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Healthdirect Australia acknowledges the Traditional Owners of Country throughout Australia and their continuing connection to land, sea and community. We pay our respects to the Traditional Owners and to Elders both past and present.



OUR SHAREHOLDERS



Australian Government
Department of Health and Aged Care



ACT
Government
Health



NSW
GOVERNMENT | Health



**NORTHERN
TERRITORY**
GOVERNMENT



Queensland Government
Queensland Health



**Government
of South Australia**
SA Health



**Tasmanian
Government**



VICTORIA
State
Government



**Government of
Western Australia**
Department of Health



CARE:

We are passionate about a healthier Australia.



COURAGE:

We are innovative and can meet any challenge.



COLLABORATE:

We are one team.



FROM THE CHAIR



In FY23, our virtual health services provided 85 million interactions with the community, which is significantly (49 per cent) higher than pre-pandemic levels. This increased demand is driven by the increasing value we deliver to Australian consumers in achieving their healthcare outcomes, their willingness to use virtual and digital services, and the role we play in connecting them to the right care across our complex health system. With new capabilities, services and analytics, Healthdirect Australia is now able to play a key role in informing governments on consumer appetite, demand and needs while contributing to health sector reform.

During the year, Healthdirect has also become a true national provider of critical health services. I am delighted to advise that we have welcomed Queensland as a Shareholder of the Company, joining all other states, territories and the Commonwealth to realise the vision to be a national healthcare provider, delivering toward a healthier Australia. Working together with all jurisdictions, we will continue to deliver nationally consistent, trusted health services while driving unprecedented economies of scale and cost savings.

As we enter the final year of our current strategic plan, we are pleased to report strong delivery on our priorities and initiatives. We have enhanced our capability through investing in modern technological infrastructure and a

contemporary operating model for our human and digital services. Combined, these enable increased scalability and responsiveness to provide new service models to meet the needs of our funders and shareholders.

It's been another big year of change in the types of services consumers want and need. We have worked closely with our shareholders and service delivery partners to deliver increased GP services in metro and rural areas, provide enhanced mental health navigation and transition core COVID health services to our core offerings, ensuring that our infrastructure is being fully leveraged for existing and enhanced services.

By the end of 2023, after more than five million calls, the National Coronavirus Helpline will cease, and consumers with COVID symptoms will use our trusted healthdirect helpline. In April 2023, we merged the Vaccine Clinic Finder with the healthdirect Service Finder in a new and improved self-help tool which helps one million consumers per month book and find health services for their family's needs.

As part of our commitment to improving the health of consumers through better connected care, we have introduced innovative technological solutions, such as our AI clinical decision support system to supplement nurse expertise and judgement. These evolutions enable us to support governments who seek

to provide economically sound, quality virtual health care as they also look for new ways to mobilise health system reform.

After almost eight years on the Board, I am confident that we are in the strongest position yet to deliver further value and insights for all governments and shareholders. On behalf of the Board, I thank the Shareholder Committee for its continued support and guidance to consolidate our critical and expanding role in the health system to connect consumers to the right care. Together we have further embedded Healthdirect as a true strategic asset in the fabric of the Australia's virtual health care models.

In my last formal address as Chair in this annual report, I wanted to express my appreciation for the opportunity and privilege to Chair this wonderful organisation. I have been honoured to help drive the transformation of our services and infrastructure to ensure Healthdirect continues to serve all Australians who need support in their times of need. I am confident for the bright future that lies ahead.

Jane Muirsmith
Chair, Board of Directors
Healthdirect Australia



FROM THE CEO



Coming into my third year as CEO of Healthdirect Australia, we are consolidating the role Healthdirect plays in a digitally enabled health system to provide advice, information and reduce barriers to care beyond the surge in virtual care during the pandemic.

This year we have increased our capability to measure the value we provide through independent evaluations, audit and analytics. These studies have validated the contribution Healthdirect makes to connecting consumers to the right care at the right time.

The health system is undergoing major reform, and we are supporting governments to connect consumers to advice or the right service through new care pathways. In New South Wales, South Australia and Victoria, virtual GP access is available 24/7 for every citizen via the healthdirect helpline. Appointments at new urgent care services, which will be operational and accessible by the end of the year, will be bookable in NSW via the healthdirect helpline, and in other jurisdictions we will advise consumers of the existence of these services.

We help people where and when healthcare is hard to get, and on the

healthdirect helpline, where 69 per cent of calls are handled in the after-hours period and many living in rural and remote regions that may be far from a health service. Our online information and advice is provided in plain English and up to 16 other languages, is optimised for screen readers and supports health literacy. Our data bears out the trust consumers place in our services and the high quality of service satisfaction they experience.

We have worked closely with the health industry in many areas, including online booking and streamlining data exchange. A FHIR-based integration pathway between Provider Connect Australia and the National Health Services Directory helps us keep our Directory up to date as soon as a service changes their details.

This year we have made significant strides in our Environment Social and Governance (ESG) initiatives. I am pleased to present in this annual report, our inaugural ESG Report which outlines the current areas of focus.

We continue to invest in privacy and cyber security; protecting the data we collect through our operations in order to retain the high levels of trust Australians have in us.

I'd like to thank the Healthdirect Australia Board for their continued support and guidance as Healthdirect repositions to support government reform. In particular, I'd like to thank Board Chair, Jane Muirsmith, for her significant contribution as Chair during her tenure over the past eight years. Over this time, Healthdirect has transformed from a commissioner of call centre services for seven shareholder governments to an omni-channel virtual care organisation for all nine Australian governments. Healthdirect's inclusion for the first time in the **Intergovernmental Agreement on National Digital Health** shows the increasing integration we now have with the Australian health system.

And finally, I'd like to thank our people for their ongoing drive to uphold our vision of a healthier Australia. It is through your enthusiasm and creativity that we are achieving our vision of a healthier Australia.

Bettina McMahon
CEO
Healthdirect Australia



VIRTUAL HEALTH SERVICES AND CAPABILITIES

Healthdirect Australia develops and delivers high quality, safe virtual health services and care pathways that are scalable, stable, reliable, cost efficient and reusable according to jurisdictional health priorities.

Continued optimisation and connectivity of our services and care pathways to the broader health system works towards better health outcomes and a more seamless experience for consumers.



DIGITAL SELF-HELP

- healthdirect app
- Symptom Checker
- Service Finder
- healthdirect website
- Vaccine Clinic Finder
- COVID-19 Symptom and Antiviral Eligibility Checker
- Risk Checker
- Question Builder
- BMI calculator
- Opioid Risk Checker
- Medicines Information Service
- Pregnancy, Birth and Baby website
- Pregnancy due date calculator



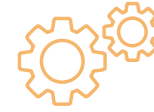
HELPLINE SERVICES

- healthdirect
- National Coronavirus Helpline
- My Aged Care
- Pregnancy, Birth and Baby
- Bespoke state health services
- Health alert lines



NATIONAL DIGITAL INFRASTRUCTURE

- healthdirect Video Call
- National Health Services Directory
- Australian Health Thesaurus
- Health Terminology Database



OUR CAPABILITIES

- Scalable platform
- Clinical Governance
- Multidisciplinary workforce panel
- Virtual waiting rooms
- Interoperable secure messaging service



DIGITAL CARE PATHWAYS

- COVID antiviral treatment eligibility pathway
- Upload to My Health Record
- SMS follow-up care advice
- Real-time online booking integration
- NHSD FHIR API e-referrals
- Connection to Urgent Care Clinics with online booking
- Warm transfer to Virtual ED
- Video and/or phone GP call back



HEALTHDIRECT AUSTRALIA: STRATEGIC PLAN 2021-2024



VISION
A healthier Australia



PURPOSE
To help Australians actively manage and improve their health by providing trusted information and virtual services anywhere and at any time.

VALUES AND OUTCOME PRIORITIES

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 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 interconnection of our information, advice, referral and virtual services with other services in the health and aged care systems.

ENABLING PRIORITIES

Our Capability

Enhance internal flexibility and scalability to enable a rapid response to emerging and urgent healthcare issues.

Our Operational Strength

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



COMPANY OVERVIEW

As the national government-funded provider of virtual health services, Healthdirect Australia partners with the governments of Australia to help connect Australians to the care they need.

Healthdirect Australia also works with industry, peak bodies and local health providers to co-design and deliver integrated consumer-facing health information and care services.



Strategic Plan

In FY22, Healthdirect Australia consulted with stakeholders and providers to prepare a three-year **Strategic Plan**, endorsed by the Board of Directors. The Plan sets out five measurable priority areas: three that provide a roadmap for demonstrating further value to consumers, governments and industry; and two enabling priority areas that will enhance our flexibility and scalability and strengthen our organisational capability.

The Strategic Plan also sets out Healthdirect Australia's statement of purpose: To help Australians actively manage and improve their health by providing trusted information and virtual services anywhere and at any time.

Connecting consumers to the care they need, when they need it

Healthdirect Australia co-designs and delivers services that are helping to manage the growing demand for health services, reduce barriers to care, and connect consumers with the care they need when they need it.

Over the past 12 months, we have increased the number of care pathways to which we connect consumers and have deepened our integration with services to provide a more seamless experience.

We are now connecting consumers with virtual ED where this is available, we have expanded the scope of healthdirect's virtual GP pathway to issue electronic prescriptions and medical certificates, and have extended the hours of operation to 24/7 in some states.

We are ready to triage and connect people with more urgent care services to provide alternatives to the emergency department where appropriate. We now show consumers the availability of certain healthcare services, flu and COVID vaccine appointments, and GP consultations for those practices that have online booking systems. Our upgraded Service Finder allows users to search GP practices that do not charge any gap fees, and those that offer telehealth by phone or video.

Over the past 18 months we have upgraded the technology stack underpinning our cloud-based service infrastructure to improve our ability to provide scalable, secure, reliable services.

Government shareholders

Healthdirect Australia is jointly owned by the Australian Government and the governments of all states and territories.

Healthdirect Australia provides virtual health services to all Australians with an increasing focus on reducing barriers to equal access to health information, advice and care. In FY23, these services helped millions of consumers.

85 million interactions with the community across all services

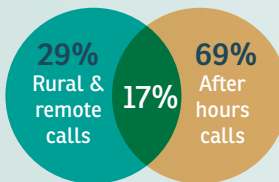


We help people where healthcare is harder to get



27% of website usage is from outside capital cities

healthdirect website



healthdirect helpline

Interactions with consumers



Demand for health information and advice is **49% higher** than pre-pandemic levels.

3.1m uses of the healthdirect Symptom Checker



75% of symptom triage is digital



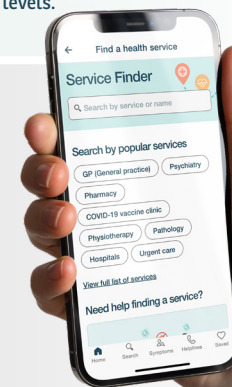
1m uses per month of the healthdirect Service Finder



33.5% of users make an appointment booking when one is available



73.5k uses of the Guided Search function in Service Finder



53 million website visits



77k visits to a translated webpage



100% of health article pages are optimised for accessibility, including screen readers



Plain language content throughout the website is understandable and suitable for **12-14 year olds**



73k times a user has clicked to have webpage content read aloud

5.6 million calls



32k callers used an interpreter on a helpline



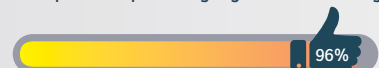
7% of callers identified as First Nations people



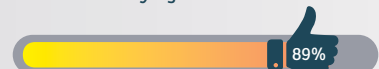
513k follow-up SMSs sent to support health literacy



People who speak languages other than English



Callers identifying as First Nations



General population

Satisfaction with healthdirect service





ENVIRONMENT, SOCIAL AND GOVERNANCE REPORT

Healthdirect Australia is committed to responsible and sustainable operations in the delivery of virtual health services that deliver value on behalf of our stakeholders.

We have reported informally on many areas of corporate social responsibility and ethical business practices in our annual reports. As global risks evolve, we recognise the importance

of aligning our reporting with a modern Environmental Social and Governance (ESG) framework. This year, we present our inaugural ESG inclusions, demonstrating our commitment to transparency to our partners, funders and the Australian public. Looking ahead, we are dedicated to developing a comprehensive ESG strategy and work plan in 2024 to further enhance our sustainability efforts.

ENVIRONMENT

As a provider of virtual care services, Healthdirect Australia has worked to ensure our office operations are carbon neutral, and we now turn our attention to measuring the contribution our services can have to reduce emissions generated by the broader health sector. We acknowledge that we have a role to play in protecting the environment by addressing the complex challenges presented by population growth, climate change, biodiversity loss, increasing energy demand and resource scarcity, so we can all live healthily within the natural limits of our planet.

Low-carbon health innovation

The digital revolution is a key catalyst for economic and social transformation worldwide, and Healthdirect Australia proactively develops innovative and sustainable virtual health services. This healthcare model is a low-carbon alternative to traditional healthcare provision and we are committed to continuing to innovate in this space to support the digitisation of the health system.

Adapt to a changing climate

Our services play an important role in ensuring ongoing access to vital healthcare services, including during climate-induced health emergencies, such as bush fires, floods and the rise of mosquito-borne diseases.

Reduce our footprint

Healthdirect is committed to supporting our shareholders to achieve their environmental targets and as part of our ESG strategy, we will commit to understanding, measuring and reducing our greenhouse gas emissions.

Having achieved carbon neutrality in our office operations, we are examining emissions performance in our supply chain.

Our main office is located in a carbon-neutral building that uses 100 per cent renewable energy and achieves 5 stars for energy and 3.5 stars for water on the National Australian Built Environment Rating System (out of a possible 6 stars).



SOCIAL

Healthdirect Australia makes a positive impact on our people, partners and community.

Our vision of a healthier Australia is achieved by helping all Australians to actively manage and improve their health by providing trusted information and virtual services anywhere and at any time. Our people work with purpose, actively seeking to improve the healthcare system by providing safe and effective pathways to health information and care.

Diversity, Equity and Inclusion in service design

Healthdirect Australia embraces inclusive design practices and strives to ensure equitable access to our services, so that all consumers can access trusted health information and virtual services.

Through user-friendly interfaces, multilingual options, and inclusive design practices, we aim to ensure that everyone can navigate our platforms with ease and confidence. We recognise that access to digital tools and resources is essential for individuals to fully participate in today's interconnected world and strive to make our virtual health services and information platforms accessible to all, regardless of digital literacy levels.

We aim to address health disparities, reduce inequalities, and empower consumers to achieve optimal wellbeing by prioritising inclusive and plain language principles within our editorial guidelines and clinical governance frameworks.

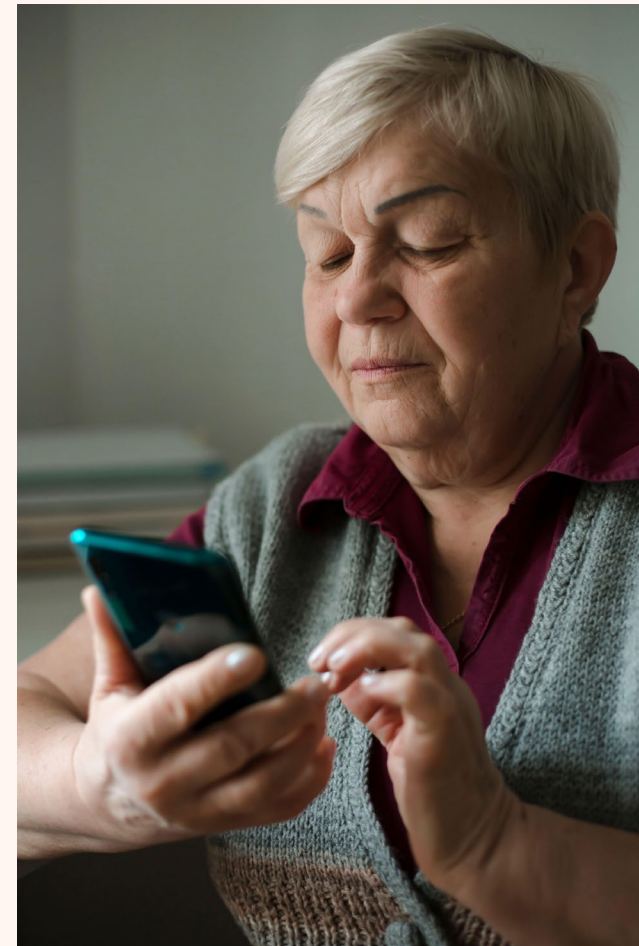
In 2022 we updated our editorial guidelines on gendered language in our health content to be more inclusive.

We strive to improve health literacy and empower consumers to make informed health decisions through the structure of page design, contextually placed self-help tools, audio reader, optimisation for screen readers, multi-language and adherence to Web Content Accessibility Guidelines.

We help people where and when healthcare is hard to get. On the healthdirect helpline, where 69% of calls are handled in the after-hours period, 17% of these calls are from consumers in rural and remote regions, that may be far from a health service.

In March 2023 we released a new version of the healthdirect Service Finder tool developed with specialist designers to embed an 'accessibility-first' approach. The Service Finder has been designed to improve health equity and access to services, particularly by those with lower health literacy levels.

It is translated into 15 languages, improving the accessibility for culturally and linguistically diverse consumers.





Employee wellbeing

Healthdirect Australia's workforce is highly diverse and we prioritise providing an inclusive environment for all to thrive. Our Wellbeing@Work program encompasses holistic wellness, including financial, mental, occupational, physical, community, and belonging dimensions.

Through employee-driven working groups, we act on feedback from engagement surveys and active listening activities, maintaining a high engagement score of 85 per cent.

Over a quarter of our organisation volunteer their time to collectively improving our work environment.

In FY23, important policies were reviewed and updated to be more equitable.

Equal Parental Leave benefits for both parents increased to 14 weeks of paid leave and a superannuation guarantee for 12 months.

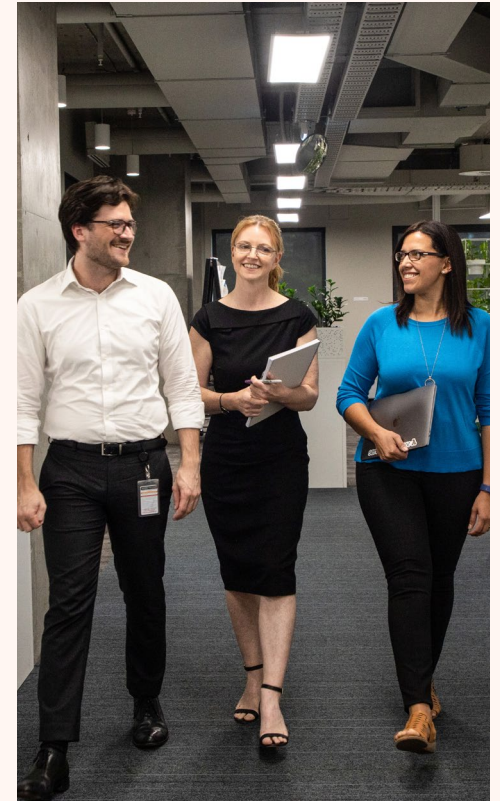
We enhanced flexibility with hybrid working practices and the option to work from anywhere globally for up to 6 months per year.

We prioritise mental health and wellbeing for our people, by providing an Employee Assistance Program, and Mental Health First Aiders (1 per 20 employees), and partner with organisations that are able to provide deep subject matter expertise in areas such as culture, gender and neurodiversity.

Healthdirect Australia has defined practices to ensure equity in decision making across the employee lifecycle including hiring, promotions, remuneration, and development. We conduct a twice-yearly gender pay-gap review to address points of potential inequity before it occurs.

At Healthdirect Australia we have made significant improvements in the gender pay-gap through a sustained focus, led by the Board's Financial, Risk Management and Audit Committee. Our gender pay gap is 16.6 per cent and is reviewed regularly for opportunities to further reduce the gap.

We are committed to supporting our people to develop their careers in a way that is meaningful for them.



The introduction of individual curated learner journeys and the expansion of support and development opportunities for our people leaders has resulted in the number of hours devoted to learning in FY23 tripling.





GOVERNANCE

As a government-funded and trusted provider, Healthdirect Australia upholds the highest standards of practices, principles, and governance. We maintain a close partnership with the government and prioritise robust governance across all aspects of our operations. Our governance framework has undergone substantial development, with a heightened emphasis on addressing risk management in our supply chain, cyber threats, enhancing risk awareness, and ensuring fair and value-driven sourcing, as well as conducting comprehensive internal and external evaluations of our work, processes, and outcomes.

Clinical Governance

As a provider of health services directly to the public, clinical safety is a critical whole-of-life presence across our portfolio. Clinical governance practices are equally applied across helplines, digital content and tools and social media channels and marketing collateral, ensuring health information is safe, evidence-based and high quality.

Health information and advice provided by Healthdirect Australia's services adheres to Healthdirect Australia's Clinical Governance and Quality Framework, Australian health guidelines and best-practice health literacy principles to support consumers in making informed decisions about their health.

The Clinical Governance team manages a mature feedback, complaints and incidents process. The Clinical Incident Management System (CIMS) collates queries and feedback from triage nurses, service providers and the general public via the healthdirect website. All CIMS notifications, including privacy concerns, clinical decisions support queries and general feedback are reviewed

by Healthdirect Australia's Clinical Governance team and assigned for investigation and reporting in the relevant Service Development and Improvement Committee meetings.

Clinical governance is managed by the Board's Clinical Advisory Committee which meets four times a year.

Audit and risk

Healthdirect Australia's Finance, Risk Management and Audit Committee assist the Board in maintaining financial integrity, risk management, and internal controls. The organisation continually evolves its risk management framework, integrating it into projects via the Risk Information Management System. Healthdirect has launched tailored training and awareness programs to foster a risk-positive culture at all levels. Consistent risk assessment is ensured with the development of a Risk Assessment Tool that is being progressively deployed to ensure there is a consistent approach to assessing the risks associated with any new project (or material change initiative) across all services and functions.



We maintain a robust three-year rolling delivery program, aligning with business needs and risk management. Business continuity capabilities are regularly assessed through critical incident desktop simulations, including participation from Directors. Improvement opportunities identified during these simulations are acted upon to enhance incident response protocols and processes.



Data security and privacy

As custodians of personal health information, Healthdirect Australia has a duty to safeguard it. When developing new services, we prioritise responsible data handling, secure data transfer and storage, and collect only necessary information for addressing consumers' conditions. We ensure privacy notices are provided to consumers when collecting their personal information on helplines. Consent is sought for secure messaging with their GP to connect them to the broader health system. Over the past 12 months, there have been no notifiable data breaches.

Healthdirect Australia has transitioned to a new operational model built on internal infrastructure, including consumer database and telephony systems. Alongside the emergence and increasing use of artificial intelligence, this work has reinforced the need for stakeholder and public confidence in our data management and handling processes.

To manage the expanding scope of services and data management required, our privacy function has expanded over the last 12 months to assist with the management of operational privacy. In particular, the privacy function has focused on advisory, governance and process improvements by implementing a privacy-by-design approach across the business.

Key deliverables include:

- Updating the Healthdirect Australia Privacy policy.
- Creation of a combined incident response plan.
- Standardised privacy impact assessment process and supporting documentation.
- Streamlining of incidents, access and correction requests and impact assessments.
- Privacy Awareness Week activities, and specialised privacy training.

Cybersecurity

The healthcare industry remains in the top three sectors for data breaches, according to the Office of the Australian Information Commissioner. Our Board is committed to safeguarding against cyber threats and preparing for potential incidents as ongoing priority areas and is provided regular updates and educational opportunities that underpin strategic decision-making in cybersecurity.

For services that host personally identifiable information and strategic initiatives, we have achieved Maturity Level 2 against the Australian Cyber Security Centre's Essential Eight.

Healthdirect Australia's security policies and standards align with the Australian Cyber Security Centre's Information Security Manual and the Personal Security Protection Framework. Healthdirect Australia has taken the initiative to move towards ISM compliance, conducting a gap analysis that will lay the foundation for achieving the next Information Security maturity level.

Healthdirect Australia has taken steps to strengthen its robust cyber security measures and comprehensive incident response strategies through some major 'security-by-design' activities during FY23:

- Refreshed cyber security awareness program for new and existing staff
- Uplift of contractual obligations when engaging external providers
- Implementation of additional monitoring capabilities
- Regular real-time external vulnerability scanning against our infrastructure
- Security team expansion
- Regular penetration testing
- Conduct cyber security incident simulations



Supply chain

Healthdirect Australia recognises its responsibility to combat the risks of modern slavery in day-to-day business operations and via the large extended workforce and supply chain. We operate in the healthcare and government sectors which carry a lower inherent risk of modern slavery. In FY21 Healthdirect Australia undertook its first Modern Slavery reporting, outlining a four-stage approach to managing modern slavery risks. Stage 1 has been completed with work on stage 2 well underway with risk assessments confirming no modern slavery incidents relating to suppliers or their supply chain. Early learnings are being applied to stage 3 activities and contract templates have been updated to include enforceable modern slavery clauses for anti-slavery, ethical sourcing, labour hire, and subcontracting clauses in supplier contracts.

Responsible sourcing

Healthdirect Australia manages many large contracts and is committed to understanding how suppliers provide their services and have the rights systems in place. In FY23, to deepen our understanding of supplier ESG maturity, Healthdirect engaged a third party to undertake a benchmarking exercise with its top 20 suppliers.

Each supplier assessed its own ESG maturity in supplier diversity, working conditions, environmental regulatory compliance, management of environmental impacts, anti-bribery and corruption, child labour, forced labour and modern slavery.

Indexed against an independent industry ESG maturity benchmark, Healthdirect Australia now understands which

companies are recognised as innovators in their approach to ESG and those that are still learning how to incorporate ESG reporting. Each supplier will next take part in an exercise to provide evidence in support of its self-assessment, which will help Healthdirect Australia know which organisations to partner with to achieve

the expected level of ESG maturity. It will also help us identify the companies from which we can learn as we align our performance with our ESG framework.

This supports Healthdirect Australia's approach to supplier management, sourcing and contract management.





VALUE TO CONSUMER

Our strategic goal is to ensure easier and faster access to information and virtual services for all Australians. We focus on how we are delivering for culturally and linguistically diverse groups, older consumers and people living with disability – groups that can be underserved by the health system and digital services designed for the mainstream.

Via the National Coronavirus Helpline, the 'Hey EVA' call-back service has assisted 17,700 consumers with different needs to make COVID vaccination appointments and obtain information about the right vaccination for them. COVID-specific information is also available in 16 languages on the healthdirect website.

In FY23, Healthdirect Australia received 5.6 million calls across our helplines, three quarters of which were received after hours. There is significant demand in the after-hours period from rural, remote and regional consumers. These numbers are 49 percent higher than pre-pandemic levels, showing increased uptake of virtual services and the importance of virtual services in supporting those who live outside metropolitan areas.

VACCINE CLINIC FINDER TRANSITIONS TO SERVICE FINDER

The Vaccine Clinic Finder, which was used more than 54 million times by people looking to make an online booking for a COVID-19 vaccination since it was launched in March 2021, has now been merged into the healthdirect Service Finder.

We have upgraded the **Service Finder** to provide a more streamlined consumer experience, with improved accessibility, usability and access to online bookings, powered by the National Health Services Directory.

The Service Finder's new functionality

Improved search and filtering capabilities make it easier and more intuitive for Service Finder users to access the most relevant service, helping to bridge the health literary gap. Search results can be filtered by appointment type, billing option and accessibility needs.

A new guided search functionality shows consumers the most appropriate services based on their answers to a few short questions, helping them make more informed decisions about their healthcare.

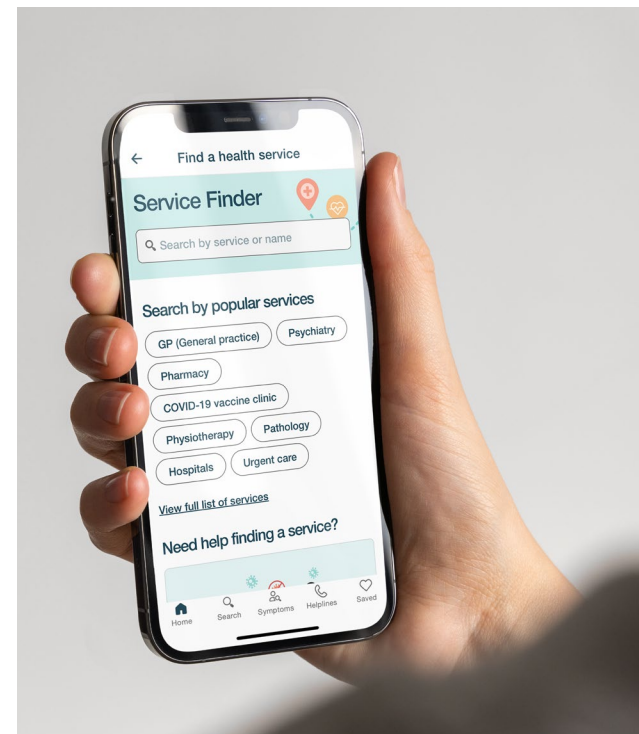
Along with the **Question Builder** developed in partnership with the Australian Commission on Safety and Quality in Health Care, consumers can book an appointment with the right care provider and prepare for their medical appointment by creating a list of questions to ask.

Translation and promotion in language

A key feature of the transition project was making the healthdirect Service Finder more accessible through translation into 15 languages. The Service Finder is promoted in language via social media, and translated posters for clinic waiting rooms are provided to primary care providers.

“healthdirect provided very meaningful, simple to follow and easy to understand messages for the Turkish community. The ads were precise, the message was clear, and we received very positive feedback from our readers.”

Dunya, an Australian Turkish newspaper





ENHANCING OUR CAPABILITY

Healthdirect Australia has built and implemented a new platform that enables us to deliver next-generational virtual care services that are scalable, efficient, and clinically cutting edge.

Registered nurses have access to state-of-the-art technology, including a clinical decision support system that uses

artificial intelligence rather than more traditional decision tree logic. This allows us to consider multiple symptoms and risk factors when performing triage and giving consumers advice.

The overarching capability benefit of the new model is its flexibility and innovation which allows us to respond

rapidly to the healthcare priorities of our shareholders and funders.

Building on the assets developed and experience gained during the pandemic, Healthdirect Australia is better positioned to support Australians and respond to surges for health services.

TRANSFORMING OUR OPERATING MODEL TO ENHANCE OUR CAPABILITIES



With the groundwork laid at the start of the pandemic, a major transformation program began in 2021 to upgrade our technology, people and process to become more agile and to make better use of the virtual care capability offered by industry.

The modernisation of our operational model has embedded rapid response capability, reduced duplication across our services and provides the opportunity to access new technologies to improve the quality of our services. This has allowed us to match consumers with new health services (such as urgent care services) as they are launched by jurisdictions, to send secure message communications to general practice rather than faxes, and to analyse our data to better understand the needs of consumers and provide feedback to government on trends.

Technology benefits

Under the legacy model, all contact centre technology was delivered by separate, external service providers for each

helpline service, with Healthdirect Australia performing a commissioning role.

Now, for services that are resident on Healthdirect Australia's in-house contact centre platform, key assets such as systems for call management, customer relationship management, clinical decision support, agent access and records archiving were built once and are managed by Healthdirect Australia. The interface with the National Health Services Directory, secure messaging connectivity and integration with appointment booking engines are now shared capabilities under Healthdirect Australia's management and available for all services as they are transitioned to our platform.

Next generation clinical decision support system

A central part of the healthdirect/ Nurse-On-Call helpline in the new operating model is a new clinical decision support system for the nurses

to use when triaging consumers. This system allows nurses to engage consumers in a more holistic assessment, supporting them with evidence-based triage recommendations driven by an AI probabilistic logic engine. These comprehensive assessments can cope with multiple symptoms and risk factors in a way the previous system could not, and more closely resemble a traditional consultation.

The implementation of this next generation clinical decision support system has also enabled the triage of specific presenting conditions to newer emerging care pathways, such as virtual ED and urgent care services that cater for such presentations, helping to appropriately divert certain presentations from ED and to care available in the community. Healthdirect Australia plans to transition the digital **Symptom Checker** for consumers to this technology in the next year.



Healthdirect strengthens capability in virtual service delivery

Healthdirect Australia has made significant enhancements to our services based on evaluations, innovation to meet demand and an increasingly digitally connected population and health system.

Data-driven decision making

- Improved analytics and reporting capabilities
- More mature operational management systems and processes
- Greater ability to optimise the workforce to meet changing requirements
- Greater certainty that services are consumer-centric via consumer satisfaction surveys

Dedicated pandemic responses

- Ensure rapid response contact centre infrastructure is available to support future pandemics and other health emergencies

Built-in interoperability and transformation for different needs

- Opportunities to reuse assets developed for COVID services to enhance other services and support future programs and pandemic needs
- Secure messaging embedded into business
- Advances in accessibility, usability and online bookings built into revamped healthdirect Service Finder

Service communications

- SMS and email in real-time during and immediately after a call

Core benefits realised through a focus on digital connectivity

We have expanded the breadth and depth of how we help consumers navigate their way to the right care at the right time and, more importantly, connecting them to care. This is a first step in the evolution of a digital front door and access point to the health system.

Scalability

Digital provision of healthcare far surpasses the capacity of fixed infrastructure and human resources to deliver non-life-threatening healthcare. A digital front door acts as a landing point for consumers – to stream and guide them to the information and services, connecting them to services, with rapid response escalation and intervention if appropriate.

Resilience

Digital front doors soften the inbound contact centre burden, and the primary and acute care burden, conserving service capacity for those who need it most.

Convenience

A digital front door offers free, quick, easy to access information and service access options. An at-the-finger-tip alternative to attending a physical place, while becoming engaged in their own healthcare and building health literacy in the process.

Simplification

By offering a unified point of entry, the healthcare digital front door simplifies the process of navigating multiple healthcare services and allows consumers to take a more active role in managing their health.



ACCESS TO VIRTUAL GP VIA HEALTHDIRECT SCALES UP

Jurisdictions have looked at healthdirect and the established after hours GP helpline call-back pathway as a viable option to alleviate pressure on the primary and acute sectors of the health system and assist in demand management for health services.

NSW pilots virtual GP access 24/7

In New South Wales in 2022, the Ministry of Health and Healthdirect Australia expanded the scope of the after hours GP pathway to all hours and all regions, with the inclusion of e-scripts and medical certificates.

If a GP service with available appointments inside 24 hours cannot be identified, the consumer is offered a virtual GP consultation, with a call back within 30 minutes.

When asked what they would have done if the service had not been available, 60 per cent of consumers surveyed advised they would have attended the emergency department.



As it was a Saturday night with no GP open on a Sunday, the healthdirect service gave us the information and assistance we needed, while also reassuring us that we were doing the right thing for our child without having to use up the local hospital emergency resources.

Caller to the healthdirect helpline who had a video call-back from a GP

This contributed to a 20 per cent reduction in referrals from healthdirect to the emergency department for NSW residents since the healthdirect service is able to connect callers to a virtual GP instead.

Based on the success of this expansion, the virtual GP pathway is now available permanently for NSW residents, while several other jurisdictions are implementing similar 24/7 virtual GP pathways with Healthdirect Australia.





VALUE TO GOVERNMENT

In FY23, we assisted governments to enable digital health journeys that reduce pressure on the health system, deepening our service offering from advising consumers where to go to seek medical help, to connecting them directly with the appropriate healthcare providers.

A digital front door approach includes numerous points that work together as part of an omnichannel consumer engagement strategy aimed at helping them better navigate the health system and making care management easy, efficient and engaging.

These innovations and evolution are possible due to the enhanced capabilities and new service pathways and developed, delivered and evaluated as a result of connecting consumers to care during the pandemic.

EMBEDDING URGENT CARE IN THE HEALTH SYSTEM

The Australian healthcare system is undergoing a transformation to improve rapid access to urgent care closer to home and out of hospital. To support this change, Healthdirect Australia collaborated with governments to design the patient flow of this newly emerging care pathway, including connecting people directly to urgent care services in their area.

Urgent care services have the potential to reduce non-urgent presentations at emergency departments, reducing pressure on emergency departments, saving families and patients time and suffering and bolstering the available options for acute care needs in the community.



Thanks to our strong collaboration with Healthdirect Australia, Urgent Care Services will soon be accessible in NSW via a Single Front Door. We're pioneering a model that holds promise for nationwide implementation.

Amith Shetty, Clinical Director, System Sustainability and Performance, NSW Ministry of Health

The healthdirect service is the entry point for people in New South Wales to access urgent care services, including checking availability and making bookings for patients who are appropriate for these services. We are working with other states and territories on pathways to connect consumers with these services.

Defining who is eligible for an urgent care service

Healthdirect Australia started work with NSW Health in early 2023 to build pathways for urgent care appointments via the healthdirect helpline.

NSW Health defined the scope of the urgent care services – such as a requirement for radiology, pathology and being able to provide intravenous medication, and the scope of practice for a general practitioner such as dealing with fractures and suturing wounds.

Healthdirect Australia has mapped presenting conditions suitable for treatment at each urgent care service. These conditions assist the nurses on the healthdirect helpline to seamlessly determine if the caller is eligible for an urgent care service and whether the service can treat their condition.

Online bookings possible with the National Health Services Directory

In NSW, the healthdirect nurse can book the consumers an appointment at an Urgent Care Clinic. This is possible due to integration of the healthdirect technology platform with the National Health Services Directory and the online booking software of urgent care practices.

Leveraging the infrastructure built in 2021 to enable consumers to find and book COVID-19 vaccination appointments, real-time integration between the Directory, the healthdirect service and urgent care booking providers, now also support nurses to find available appointments and book them on behalf of callers.

Existing Urgent Care Clinics across the country are listed in the National Health Services Directory and can be found via the healthdirect Service Finder.



COVID PROGRAM DELIVERS VALUE

With a widely vaccinated population and COVID restrictions easing, the Australian Government needed to ensure the healthcare system was able to safely manage people who were COVID-positive in the 'post-acute' phase of its national COVID response. Healthdirect Australia partnered with its shareholders and primary care to develop a program designed to connect consumers with the right level of care based on their symptoms and risk factors.

Launched in early 2022, the program handled 190,824 calls from COVID-positive consumers and connected 47,174 consumers with Primary Care including sending notifications via secure message.



This evaluation indicates that the helpline provides significant net benefits (or cost savings) by directing some callers to undertake less resource intensive and less costly treatment pathways than they would have undertaken without the helpline.

Healthdirect Australia Living with COVID program evaluation, CSIRO's Australian e-Health Research Centre

The program comprised four elements:

- Callers to the 24/7 National Coronavirus Helpline are assessed, triaged and provided with health advice.
- The National Coronavirus Helpline notifies GPs that their patient is COVID-positive via a secure messaging system.
- The healthdirect website supports self-managed care at home with digital tools and information.
- In NSW, the program supported COVID-positive consumers to access antiviral therapy.

Queensland, South Australia, New South Wales and Victoria participated in the Program.

Overview of evaluation findings

An independent evaluation of the program conducted by the CSIRO's digital health research program, the Australian e-Health Research Centre, looked into how effective COVID-positive consumers found the program, as well as how engaged GPs were and how useful they found the secure message notifications.

The evaluation found that Healthdirect Australia is capable of a rapid response, delivering a high level of consumer satisfaction and enabling informed decision-making.



The evaluation also found the National Coronavirus Helpline was able to adapt to changing circumstances, such as snap lockdowns and 'spikes' in case numbers and that the helpline and healthdirect website had increased health literacy and enabled members of the public to make informed decisions about their own care.

In particular, the CSIRO found the program:

- effectively supported care through efficient triage and by connecting consumers to primary care, enabling early intervention to enhance health outcomes;
- contributed to a reduced patient flow through GP and hospital doors, leading to the saving of significant resources and budget;

- allowed consumers to access the right care, at the right time;
- offered the potential to streamline communication, care, and tasks to improve care; and,
- demonstrated its potential as an agile solution provider that can be scaled up and down as demand dictates.
- significant net benefits by directing some consumers to take less resource-intensive and less costly treatment paths

The evaluation of the program has been extremely valuable in helping us to understand the benefits to consumers, primary care and funders, and has also informed service design improvements for Healthdirect Australia.



HEALTHDIRECT VIDEO CALL SUPPORTS 10-YEAR TELEHEALTH PLAN

Since March 2020, the rapid expansion of MBS-funded telehealth services has been a central aspect of the Australian Government’s response to the COVID-19 pandemic. For the first time, MBS-funded phone and video consultations with GPs, specialists and allied health professionals were available nationally. Previously, these MBS-funded services were only available, under certain conditions, to rural and remote areas.

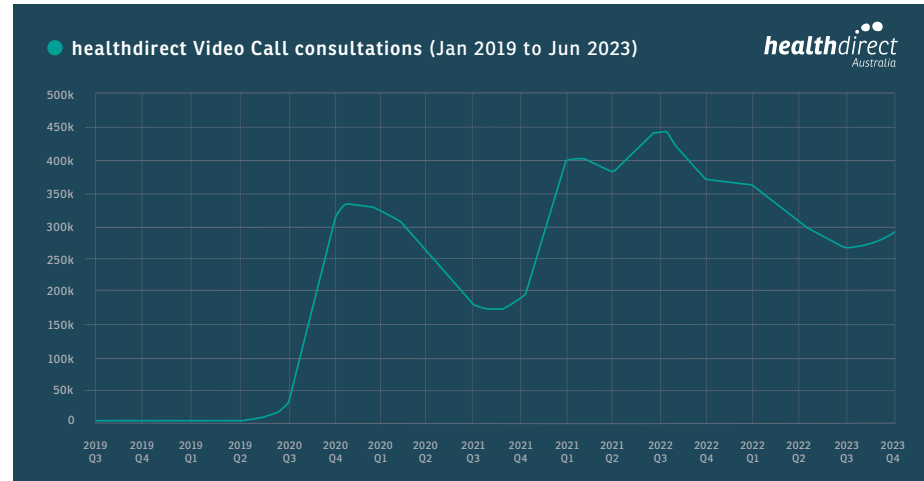
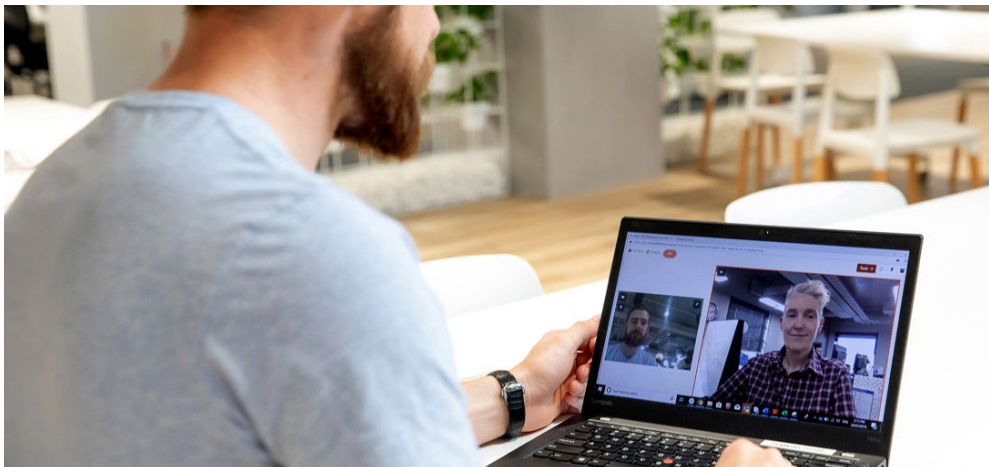
With its scalable, secure and reliable infrastructure, **healthdirect Video Call**

remains well positioned to support the government’s continuing investment in telehealth to enable reform of primary care and MBS-funded services, as set out in the *Future focused primary health care: Australia’s Primary Health Care 10 Year Plan 2022-2032*.

In Q2 of FY23, shortly before usage began to stabilise, consumers participated in 306,997 consultations via healthdirect VideoCall, up from the pre-pandemic figure of 6,197 in Q2 of FY20.

Video favoured over phone

One of the first action areas under the 10-year plan for future-focused primary care was to reform the eHealth Practice Incentives Program to support general practice adoption of better data security, software integrating video into workflow,



The well-established government-funded healthdirect Video Call service enabled the government to scale-up and fund video consultations while the country was in lockdown so people could still see their health professional. Adoption remains substantially higher than pre-pandemic levels as video consultations are embedded into an increasingly digitally-enabled health system

and decision support tools, helping embed technology like healthdirect Video Call into practices.

The importance of visual cues in patient assessment, and other evidence of the quality and safety of telehealth care, show video has the potential to support a higher quality of care. The government expects GPs’ use of video-based consultations to increase and aims to monitor usage with a view to supporting the increased uptake of services like healthdirect Video Call and has been making policy changes to incentivise video consultations.

With 37 per cent of all GP practices with access to the service, healthdirect Video Call also supports a key recommendation of the **Strengthening Medicare Taskforce** to modernise primary care through digital technology.

Enabling better mental health care

During the pandemic, consumers appreciated the convenience and privacy of a video consultation with their mental health professional. In FY23, mental health was the largest single specialty using healthdirect Video Call, stabilising at 18 per cent of all consultations after the pandemic peak volumes. Medicare-subsidised mental health consultations delivered by video have also stabilised at the national level across all platforms.



CONNECTING WITH INDUSTRY PARTNERS

Healthdirect Australia works in partnerships across the health ecosystem to deliver better health outcomes through digital connectivity and support equitable contracting arrangements. In FY23, we have built on the foundations of work done during

the pandemic to deepen the connections with software providers and GP practices and broaden the network of companies that have the opportunity to work with us.

WORKFORCE MANAGEMENT BENEFITS

A key aspect of Healthdirect Australia's upgraded platform is the establishment of a panel of eight workforce providers providing Healthdirect Australia with access to a range of nurses, specialists, and other healthcare professionals who can be quickly engaged to meet specific service needs. In the case of the healthdirect/Nurse-On-Call helpline, multiple providers of contact centre agents have been selected from the panel. This makes it easier to scale up or scale down quickly, respond rapidly to the needs of the community, and to manage service performance by comparing the quality of different providers on the panel through a balanced scorecard.

The workforce panel members operate in a competitive environment, allowing Healthdirect Australia to negotiate the



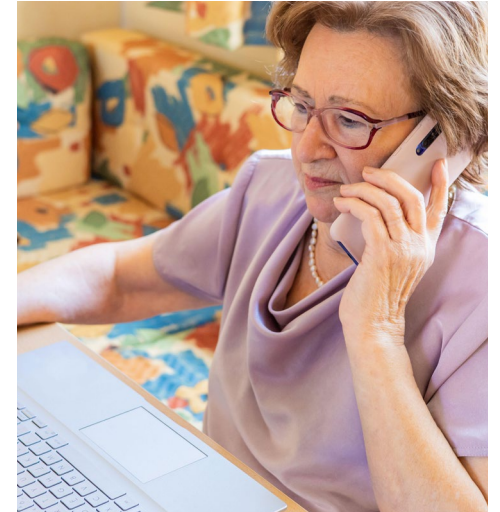
best value for funders and the highest quality for consumers. This also creates more opportunity for companies to work with us.

COLLABORATING WITH THE MED-TECH INDUSTRY

The work to transition the Vaccine Clinic Finder to the healthdirect Service Finder required collaboration with industry and government to enable users to seamlessly find and book a health appointment from just one online portal.

To support better integration with online booking functionality, Healthdirect Australia offered appointment booking vendors the opportunity to integrate with the healthdirect Service Finder.

Online booking providers gained value from integrating with us during the pandemic and beyond as the volumes of online booking through the Vaccine Clinic Finder pushed 1.6 million bookings through booking engines in FY23.



In May 2023, the Vaccine Clinic Finder was combined with the healthdirect Service Finder which offers many more online booking types beyond vaccinations.

The Service Finder links with seven major booking providers and now connects consumers to 80 per cent of primary care GPs and pharmacies that provide online appointment bookings.



WORKING WITH PRACTICES FOR SECURE MESSAGING

As part of Healthdirect’s COVID program, when a caller is determined to be COVID-positive but at medium risk of severe complications, a secure notification is sent by Healthdirect Australia to the consumer’s nominated GP clinic advising the patient’s condition and to expect the patient to request an appointment. The GP was able to use this notification to risk-stratify the patient and prioritise an appointment.

During the early stages of the program, it was found that not all practices had secure messaging enabled, so Healthdirect Australia, in conjunction with Primary Health Networks and the Australian Government Department of Health, worked with practice managers to lift their capability and awareness that they would receive and read notifications to their practice management software.

To enable the sending of secure messages – agnostic of which secure messaging vendor each practice uses – Healthdirect Australia implemented a new interoperability engine which communicates with the four secure messaging vendors in Australia.

This innovation facilitated connectivity with the majority of secure message-enabled practices.

According to the CSIRO evaluation, 81 per cent of GPs confirmed they received notifications from Healthdirect Australia. They found the information, when received, was useful in reducing the number of questions the patients needed to be asked again, providing additional information for the antiviral eligibility assessment.

The new interoperability engine will be used to send secure messages for mental health service referrals and as part of urgent care service pathways in FY24.

NATIONAL HEALTH SERVICES DIRECTORY

More than 98 per cent of interactions with the **National Health Services Directory** are from other systems that use this information, such as consumer apps or medical software. We have started using Fast Healthcare Interoperability Resources (FHIR) protocols for data exchange and are working to transition all our connections to this format to make the National Health Services Directory an easier resource to access and to support the national interoperability agenda.

Responding to health emergencies

On behalf of Victoria Health, Healthdirect Australia set up a dedicated inbound and outbound health alert line for the patients of a doctor who incorrectly performed colonoscopies, serving as a first interaction with impacted patients.

The Albury Wodonga Region Colonoscopy Recall Line provided health information and advice to consumers about the colonoscopy recall and conducted pre-screening checks, assessing them for further clinical engagement and possible re-screening.

To set up this short-term service, Healthdirect Australia worked with Safer Care Victoria, Victoria Health, and clinical professionals to proactively and reactively support concerned former patients of the doctor regarding the outcomes of their previous bowel cancer screening.

To improve contact with patients, Healthdirect sent an SMS with advance notice to expect the call.



Healthdirect played a key role as the initial point of contact for affected patients during the Albury Wodonga Region Colonoscopy Recall. We greatly appreciate your compassion and professionalism, as well as your team's responsiveness and flexibility despite the dynamic and ever-changing needs of the recall program.

Professor Mike Roberts, CEO, Safer Care Victoria



FINANCIAL STATEMENTS

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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. Healthdirect Australia Limited is domiciled in Australia. Its registered office and principal place of business is:

Level 4
477 Pitt Street
Haymarket
NSW 2000

The financial statements were authorised for issue by the Directors on 30 October 2023. The Directors have the power to amend and reissue the financial statements.



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report
30 June 2023

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 2023.

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

P Jurd

The following persons were Directors of the Company from 1 July 2022 to 31 December 2022:

H Nott

G Ginnane

The following person was Director of the Company from 1 July 2022 to 24 April 2023:

L McElvogue

The following persons were Directors of the Company from 1 January 2023 up to the date of this report:

S Duckett

C Kilpatrick

R Taggart

The following person was Director of the Company from 1 August 2023 up to the date of this report:

A Hansra

Information on Directors as at the date of this report

Mrs Jane Muirsmith, Chair

Appointed Director January 2016 – December 2019

Appointed Chair January 2020

Reappointed Director January 2020 – December 2022

Term extended January 2023 – December 2023

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, Cedar Woods Properties Ltd (CWP), the Australian Finance Group (AFG) and the Telethon Kids Institute.

Mrs Muirsmith is a member of the UWA Business School's Ambassadorial Council and a former President of the Western Australian Women's Advisory Council to the Minister for Women's Interests.

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)

Member of the Australasian Institute of Digital Health (MAIDH)

Special responsibilities

Chair of the Board of Directors (appointed January 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 Advisory Committee (appointed Member July 2018, appointed Chair February 2020)



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report (continued)
30 June 2023

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 Smartz 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 Corporate Managers, Secretaries & Administrators)
Fellow of the Australian Institute of Company Directors (FAICD)
Member of Certified Practising Accountants Australia (CPA)

Special responsibilities

Chair of the Finance, Risk Management and Audit Committee (appointed Member February 2020, appointed Chair January 2023)

Information on Directors from 1 July 2022 to 31 December 2022

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 was Chair of the National Blood Authority for eight years. Ms Ginnane also serves as a member of the audit and risk committee for the Department of Veterans' Affairs and as Chair of audit and risk committees for 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, term ended December 2022)

Dr Helen Nott, Director

Appointed January 2020 – December 2022

Dr Nott is currently a Non-Executive Director of QBE Australia Pacific and the NZ Accident Compensation Corporation. Dr Nott was previously 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 Member February 2020, term ended December 2022)



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report (continued)
30 June 2023

Information on Directors from 1 July 2022 to 24 April 2023

Ms Louise McElvogue, Director

Appointed January 2020 – December 2021

Reappointed January 2022 – June 2024

Resigned April 2023

Ms McElvogue is an experienced board director and advisor in strategy, marketing and digital technology. Current board roles include Cluey Learning, Halo Technologies and NSW Councillor of the Australian Institute of Company Directors. Ms McElvogue was Industry Professor, UTS Business School where she co-curated the faculty's first online-only degree, the Master of Digital Marketing. She is an Adjunct Professor at UTS Business School.

Ms McElvogue brings expertise in product and user experience from leading more than 30 digital projects for companies that include Fairfax Media, the ABC, McDonald's and the first video streaming services for the BBC and Channel 4.

Ms McElvogue took a leave of absence from December 2022 to April 2023.

Qualifications

Bachelor of Arts (BA)

Master of Arts (MA)

Fellow of the Australian Institute of Company Directors (FAICD)

Special responsibilities

Member of the Clinical Advisory Committee (appointed Member February 2020, term ended December 2022)

Information on Directors from 1 January 2023 up to the date of this report

Dr Stephen Duckett AM, Director

Appointed Director January 2023 – December 2025

Dr Duckett has been a leader in health care operations and policy in Australia and Canada, including as a past Secretary of the Australian Department of Health.

An economist by profession, Dr Duckett is renowned for evidence-based innovation and reform in areas ranging from the introduction of activity-based funding for hospitals to new systems of accountability for the safety of hospital care.

Qualifications

Master of Health Administration (MHA)

Doctor of Philosophy (PhD)

Doctor of Science (DSc)

Life Member of the Australian College of Health Service Executives (FACHSE)

Fellow of the Australian Institute of Company Directors (FAICD)

Fellow of the Academy of the Social Sciences in Australia (FASSA)

Fellow of the Australian Academy of Health and Medical Sciences (FAHMS)

Special responsibilities

Member of the Finance, Risk Management and Audit Committee (appointed Member January 2023)

Professor Christine Kilpatrick AO, Director

Appointed Director January 2023 – December 2025

Professor Kilpatrick was Chief Executive of Royal Melbourne Hospital from 2017 to 2023. Previous appointments include Chief Executive, the Royal Children's Hospital from 2008 to 2017, Chief Medical Officer, Melbourne Health and Executive Director, Royal Melbourne Hospital, from 2004 to 2008.

Professor Kilpatrick is a member of several boards, including Walter and Eliza Hall Institute of Medical Research (WEHI), The Florey Institute of Neuroscience and Mental Health, HealthShare Victoria and the Victorian Comprehensive Cancer Centre (VCCC) Alliance.

Professor Kilpatrick was awarded a Centenary Medal in 2003; in 2014, was included in the Victorian Honour Roll of Women; in 2017, was a recipient of the Distinguished Fellow Award, Royal Australasian College of Medical Administrators; in 2018, was inducted in the Top 50 Public Sector Women; and in 2019, was appointed an Officer of the Order of Australia.

Qualifications

Doctor of Medical Science (honoris causa) (DMedSci (Hons))

Doctor of Medicine (MD)

Bachelor of Medicine, Bachelor of Surgery (MBBS)

Master of Business Administration (MBA)

Fellow of the Australian Institute of Company Directors (FAICD)

Fellow of the Royal Australasian College of Medical Administrators (FRACMA)

Fellow of the Australian Academy of Health and Medical Science (FAHMS)

Fellow of the Royal Australasian College of Physicians (FRACP)



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report (continued)
30 June 2023

Special responsibilities

Member of the Clinical Advisory Committee
(appointed Member January 2023)

Mr Richard Taggart, Director

Appointed Director January 2023 – December 2025

Mr Taggart has more than 20 years' experience as a transformative leader in digital health.

Mr Taggart is currently the National Director of Information Communications and Technology and Digital at Calvary Healthcare and Independent Chair of Australian Stroke and Heart Research Accelerator, which brings together researchers and industry investors to translate research into new benefits for patients. Prior to these appointments he was Chief Information Officer for Sydney Local Health District (2019-2023) and Healthcare lead for Australia and New Zealand with Apple from 2014 to 2019.

Qualifications

Master of Pharmacy (Hons) (MPharm)

Master of Business Administration (MBA)

Fellow of the Australasian Institute of Digital Health (FAIDH)

Fellow of the Faculty of Clinical Informatics (UK) (FFCI)

Special responsibilities

Member of the Finance, Risk Management and Audit Committee (appointed Member January 2023)

Information on Directors from 1 August 2023 up to the date of this report

Dr Amandeep Hansra, Director

Appointed Director August 2023 – June 2026

Dr Hansra is a leader at the intersection of digital health and innovation. Dr Hansra is an experienced healthcare executive, board director and international expert in health innovation, having served as a Senior Medical Adviser at Medibank Health Solutions and as the founding Chief Medical Officer and CEO of Telstra ReadyCare, the first full-service telemedicine service in Australia.

Dr Hansra holds a position as Adjunct Associate Professor, University of Sydney, Faculty of Medicine and Health, School of Medical Sciences, Biomedical Informatics and Digital Health. Dr Hansra is on the boards of the Australian Medical Association (NSW), MoleMap NZ and the Australian Council of Healthcare Standards (International) and has previously chaired the Board at Coviu Global.

Qualifications

Global Executive Masters of Business Administration
Master of Public Health and Tropical Medicine
Certified Health Informatician Australasia, HISA/ AIDH
Australian Certificate of Civil Aviation Medicine
Bachelor of Medicine (with Honours)
Graduate of the Australian Institute of Company Directors (GAICD)
Fellow of the Australasian Institute of Digital Health (FAIDH)
Fellow of the Royal Australian College of General Practitioners (FRACGP)

Special responsibilities

Member of the Clinical Advisory Committee
(appointed Member August 2023)



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report (continued)
30 June 2023

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, Ms McMahon 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 (GAICD)
Fellow of the Australasian Institute of Digital Health (FAIDH)

Mr Brendan Egan, Company Secretary

Appointed July 2022

Mr Egan has significant experience in senior corporate leadership, corporate governance, and accounting. He has worked in large multinational corporations, publicly listed companies, national and community-based not-for-profit organisations, and within government departments and agencies. Mr Egan has extensive experience as a Company Secretary and advisor to boards on strategy and corporate governance. Mr Egan is also the Chair of The Indigenous Reading Project.

Qualifications

Master of Public Policy
Bachelor of Business
Fellow of The Governance Institute Australia (FGIA)
Fellow of The Chartered Governance Institute
Fellow of CPA Australia (FCPA)
Graduate of the Australian Institute of Company Directors (GAICD)

Ms Judith Maude, Company Secretary

Appointed September 2020

Resigned July 2022

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 11 years. Ms Maude is a director of Aquilo Pty Limited which provides governance consulting services.

Qualifications

Bachelor of Arts (BA)
Bachelor of Laws (LLB)
Graduate of the Australian Institute of Company Directors (GAICD)
Fellow of the Governance Institute of Australia (FGIA)



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report (continued)
30 June 2023

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 2023, and the number of meetings attended by each Director are detailed in the table right.

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.

Principal activities

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

- a. Establish and manage virtual health services on behalf of the governments of Australia.
- b. 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 4-24.

| | Full meetings of Directors | | Finance, Risk Management and Audit Committee | | Clinical Advisory Committee | |
|--------------|----------------------------|----|--|-----|-----------------------------|-----|
| | A | B | A | B | A | B |
| J Muirsmith | 11 | 11 | 4* | N/A | 1* | N/A |
| D Ashbridge | 10 | 11 | N/A | N/A | 4 | 4 |
| P Jurd | 10 | 11 | 5 | 5 | N/A | N/A |
| H Nott | 7 | 7 | 2 | 2 | N/A | N/A |
| L McElvogue | 6 | 8 | N/A | N/A | 2 | 2 |
| G Ginnane | 7 | 7 | 2 | 2 | N/A | N/A |
| S Duckett | 4 | 4 | 2 | 3 | N/A | N/A |
| R Taggart | 4 | 4 | 3 | 3 | N/A | N/A |
| C Kilpatrick | 4 | 4 | N/A | N/A | 2 | 2 |

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.

Operating results

The Company continued to deliver virtual health services to the Australian public on behalf of government shareholders and funders. These services include the Health Information and Advice Service (HIAS), My Aged Care, the National Health Services Directory and National Coronavirus Helpline.

The National Coronavirus Helpline continued to assist COVID-positive callers to know how to manage their symptoms, conduct pre-assessments for antiviral treatment eligibility and connect callers with a General Practitioner when appropriate. As anticipated, demand for the National Coronavirus Helpline reduced as we moved beyond the

pandemic response and the residual demand for these services will now be integrated into our standard HIAS service.

A second element of the National Coronavirus Helpline program was the investment made in digital capabilities, including the knowledge base, service finder and symptom checker, which help



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' report (continued)
30 June 2023

Australians manage their health care needs. As a consequence, usage of these digital tools is significantly higher than pre-pandemic levels. In particular, the refreshed healthdirect Service Finder now provides online booking information and is optimised for greater accessibility.

The Company's new operating platform launched during the year, with the HIAS being the first service to migrate across to the updated technology stack. This incorporates a new clinical decision support system, and new commercial arrangements with suppliers. This upgraded platform will underpin many of our services in the future to provide enhanced pathways for consumers to the most appropriate health services, such as GP telehealth or virtual emergency services and provide real-time data insights to inform service improvements.

The Company's recorded operating loss before tax is \$819,093. This reflects the depreciation of assets funded in prior years exceeding the funding received for assets purchased and the write off as a bad debt of a receivable with South Australia. The application of AASB 16 Leases, adopted from 1 July 2018, also increased the charges of interest and depreciation during the year relative to the lease cashflow expenditure in the current year.

The balance of the operating result is effectively nil because 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.

Government grants – economic dependence

The Company signed a new Governance Agreement (Agreement), commencing on 15 October 2022. The agreement has an expiry date of 30 June 2026, with an extension option of two four-year periods. Further details are in Note 1(p) in the Notes to the Financial Statements.

Dividends and distributions

The Company did not pay, recommend or declare any dividends or distributions to shareholders 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 effected Directors and Officers insurance and paid the premium.

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. Shareholding

Subsequent to the year end the State of Queensland as represented by Queensland Health has become a shareholder of the Company.

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 33.

Auditor

Grant Thornton Audit Pty Ltd continues in office 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)*.

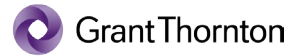
J Muirsmith

Chair
Sydney
30 October 2023



FINANCIAL STATEMENTS

Auditor's independence declaration



Grant Thornton Audit Pty Ltd
Level 17
383 Kent Street
Sydney NSW 2000
Locked Bag Q800
Queen Victoria Building NSW
1230
T +61 2 8297 2400

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 30 June 2023, 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, 30 October 2023

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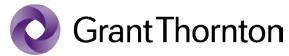
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Healthdirect Australia Ltd
ABN 28 118 291 044
Auditor's independence declaration
30 June 2023



FINANCIAL STATEMENTS

Independent auditor's report to the members



Grant Thornton Audit Pty Ltd
 Level 17
 383 Kent Street
 Sydney NSW 2000
 Locked Bag Q800
 Queen Victoria Building NSW
 1230
 T +61 2 8297 2400

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 2023, 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 2023 and of its performance for the year ended on that date; and
- b complying with Australian Accounting Standards *AASB 1060 General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* 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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Healthdirect Australia Ltd
ABN 28 118 291 044
Independent auditor's report to the members
30 June 2023



FINANCIAL STATEMENTS

Independent auditor's report to the members

Healthdirect Australia Ltd
ABN 28 118 291 044
Independent auditor's report to the members
(continued)
30 June 2023

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 2023, 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 Standard – AASB 1060 *General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* 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, 30 October 2023



FINANCIAL STATEMENTS

Directors' declaration

Healthdirect Australia Ltd
ABN 28 118 291 044
Directors' declaration
30 June 2023

In the Directors' opinion:

- A. The financial statements and notes set out on pages 37 to 57 are in accordance with the *Corporations Act 2001 (Cth)*, including:
- i. Complying with Accounting Standards - Simplified 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 2023 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
Sydney
30 October 2023



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Statement of comprehensive income
For the year ended 30 June 2023

Statement of comprehensive income

| | Notes | 2023 (\$) | 2022 (\$) |
|---------------------------------------|-------|----------------------|----------------------|
| Revenue from contracts with customers | 3 | 206,159,976 | 260,809,661 |
| Other income | 4 | 9,836,349 | 6,000,000 |
| Expenses | | | |
| Call centre costs | | (144,047,234) | (199,975,587) |
| Employee benefit expenses | 5 | (46,705,470) | (40,626,473) |
| Consultancy fees | | (733,338) | (1,413,313) |
| Outsourcing fees | | (1,986,803) | (1,825,288) |
| Legal, risk management and audit fees | | (478,783) | (637,166) |
| Website management | | (742,877) | (286,703) |
| Design, develop and build | | (4,948,257) | (4,231,274) |
| Technology support | | (9,868,484) | (10,298,474) |
| Travel | | (259,186) | (74,584) |
| Marketing and advertising | | (1,436,998) | (3,259,449) |
| Office cost | | (700,836) | (662,766) |
| Insurance | | (610,137) | (418,339) |
| Interest expense | | (178,180) | (216,433) |
| Bad debt expense | | (1,076,085) | - |
| Other expenses | | (735,607) | (486,837) |
| Depreciation and amortisation expense | 5 | (2,307,143) | (2,450,229) |
| Total expenses | | (216,815,418) | (266,862,915) |

| | Notes | 2023 (\$) | 2022 (\$) |
|--|-------|------------------|-----------|
| (Loss) before income tax | | (819,093) | (53,254) |
| Income tax (expense)/benefit | 6 | (77,098) | 15,975 |
| (Loss) from continuing operations | | (896,191) | (37,279) |
| (Loss) for the year and total comprehensive (loss) for the year | | (896,191) | (37,279) |
| (Loss) is attributable to: | | | |
| Shareholders of Healthdirect Australia Ltd | | (896,191) | (37,279) |
| | | (896,191) | (37,279) |
| Total comprehensive (loss) for the year is attributable to: | | | |
| Shareholders of Healthdirect Australia Ltd | | (896,191) | (37,279) |
| | | (896,191) | (37,279) |

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



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Statement of financial position
As at 30 June 2023

Statement of financial position

| | Notes | 2023 (\$) | 2022 (\$) |
|------------------------------------|-------|--------------------|-------------|
| ASSETS | | | |
| Current assets | | | |
| Cash and cash equivalents | 7 | 113,086,101 | 85,453,987 |
| Trade and other receivables | 8 | 2,483,828 | 17,576,395 |
| Prepayments | | 1,277,577 | 1,434,990 |
| Contract asset | | 1,997,239 | - |
| Financial assets at amortised cost | 9 | 431,000 | 862,000 |
| Other current assets | 10 | 43,380 | 7,030 |
| Total current assets | | 119,319,125 | 105,334,402 |
| Non-current assets | | | |
| Financial assets at amortised cost | 11 | 3,894,447 | 4,325,447 |
| Property, plant and equipment | 12 | 1,632,596 | 2,096,804 |
| Right of use assets | 13 | 5,901,040 | 7,594,648 |
| Deferred tax assets | 17 | 1,472,013 | 1,291,797 |
| Prepayments | | - | 1,897 |
| Contract asset | | 1,997,239 | - |
| Total non-current assets | | 14,897,335 | 15,310,593 |
| Total assets | | 134,216,460 | 120,644,995 |

| | Notes | 2023 (\$) | 2022 (\$) |
|--------------------------------|-------|--------------------|-------------|
| LIABILITIES | | | |
| Current liabilities | | | |
| Trade and other payables | 14 | 30,019,387 | 26,525,350 |
| Unearned revenue | 15 | 91,210,472 | 79,006,955 |
| Employee benefits obligation | 16 | 2,377,096 | 1,862,952 |
| Lease liability | 13 | 2,097,876 | 1,975,218 |
| Total current liabilities | | 125,704,831 | 109,370,475 |
| Non-current liabilities | | | |
| Deferred tax liabilities | 17 | 1,290,320 | 1,033,006 |
| Employee benefits obligation | 18 | 666,963 | 708,288 |
| Provision for lease make good | 13 | 767,565 | 752,378 |
| Lease liability | 13 | 5,728,614 | 7,826,490 |
| Total non-current liabilities | | 8,453,462 | 10,320,162 |
| Total liabilities | | 134,158,293 | 119,690,637 |
| Net assets | | 58,167 | 954,358 |
| EQUITY | | | |
| Contributed equity | 19 | 448 | 448 |
| Retained surplus | | 57,719 | 953,910 |
| Total equity | | 58,167 | 954,358 |

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



FINANCIAL STATEMENTS

Statement of changes in equity

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Statement of changes in equity
 For the year ended 30 June 2023

| | Notes | Contributed equity (\$) | Retained earnings (\$) | Total equity (\$) |
|-------------------------|-------|-------------------------|------------------------|-------------------|
| Balance at 1 July 2021 | | 448 | 991,189 | 991,637 |
| (Loss) for the year | | - | (37,279) | (37,279) |
| Balance at 30 June 2022 | | 448 | 953,910 | 954,358 |
| Balance at 1 July 2022 | | 448 | 953,910 | 954,358 |
| (Loss) for the year | | - | (896,191) | (896,191) |
| Balance at 30 June 2023 | | 448 | 57,719 | 58,167 |

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



FINANCIAL STATEMENTS

Statement of cash flows

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Statement of cash flows
 For the year ended 30 June 2023

| | Notes | 2023 (\$) | 2022 (\$) |
|--|-------|----------------------|---------------|
| Cash flows from operating activities | | | |
| Receipts from funding agreements and lease incentive | | 240,332,072 | 243,188,354 |
| Payments to suppliers and employees | | (214,671,757) | (263,734,199) |
| Interest received | | 1,237,193 | 189,793 |
| Net cash inflow/(outflow) from operating activities | | 26,897,508 | (20,356,052) |
| Cash flows from investing activities | | | |
| Payments for property, plant and equipment | 12 | (127,394) | (538,107) |
| Proceeds from financial assets at amortised cost | | 862,000 | 514,871 |
| Net cash inflow/(outflow) from investing activities | | 734,606 | (23,236) |
| Net (decrease)/increase in cash and cash equivalents | | 27,632,114 | (20,379,288) |
| Cash and cash equivalents at the beginning of the financial year | | 85,453,987 | 105,833,275 |
| Cash and cash equivalents at the end of the financial year | 7 | 113,086,101 | 85,453,987 |

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



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Notes to the financial statements
30 June 2023

Notes to the financial statements

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FINANCIAL STATEMENTS

Healthdirect Australia Ltd
ABN 28 118 291 044
Notes to the financial statements (continued)
30 June 2023

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 or amended Accounting Standards and Interpretations adopted

The Company has adopted all of the new or amended Accounting Standards and Interpretations issued by the Australian Accounting Standards Board (AASB) that are mandatory for 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 – Simplified 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. Rounding of amounts

The company is of a kind referred to in Corporations Instrument 2016/191, issued by the Australian Securities and Investments Commission, relating to 'rounding-off'. Amounts in this report have been rounded off in accordance with that Corporations Instrument to the nearest dollar.

iii. 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 - Simplified 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 \$71.1 million (2022: \$75.6 million) as disclosed in Note 15.

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. Contract asset

The Company has a Contract Asset in relation to the upfront costs to train the call centre workforce and a range of other contract set-up costs. The estimated period to consume is disclosed in Note 2.

v. Unearned revenue – funding received in advance

Amounts received in advance



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Notes to the financial statements (continued)
 30 June 2023

when the Company has not met all the conditions to obtain the control of the funding are accounted for as unearned revenue. Five invoices (2022: six invoices) to the sum of \$22.7 million were invoiced during June 2023 (2022: \$3.7 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 \$20.1 million remains unspent at 30 June 2023 (2022: \$3.4 million) from invoices issued during the financial year.

e. Income tax

The income tax expense or benefit 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 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.



FINANCIAL STATEMENTS

Healthdirect Australia Ltd

ABN 28 118 291 044

Notes to the financial statements (continued)

30 June 2023

When there is no reasonable expectation of recovering part or all of a financial asset, its 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. 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.

m. 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 Company 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.



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30 June 2023

n. Contributed equity

Ordinary shares are classified as equity.

o. 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.

p. Government grants – economic dependence

The Company's main 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 2023. The Company had a working capital deficit of \$4.4 million at 30 June 2023 (2022: \$4.0 million). This deficit is due to setting aside a term deposit of \$3.9 million as required by the lease and this results in it being classified as a non-current asset.

The majority of the available funds have been provided to fund various Service Definition Management Orders (SDMOs), using standard terms set out in the Head Deed of Agreement for Services, and within an overall framework that is provided by the Governance Agreement (Agreement) for the Company (previously called Umbrella Funding Agreement (UFA)) dated 15 October 2022. The available funds balance reflects accumulated unspent funds received for SDMOs and other agreements in the prior years.

The Agreement 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 Deed or if the funds have been spent, or committed, not in accordance with the Agreement.

The Agreement expires on 30 June 2026. Although the Company does not have a contractual obligation to repay the funds until the termination of the Deed, the fund providers may repurpose the use of the funds for new projects.

The Company has economic dependence on the support of the shareholders to continue its operations and renew the Governance Agreement at its extension dates.

q. Forward foreign exchange contracts

To protect against exchange rate movements, the Company has entered into forward foreign exchange contracts. These contracts are hedging highly probable forecasted cash flows for the ensuing financial year. The Company has hedged between 70% and 80% of anticipated foreign currency transactions for the subsequent 6 months services for this financial year. At the end of the financial year it has unrealised foreign exchange assets of \$36,350 (2022: nil) in Note 10.

r. Auditors

Audit services for this financial year were provided by Grant Thornton Audit Pty Ltd, appointed auditor in 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



FINANCIAL STATEMENTS

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Notes to the financial statements (continued)
30 June 2023

income tax assets and liabilities in the period in which such determination is made.

years for the initial set-up costs. A portion of the Contract Asset is thus considered non-current.

ii. 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.

iii. Estimated period to consume Contract asset

The Company has a Contract asset in relation to the upfront costs to train the call centre workforce and a range of other contract set up costs. The benefit of this training is realised over the period that the Company use the workforce provider and is recognised in conjunction with their monthly workforce charge to reflect the delivery of their performance obligations. The life of this benefit is influenced by the term of the underlying funder contract, the period of the work order for the workforce provider, and the probability the workforce provider will be awarded a renewed work order. The Company has assessed the appropriate period to be two

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

i. 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.



FINANCIAL STATEMENTS

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 Notes to the financial statements (continued)
 30 June 2023

3. Revenue

| | 2023 (\$) | 2022 (\$) |
|--|--------------------|-------------|
| Revenue from contracts with customers | 206,159,976 | 260,809,661 |
| <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) | 152,176,596 | 204,656,795 |
| Digital activities | 24,639,026 | 20,778,222 |
| Other | 29,344,354 | 35,374,644 |
| | 206,159,976 | 260,809,661 |

Revenue is recognised over time when the services are delivered.

4. Other income

| | 2023 (\$) | 2022 (\$) |
|----------------------------------|------------------|-----------|
| Income from government grants | 9,800,000 | 6,000,000 |
| Unrealised foreign exchange gain | 36,349 | - |
| | 9,836,349 | 6,000,000 |

Revenue is recognised when contractually enforceable.



FINANCIAL STATEMENTS

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 Notes to the financial statements (continued)
 30 June 2023

5. Other expenses

| | 2023 (\$) | 2022 (\$) |
|---|------------|------------|
| Loss before income tax includes the following specific expenses: | | |
| <i>Employee benefit expenses</i> | | |
| Defined contribution superannuation expense | 3,274,806 | 2,574,941 |
| Other employee benefit expenses | 43,430,664 | 38,051,532 |
| Total employee benefit expenses | 46,705,470 | 40,626,473 |
| <i>Depreciation and amortisation expenses</i> | | |
| Depreciation expenses | 2,307,143 | 2,449,449 |
| Amortisation expenses | - | 780 |
| Total depreciation and amortisation expenses | 2,307,143 | 2,450,229 |

6. Income tax expense/(benefit)

| | 2023 (\$) | 2022 (\$) |
|---|-----------|-----------|
| (a) Income tax expense/(benefit) | | |
| Current tax | - | - |
| Deferred tax | 77,098 | (15,975) |
| | 77,098 | (15,975) |
| The major components of income tax (benefit)/expense are: | | |
| (Increase)/Decrease in deferred tax assets | (180,216) | (217,490) |
| (Decrease)/Increase in deferred tax liabilities | 257,314 | 201,515 |
| | 77,098 | (15,975) |



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Notes to the financial statements (continued)
 30 June 2023

6. Income tax expense/(benefit) (continued)

| | 2023 (\$) | 2022 (\$) |
|---|------------------|-----------|
| (b) Reconciliation of income tax expense to prima facie tax payable | | |
| (Loss) from continuing operations before income tax expense | (819,093) | (53,254) |
| Tax at the Australian tax rate of 30% (2022 - 30%) | (245,727) | (15,975) |
| Tax effect of amounts which are not deductible (taxable) in calculating taxable income: | | |
| Entertainment | 3,629 | 2,084 |
| Tax Loss utilised against prior period tax loss | (3,629) | (2,084) |
| Tax losses written off as not virtually certain | 322,825 | - |
| Income tax (benefit) | 77,098 | (15,975) |

Total taxable losses carried forward is \$8,287,334 (2022: \$6,848,117) at the end of the period.

7. Current assets – Cash and cash equivalents

| | 2023 (\$) | 2022 (\$) |
|--------------|--------------------|------------|
| Petty cash | 200 | 200 |
| Cash at bank | 113,085,901 | 85,453,787 |
| | 113,086,101 | 85,453,987 |

Cash at bank is bearing variable interest rates. The weighted average interest rate is 1.85% (2022: 0.17%) at the end of the period.



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 Notes to the financial statements (continued)
 30 June 2023

8. Current assets – Trade and other receivables

| | 2023 (\$) | 2022 (\$) |
|---------------------|------------------|-------------------|
| Trade receivables | 594,764 | 15,209,164 |
| GST receivable | 1,517,430 | 2,334,570 |
| Interest receivable | 348,566 | 32,269 |
| Sundry receivable | 23,068 | 392 |
| | <u>2,483,828</u> | <u>17,576,395</u> |

9. Current assets – Financial assets at amortised cost

| | 2023 (\$) | 2022 (\$) |
|---|----------------|----------------|
| Term deposits held as security for bank guarantee | <u>431,000</u> | <u>862,000</u> |

10. Current assets – Other current assets

| | 2023 (\$) | 2022 (\$) |
|------------------------------------|---------------|--------------|
| Unrealised foreign exchange assets | 36,350 | - |
| Accrued income | 7,030 | 7,030 |
| | <u>43,380</u> | <u>7,030</u> |

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

| | 2023 (\$) | 2022 (\$) |
|---|------------------|------------------|
| Term deposits held as security for bank guarantee | <u>3,894,447</u> | <u>4,325,447</u> |



FINANCIAL STATEMENTS

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Notes to the financial statements (continued)
30 June 2023

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

| | IT hardware (\$) | Office equipment (\$) | Furniture and fittings (\$) | Fitout new premises (\$) | Fitout (\$) | Total (\$) |
|--|---------------------|--------------------------|-----------------------------------|--------------------------------|----------------|---------------|
| At 1 July 2022 | | | | | | |
| Cost | 1,329,578 | 213,288 | 60,126 | 3,001,830 | 121,678 | 4,726,500 |
| Accumulated depreciation | (1,052,562) | (172,748) | (53,390) | (1,327,179) | (23,817) | (2,629,696) |
| Net book amount | 277,016 | 40,540 | 6,736 | 1,674,651 | 97,861 | 2,096,804 |
| Year ended 30 June 2023 | | | | | | |
| Opening net book amount | 277,016 | 40,540 | 6,736 | 1,674,651 | 97,861 | 2,096,804 |
| Additions | 124,148 | 3,246 | - | - | - | 127,394 |
| Disposals | (1,451) | (47) | - | - | - | (1,498) |
| Depreciation charge reclass and adjustments | 10,491 | (3,745) | - | - | - | 6,746 |
| Depreciation charge | (179,247) | (17,125) | (914) | (375,229) | (24,335) | (596,850) |
| Closing net book amount | 230,957 | 22,869 | 5,822 | 1,299,422 | 73,526 | 1,632,596 |
| At 30 June 2023 | | | | | | |
| Cost | 1,368,589 | 214,687 | 60,126 | 3,001,830 | 121,678 | 4,766,910 |
| Accumulated depreciation | (1,137,632) | (191,818) | (54,304) | (1,702,408) | (48,152) | (3,134,314) |
| Net book amount | 230,957 | 22,869 | 5,822 | 1,299,422 | 73,526 | 1,632,596 |



FINANCIAL STATEMENTS

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 Notes to the financial statements (continued)
 30 June 2023

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

| | 2023 (\$) | | | 2022 (\$) |
|---|------------------|-------------------|-----------------------|------------------|
| (a) Non-current assets – Right-of-use assets | | | | |
| Right-of-use assets | 5,901,040 | | | 7,594,648 |
| | Make good (\$) | Office space (\$) | Office equipment (\$) | Total (\$) |
| At 1 July 2022 | | | | |
| Cost or fair value | 752,378 | 12,848,237 | 32,623 | 13,633,238 |
| Accumulated depreciation | (326,169) | (5,683,559) | (28,862) | (6,038,590) |
| Net book amount | <u>426,209</u> | <u>7,164,678</u> | <u>3,761</u> | <u>7,594,648</u> |
| Year ended 30 June 2023 | | | | |
| Opening net book amount | 426,209 | 7,164,678 | 3,761 | 7,594,648 |
| Addition to provision | 15,188 | - | - | 15,188 |
| Depreciation | (99,004) | (1,606,030) | (3,761) | (1,708,795) |
| Closing net book amount | <u>342,393</u> | <u>5,558,648</u> | <u>-</u> | <u>5,901,041</u> |
| At 30 June 2023 | | | | |
| Cost or fair value | 767,565 | 12,848,237 | 32,623 | 13,648,425 |
| Accumulated depreciation | (425,173) | (7,289,589) | (32,623) | (7,747,385) |
| Net book amount | <u>342,392</u> | <u>5,558,648</u> | <u>-</u> | <u>5,901,040</u> |



FINANCIAL STATEMENTS

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Notes to the financial statements (continued)
30 June 2023

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

| | 2023 (\$) | | 2022 (\$) | |
|--|--------------------------|-------------------|-----------------------|-------------------|
| (b) Current and Non-current liabilities – Lease liabilities and provision make good | | | | |
| Current - lease liabilities | | 2,097,876 | | 1,975,218 |
| Non-current - lease liabilities | | 5,728,614 | | 7,826,490 |
| | | 7,826,490 | | 9,801,708 |
| Non-current - Provision make good | | 767,565 | | 752,378 |
| | Provision make good (\$) | Office space (\$) | Office equipment (\$) | Total (\$) |
| At 1 July 2022 | | | | |
| Cost or fair value | 702,723 | 15,850,065 | 32,623 | 16,585,411 |
| Accumulated addition to provision | 49,655 | - | - | 49,655 |
| Accumulated interest expense | - | 920,778 | 1,328 | 922,106 |
| Accumulated lease payments | - | (6,973,029) | (30,056) | (7,003,085) |
| Net book amount | <u>752,378</u> | <u>9,797,814</u> | <u>3,895</u> | <u>10,554,087</u> |
| Year ended 30 June 2023 | | | | |
| Opening net book amount | 752,378 | 9,797,814 | 3,895 | 10,554,087 |
| Addition to provision | 15,188 | - | - | 15,188 |
| Interest expense | - | 178,159 | 21 | 178,180 |
| Lease payments | - | (2,149,481) | (3,916) | (2,153,397) |
| Closing net book amount | <u>767,566</u> | <u>7,826,491</u> | <u>-</u> | <u>8,594,057</u> |
| At 30 June 2023 | | | | |
| Cost or fair value | 702,723 | 15,850,065 | 32,623 | 16,585,411 |
| Accumulated addition to provision | 64,843 | - | - | 64,843 |
| Accumulated interest expense | - | 1,098,937 | 1,349 | 1,100,286 |
| Accumulated depreciation | - | (9,122,510) | (33,972) | (9,156,483) |
| Net book amount | <u>767,566</u> | <u>7,826,491</u> | <u>-</u> | <u>8,594,057</u> |



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Notes to the financial statements (continued)
 30 June 2023

14. Current liabilities – Trade and other payables

| | 2023 (\$) | 2022 (\$) |
|------------------|-------------------|-------------------|
| Unsecured | | |
| Trade payables | 6,451,928 | 4,211,661 |
| Accrued expenses | 22,658,912 | 21,425,897 |
| Other payables | 908,548 | 887,792 |
| | 30,019,388 | 26,525,350 |

15. Current liabilities – Unearned revenue

| | 2023 (\$) | 2022 (\$) |
|--|-------------------|-------------------|
| Unearned revenue – funding received in advance | 20,129,915 | 3,427,177 |
| Contract liabilities owed to jurisdictions (AASB 15) | 71,080,557 | 75,579,778 |
| | 91,210,472 | 79,006,955 |

16. Current liabilities – Employee benefits obligation

| | 2023 (\$) | 2022 (\$) |
|--|------------------|------------------|
| Employee benefits – annual leave (see Note 1(m)) | 1,965,143 | 1,800,713 |
| Employee benefits – long-service leave | 411,953 | 62,239 |
| | 2,377,096 | 1,862,952 |



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Notes to the financial statements (continued)
 30 June 2023

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

| | 2023 (\$) | 2022 (\$) |
|--|------------------|------------------|
| Deferred tax assets | | |
| The balance comprises temporary differences attributable to: | | |
| Property, plant and equipment | 32,870 | 8,310 |
| Superannuation payable | 86,247 | 106,579 |
| Lease | 418,078 | 385,436 |
| Provision for employee entitlements | 589,543 | 540,214 |
| Provision for long-service leave | 323,675 | 231,158 |
| Audit accrual | 21,600 | 20,100 |
| | <u>1,472,013</u> | <u>1,291,797</u> |
| Deferred tax liabilities | | |
| The balance comprises temporary differences attributable to: | | |
| Deferred Revenue from contracts with customers | 1,290,320 | 1,033,006 |
| | <u>1,290,320</u> | <u>1,033,006</u> |
| Total deferred tax assets/(liabilities) | <u>181,693</u> | <u>258,791</u> |

18. Non-current liabilities – Employee benefits obligation

| | 2023 (\$) | 2022 (\$) |
|--|----------------|----------------|
| Employee benefits – long-service leave | <u>666,963</u> | <u>708,288</u> |



FINANCIAL STATEMENTS

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 Notes to the financial statements (continued)
 30 June 2023

19. Contributed equity

| | 2023 Shares | 2022 Shares | 2023 (\$) | 2022 (\$) |
|-----------------|----------------|----------------|--------------|--------------|
| Ordinary shares | | | | |
| Uncalled shares | 448 | 448 | 448 | 448 |

20. Key management personnel disclosures

| | 2023 (\$) | 2022 (\$) |
|---------------------------------------|------------------|-----------|
| Key management personnel compensation | 3,090,028 | 3,251,956 |

The above amount includes compensation paid to Directors and Senior Executives.

21. Remuneration of auditors

Audit and other assurance services

| | 2023 (\$) | 2022 (\$) |
|---|---------------|-----------|
| Audit services | 63,000 | 59,000 |
| Other assurance services | 9,000 | 8,000 |
| Total remuneration for audit and other services | 72,000 | 67,000 |

22. Contingencies

The Company has contingent liabilities on the lease of current premises of \$4,325,447 at 30 June 2023 (2022: \$4,517,914) as a result of the landlord holding a term deposit of the same amount.



FINANCIAL STATEMENTS

Healthdirect Australia Ltd
 ABN 28 118 291 044
 Notes to the financial statements (continued)
 30 June 2023

23. Commitments

a. Non-cancellable operating leases

The Company current premises has been leased since December 2018. Other lease commitments include office equipment. These leases are non-cancellable operating leases expiring within five years.

| | 2023 (\$) | 2022 (\$) |
|--|------------------|-------------------|
| Commitments for minimum lease payments in relation to non-cancellable operating leases are payable as follows: | | |
| Within one year | 2,235,460 | 2,153,397 |
| Later than one year but not later than five years | 5,877,792 | 8,113,252 |
| Later than five years | - | - |
| | <u>8,113,252</u> | <u>10,266,649</u> |

24. Related party transactions

a. Key management personnel

Disclosures relating to key management personnel are set out in Note 20.

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 \$52,106 in this financial year (2022: \$11,466).

25. 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. Shareholding

Subsequent to the year end the State of Queensland as represented by Queensland Health has become a shareholder of the Company.



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healthdirect
Australia

Level 4, 477 Pitt Street,
Haymarket, NSW 2000

P (02) 9263 9000
W about.healthdirect.gov.au
ABN 28 118 291 044