating Officer and Executive General Manager for Industry and Government. She is the Chair of the Board of the Australasian Institute of Digital Health.

Qualifications

Master of Business Administration (IT Management)
Master of Public Policy
Graduate Diploma in Applied Finance
Graduate of the Australian Institute of Company Directors
Fellow of the Australian Institute of Digital Health

Ms Judith Maude, Company Secretary

Appointed September 2020

Ms Maude is an experienced corporate governance professional. She has worked with Boards and managed governance responsibilities for organisations in the government and not-for-profit sector for over 10 years. Ms Maude is a director of Aquilo Pty Limited which provides governance consulting services.

Qualifications

Bachelor of Arts
Bachelor of Law
Graduate of the Australian Institute of Company Directors
Fellow of the Governance Institute of Australia

Ms Karen Borg, Chief Executive Officer

Appointed April 2019, resigned November 2020

Ms Borg has extensive experience across multiple industry sectors and has led organisational transformation and growth in emerging and mature markets in the Asia-Pacific region, the USA and Europe.

Prior to joining Healthdirect Australia, Ms Borg was the inaugural CEO of Jobs for NSW, where she led a combined public and private sector team that redesigned government support for private enterprise. Ms Borg was previously President Asia Pacific at ResMed, and Global Vice President at Johnson & Johnson. Ms Borg also held senior leadership positions at Revlon, Seagram, Goodman Fielder and Nestlé.

Qualifications

Bachelor of Arts (BA)

Ms Fleur Katsmartin, Company Secretary

Appointed June 2017, resigned September 2020

Ms Katsmartin was Senior Legal Counsel at Healthdirect Australia and was with the company since 2013. Ms Katsmartin has more than 12 years' legal experience with a focus on government and commercial advisory.

Prior to joining Healthdirect Australia, Ms Katsmartin was a Senior Lawyer at the Australian Government Solicitor and Senior Associate at Lander & Rogers Lawyers.

Ms Katsmartin was a Director for Sisters Housing Enterprises Inc in Wagga Wagga up to January 2020.

Qualifications

Bachelor of Arts (BA)
Bachelor of Laws with Honours (LLB (Hons))
Graduate Diploma of Legal Practice (GDLP)
Graduate of the Australian Institute of Company Directors (GAICD)

Financial statements

Meetings of Directors

The number of meetings of the Company's Board of Directors and of each board committee held during the financial year ended 30 June 2021, and the number of meetings attended by each Director are detailed in the table.

The Project Review and WHS Advisory Committee (PROWAC) is a committee of the Board and meets on an ad hoc basis as required by the Board. PROWAC did not meet this financial year.

	Full meetings of Directors		Finance, Risk Management and Audit Committee		Clinical Governance Advisory Group	
	A	B	A	B	A	B
J Muirsmith	15	15	3*	n/a	1*	n/a
D Ashbridge	15	15	n/a	n/a	6	6
P Jurd	15	15	5	5	n/a	n/a
H Nott	15	15	5	5	4*	n/a
L McElvogue	13	13^	n/a	n/a	5	5^
G Ginnane	14	15	5	5	2*	n/a

A = Number of meetings attended.

B = Number of meetings held during the time the Director held office.

* = Meeting attended in ex-officio capacity, i.e. not required to attend.

^ = Louise McElvogue was on an approved leave of absence from 30 March 2021 until 22 June 2021.

Principal activities

The principal activities of the Company during the period are outlined below:

- Establish and manage virtual health services on behalf of the governments of Australia.
- Provide the Australian public access to the right health advice and the most appropriate health services for their needs, when and where they need it.

Operations

A summary of the Company's operations is contained on pages 4-23.

Operating results

Multiple new COVID-19 support services were quickly and efficiently established on behalf of the Australian Government, Victoria and New South Wales. These are in addition to existing and ongoing services such as the National Coronavirus Helpline, and are often integrated with or leveraged off that service. The Company played a substantial role in building component parts of the Vaccine Online Booking System and maintaining accuracy of information in the Eligibility Checker and Clinic Finder.

healthdirect Video Call was integrated into the after hours GP helpline. Funding was also extended to support access to healthcare through the ongoing pandemic.

The healthdirect service continues to provide enhanced value to callers and the health system, introducing a new SMS option which provides callers a summary of their discussion with a nurse, along with advice on what to do if symptoms persist and where to find medical assistance.

The My Aged Care contact centre focused on the caller experience by helping call handlers deliver consistent information while tailoring their interaction appropriately for each call.

The Company's recorded operating deficit before tax is \$975,865. This reflects the depreciation of assets funded in prior years exceeding the funding received for assets purchased this year. The application of AASB 16 Leases, adopted from 1 July 2018, increased the expenditure incurred during the current year. The bulk of grants received by the Company are recognised as revenue in the period when the terms and conditions of the grants have been met. If those funds are not fully expended before the financial year end, the unexpended amounts are recognised as unearned revenue in accordance with the revenue recognition standard, AASB 15.

Financial statements

Government grants – economic dependence

The Company is currently negotiating the renewal of the Umbrella Funding Agreement beyond 30 June 2022 and has written advice from the shareholders of their intention to renew the agreement. Further details are in Note 1(q) in the Notes to the Financial Statements.

Dividends and distributions

The Company did not pay any dividends. The Company issued 56 ordinary shares at an issue price of \$1 per share to the State of Victoria represented by the Department of Health during the year.

Insurance of Officers

The Company entered into deeds of access, insurance and indemnity with Directors. Under these deeds, the Company indemnifies, to the extent permissible by law and subject to the prohibitions in section 199A of the Corporations Act 2001 (Cth), each of the Directors who have entered into deeds, against any and all liabilities incurred by the Directors as officers of the Company, and against any and all reasonable legal costs incurred by the Directors in defending action for a liability incurred, or allegedly incurred, by the Directors as officers of the Company. During the financial year, the Company paid a premium of \$36,359 (2020: \$32,694) to insure the Directors and Officers of the Company.

Proceedings on behalf of the company

No person has applied to the Court under section 237 of the Corporations Act 2001 (Cth) for leave to bring proceedings on behalf of the Company, or to intervene in any proceedings to which the Company is a party, for the purpose of taking responsibility on behalf of the Company for all or part of those proceedings.

No proceedings have been brought or intervened in on behalf of the Company with leave of the Court under section 237 of the Corporations Act 2001 (Cth).

Matters subsequent to the end of the financial year

With the exception of the items disclosed below, the Directors are not aware of any matters that have arisen subsequent to the end of the financial year that may significantly affect the Company's operations, the results of those operations, or the Company's state of affairs in future financial years.

a. Impact of COVID-19

The COVID-19 pandemic continues to impact communities and business in Australia where the Company operates. During the pandemic the Company has experienced a growth in funding for multiple new support services. Potential business growth and increased revenue are expected in the following financial year as further COVID-19 support services are established.

b. Impact of NURSE-ON-CALL

As of 1 July 2021, the Company manages NURSE-ON-CALL on behalf of Victoria's Department of Health which will increase the revenue and operating expenses of the healthdirect service.

Auditor's independence declaration

A copy of the auditor's independence declaration as required under section 307C of the Corporations Act 2001 (Cth) is set out on page 30.

Auditor

Grant Thornton begins in office in this financial year in accordance with section 327 of the Corporations Act 2001 (Cth).

This report is made and signed in accordance with a resolution of the Board of Directors, pursuant to section 298(2)(a) of the Corporations Act 2001 (Cth).



J Muirsmith
 Chair
 Perth
 14 October 2021

Auditor's independence declaration



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Auditor's Independence Declaration

To the Directors of Healthdirect Australia Ltd

In accordance with the requirements of section 307C of the *Corporations Act 2001*, as lead auditor for the audit of Healthdirect Australia Ltd for the year ended 31 June 2021, I declare that, to the best of my knowledge and belief, there have been:

- a no contraventions of the auditor independence requirements of the *Corporations Act 2001* in relation to the audit; and
- b no contraventions of any applicable code of professional conduct in relation to the audit.

Grant Thornton Audit Pty Ltd
 Chartered Accountants

A G Rigele
 Partner – Audit & Assurance
 Sydney, 14th October 2021

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Independent auditor's report to the members



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Independent Auditor's Report

To the Members of Healthdirect Australia Ltd

Report on the audit of the financial report

Opinion

We have audited the financial report of Healthdirect Australia Ltd (the Company), which comprises the statement of financial position as at 30 June 2021, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the Directors' declaration.

In our opinion, the accompanying financial report of the Company is in accordance with the *Corporations Act 2001*, including:

- a giving a true and fair view of the Company's financial position as at 30 June 2021 and of its performance for the year ended on that date; and
- b complying with Australian Accounting Standards – Reduced Disclosure Requirements and the *Corporations Regulations 2001*.

Basis for opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the *Corporations Act 2001* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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Emphasis of matter related to going concern

We draw attention to Note 1q in the financial statements, which indicates that the Umbrella Funding Agreement (UFA) expires on 30 June 2022 – less than 12 months after signing of the annual report. Evidence supporting the renewal of the UFA as well as approved business models which extend past 30 June 2022 has been provided. As a result we have included an emphasis of matter which is not a qualification but highlights the potential uncertainty in relation to a significant matter within the financial statement of the Company's ability to continue as a going concern. Our opinion is not modified in respect of this matter.

Information other than the financial report and auditor's report thereon

The Directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2021 but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Directors' for the financial report

The Directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the *Corporations Act 2001*. The Directors' responsibility also includes such internal control as the Directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the Directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: https://www.auasb.gov.au/auditors_responsibilities/ar4.pdf. This description forms part of our auditor's report.

Grant Thornton Audit Pty Ltd
 Chartered Accountants

A G Rigele
 Partner – Audit & Assurance

Sydney, 14th October 2021

Directors' declaration

In the Directors' opinion:

- A. The financial statements and notes set out on pages 34-51 are in accordance with the *Corporations Act 2001 (Cth)*, including:
 - i. Complying with Accounting Standards – Reduced Disclosure Requirements, the *Corporations Regulations 2001 (Cth)* and other mandatory professional reporting requirements.
 - ii. Giving a true and fair view of the Company's financial position as at 30 June 2021 and of its performance, as represented by the results of the Company's operations, changes in equity and its cash flows, for the financial year ended on that date.
- B. There are reasonable grounds to believe that the Company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

J Muirsmith
 Chair
 Perth
 14 October 2021

Statement of comprehensive income

	Notes	2021 (\$)	2020 (\$)
Revenue from contracts with customers	3	172,273,163	157,841,093
Other income	4	6,000,000	6,002,805
Expenses			
Call centre costs		(128,172,278)	(119,213,219)
Employee benefit expenses	5	(31,978,684)	(24,556,541)
Legal, risk management and audit fees		(770,151)	(401,865)
Software research and development		(1,392,021)	(480,062)
Marketing and advertising		(441,268)	(747,453)
Consultancy fees		(635,665)	(5,603,895)
Outsourcing fees		(771,270)	(356,402)
Office cost		(1,134,245)	(672,734)
Insurance		(257,303)	(227,898)
Technology support		(10,468,338)	(9,324,465)
Travel and entertainment		(76,897)	(179,896)
Website management		(373,041)	(560,570)
Other expenses		(255,684)	(288,257)
Depreciation and amortisation expense	5	(2,522,183)	(2,421,959)
Total expenses		(179,249,028)	(165,035,216)
(Loss) before income tax		(975,865)	(1,191,318)
Income tax benefit	6	266,709	2,234,518
Profit/(Loss) from continuing operations		(709,156)	1,043,200
(Loss)/Profit for the year and total comprehensive (loss)/profit for the year		(709,156)	1,043,200
(Loss)/Profit is attributable to:			
Shareholders of Healthdirect Australia Ltd		(709,156)	1,043,200
		(709,156)	1,043,200
Total comprehensive (loss)/profit for the year is attributable to:			
Shareholders of Healthdirect Australia Ltd		(709,156)	1,043,200
		(709,156)	1,043,200

The above statement of comprehensive income should be read in conjunction with the accompanying notes.

Statement of financial position

	Notes	2021 (\$)	2020 (\$)
ASSETS			
Current assets			
Cash and cash equivalents	7	105,833,275	35,615,152
Trade and other receivables	8	14,439,221	10,627,778
Prepayments		1,017,461	1,381,711
Financial assets at amortised cost	9	976,796	862,526
Other current assets	10	7,030	7,030
Total current assets		122,273,783	48,494,197
Non-current assets			
Financial assets at amortised cost	11	4,725,522	5,271,055
Property, plant and equipment	12	2,297,285	3,055,474
Right of use assets	13	9,289,545	10,982,011
Intangible assets	14	1,855	3,218
Deferred tax assets	20	1,074,307	793,086
Prepayments		24,664	-
Total non-current assets		17,413,178	20,104,844
Total assets		139,686,961	68,599,041
LIABILITIES			
Current liabilities			
Trade and other payables	15	23,021,829	23,805,603
Unearned revenue	16	99,686,074	23,227,940
Provision	17	590,507	3,263,745
Employee benefits obligation	18	1,564,345	1,176,409
Lease liability	13	1,858,869	1,743,461
Other current liabilities	19	113	4,278
Total current liabilities		126,721,737	53,221,436
Non-current liabilities			
Deferred tax liabilities	20	831,491	816,979
Employee benefits obligation	21	602,896	476,411
Provision for lease make good	13	737,492	722,901
Lease liability	13	9,801,708	11,660,577
Total non-current liabilities		11,973,587	13,676,868
Total liabilities		138,695,324	66,898,304
Net assets		991,637	1,700,737
EQUITY			
Contributed equity	22	448	392
Retained surplus		991,189	1,700,345
Total equity		991,637	1,700,737

The above statement of financial position should be read in conjunction with the accompanying notes.

Statement of changes in equity

	Notes	Contributed equity (\$)	Retained earnings (\$)	Total equity (\$)
Balance at 1 July 2019		392	657,145	657,537
Profit for the year		-	1,043,200	1,043,200
Balance at 30 June 2020		392	1,700,345	1,700,737
Balance at 1 July 2020		392	1,700,345	1,700,737
Shares		56	-	56
Loss for the year		-	(709,156)	(709,156)
Balance at 30 June 2021		448	991,189	991,637

The above statement of changes in equity should be read in conjunction with the accompanying notes.

Statement of cash flows

	Notes	2021 (\$)	2020 (\$)
Cash flows from operating activities			
Receipts from funding agreements and lease incentive		246,935,232	140,972,807
Payments to suppliers and employees		(177,279,407)	(155,258,057)
Interest received		186,612	518,917
Net cash inflow/(outflow) from operating activities		69,842,437	(13,766,333)
Cash flows from investing activities			
Payments for property, plant and equipment	12	(55,577)	(274,922)
Proceeds from financial assets at amortised cost		431,263	10,000,000
Net cash inflow from investing activities		375,686	9,725,078
Net increase/(decrease) in cash and cash equivalents			
Cash and cash equivalents at the beginning of the financial year		35,615,152	39,656,407
Cash and cash equivalents at the end of the financial year	7	105,833,275	35,615,152

The above statement of cash flows should be read in conjunction with the accompanying notes.

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1. Summary of significant accounting policies

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

a. New Accounting Standards and Interpretations adopted

The Company has adopted all of the new Accounting Standards and Interpretations issued by the Australian Accounting Standards Board (AASB) that are mandatory in the current reporting period.

Any new or amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

b. Basis of preparation

This financial report is a general purpose financial report and has been prepared in accordance with Australian Accounting Standards - Reduced Disclosure Requirements, other authoritative pronouncements of the Australian Accounting Standards Board, Australian Accounting Interpretations and the *Corporations Act 2001 (Cth)*.

The Company is a not-for-profit entity for the purpose of preparing the financial statements.

i. Historical cost convention

These financial statements have been prepared under the historical cost convention.

ii. Critical accounting estimates

The preparation of financial statements requires the use of certain critical accounting estimates. It also requires management to exercise its judgement in the process of applying the Company's accounting policies. The areas involving a higher degree of judgement or complexity, or areas where assumptions and estimates are significant to the financial statements, are disclosed in Note 2.

c. Statement of compliance

This financial report has been prepared in accordance with and is compliant with the Australian Accounting Standards - Reduced Disclosure Requirements.

d. Revenue recognition

The Company recognises revenue as follows:

i. Revenue from contracts with customers and contracts liabilities

Revenue is recognised at an amount that reflects the consideration to which the Company is expected to be entitled in exchange for transferring goods or services to a customer. For each contract with a customer, the Company: identifies the contract with a customer; identifies the performance obligations in the contract; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative stand-alone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised. Any consideration received over the expected entitlement is recognised as contracts liabilities owed to jurisdictions. This amounted to \$95.4 million (2020: \$21.2 million) as disclosed in Note 16.

ii. Funding from governments

Funding from governments is accounted in accordance with AASB 15 if the promises to be delivered are sufficiently specific.

iii. Funding from government grants

Funding from government grants that are within the scope of AASB 1058 are recognised as income when the Company has contractual rights to receive the funding. All invoices are issued in accordance with a predetermined schedule detailed in the specific funding agreement.

iv. Unearned revenue – funding received in advance

Amounts received in advance when the Company has not met all the conditions to obtain the control of the funding are accounted for as unearned revenue. Five invoices (2020: five invoices) to the sum of \$4.5 million were invoiced during June 2021 (2020: \$2.0 million), however as they relate to the next financial year, they have been recorded as unearned revenue and are classified in the statement of financial position as a current liability. A total of \$4.3 million remains unspent at 30 June 2021 (2020: \$2.0 million) from invoices issued during the financial year.

e. Income tax

The income tax expense or revenue for the period is the tax payable on the current period's taxable income based on the notional income tax rate adjusted by changes in deferred tax assets and liabilities attributable to temporary differences between the tax bases of assets and liabilities and their carrying amounts in the financial statements. Unexpended grant income is excluded from taxable income in accordance with the Australian Taxation Office's tax ruling 2006/3. Grant income is only considered to be taxable when all requirements stipulated within the funding agreement have been met and expenses are recognised for tax purposes.

Deferred tax assets and liabilities are recognised for temporary differences at the tax rates expected to apply when the assets are recovered, or liabilities are settled. The relevant tax rates are applied to the cumulative amounts of deductible and taxable temporary differences to measure the deferred tax asset or liability. Deferred tax assets are recognised for deductible temporary differences and unused tax losses only if it is probable that future taxable amounts will be available to utilise those temporary differences and losses.

Deferred tax assets and liabilities are offset when there is a legally enforceable right to offset current tax assets and liabilities and when the deferred tax balances relate to the same taxation authority. Current tax assets and tax liabilities are offset where the entity has a legally enforceable right to offset and intends either to settle on a net basis, or to realise the asset and settle the liability simultaneously.

f. Leases

The Company leases an office and equipment. Lease contracts are made for four to eight years. Lease terms are negotiated on an individual basis and contain a wide range of different terms and conditions. The lease agreements do not impose any covenants, but leased assets may not be used as security for borrowing purposes.

Leases are recognised as a right-of-use assets and a corresponding liability at the date at which the leased asset is available for use by the Company. Each lease payment is allocated between the liability and finance cost. The finance cost is charged to profit and loss over the lease period so as to produce a constant periodic rate of interest on the remaining balance of the liability for each period. The right-of-use asset is depreciated over the shorter of the asset's useful life and the lease term on a straight-line basis. Assets and liabilities arising from a lease are initially measured on a net present value basis. The right-of-use assets include an estimated costs of make good and net lease incentives received.

g. Cash and cash equivalents

Cash and cash equivalents in both the statement of financial position and statement of cash flows include cash at bank and cash on hand.

h. Trade receivables

Trade receivables are initially recognised at fair value and subsequently measured at amortised cost using the effective interest method, less any allowance for expected credit losses. Trade receivables are generally due for settlement within 30 days. The Company has applied the simplified approach to measuring expected credit losses, which uses a lifetime expected loss allowance. To measure the expected credit losses, trade receivables have been grouped based on days overdue. Other receivables are recognised at amortised cost, less any allowance for expected credit losses.

i. Investments and other financial assets

Investments and other financial assets are initially measured at fair value. Transaction costs are included as part of the initial measurement, except for financial assets at fair value through profit or loss. Such assets are subsequently measured at either amortised cost or fair value depending on their classification. Classification is determined based on both the business model within which such assets are held and the contractual cash flow characteristics of the financial asset unless, an accounting mismatch is being avoided. Financial assets are derecognised when the rights to receive cash flows have expired or have been transferred and the consolidated entity has transferred substantially all the risks and rewards of ownership. When there is no reasonable expectation of recovering part or all of a financial asset, it's carrying value is written off. Financial instruments are initially measured at cost.

i. Financial assets at fair value through profit or loss

Financial assets not measured at amortised cost or at fair value through other comprehensive income are classified as financial assets at fair value through profit or loss. Typically, such financial assets will be either: (i) held for trading, where they are acquired for the purpose of selling in the short-term with an intention of making a profit, or a derivative; or (ii) designated as such upon initial recognition where permitted. Fair value movements are recognised in profit or loss.

ii. Financial assets at amortised cost

Held-to-maturity investments are held with the objective to collect contractual cash flows and the contractual terms of the financial asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

j. Property, plant and equipment assets

Plant and equipment is stated at cost less accumulated depreciation and any impairment losses.

Plant and equipment assets are depreciated over their estimated useful lives using the straight-line or diminishing value method as considered appropriate. Estimates of remaining useful lives are made on a regular basis for all assets. New assets are depreciated from the date of acquisition. The expected useful lives are as follows:

IT hardware	1-4 years
Furniture and fittings	3-5 years
Office equipment	1-5 years
Fitout	1-20 years

At each reporting date, the Company reviews the carrying value of its tangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and its value-in-use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the statement of comprehensive income.

k. Lease right-of-use assets

The lease right-of-use assets are associated with the costs to be incurred in obtaining the rights to use premises and office equipment, under lease, in line with AASB 16. The right-of-use assets are depreciated over the shorter of the assets' useful life and the lease term on the straight line basis. At each reporting date, the Company reviews the carrying values of its right-of-use assets to determine whether there is any indication that those assets have been impaired.

l. Intangible assets**i. Website and software development**

Website costs related to the development of applications and infrastructure, graphical design and content development are capitalised to the extent that the cost is directly attributed to preparing the website to operate in the manner intended by management. Software development costs include only those costs directly attributable to the development phase and are only recognised following determination of technical feasibility and where the Company has an intention and ability to use the asset. Internal labour costs are capitalised when labour costs directly attributable to the website and software development during its development phase can be measured reliably. Website and software development costs are stated at cost less accumulated amortisation and impairment losses. Website and software developments costs are amortised over their useful life of two and a half years

ii. IT software

IT software costs related to costs incurred in acquiring externally developed software programs and associated costs incurred in bringing them into intended use are amortised over their useful lives ranging from one to four years.

iii. Impairment of intangible assets

At each reporting date, the Company reviews the carrying values of its intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and its value-in-use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the statement of comprehensive income.

m. Trade and other payables

Trade and other payables are carried at amortised costs. They represent liabilities for goods and services provided to the Company prior to the end of the financial year which are unpaid. The amounts are unsecured and are paid within 30 days of recognition.

n. Employee benefits**i. Short-term obligations**

Liabilities for wages and salaries, including annual and long service leave expected to be settled within 12 months of the reporting date are recognised as a current liability in respect of employees' services up to the reporting date and are measured at the amounts expected to be paid when the liabilities are settled.

ii. Other long-term employee benefit obligations

The liability for long service leave and annual leave which is not expected to be settled within 12 months after the end of the reporting period in which the employees render the related service is recognised in the provision for employee benefits and measured as the present value of expected future payments to be made in respect of services provided by employees up to the end of the reporting period using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the end of the reporting period on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows. The obligations are presented as current liabilities in the statement of financial position if the entity does not have an unconditional right to defer settlement for at least 12 months after the reporting date, regardless of when the actual settlement is expected to occur.

o. Contributed equity

Ordinary shares are classified as equity.

p. Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable from the taxation authority. If the amount of GST is not recoverable from the taxation authority it is recognised as part of the cost of acquisition of the asset or as part of the expense. Receivables and payables are stated inclusive of GST where appropriate. The net amount of GST recoverable from, or payable to, the taxation authority is included with other receivables or payables in the statement of financial position. Cash flows are presented on a gross basis. The GST components of cash flows arising from investing or financing activities which are recoverable from, or payable to the taxation authority, are presented as operating cash flows.

The Company is designated as a Government Related Entity (GRE) for GST purposes. This means that no GST is added to invoices if the customer is a government department or another GRE. Invoices raised on any other type of customer will still need to have GST added.

q. Government grants – economic dependence

The Company's sole source of income is from grants received from the Commonwealth and various state and territory governments. As such, the Company is dependent on the receipt of these grants. The Company has agreed the level of funding from the Commonwealth and state and territory governments up to June 2022.

The Company had a working capital deficit of \$4.4 million at 30 June 2021 (2020: \$4.7 million). This deficit includes a current portion of lease liability of \$1.8 million (2019: \$1.7 million), which will be funded with governance and service funding in the 2021–22 financial year.

The majority of the available funds have been provided to fund various Service Definition Management Orders (SDMOs) under the Umbrella Funding Agreement (UFA) dated 13 June 2013. The available funds balance reflects accumulated unspent funds received for SDMOs in the prior years.

The UFA has a clause that the fund providers may, at their sole discretion, require the Company to repay the funds on the expiry or any earlier termination of the UFA or if the funds have been spent, or committed, not in accordance with the UFA.

The UFA expires on 30 June 2022. Although the Company does not have a contractual obligation to repay the funds until the termination of the UFA, the fund providers may repurpose the use of the funds for new projects.

The fund providers have advised in writing of their intention to renew the UFA beyond 30 June 2022. The Company is currently negotiating the renewal of the UFA with the fund providers.

The Company has economic dependence on the support of the shareholders to continue its operations and manage its working capital.

The Company is carrying a \$1.1 million exposure from South Australia Health which relates to the healthdirect service for the period 2015–18 financial years. An external review of factual findings has taken place and the Company is awaiting a response from shareholders.

r. Auditors

Audit services for the 2020 financial year were provided by Crowe. Grant Thornton was appointed auditor for the 2021 financial year.

2. Critical accounting estimates and judgements

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that may have a financial impact on the entity and that are believed to be reasonable under the circumstances.

a. Critical accounting estimates and assumptions

i. Income taxes

The Company is subject to income taxes in Australia. There are certain transactions and calculations undertaken during the ordinary course of business for which the ultimate tax determination is uncertain. The Company estimates its tax liabilities based on the Company's understanding of the tax law. Where the final tax outcome of these matters is different from the amounts that were initially recorded, such differences will impact the current and deferred income tax assets and liabilities in the period in which such determination is made.

ii. Estimation of useful lives of assets

The Company determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down.

iii. Lease break clause

The Company has entered into an eight year premises lease for 477 Pitt Street, Sydney, NSW 2000. This lease has a four year break clause option. The Company has assessed its business requirements and does not plan to exercise the four year break clause in the lease.

iv. Lease make good provision

The Company has estimated a value of make good for the current premises lease. This estimate was based on market rates. The make good estimate has been discounted to provide a present value cost and has been added to the right-of-use asset.

v. Employee benefits obligation provision

The Company has estimated the liability for employee benefits expected to be settled more than 12 months from the reporting date. This estimate is recognised and measured at the present value of the estimated future cash flows, to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been considered.

b. Critical judgements in applying the Company's accounting policies

i. Impairment of intangible assets

In the 2021 financial statements, the Company made a judgement about the impairment of its intangible assets. The Company follows the guidance of AASB 138 Intangible Assets and AASB 136 Impairment of Assets to determine when an intangible asset is impaired. In making this judgement, the Company evaluates, among other factors, any decline in the asset's market value, significant changes in the market, economy or legal environment in which the Company operates, obsolescence or physical damage to the assets, whether the assets have become idle, plans to discontinue or restructure operations, and any evidence from internal reporting that an asset's economic performance is worse than expected.

The Company has concluded that there is no impairment, on the basis that there are no indicators of impairment as at 30 June 2021. Furthermore, the appropriate recoverable amount is depreciated costs, which is the method by which these assets are recognised in these financial statements.

ii. Unearned revenue

The Company made a significant judgement on whether the terms and conditions of the grants have been met, therefore the respective revenue can be recognised in the current financial year.

3. Revenue

	2021 (\$)	2020 (\$)
Revenue from contracts with customers	172,273,163	157,841,093
<i>Disaggregation of revenue</i>		
The disaggregation of revenue from contracts with customers is as follows:		
<i>Major Lines of Business</i>		
Contact centre activities (including service management)	135,577,017	128,048,194
Digital activities	18,581,103	19,255,289
Other	18,115,043	10,537,610
	172,273,163	157,841,093

Revenue is recognised over time when the services are delivered.

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30 June 2021

4. Other income

	2021 (\$)	2020 (\$)
Income from government grants	6,000,000	6,000,000
Net profit on disposal of IT hardware	-	2,805
	6,000,000	6,002,805

5. Other expenses

	2021 (\$)	2020 (\$)
Loss before income tax includes the following specific expenses:		
<i>Employee benefit expenses</i>		
Defined contribution superannuation expense	2,099,774	1,914,436
Other employee benefit expenses	29,878,910	22,642,105
Total employee benefit expenses	31,978,684	24,556,541
<i>Depreciation and amortisation expenses</i>		
Depreciation expenses	2,520,820	2,419,561
Amortisation expenses	1,363	2,398
Total depreciation and amortisation expenses	2,522,183	2,421,959

6. Income tax expense/(benefit)

	2021 (\$)	2020 (\$)
a. Income tax expense/(benefit)		
Current tax	-	-
Deferred tax	(291,477)	(2,234,518)
Prior period adjustment to deferred tax	24,768	-
	(266,709)	(2,234,518)
The major components of income tax (benefit)/expense are:		
Current income tax charge	-	-
Prior period adjustment to deferred tax	-	-
(Increase)/Decrease in deferred tax assets	(281,221)	4,225,811
(Decrease)/Increase in deferred tax liabilities	14,512	(6,460,329)
	(266,709)	(2,234,518)
b. Numerical reconciliation of income tax expense to prima facie tax payable		
(Loss) from continuing operations before income tax expense	(975,865)	(1,191,318)
Tax at the Australian tax rate of 30% (2020 - 30%)	(292,760)	(357,396)
Tax effect of amounts which are not deductible (taxable) in calculating taxable income:		
Entertainment	1,283	4,165
Prior period adjustment to deferred tax	24,768	(1,881,287)
Income tax (benefit)	(266,709)	(2,234,518)

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30 June 2021

7. Current assets – Cash and cash equivalents

	2021 (\$)	2020 (\$)
Petty cash	200	200
Cash at bank	105,833,075	35,614,952
	105,833,275	35,615,152

Cash at bank is bearing variable interest rates. The weighted average interest rate is 0.24% (2020: 1.01%) at the end of the period.

8. Current assets – Trade and other receivables

	2021 (\$)	2020 (\$)
Trade receivables	12,834,115	7,879,436
GST receivable	1,556,032	2,728,471
Interest receivable	48,682	19,479
Sundry receivable	392	392
	14,439,221	10,627,778

9. Current assets – Financial assets at amortised cost

	2021 (\$)	2020 (\$)
Term deposits for investment	114,270	-
Term deposits held as security for bank guarantee	862,526	862,526
	976,796	862,526

10. Current assets – Other current assets

	2021 (\$)	2020 (\$)
Accrued Income (AASB 1058)	7,030	7,030

11. Non-current assets – Financial assets at amortised cost

	2021 (\$)	2020 (\$)
Term deposits held as security for bank guarantee	4,725,522	5,156,785
Term deposits for investment	-	114,270
	4,725,522	5,271,055

12. Non-current assets – Property, plant and equipment

	IT hardware (\$)	Office equipment (\$)	Furniture and fittings (\$)	Fitout new premises (\$)	Total (\$)
At 1 July 2020					
Cost or fair value	2,500,110	250,256	68,530	3,001,830	5,820,726
Accumulated depreciation	(1,942,106)	(187,673)	(58,752)	(576,721)	(2,765,252)
Net book amount	558,004	62,583	9,778	2,425,109	3,055,474
Year ended 30 June 2021					
Opening net book amount	558,004	62,583	9,778	2,425,109	3,055,474
Additions	26,033	29,544	-	-	55,577
Disposals	(35,601)	(9,282)	(257)	-	(45,140)
Depreciation charge	(360,111)	(31,662)	(1,624)	(375,229)	(768,626)
Closing net book amount	188,325	51,183	7,897	2,049,880	2,297,285
At 30 June 2021					
Cost or fair value	1,488,733	201,747	62,088	3,001,830	4,754,398
Accumulated depreciation	(1,300,408)	(150,564)	(54,191)	(951,950)	(2,457,113)
Net book amount	188,325	51,183	7,897	2,049,880	2,297,285

13. Non-current assets – Right-of-use assets

a. Non-current assets – Right-of-use assets		2021 (\$)	2020 (\$)	
Right-of-use assets		9,289,545	10,982,011	
At 1 July 2020				
	Make good (\$)	Office space (\$)	Office equipment (\$)	Total (\$)
Cost or fair value	722,901	12,848,237	32,623	13,603,761
Accumulated depreciation	(137,699)	(2,471,500)	(12,551)	(2,621,750)
Net book amount	585,202	10,376,736	20,072	10,982,011
Year ended 30 June 2021				
Opening net book amount	585,202	10,376,736	20,072	10,982,011
Addition to provision	14,592	-	-	14,592
Depreciation	(92,870)	(1,606,029)	(8,156)	(1,707,055)
Closing net book amount	506,922	8,770,707	11,916	9,289,545
At 30 June 2021				
Cost or fair value	737,492	12,848,237	32,623	13,618,352
Accumulated depreciation	(230,570)	(4,077,530)	(20,707)	(4,328,807)
Net book amount	506,922	8,770,707	11,916	9,289,545

13. Non-current assets – Right-of-use assets (continued)

b. Current and Non-current liabilities – Lease liabilities and provision make good				
	2021 (\$)	2020 (\$)		
Current - lease liabilities	1,858,869	1,743,461		
Non-current - lease liabilities	9,801,708	11,660,577		
	11,660,577	13,404,038		
Non-current - Provision make good	737,492	722,901		
At 1 July 2020				
	Provision Make good (\$)	Office space (\$)	Office equipment (\$)	Total (\$)
Cost or fair value	702,723	15,850,065	32,623	16,585,411
Accumulated addition to provision	20,178	-	-	20,178
Accumulated interest expense	-	452,498	827	453,325
Accumulated lease payments	-	(2,918,905)	(13,070)	(2,931,975)
Net book amount	722,901	13,383,658	20,380	14,126,939
Year ended 30 June 2021				
Opening net book amount	722,901	13,383,658	20,380	14,126,939
Addition to provision	14,591	-	-	14,591
Interest expense	-	252,015	333	252,348
Lease payments	-	(1,987,316)	(8,493)	(1,995,809)
Closing net book amount	737,492	11,648,357	12,220	12,398,069
At 30 June 2021				
Cost or fair value	702,723	15,850,065	32,623	16,585,411
Accumulated addition to provision	34,769	-	-	34,769
Accumulated interest expense	-	704,513	1,160	705,673
Accumulated depreciation	-	(4,906,221)	(21,563)	(4,927,784)
Net book amount	737,492	11,648,357	12,220	12,398,069

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14. Non-current assets – Intangible assets

	IT software (\$)	Intangible right- of-use assets (\$)	Website (\$)	Software development (\$)	Total (\$)
At 1 July 2020					
Cost	222,244	4,125,871	8,141,178	7,168,214	19,657,507
Accumulated amortisation	(219,026)	(4,125,871)	(8,141,178)	(7,168,214)	(19,654,289)
Net book amount	3,218	-	-	-	3,218
Year ended 30 June 2021					
Opening net book amount	3,218	-	-	-	3,218
Amortisation charge	(1,363)	-	-	-	(1,363)
Closing net book amount	1,855	-	-	-	1,855
At 30 June 2021					
Cost	217,195	4,125,871	8,141,178	7,168,214	19,652,458
Accumulated amortisation	(215,340)	(4,125,871)	(8,141,178)	(7,168,214)	(19,650,603)
Net book amount	1,855	-	-	-	1,855

15. Current liabilities – Trade and other payables

	2021 (\$)	2020 (\$)
Unsecured		
Trade payables	6,704,145	7,222,338
Accrued expenses	15,697,293	16,323,385
Other payables	620,391	259,880
	23,021,829	23,805,603

16. Current liabilities – unearned revenue

	2021 (\$)	2020 (\$)
Unearned revenue - funding received in advance	4,293,768	2,049,032
Contract liabilities owed to jurisdictions (AASB 15)	95,392,306	21,178,908
	99,686,074	23,227,940

Financial statements

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30 June 2021

17. Current liabilities – Provisions

	2021 (\$)	2020 (\$)
Provision for funding owed to jurisdictions (AASB 1058)	590,507	3,263,745

18. Current liabilities – Employee benefits obligation

	2021 (\$)	2020 (\$)
Employee benefits - annual leave (see Note 1(n))	1,538,685	1,154,472
Employee benefits - long service leave	25,660	21,937
	1,564,345	1,176,409

19. Current liabilities – Other current liabilities

	2021 (\$)	2020 (\$)
Others	113	4,278

20. Non-current liabilities – Deferred tax assets/(liabilities)

	2021 (\$)	2020 (\$)
Deferred tax assets		
The balance comprises temporary differences attributable to:		
Property, plant and equipment	6,158	5,618
Superannuation payable	81,933	53,098
Lease	317,594	215,947
Provision for employee entitlements	461,605	346,342
Provision for long service leave	188,567	149,504
Legal fees	-	1,652
Audit accrual	18,450	20,925
	1,074,307	793,086
Deferred tax liabilities		
The balance comprises temporary differences attributable to:		
Interest receivable	-	5,844
Accrued income	-	2,109
Deferred Revenue from contracts with customers	831,491	809,026
	831,491	816,979
Total deferred tax assets/(liabilities)	242,816	(23,893)

21. Non-current liabilities – Employee benefits obligation

	2021 (\$)	2020 (\$)
Employee benefits - long service leave	602,896	476,411

22. Contributed equity

	2021 Shares	2020 Shares	2021 (\$)	2020 (\$)
Ordinary shares				
Uncalled shares	448	392	448	392

23. Key management personnel disclosures

	2021 (\$)	2020 (\$)
Key management personnel compensation	3,284,242	2,930,517

The above amount includes compensation paid to Directors and senior executives.

24. Remuneration of auditors

	2021 (\$)	2020 (\$)
Audit and other assurance services		
Audit services	54,000	56,000
Other assurance services	7,500	13,750
Total remuneration for audit and other services	61,500	69,750

25. Contingencies

The Company had no contingent liabilities or assets at 30 June 2021 (2020: nil).

26. Related party transactions

a. Key management personnel

Disclosures relating to key management personnel are set out in Note 23.

b. Transactions with related parties

Directors may hold positions with organisations that trade with the Company. Any contracts and transactions between these organisations and the Company are based on normal commercial terms and conditions. The Company transacted with none in this financial year (2020: nil).

27. Events occurring after the reporting period

With the exception of the items disclosed below, the Directors are not aware of any matters that have arisen subsequent to the end of the financial year that may significantly affect the Company's operations, the results of those operations, or the Company's state of affairs in future financial years.

a. Impact of COVID-19

The COVID-19 pandemic continues to impact communities and business in Australia where the Company operates. During the pandemic the Company has experienced a growth in funding for multiple new support services. Potential business growth and increased revenue are expected in the following financial year as further COVID-19 support services are established.

b. Impact of NURSE-ON-CALL

As of 1 July 2021, the Company manages NURSE-ON-CALL on behalf of Victoria's Department of Health which will increase the revenue and operating expenses of the healthdirect service.

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