



# Private Health Insurance (Benefit Requirements) Rules 2011

made under item 3A of the table in section 333-20 of the

*Private Health Insurance Act 2007*

## Compilation No. 96

**Compilation date:** 1 November 2024

**Includes amendments:** F2024L01330

Prepared by the Office of Parliamentary Counsel, Canberra

---

## About this compilation

### This compilation

This is a compilation of the *Private Health Insurance (Benefit Requirements) Rules 2011* that shows the text of the law as amended and in force on 1 November 2024 (the **compilation date**).

The notes at the end of this compilation (the **endnotes**) include information about amending laws and the amendment history of provisions of the compiled law.

### Uncommenced amendments

The effect of uncommenced amendments is not shown in the text of the compiled law. Any uncommenced amendments affecting the law are accessible on the Register ([www.legislation.gov.au](http://www.legislation.gov.au)). The details of amendments made up to, but not commenced at, the compilation date are underlined in the endnotes. For more information on any uncommenced amendments, see the Register for the compiled law.

### Application, saving and transitional provisions for provisions and amendments

If the operation of a provision or amendment of the compiled law is affected by an application, saving or transitional provision that is not included in this compilation, details are included in the endnotes.

### Editorial changes

For more information about any editorial changes made in this compilation, see the endnotes.

### Modifications

If the compiled law is modified by another law, the compiled law operates as modified but the modification does not amend the text of the law. Accordingly, this compilation does not show the text of the compiled law as modified. For more information on any modifications, see the Register for the compiled law.

### Self-repealing provisions

If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.

---

## Contents

<b>Part 1</b>	<b>Preliminary</b>	<b>1</b>
1.	Name of Rules	1
3.	Definitions	1
<b>Part 2</b>	<b>Minimum benefit requirements</b>	<b>3</b>
4.	Psychiatric care, rehabilitation and palliative care	3
5.	Other hospital treatments	3
6.	Benefit not to exceed hospital fees or charges	3
<b>Schedule 1—Overnight accommodation: private hospitals in all States/Territories and shared ward accommodation at public hospitals in Victoria and Tasmania</b>		<b>5</b>
<b>Part 1</b>	<b>General</b>	<b>5</b>
1.	Circumstances	5
2.	Minimum benefit	5
<b>Part 2</b>	<b>Type A procedures</b>	<b>8</b>
3.	Interpretation	8
4.	Advanced surgical patient	8
5.	Obstetric patient	10
6.	Surgical patient	10
7.	Psychiatric patient	13
8.	Rehabilitation patient	13
9.	Other patient	13
<b>Part 3</b>	<b>Certified Type B procedures and certified overnight Type C procedures</b>	<b>14</b>
10.	Certified Type B procedures	14
11.	Certified overnight Type C procedures	14
<b>Schedule 2 - Overnight shared ward accommodation for private patients at public hospitals in the Australian Capital Territory, New South Wales, Northern Territory, Queensland, South Australia and Western Australia</b>		<b>15</b>
1.	Circumstances	15
2.	Minimum benefit	15
<b>Schedule 3—Same-day accommodation: hospitals in all States/Territories</b>		<b>17</b>
<b>Part 1</b>	<b>General</b>	<b>17</b>

---

---

1.	Circumstances	17
2.	Minimum benefit	17
<b>Part 2</b>	<b>Type B procedures</b>	<b>19</b>
3.	Interpretation	19
4.	Band 1	19
5.	Non-band specific Type B day procedures	19
6.	Other bands	20
7.	Certified Type C procedure	21
<b>Part 3</b>	<b>Type C procedures</b>	<b>22</b>
8.	Interpretation	22
<b>Schedule 4—Nursing-home type patient accommodation: hospitals in all States/Territories</b>		<b>25</b>
1.	Circumstances	25
2.	Interpretation	25
3.	Application	25
4.	Provision of acute care	26
5.	Ceasing and resuming hospital treatment	26
6.	Minimum benefit	26
Table 1	26	
Table 2	26	
<b>Schedule 5—Second-tier default benefits</b>		<b>27</b>
1.	Interpretation	27
1A.	Categorisation of private hospitals	27
1B.	Internal review of a categorisation determination	29
2.	Circumstances	29
3.	Minimum benefit	29
4.	Transitional	31
<b>Endnotes</b>		<b>32</b>
Endnote 1—About the endnotes		32
Endnote 2—Abbreviation key		33
Endnote 3—Legislation history		34
Endnote 4—Amendment history		41

---

## Part 1 Preliminary

### 1. Name of Rules

These Rules are the *Private Health Insurance (Benefit Requirements) Rules 2011*.

### 3. Definitions

In these Rules:

*Act* means the *Private Health Insurance Act 2007*.

*ACT* means the Australian Capital Territory.

*certified Type B procedure* means a Type B procedure certified in accordance with clause 10 of Schedule 1.

*certified overnight Type C procedure* means a Type C procedure certified in accordance with clause 11 of Schedule 1.

*certified Type C procedure* means a Type C procedure certified in accordance with clause 7 of Schedule 3.

*continuous period of hospitalisation*, for the purpose of counting days of hospital treatment, includes any two periods during which a patient was, or is, receiving hospital treatment as a patient at a hospital, whether or not the same hospital, where the periods are separated from each other by a period of not more than 7 days during which the patient was not receiving hospital treatment as a patient at any hospital.

*diagnostic imaging services table* means the table prescribed under subsection 4AA(1) of the *Health Insurance Act 1973*.

*fee in the MBS* means the Schedule fee as defined in subsection 8(1A) of the *Health Insurance Act 1973*.

*general medical services table* means the table prescribed under subsection 4(1) of the *Health Insurance Act 1973*.

*insurer* means a private health insurer.

*item* has the same meaning as in subsection 3(1) of the *Health Insurance Act 1973*.

*MBS* comprises the:

- (a) general medical services table;
- (b) diagnostic imaging services table; and
- (c) pathology services table.

*negotiated agreement* means an agreement entered into between a hospital and an insurer, that includes provisions to the effect that, except to the extent (if any) provided in the agreement, the hospital agrees to accept payment by the insurer in satisfaction of any amount that would, apart from the agreement, be owed to the hospital, in relation to an episode of hospital treatment, by an insured person under a policy.

**NSW** means the State of New South Wales.

**nursing-home type patient** has the meaning given by Schedule 4.

Note: Item 19 of Schedule 2 of the *Private Health Insurance (Transitional Provisions and Consequential Amendments) Act 2007* also deals with nursing-home type patients.

**outreach service** means a service referred to in subsection 16(1) of the *Private Health Insurance (Transitional Provisions and Consequential Amendments) Act 2007*, unless subsection 16(2) of that Act applies to the particular service.

**participating midwife** has the same meaning as in subsection 3(1) of the *Health Insurance Act 1973*.

**pathology services table** means the table prescribed under subsection 4A(1) of the *Health Insurance Act 1973*.

**policy** means a complying health insurance policy.

**private hospital** means a hospital in respect of which there is in force a statement under subsection 121-5(8) of the Act that the hospital is a private hospital.

Note: Section 15 of the *Private Health Insurance (Transitional Provisions and Consequential Amendments) Act 2007* deals with the status of certain hospitals for which a declaration had been made before the commencement of the Act.

**professional service** has the same meaning as in subsection 3(1) of the *Health Insurance Act 1973*.

**public hospital** means a hospital in respect of which there is in force a statement under subsection 121-5(8) of the Act that the hospital is a public hospital.

Note: Section 15 of the *Private Health Insurance (Transitional Provisions and Consequential Amendments) Act 2007* deals with the status of certain hospitals for which a declaration had been made before the commencement of the Act.

**Type A procedure** means:

- (a) a procedure specified in clauses 3 to 9 of Schedule 1; or
- (b) a certified Type B procedure; or
- (c) a certified overnight Type C procedure.

**Type B procedure** means:

- (a) a procedure specified in clauses 3 to 7 of Schedule 3 other than a certified Type B procedure; or
- (b) a certified Type C procedure.

**Type C procedure** means a procedure specified in clause 8 of Schedule 3 other than a certified Type C procedure.

## Part 2 Minimum benefit requirements

### 4. Psychiatric care, rehabilitation and palliative care

- (1) For item 1 in the table in subsection 72-1(2) of the Act, the minimum benefit for hospital treatment specified in that item is the amount set out, or worked out using the method for working out the minimum benefit for that treatment, in Schedules 1, 2, 3 or 5 where the treatment is provided in the circumstances specified in the particular Schedule relevant to that treatment.

Note: Item 1 in the table in subsection 72-1(2) of the Act requires that each policy that covers hospital treatment must cover any part of hospital treatment that is psychiatric care, rehabilitation or palliative care if the treatment is provided in a hospital and no medicare benefit is payable for that part of the treatment.

- (2) Despite subrule (1), the minimum benefit for the treatment may be reduced by the amount of any co-payment or excess that is required to be paid under the insured person's policy in respect of that treatment.

### 5. Other hospital treatments

- (1) For item 5 in the table in subsection 72-1(2) of the Act, for a policy that covers any type of hospital treatment provided in a hospital, other than treatment referred to in rule 4, the minimum benefit for that treatment is the amount set out, or worked out using the method for working out the minimum benefit, for that treatment in Schedules 1, 2, 3, 4 or 5 where the treatment is provided in the circumstances specified in the particular Schedule relevant to that treatment.
- (2) Despite subsection (1), if a policy covers a type of hospital treatment, other than treatment referred to in rule 4, and the insurer for that policy has a negotiated agreement with the hospital in which the treatment is provided, the minimum benefit for that treatment is the amount specified for the treatment in the negotiated agreement.
- (3) Despite subrules (1) and (2), the minimum benefit for the treatment may be reduced by the amount of any co-payment or excess that is required to be paid under the insured person's policy in respect of that treatment.

### 6. Benefit not to exceed hospital fees or charges

- (1) In respect of treatment referred to in rule 4 and in rule 5 other than hospital treatment for a nursing-home type patient (as set out in Schedule 4), the amount of benefit payable by the insurer in respect of hospital treatment for a person will not exceed the fees or charges incurred in respect of that hospital treatment.

- (2) In respect of treatment referred to in rule 5 of this Part, the amount of benefit payable by the insurer in respect of hospital treatment for a nursing-home type patient (as set out in Schedule 4) will not exceed an amount equal to the fees or charges incurred in respect of that hospital treatment less the amount of the patient contribution in relation to the patient for each day on which the patient was a patient in the hospital.



# Schedule 1—Overnight accommodation: private hospitals in all States/Territories and shared ward accommodation at public hospitals in Victoria and Tasmania

## Part 1 General

### 1. Circumstances

For rules 4 and 5 of Part 2 of these Rules, the circumstances specified for hospital treatment to which this Schedule applies are that the treatment is:

- (a) provided to a patient who is not a nursing-home type patient; and
- (b) provided to a patient:
  - (i) at a private hospital; or
  - (ii) as shared ward accommodation at a public hospital in Victoria or Tasmania; and

Note: The definition of hospital treatment in section 121-5 of the Act includes that the treatment is provided either at the hospital or provided or arranged with the direct involvement of a hospital. This Schedule sets out benefit requirements only for treatment provided at the relevant hospital — see paragraph 121-5(1)(c) of the Act.

- (c) provided for the purpose of permitting the provision to the patient of hospital treatment that is:
  - (i) a Type A procedure; and
  - (ii) for a period that includes part of an overnight stay.

Note: A Type A procedure is defined to include a certified Type B procedure and a certified overnight Type C procedure—see the definitions of those terms in rule 3 of Part 1 of these Rules.

### 2. Minimum benefit

- (1) The minimum benefit for hospital treatment provided in the circumstances specified in this Schedule is the amount set out in the tables in this Schedule for that hospital treatment.
- (2) When counting the days referred to in the tables in this Schedule to determine the minimum benefit in respect of any particular patient, days forming part of a continuous period of hospitalisation are to be counted.

**Table 1—Overnight accommodation for private patients at private hospitals in all States/Territories**

<b>Column 1</b>	<b>Column 2</b>
<b>Class of patient</b>	<b>Minimum benefit payable per night</b>
<b>Advanced surgical patient</b>	
- first 14 days	\$527
- over 14 days	\$367

Schedule 1—Overnight accommodation: private hospitals in all States/Territories and shared ward accommodation at public hospitals in Victoria and Tasmania

**Table 1—Overnight accommodation for private patients at private hospitals in all States/Territories**

<b>Column 1</b>	<b>Column 2</b>
<b>Class of patient</b>	<b>Minimum benefit payable per night</b>
<b>Surgical patient or obstetric patient</b>	
- first 14 days	\$489
- over 14 days	\$367
<b>Psychiatric patient</b>	
- first 42 days	\$489
- 43 – 65 days	\$425
- over 65 days	\$367
<b>Rehabilitation patient</b>	
- first 49 days	\$489
- 50 - 65 days	\$425
- over 65 days	\$367
<b>Other patients</b>	
- first 14 days	\$425
- over 14 days	\$367

**Table 2—Victoria—overnight shared ward accommodation for private patients at public hospitals**

<b>Column 1</b>	<b>Column 2</b>
<b>Class of patient</b>	<b>Minimum benefit payable per night</b>
<b>Advanced surgical patient</b>	
- first 14 days	\$527
- over 14 days	\$367
<b>Surgical patient or obstetric patient</b>	
- first 14 days	\$489
- over 14 days	\$367
<b>Psychiatric patient</b>	
- first 42 days	\$489
- 43 – 65 days	\$425
- over 65 days	\$367
<b>Rehabilitation patient</b>	
- first 49 days	\$489
- 50 - 65 days	\$425
- over 65 days	\$367
<b>Other patients</b>	
- first 14 days	\$425
- over 14 days	\$367

**Table 3-Tasmania-overnight shared ward accommodation for private patients at public hospitals**

<b>Column 1</b>	<b>Column 2</b>
<b>Class of patient</b>	<b>Minimum benefit payable per night</b>
<b>Advanced surgical patient</b>	
- first 14 days	\$527
- over 14 days	\$367
<b>Surgical patient or obstetric patient</b>	
- first 14 days	\$489
- over 14 days	\$367
<b>Psychiatric patient</b>	
- first 42 days	\$489
- 43 – 65 days	\$425
- over 65 days	\$367
<b>Rehabilitation patient</b>	
- first 49 days	\$489
- 50 - 65 days	\$425
- over 65 days	\$367
<b>Other patients</b>	
- first 14 days	\$425
- over 14 days	\$367

## Part 2 Type A procedures

### 3. Interpretation

A Type A procedure is a procedure specified in this Part provided to a patient in one of the categories of patients in clauses 4 to 9.

### 4. Advanced surgical patient

- (1) In this Schedule, *advanced surgical patient* has the meaning given by this clause.
- (2) A patient is taken to be an advanced surgical patient upon admission to a hospital:
  - (a) from and including the day before a professional service of the type identified by the item number in the MBS which is specified in subclause (3) is rendered to the patient at that hospital, unless the particular advanced surgical procedure to be rendered is recognised as requiring a longer pre-operative period; or
  - (b) if a longer pre-operative period than that referred to in paragraph (a) is required, from and including the day of admission of the patient for the purpose of providing the professional service of the type mentioned in paragraph (a); or
  - (c) if the advanced surgery is rendered to a patient during an admission, from the day the advanced surgery involving a professional service of the type mentioned in paragraph (a) is performed (not the day before).

Note: The effect of the reference in subclause (1)(a) to a professional service, being a service for which a Medicare benefit is payable, is that a professional service must have been provided to the patient for the minimum benefit to apply.

- (3) The MBS item numbers for this clause are those set out in the following table, but only where those items have a fee in the MBS greater than \$971.65:

---

#### **Type A procedures: Advanced surgical patient – list of MBS items**

---

30175, 30176, 30177, 30179, 30250, 30251, 30255, 30275, 30294, 30296, 30297, 30315, 30317, 30318, 30320, 30323, 30324, 30336, 30382, 30384, 30388, 30396, 30415, 30417, 30418, 30421, 30425, 30427, 30428, 30430, 30448, 30449, 30454, 30455, 30457, 30458, 30460, 30461, 30463, 30464, 30469, 30472, 30517, 30518, 30521, 30526, 30529, 30532, 30533, 30560, 30565, 30577, 30583, 30584, 30589, 30590, 30593, 30594, 30596, 30599, 30601, 30606, 30608, 30619, 30640, 30655, 30657, 30680, 30682, 30684, 30686, 30725, 30730, 30732, 30750, 30751, 30752, 30753, 30754, 30755, 30756, 30762, 30771, 30780, 30792, 30810, 31002, 31005, 31409, 31412, 31429, 31432, 31435, 31438, 31466, 31468, 31472, 31514, 31516, 31520, 31522, 31523, 31526, 31528, 31529, 31572, 31581, 31584, 32000, 32003, 32004, 32005, 32006, 32009, 32012, 32015, 32018, 32024, 32025, 32026, 32028, 32030, 32033, 32036, 32039, 32042, 32047, 32051, 32054, 32060, 32063, 32069, 32106, 32108, 32117, 32118, 32221, 32232, 32514, 32517, 32700, 32703, 32708, 32710, 32711, 32712, 32715, 32718, 32721, 32724, 32730, 32733, 32739, 32742, 32745, 32748, 32751, 32754, 32763, 33050, 33055, 33075, 33080, 33100, 33103, 33109, 33112, 33115, 33116, 33118, 33119, 33121, 33124, 33127, 33130, 33133, 33136, 33139, 33142, 33145, 33148, 33151,

---

---

**Type A procedures: Advanced surgical patient – list of MBS items**

---

33154, 33157, 33160, 33163, 33166, 33169, 33172, 33175, 33178, 33181, 33500, 33506, 33509, 33512, 33515, 33518, 33521, 33524, 33527, 33530, 33533, 33536, 33539, 33542, 33800, 33803, 33811, 33812, 33815, 33818, 33821, 33824, 33827, 33830, 33833, 33836, 33839, 33842, 34112, 34115, 34118, 34121, 34124, 34127, 34136, 34139, 34142, 34148, 34151, 34154, 34157, 34160, 34163, 34166, 34169, 34172, 34175, 34509, 34512, 34518, 34533, 34803, 34806, 34809, 34812, 34815, 34818, 34821, 34833, 35003, 35006, 35009, 35307, 35312, 35315, 35320, 35412, 35414, 35548, 35551, 35552, 35561, 35562, 35585, 35591, 35592, 35596, 35597, 35632, 35641, 35661, 35667, 35668, 35669, 35671, 35697, 35717, 35720, 35721, 35723, 35724, 35753, 35754, 35756, 36503, 36506, 36516, 36519, 36522, 36525, 36528, 36529, 36531, 36532, 36533, 36543, 36564, 36567, 36570, 36573, 36576, 36588, 36591, 36594, 36597, 36600, 36603, 36606, 36610, 36611, 36645, 36656, 37014, 37015, 37016, 37018, 37019, 37021, 37029, 37040, 37042, 37045, 37047, 37048, 37053, 37200, 37203, 37207, 37209, 37210, 37211, 37213, 37214, 37220, 37245, 37309, 37338, 37340, 37341, 37343, 37344, 37372, 37375, 37384, 37390, 37405, 37411, 37423, 37426, 37432, 37607, 37610, 37822, 37824, 37825, 37831, 37842, 37848, 37851, 38212, 38244, 38247, 38248, 38249, 38251, 38252, 38270, 38272, 38273, 38276, 38287, 38290, 38293, 38307, 38308, 38309, 38310, 38311, 38313, 38314, 38316, 38317, 38319, 38320, 38322, 38323, 38358, 38368, 38375, 38429, 38431, 38461, 38463, 38467, 38471, 38474, 38477, 38484, 38487, 38493, 38495, 38499, 38502, 38508, 38509, 38512, 38514, 38515, 38516, 38517, 38518, 38522, 38550, 38553, 38554, 38555, 38556, 38557, 38558, 38568, 38571, 38600, 38615, 38618, 38624, 38653, 38670, 38673, 38677, 38680, 38700, 38703, 38706, 38709, 38715, 38718, 38721, 38724, 38727, 38730, 38733, 38736, 38739, 38742, 38745, 38748, 38751, 38754, 38757, 38760, 38764, 38766, 38816, 38817, 38818, 38820, 38821, 38822, 38823, 38824, 38831, 38832, 38833, 38834, 38838, 38840, 38841, 38842, 38846, 38848, 38852, 38853, 38857, 38858, 38859, 38864, 39109, 39113, 39124, 39139, 39315, 39503, 39604, 39610, 39612, 39615, 39638, 39639, 39641, 39651, 39654, 39656, 39700, 39703, 39710, 39712, 39715, 39718, 39720, 39801, 39803, 39815, 39818, 39821, 39900, 39903, 40004, 40012, 40104, 40106, 40109, 40112, 40119, 40600, 40700, 40703, 40706, 40709, 40712, 40801, 40803, 40804, 40805, 40806, 40850, 40851, 40860, 41518, 41521, 41530, 41533, 41536, 41539, 41542, 41551, 41554, 41557, 41560, 41563, 41564, 41566, 41569, 41572, 41575, 41576, 41578, 41579, 41581, 41584, 41587, 41590, 41593, 41596, 41599, 41608, 41614, 41615, 41617, 41618, 41623, 41635, 41638, 41703, 41705, 41728, 41734, 41785, 41834, 41837, 41840, 41843, 41879, 41887, 41888, 41890, 42521, 42539, 42543, 42545, 42557, 42569, 42626, 42653, 42656, 42662, 42672, 42705, 42710, 42716, 42725, 42731, 42746, 42749, 42752, 42767, 42773, 42776, 42779, 42801, 42842, 42851, 42860, 43801, 43804, 43807, 43810, 43813, 43816, 43819, 43822, 43825, 43828, 43831, 43834, 43837, 43838, 43840, 43843, 43846, 43852, 43855, 43861, 43864, 43870, 43873, 43876, 43879, 43882, 43900, 43903, 43906, 43909, 43912, 43915, 43936, 43945, 43951, 43954, 43957, 43963, 43966, 43969, 43972, 43975, 43978, 43984, 43987, 43990, 43993, 43996, 44334, 44373, 45006, 45036, 45060, 45061, 45062, 45500, 45501, 45502, 45503, 45504, 45505, 45507, 45520, 45523, 45527, 45528, 45529, 45530, 45531, 45535, 45538, 45539, 45540, 45541, 45558, 45561, 45562, 45563, 45564, 45565, 45566, 45567, 45571, 45587, 45588, 45596, 45597, 45599, 45624, 45641, 45644, 45646, 45660, 45661, 45686, 45717, 45718, 45767, 45773, 45776, 45779, 45782, 45785, 45788, 45791, 45871, 45873, 45874, 46060, 46062, 46064, 46066, 46068, 46070, 46072, 46080, 46082, 46084, 46086, 46088, 46090, 46104, 46105, 46106, 46107, 46108, 46109, 46110, 46111, 46112, 46116, 46117, 46118, 46119, 46120, 46121, 46122, 46123, 46124, 46128, 46129, 46133, 46134, 46135, 46136, 46150, 46151, 46152, 46153, 46154, 46155, 46156, 46157, 46158, 46159, 46160, 46161, 46170, 46171, 46172, 46173, 46174, 46175, 46176, 46177, 46178, 46179, 46180, 46181, 46182, 46183, 46184, 46185, 46315, 46318, 46321, 46324, 46325, 46380, 46393, 46394, 46395, 46477, 46504, 46507, 47486, 47489, 47491, 47501, 47511, 47519, 47531, 47534, 47558, 47566, 47588, 47591, 47956, 47983, 47984, 48254, 48421, 48422, 48426, 48427, 48433, 48446, 48448, 48450, 48452, 48454, 48456, 48512, 48918, 48919, 48921, 48924, 48939, 48942, 48951, 48954, 48958, 48959, 48960, 49106, 49115, 49116, 49117, 49210, 49230, 49306, 49318, 49319, 49321, 49372, 49374, 49376, 49378, 49380, 49382, 49384, 49386, 49388, 49390, 49392, 49394, 49396, 49398, 49512, 49516, 49517, 49518, 49519, 49521,

---

---

**Type A procedures: Advanced surgical patient – list of MBS items**

---

49524, 49525, 49527, 49530, 49533, 49536, 49542, 49544, 49548, 49551, 49554, 49564, 49565, 49592, 49594, 49712, 49715, 49716, 49717, 49740, 49742, 49744, 49763, 49764, 49765, 49766, 49767, 49768, 49769, 49770, 49776, 49778, 49779, 49780, 49781, 49784, 49785, 49786, 49787, 49788, 49789, 49790, 49797, 49798, 49814, 49815, 49836, 49838, 50212, 50215, 50218, 50221, 50224, 50233, 50236, 50239, 50245, 50300, 50303, 50306, 50321, 50324, 50336, 50351, 50354, 50372, 50378, 50384, 50394, 50395, 50399, 50411, 50414, 50417, 50420, 50423, 50450, 50451, 50455, 50456, 50460, 50461, 50465, 50466, 50470, 50471, 50475, 50476, 50592, 50604, 50608, 50612, 50620, 50624, 50628, 50632, 50636, 50640, 50644, 51011, 51012, 51013, 51014, 51015, 51021, 51022, 51023, 51024, 51025, 51026, 51031, 51032, 51033, 51034, 51035, 51036, 51041, 51042, 51043, 51044, 51045, 51051, 51052, 51053, 51054, 51055, 51056, 51057, 51058, 51059, 51061, 51062, 51063, 51064, 51065, 51066, 51071, 51072, 51073, 51102, 51103, 51130, 51131, 51160, 51165, 51170, 51171, 52123, 52126, 52129, 52158, 52337, 52342, 52345, 52348, 52351, 52354, 52357, 52360, 52363, 52366, 52369, 52372, 52375, 52379, 52380, 52382, 52430, 52446, 52821, 53209, 53212, 53221, 53224, 53227, 53230, 53233

---

## 5. Obstetric patient

- (1) In this Schedule, *obstetric patient* has the meaning given by this clause.
- (2) A patient shall be taken to be an obstetric patient during an admission to a hospital from and including:
  - (a) whichever is the earlier of:
    - (i) the day on which the patient commences labour leading to delivery in that hospital; or
    - (ii) the day on which a professional service with the item number 16406, 16515, 16518, 16519, 16522 (excluding caesarean), 16527, 16528, 16530, 16531, 16533 or 16534 is rendered to the patient in that hospital; or
  - (b) if the circumstances in paragraph (a) do not apply, the day before a professional service with the item number 16520 and 16522 (including caesarean) is rendered to the patient at that hospital, unless the particular obstetric procedure to be rendered is recognised as requiring a longer pre-operative period; or
  - (c) the day on which a professional service with the item number 82118, 82120, 82123, 82125 or 82127 is rendered to a patient by a participating midwife.
- (3) In this clause, the item numbers specified are the item numbers in the general medical services table.

## 6. Surgical patient

- (1) In this Schedule, *surgical patient* has the meaning given by this clause.
- (2) A patient shall be taken to be a surgical patient upon admission to a hospital from and including:
  - (a) the day before a professional service of the type identified by the item number in the MBS which is specified in subclause (3), is rendered to the patient at that hospital, unless the particular

- surgical procedure to be rendered is recognised as requiring a longer pre-operative period; or
- (b) if a longer pre-operative period is required, from and including the day of admission of the patient for the purpose of providing the professional service of the type mentioned in paragraph (a); or
  - (c) if the surgery is rendered to a patient during an admission, from the day the surgery involving a professional service of the type mentioned in paragraph (a) is performed (not the day before).

Note: The effect of the reference in subclause (1)(a) to a professional service, being the service for which a Medicare benefit is payable, is that a professional service must have been provided to the patient for the minimum benefit to apply.

- (3) The MBS item numbers for this clause are those set out in the following table, but only where those items have a fee in the MBS within the range of \$289.35 to \$971.65:

---

**Type A procedures: Surgical patient – list of MBS items**

---

13212, 13218, 13241, 13251, 13700, 13834, 13837, 14234, 14237, 16567, 16570, 16571, 16573, 30016, 30023, 30024, 30068, 30166, 30169, 30190, 30225, 30229, 30235, 30241, 30244, 30246, 30247, 30253, 30256, 30272, 30286, 30287, 30289, 30293, 30299, 30305, 30306, 30310, 30311, 30314, 30326, 30330, 30332, 30385, 30387, 30392, 30399, 30400, 30408, 30414, 30416, 30419, 30422, 30431, 30433, 30440, 30443, 30445, 30450, 30451, 30452, 30475, 30479, 30481, 30484, 30485, 30490, 30491, 30492, 30494, 30495, 30515, 30520, 30530, 30559, 30562, 30563, 30600, 30611, 30615, 30618, 30621, 30622, 30623, 30626, 30629, 30635, 30637, 30639, 30641, 30642, 30643, 30644, 30645, 30646, 30648, 30651, 30652, 30662, 30664, 30665, 30672, 30676, 30688, 30690, 30692, 30694, 30720, 30721, 30722, 30723, 30724, 30731, 30760, 30761, 30763, 30770, 30790, 30791, 30800, 31000, 31001, 31003, 31004, 31245, 31250, 31350, 31355, 31400, 31403, 31406, 31423, 31426, 31454, 31460, 31462, 31500, 31503, 31506, 31509, 31512, 31513, 31515, 31519, 31525, 31554, 31569, 31575, 31578, 31585, 32021, 32023, 32045, 32046, 32057, 32066, 32094, 32096, 32105, 32123, 32129, 32131, 32139, 32150, 32159, 32162, 32165, 32183, 32186, 32213, 32216, 32231, 32233, 32237, 32504, 32507, 32508, 32511, 32736, 32757, 32760, 32766, 32769, 33070, 33545, 33548, 33551, 33554, 33806, 33810, 33845, 33848, 34100, 34103, 34106, 34109, 34130, 34133, 34145, 34500, 34503, 34515, 34521, 34524, 34527, 34528, 34529, 34534, 34538, 34800, 34824, 34827, 34830, 35000, 35012, 35100, 35202, 35300, 35303, 35306, 35309, 35317, 35319, 35321, 35324, 35327, 35330, 35331, 35360, 35361, 35362, 35363, 35401, 35404, 35406, 35408, 35410, 35508, 35533, 35534, 35536, 35560, 35564, 35565, 35566, 35568, 35570, 35571, 35573, 35577, 35578, 35581, 35582, 35595, 35599, 35610, 35612, 35616, 35622, 35623, 35631, 35635, 35636, 35637, 35645, 35649, 35653, 35657, 35658, 35673, 35680, 35694, 35700, 35726, 35750, 35751, 35759, 36502, 36508, 36509, 36530, 36537, 36546, 36549, 36552, 36558, 36579, 36585, 36604, 36607, 36608, 36609, 36612, 36615, 36618, 36621, 36624, 36627, 36633, 36636, 36639, 36649, 36652, 36654, 36663, 36664, 36666, 36803, 36806, 36809, 36811, 36818, 36821, 36822, 36823, 36833, 36840, 36842, 36845, 36854, 36863, 37000, 37004, 37008, 37020, 37023, 37026, 37038, 37039, 37044, 37046, 37050, 37201, 37208, 37215, 37221, 37224, 37227, 37306, 37318, 37327, 37330, 37333, 37336, 37342, 37345, 37348, 37351, 37354, 37381, 37387, 37396, 37402, 37408, 37417, 37418, 37429, 37438, 37601, 37604, 37605, 37606, 37613, 37616, 37619, 37800, 37801, 37803, 37804, 37806, 37807, 37809, 37810, 37812, 37813, 37818, 37819, 37821, 37827, 37828, 37830, 37833, 37834, 37836, 37839, 37845, 37854, 38200, 38203, 38206, 38209, 38213, 38256, 38274, 38275, 38325, 38350, 38353, 38356, 38362, 38365, 38372, 38373, 38374, 38416, 38417, 38422, 38423, 38425, 38426, 38472, 38485, 38523, 38609, 38612, 38621, 38627, 38637, 38830, 38837, 38839, 38845, 38847, 38849, 38850, 38851, 39015, 39018, 39110, 39111, 39116, 39117, 39118, 39119, 39121, 39125, 39126, 39127, 39128, 39129, 39130, 39134,

---

---

**Type A procedures: Surgical patient – list of MBS items**

---

39137, 39138, 39140, 39300, 39303, 39306, 39307, 39309, 39312, 39318, 39319, 39321, 39323, 39324, 39327, 39328, 39330, 39336, 39339, 39342, 39906, 40701, 40704, 40705, 40708, 40852, 40854, 40856, 40858, 40905, 41512, 41515, 41524, 41527, 41545, 41548, 41603, 41611, 41620, 41629, 41671, 41689, 41692, 41707, 41710, 41713, 41725, 41737, 41743, 41746, 41749, 41752, 41770, 41776, 41779, 41786, 41789, 41793, 41813, 41825, 41831, 41867, 41873, 41876, 41880, 41881, 41885, 41910, 42505, 42506, 42509, 42510, 42512, 42515, 42518, 42527, 42530, 42533, 42536, 42542, 42548, 42551, 42554, 42563, 42574, 42584, 42590, 42596, 42599, 42602, 42605, 42608, 42623, 42629, 42635, 42638, 42641, 42665, 42680, 42686, 42692, 42695, 42698, 42701, 42702, 42703, 42704, 42707, 42713, 42719, 42734, 42740, 42743, 42758, 42761, 42764, 42770, 42782, 42785, 42788, 42791, 42802, 42805, 42806, 42807, 42808, 42809, 42810, 42815, 42818, 42833, 42836, 42839, 42848, 42854, 42857, 42863, 42866, 42869, 43021, 43022, 43521, 43527, 43530, 43533, 43805, 43832, 43835, 43841, 43849, 43858, 43867, 43930, 43933, 43939, 43960, 43981, 43999, 44101, 44102, 44108, 44111, 44114, 44130, 44133, 44325, 44328, 44331, 44346, 44350, 44354, 44359, 44361, 44364, 44367, 44370, 45000, 45003, 45009, 45012, 45015, 45018, 45019, 45026, 45035, 45045, 45048, 45051, 45054, 45200, 45201, 45202, 45203, 45206, 45207, 45209, 45221, 45227, 45233, 45440, 45443, 45451, 45496, 45497, 45512, 45522, 45524, 45532, 45534, 45537, 45542, 45545, 45547, 45548, 45551, 45553, 45554, 45556, 45560, 45568, 45572, 45575, 45578, 45581, 45584, 45585, 45590, 45592, 45594, 45602, 45605, 45608, 45609, 45611, 45614, 45620, 45623, 45626, 45627, 45629, 45632, 45635, 45652, 45653, 45656, 45658, 45659, 45668, 45669, 45671, 45675, 45676, 45677, 45680, 45683, 45689, 45692, 45695, 45698, 45701, 45704, 45707, 45710, 45713, 45714, 45716, 45761, 45794, 45809, 45811, 45813, 45815, 45825, 45827, 45831, 45837, 45841, 45845, 45849, 45865, 45888, 45891, 45939, 46050, 46052, 46092, 46094, 46103, 46115, 46127, 46132, 46142, 46143, 46300, 46303, 46308, 46309, 46312, 46322, 46330, 46333, 46335, 46336, 46339, 46340, 46341, 46342, 46345, 46351, 46354, 46357, 46360, 46367, 46372, 46375, 46378, 46379, 46381, 46384, 46387, 46390, 46399, 46401, 46408, 46411, 46414, 46417, 46423, 46426, 46432, 46434, 46441, 46442, 46444, 46453, 46468, 46471, 46474, 46480, 46483, 46489, 46492, 46493, 46500, 46501, 46502, 46503, 46510, 46522, 47007, 47012, 47021, 47027, 47033, 47045, 47047, 47049, 47052, 47053, 47054, 47063, 47066, 47310, 47313, 47316, 47319, 47357, 47364, 47370, 47373, 47381, 47384, 47385, 47386, 47387, 47390, 47393, 47399, 47402, 47408, 47417, 47420, 47426, 47429, 47432, 47435, 47438, 47441, 47447, 47450, 47451, 47453, 47456, 47459, 47465, 47468, 47480, 47483, 47495, 47498, 47514, 47516, 47528, 47537, 47546, 47549, 47552, 47555, 47559, 47561, 47565, 47568, 47570, 47573, 47577, 47582, 47585, 47592, 47593, 47597, 47600, 47603, 47612, 47615, 47618, 47621, 47624, 47630, 47648, 47657, 47741, 47753, 47765, 47766, 47786, 47789, 47790, 47791, 47792, 47795, 47953, 47954, 47955, 47967, 47975, 47982, 48245, 48248, 48251, 48257, 48400, 48403, 48406, 48409, 48412, 48415, 48419, 48420, 48423, 48424, 48430, 48435, 48442, 48444, 48507, 48900, 48903, 48906, 48909, 48915, 48925, 48927, 48932, 48943, 48944, 48945, 48948, 48952, 48953, 48972, 48980, 48983, 48986, 49100, 49104, 49105, 49109, 49112, 49113, 49114, 49118, 49121, 49124, 49127, 49200, 49203, 49206, 49209, 49213, 49215, 49218, 49219, 49220, 49221, 49224, 49227, 49233, 49236, 49239, 49300, 49303, 49309, 49315, 49360, 49363, 49366, 49500, 49503, 49506, 49509, 49515, 49534, 49569, 49570, 49572, 49574, 49576, 49578, 49580, 49582, 49584, 49586, 49590, 49596, 49703, 49706, 49709, 49718, 49724, 49727, 49728, 49730, 49732, 49734, 49736, 49738, 49760, 49761, 49762, 49771, 49772, 49773, 49774, 49775, 49777, 49782, 49783, 49791, 49792, 49793, 49794, 49795, 49796, 49812, 49818, 49821, 49824, 49827, 49830, 49833, 49837, 49839, 49845, 49854, 49857, 49860, 49866, 50107, 50112, 50118, 50130, 50201, 50203, 50206, 50209, 50242, 50309, 50312, 50333, 50335, 50339, 50345, 50357, 50360, 50369, 50375, 50381, 50393, 50396, 50426, 50428, 50508, 50512, 50524, 50528, 50532, 50536, 50540, 50544, 50548, 50552, 50556, 50560, 50564, 50568, 50572, 50576, 50580, 50584, 50588, 50596, 50600, 50616, 50654, 50950, 50952, 51020, 51110, 51111, 51114, 51115, 51140, 51141, 51145, 51150, 51900, 51904, 51906, 52018, 52035, 52039, 52048, 52051, 52054, 52059, 52063, 52066, 52078, 52090, 52092, 52094, 52095, 52105, 52108, 52111, 52114, 52117, 52120, 52122, 52130, 52131, 52138, 52141, 52144, 52147, 52148, 52182, 52184, 52186, 52300, 52303, 52306, 52312, 52315, 52321, 52324,

---



---

**Type A procedures: Surgical patient – list of MBS items**

---

52330, 52333, 52336, 52339, 52378, 52424, 52440, 52442, 52444, 52450, 52452, 52456, 52458, 52460, 52480, 52482, 52484, 52600, 52603, 52609, 52612, 52615, 52618, 52621, 52624, 52626, 52627, 52633, 52800, 52803, 52806, 52809, 52812, 52815, 52818, 52824, 52828, 52830, 52832, 53006, 53009, 53015, 53016, 53017, 53019, 53215, 53218, 53220, 53225, 53226, 53236, 53239, 53242, 53406, 53409, 53412, 53413, 53414, 53415, 53416, 53418, 53419, 53422, 53423, 53424, 53425, 53427, 53429, 53453, 53455, 53460

---

**7. Psychiatric patient**

In this Schedule, a *psychiatric patient* is a patient in a hospital who is admitted for the purposes of undertaking a specific psychiatric treatment program that is deemed by the insurer to be relevant and appropriate for the treatment of the patient's disease, injury or condition.

Note: If a patient is receiving psychiatric treatment that is not under a specific psychiatric treatment program, the patient is taken to be in the category of 'other patient'.

**8. Rehabilitation patient**

In this Schedule, a *rehabilitation patient* is a patient in a hospital who is admitted for the purposes of undertaking a specific rehabilitation treatment program that is deemed by the insurer to be relevant and appropriate for the treatment of the patient's disease, injury or condition.

Note: If a patient is receiving rehabilitation treatment that is not under a specific rehabilitation treatment program, the patient is taken to be in the category of 'other patient'.

**9. Other patient**

- (1) In this Schedule, *other patient* is deemed to be a patient at a hospital who is receiving any treatment that involves part of an overnight stay, but who is not:
- (a) an advanced surgical patient;
  - (b) a surgical patient;
  - (c) an obstetric patient;
  - (d) a psychiatric patient; or
  - (e) a rehabilitation patient.

Note: A patient receiving hospital treatment that is palliative care as described in item 1 of the table in subsection 72-1(2) of the Act is deemed to be in the category of 'other patient'.

## **Part 3 Certified Type B procedures and certified overnight Type C procedures**

### **10. Certified Type B procedures**

- (1) Minimum benefits for overnight accommodation are payable for patients receiving a Type B procedure only if certification under subclause (2) is provided.
- (2) Certification must be provided as follows:
  - (a) the practitioner providing the Type B procedure; or
  - (b) a professional employed by a hospital who is involved in the provision of the procedure provided by that hospital,  
must certify in writing that:
    - (c) because of the medical condition of the patient specified in the certificate; or
    - (d) because of the special circumstances specified in the certificate,

it would be contrary to accepted medical practice to provide the procedure to the patient unless the patient is given hospital treatment at the hospital for a period that includes part of an overnight stay.

### **11. Certified overnight Type C procedures**

- (1) Minimum benefits for overnight accommodation are payable for patients receiving a certified Type C procedure only if:
  - (a) certification has first been provided for the Type C procedure in accordance with clause 7 of Schedule 3; and
  - (b) certification under subclause (2) is also provided.
- (2) Certification must be provided as follows the practitioner providing the certified Type C procedure must certify in writing that:
  - (a) because of the medical condition of the patient specified in the certificate; or
  - (b) because of the special circumstances specified in the certificate,

it would be contrary to accepted medical practice to provide the procedure to the patient unless the patient is given hospital treatment at the hospital for a period that includes part of an overnight stay.

## **Schedule 2 - Overnight shared ward accommodation for private patients at public hospitals in the Australian Capital Territory, New South Wales, Northern Territory, Queensland, South Australia and Western Australia**

### **1. Circumstances**

For rules 4 and 5 of Part 2 of these Rules, the circumstances specified for hospital treatment to which this Schedule applies are that the treatment is provided:

- (a) to a patient who is not a nursing-home type patient; and
- (b) as shared ward accommodation at a public hospital in the ACT, NSW, Northern Territory, Queensland, South Australia or Western Australia; and

Note: The definition of hospital treatment in section 121-5 of the Act includes that the treatment is provided either at the hospital or provided or arranged with the direct involvement of a hospital. This Schedule sets out benefit requirements only for treatment provided at the relevant hospital — see paragraph 121-5(1)(c) of the Act.

- (c) for the purpose of permitting the provision to the patient of hospital treatment that is:
  - (i) a Type A procedure; and
  - (ii) for a period that includes part of an overnight stay.

Note: A Type A procedure is defined to include a certified Type B procedure and a certified overnight Type C procedure—see the definitions of those terms in rule 3 of Part 1 of these Rules.

### **2. Minimum benefit**

The minimum benefit for hospital treatment provided in the circumstances described in this Schedule is the amount set out in the table in this Schedule for that hospital treatment.

Schedule 2 - Overnight shared ward accommodation for private patients at public hospitals in the Australian Capital Territory, New South Wales, Northern Territory, Queensland, South Australia and Western Australia

**Table 1-Overnight shared ward accommodation for private patients at public hospitals in the Australian Capital Territory, New South Wales, Northern Territory, Queensland, South Australia and Western Australia**

<b>Column 1</b>	<b>Column 2</b>
<b>State/Territory</b>	<b>Minimum benefit payable per night</b>
Australian Capital Territory	\$436
New South Wales	\$436
Northern Territory	\$436
Queensland	\$447
South Australia	\$436
Western Australia	\$436

# Schedule 3—Same-day accommodation: hospitals in all States/Territories

## Part 1 General

### 1. Circumstances

For rules 4 and 5 of Part 2 of these Rules, the circumstances specified for hospital treatment to which this Schedule applies are that the treatment is provided for the purpose of permitting the provision to the patient of hospital treatment that:

- (a) is a Type B procedure; and
- (b) is provided to a patient at a hospital; and
- (c) does not include part of an overnight stay at a hospital.

Note 1: A Type B procedure includes a certified Type C procedure—see the definitions of those terms in rule 3 of Part 1 of these Rules.

Note 2: The definition of hospital treatment in section 121-5 of the Act includes that the treatment is provided either at the hospital or provided or arranged with the direct involvement of a hospital. This Schedule sets out benefit requirements only for treatment provided at the relevant hospital — see paragraph 121-5 (1) (c) of the Act.

### 2. Minimum benefit

- (1) The minimum benefit for hospital treatment provided in the circumstances specified in this Schedule is the amount set out in Table 1 or 2 in this clause for that hospital treatment.
- (2) The references to Bands in the tables are references as follows:
  - (a) Band 1 means Band 1 treatment;
  - (b) Band 2 means Band 2 treatment;
  - (c) Band 3 means Band 3 treatment;
  - (d) Band 4 means Band 4 treatment,
 as those bands are described in Part 2 of this Schedule.

**Table 1—Same day accommodation for private patients at public hospitals in all States/Territories**

Column 1	Column 2	Column 3	Column 4	Column 5
Public hospitals	Band 1	Band 2	Band 3	Band 4
New South Wales	\$316	\$352	\$389	\$436
Australian Capital Territory	\$316	\$352	\$389	\$436
Northern Territory	\$316	\$363	\$418	\$436
Queensland	\$322	\$365	\$399	\$447
South Australia	\$316	\$363	\$398	\$436
Tasmania	\$307	\$366	\$422	\$489
Victoria	\$311	\$367	\$426	\$489
Western Australia	\$359	\$359	\$359	\$359

**Table 2- Same day accommodation for private patients at private hospitals in all States/Territories**

<b>Column 1</b>	<b>Column 2</b>	<b>Column 3</b>	<b>Column 4</b>	<b>Column 5</b>
<b>Private hospitals</b>	<b>Band 1</b>	<b>Band 2</b>	<b>Band 3</b>	<b>Band 4</b>
All States and Territories	\$274	\$344	\$418	\$489

## Part 2 Type B procedures

### 3. Interpretation

A Type B procedure is a procedure specified as a Band 1, 2, 3 and 4 as described in this Part.

Note: These procedures normally require hospital treatment that does not include part of an overnight stay.

### 4. Band 1

- (1) Hospital treatment that involves a professional service of the type identified by the MBS item number specified in the following table in this clause is Band 1 treatment for the purposes of the tables in clause 2 of this Schedule:

---

**Type B day procedures: Band 1 – list of MBS items**

---

11801, 13100, 13103, 13706, 13950, 30210, 30475, 30679, 32075, 32084, 32087, 32095, 32215, 35500, 36665, 39000, 41674, 42575, 42741, 55118, 55600, 55603

---

- (2) Other hospital treatment requiring day admission to a hospital that is not Band 2, 3 or 4 treatment is Band 1 treatment for the purposes of the tables in clause 2 of this Schedule.

### 5. Non-band specific Type B day procedures

- (1) Hospital treatment that involves a professional service of the type identified by the MBS item number specified in the following table in this clause is a non-band specific Type B day procedure:

---

Non-band specific Type B day procedures – list of MBS items

---

111, 117, 120, 11919, 13110, 13212, 13215, 13241, 13318, 13400, 13750, 13755, 13757, 13761, 13762, 13815, 14218, 14224, 14247, 14249, 16512, 16603, 16618, 18216, 18230, 18242, 18276, 18280, 18284, 18286, 18290, 18294, 18296, 18298, 18375, 18379, 30042, 30045, 30055, 30081, 30084, 30087, 30094, 30099, 30103, 30104, 30105, 30107, 30187, 30189, 30190, 30223, 30225, 30257, 30262, 30269, 30281, 30283, 30311, 30390, 30409, 30473, 30478, 30484, 30627, 30630, 30658, 30661, 30687, 30820, 31225, 31227, 31344, 31345, 31346, 31350, 31355, 31356, 31358, 31359, 31360, 31361, 31363, 31364, 31367, 31369, 31371, 31372, 31373, 31374, 31375, 31376, 31377, 31378, 31379, 31380, 31381, 31382, 31383, 31386, 31387, 31388, 31456, 31458, 31530, 31551, 31557, 31560, 31563, 31566, 31590, 32094, 32147, 32150, 32156, 32171, 32218, 32222, 32223, 32224, 32225, 32226, 32227, 32228, 32229, 32230, 32235, 32236, 32237, 32504, 34109, 34130, 34500, 34503, 34506, 34524, 34539, 35324, 35507, 35508, 35509, 35513, 35517, 35527, 35536, 35539, 35545, 35548, 35557, 35560, 35569, 35609, 35612, 35616, 35622, 35623, 35630, 35633, 35635, 35636, 35637, 35640, 35641, 35643, 35644, 35645, 35647, 35648, 35694, 35697, 35730, 36504, 36505, 36507, 36561, 36650, 36667, 36668, 36812, 36815, 36818, 36821, 36822, 36823, 36824, 36827, 36830, 36833, 36836, 36840, 36860, 37011, 37204, 37205, 37215, 37216, 37217, 37218, 37219, 37226, 37318, 37321, 37324, 37339, 37354, 37369, 37435, 37623, 37803, 37806, 37809, 37812, 37815, 37816, 37854, 38200, 38272, 38285, 38286, 38288, 38419, 38420, 38423, 38428, 39013, 39014, 39100, 39110, 39111, 39116, 39117, 39118, 39119, 39133, 39135, 39140, 39323, 39329, 39331, 39332, 39345, 40702, 41503, 41506, 41509, 41626, 41629, 41632, 41644, 41650, 41677, 41693, 41701, 41702, 41722, 41801, 41822, 41831, 41855, 41861, 41870, 41886, 42503, 42504, 42572, 42573, 42576, 42584, 42593, 42610, 42611, 42652, 42673, 42680, 42683, 42686, 42689, 42692, 42738, 42739, 42812, 42818, 42833, 42845, 42869, 43942, 43948, 44102, 44104, 44105, 44136, 44338, 44342, 44346, 44358, 44376, 45019, 45027, 45030, 45033, 45200, 45212, 45224, 45239, 45510, 45515, 45534, 45535, 45589, 45626, 45665, 45668, 45674, 45823, 45851, 45855, 45857, 46101, 46102, 46113, 46114, 46125, 46126, 46130, 46131, 46140, 46141, 46330, 46336, 46348, 46363, 46364, 46365, 46370, 46420, 46438, 46441, 46450, 46486, 46489, 46495, 46501, 46510, 46525, 47738, 47906, 47915, 47918, 47927, 48436, 48438, 48440, 48945, 49218, 49800, 49803, 49806, 49809, 49881, 49884, 49887, 49890, 50115, 50352, 51112, 51113, 51120, 51902, 52015, 52025, 52042, 52045, 52057, 52058, 52061, 52062, 52064, 52072, 52073, 52075, 52081, 52084, 52087, 52097, 52099, 52102, 52180, 52321, 52826, 53003, 53006, 53009, 53054, 53056, 53058, 53060, 53062, 53064, 53070, 53206, 53215, 53218, 53225, 53410, 53459, 58939, 59970, 60000, 60003, 60006, 60009, 60012, 60015, 60018, 60021, 60024, 60027, 60030, 60033, 60036, 60039, 60042, 60045, 60048, 60051, 60054, 60057, 60060, 60063, 60066, 60069, 60072, 60075, 60078, 71202, 73310, 73313, 73316, 73425, 73426

---

- (2) A non-band specific Type B day procedure is Band 2, 3 or 4 treatment depending on anaesthetic type and, where applicable, theatre time as specified in clause 6 of this Schedule.
- (3) If a non-band specific Type B day procedure does not involve anaesthetic or theatre times, the minimum benefit is the benefit for Band 1 treatment.

**6. Other bands**

- (1) In this Schedule:

***Band 2 treatment*** means procedures, other than those that are Band 1 treatment, carried out under local anaesthetic with no sedation.

***Band 3 treatment*** means procedures, other than those that are Band 1 treatment, carried out under:

- (a) general anaesthesia; or
- (b) regional anaesthesia; or



(c) intravenous sedation,

where the theatre time, being the actual time in theatre, is less than one hour.

**Band 4 treatment** means procedures, other than those that are Band 1 treatment, carried out under:

(a) general anaesthesia; or

(b) regional anaesthesia; or

(c) intravenous sedation,

where the theatre time, being the actual time in theatre, is one hour or more.

## 7. Certified Type C procedure

Note: Type C procedures are procedures that do not normally require hospital treatment.

- (1) Benefits for day-only accommodation are payable for patients receiving a Type C procedure only if certification under subclause (2) is provided.
- (2) Certification must be provided as follows, the medical practitioner providing the professional service must certify in writing that:
  - (a) because of the medical condition of the patient specified in the certificate; or
  - (b) because of the special circumstances specified in the certificate,

it would be contrary to accepted medical practice to provide the procedure to the patient unless the patient is given hospital treatment at the hospital for a period that does not include part of an overnight stay.

## Part 3 Type C procedures

### 8. Interpretation

A Type C procedure is a procedure specified in this clause by reference to MBS items in the following table:

Note: These procedures normally do not require hospital treatment.

---

#### Type C procedures – list of MBS items

---

3, 4, 23, 24, 36, 37, 44, 47, 52, 53, 54, 57, 58, 59, 60, 65, 104, 105, 106, 107, 108, 109, 110, 115, 116, 119, 122, 128, 131, 132, 133, 135, 137, 139, 141, 143, 145, 147, 160, 161, 162, 163, 164, 170, 171, 172, 193, 195, 197, 199, 230, 233, 235, 236, 237, 238, 239, 240, 285, 287, 289, 291, 293, 296, 299, 300, 302, 304, 306, 308, 310, 312, 314, 316, 318, 319, 320, 322, 324, 326, 328, 330, 332, 334, 336, 338, 341, 342, 343, 344, 345, 346, 347, 349, 385, 386, 387, 388, 410, 411, 412, 413, 414, 415, 416, 417, 721, 723, 729, 731, 732, 735, 739, 743, 747, 750, 758, 820, 822, 823, 825, 826, 828, 855, 857, 858, 900, 903, 930, 933, 935, 937, 943, 945, 946, 948, 959, 961, 962, 964, 969, 971, 972, 973, 975, 986, 2713, 2721, 2723, 2725, 2727, 2801, 2806, 2814, 2824, 2832, 2840, 2946, 2949, 2954, 2958, 2972, 2974, 3005, 3010, 3014, 3018, 3023, 3028, 3032, 3040, 3044, 3051, 3055, 3062, 4001, 5000, 5001, 5003, 5004, 5010, 5011, 5012, 5013, 5014, 5016, 5017, 5019, 5020, 5021, 5022, 5023, 5027, 5028, 5030, 5031, 5032, 5033, 5035, 5036, 5039, 5040, 5041, 5042, 5043, 5044, 5049, 5060, 5063, 5067, 5200, 5203, 5207, 5208, 5220, 5223, 5227, 5228, 5260, 5263, 5265, 5267, 6007, 6009, 6011, 6013, 6015, 6018, 6019, 6023, 6024, 6028, 6029, 6031, 6032, 6034, 6035, 6037, 6038, 6042, 6051, 6052, 6057, 6058, 6062, 6063, 6064, 6065, 6067, 6068, 6071, 6072, 6074, 6075, 6080, 6081, 6082, 6084, 10801, 10802, 10803, 10804, 10805, 10806, 10807, 10808, 10809, 10816, 10988, 10989, 11000, 11003, 11012, 11015, 11018, 11024, 11027, 11200, 11204, 11205, 11210, 11211, 11215, 11218, 11219, 11220, 11221, 11224, 11235, 11237, 11240, 11241, 11242, 11243, 11244, 11300, 11302, 11306, 11309, 11312, 11315, 11318, 11324, 11332, 11340, 11341, 11343, 11503, 11505, 11506, 11507, 11508, 11512, 11602, 11604, 11605, 11607, 11610, 11611, 11612, 11614, 11615, 11705, 11713, 11719, 11720, 11721, 11724, 11725, 11726, 11727, 11728, 11729, 11730, 11731, 11732, 11736, 11737, 11800, 11810, 11820, 11823, 11830, 11833, 11900, 11912, 11917, 12000, 12001, 12002, 12003, 12004, 12005, 12012, 12017, 12021, 12022, 12024, 12200, 12201, 12306, 12312, 12315, 12320, 12321, 12322, 12325, 12326, 12500, 12524, 12527, 12533, 13104, 13200, 13203, 13207, 13209, 13221, 13260, 13290, 13312, 13839, 13842, 13899, 14050, 14100, 14106, 14115, 14118, 14124, 14201, 14202, 14203, 14206, 14216, 14217, 14219, 14220, 14221, 14227, 14245, 14255, 14256, 14257, 14258, 14259, 14260, 14263, 14264, 14265, 14266, 14270, 14272, 14277, 14278, 14280, 14283, 14285, 14288, 15902, 15904, 15906, 15908, 15910, 15912, 15914, 15916, 15918, 15920, 15922, 15924, 15926, 15928, 15930, 15932, 15934, 15936, 15938, 15940, 15942, 15944, 15946, 15948, 15950, 15952, 15954, 15956, 15958, 15960, 15962, 15964, 15966, 15968, 15970, 15972, 15974, 15976, 15978, 15980, 15982, 15984, 16003, 16006, 16009, 16012, 16015, 16018, 16400, 16407, 16408, 16500, 16501, 16502, 16505, 16508, 16509, 16511, 16514, 16600, 17610, 17615, 17620, 17625, 17640, 17645, 17650, 17655, 17680, 17690, 18213, 18350, 18351, 18353, 18354, 18360, 18361, 18362, 18365, 18366, 18368, 18369, 18370, 18372, 18374, 18377, 30003, 30006, 30007, 30026, 30032, 30038, 30061, 30062, 30064, 30071, 30072, 30097, 30191, 30192, 30196, 30202, 30207, 30216, 30219, 30278, 30406, 30628, 30654, 31206, 31211, 31216, 31220, 31221, 31357, 31362, 31365, 31366, 31368, 31370, 31537, 31587, 32072, 32135, 32500, 32520, 32522, 32523, 32526, 32528, 32529, 35503, 35554, 35608, 35614, 35620, 35626, 35703, 36671, 36672, 36673, 36800, 37041, 37300, 37303, 37388, 37415, 38800, 39141, 40707, 40862, 40863, 41500, 41501, 41647, 41659, 41662, 41668, 41698, 41704, 41755, 41764, 41768, 41769, 41828, 42587, 42588, 42614, 42615, 42617, 42620, 42644, 42650, 42667, 42668, 42676, 42677, 42744, 42782, 42785, 42788, 42791, 42794, 42806, 42807, 42808, 42809, 42811, 45021, 45025, 45026, 45546, 45801, 45807, 45829, 45882, 47471, 47735, 47904, 47916, 47924, 50310, 51700, 51703, 52034, 52036, 52039, 52055, 52056, 52133, 53000, 53004, 53052, 53458, 55028, 55029, 55030, 55031, 55032, 55033, 55036, 55037, 55038, 55039, 55048, 55049, 55054, 55065, 55066,

---

**Type C procedures – list of MBS items**

55068, 55070, 55071, 55073, 55076, 55079, 55126, 55127, 55128, 55129, 55132, 55133, 55134, 55137, 55141, 55143, 55145, 55146, 55208, 55211, 55238, 55244, 55246, 55248, 55252, 55274, 55276, 55278, 55280, 55282, 55284, 55292, 55294, 55296, 55700, 55703, 55704, 55705, 55706, 55707, 55708, 55709, 55712, 55715, 55718, 55721, 55723, 55725, 55729, 55736, 55739, 55740, 55741, 55742, 55743, 55757, 55758, 55812, 55814, 55844, 55846, 55852, 55854, 55856, 55857, 55858, 55859, 55860, 55861, 55862, 55863, 55864, 55865, 55866, 55867, 55868, 55869, 55870, 55871, 55872, 55873, 55874, 55875, 55876, 55877, 55878, 55879, 55880, 55881, 55882, 55883, 55884, 55885, 55886, 55887, 55888, 55889, 55890, 55891, 55892, 55893, 55894, 55895, 56001, 56007, 56010, 56013, 56016, 56022, 56028, 56030, 56036, 56101, 56107, 56220, 56221, 56223, 56224, 56225, 56226, 56233, 56234, 56237, 56238, 56301, 56307, 56401, 56407, 56409, 56412, 56501, 56507, 56553, 56620, 56622, 56623, 56626, 56627, 56628, 56629, 56630, 56801, 56807, 57001, 57007, 57201, 57341, 57352, 57353, 57354, 57357, 57360, 57364, 57506, 57509, 57512, 57515, 57518, 57521, 57522, 57523, 57524, 57527, 57700, 57703, 57706, 57709, 57712, 57715, 57721, 57901, 57902, 57905, 57907, 57915, 57918, 57921, 57924, 57927, 57930, 57933, 57939, 57942, 57945, 57960, 57963, 57966, 57969, 58100, 58103, 58106, 58108, 58109, 58112, 58115, 58300, 58306, 58500, 58503, 58506, 58509, 58521, 58524, 58527, 58700, 58706, 58715, 58718, 58721, 58900, 58903, 58909, 58912, 58915, 58916, 58921, 58927, 58933, 58936, 59103, 59300, 59302, 59303, 59305, 59312, 59314, 59318, 59700, 59703, 59712, 59715, 59718, 59724, 59733, 59739, 59751, 59754, 59763, 60500, 60503, 60918, 60927, 61310, 61313, 61314, 61321, 61324, 61325, 61328, 61329, 61333, 61336, 61340, 61341, 61345, 61348, 61349, 61353, 61356, 61357, 61360, 61361, 61364, 61368, 61372, 61373, 61376, 61381, 61383, 61384, 61386, 61387, 61389, 61390, 61393, 61394, 61397, 61398, 61402, 61406, 61409, 61410, 61413, 61414, 61421, 61425, 61426, 61429, 61430, 61433, 61434, 61438, 61441, 61442, 61445, 61446, 61449, 61450, 61453, 61454, 61457, 61462, 61466, 61469, 61473, 61480, 61485, 61495, 61499, 61505, 61524, 61527, 61541, 61553, 61560, 61563, 61564, 61565, 61612, 61614, 61644, 61647, 63001, 63004, 63007, 63010, 63019, 63020, 63040, 63043, 63046, 63049, 63052, 63055, 63058, 63061, 63064, 63067, 63070, 63073, 63101, 63111, 63114, 63125, 63128, 63131, 63151, 63154, 63161, 63164, 63167, 63170, 63173, 63176, 63179, 63182, 63185, 63201, 63204, 63219, 63222, 63225, 63228, 63231, 63234, 63237, 63240, 63243, 63271, 63274, 63277, 63280, 63301, 63304, 63307, 63322, 63325, 63328, 63331, 63334, 63337, 63340, 63361, 63385, 63388, 63391, 63395, 63397, 63399, 63401, 63404, 63416, 63425, 63428, 63440, 63443, 63446, 63454, 63461, 63464, 63467, 63470, 63473, 63476, 63482, 63487, 63489, 63491, 63494, 63496, 63497, 63507, 63510, 63513, 63516, 63519, 63522, 63531, 63533, 63539, 63540, 63541, 63543, 63545, 63546, 63547, 63549, 63551, 63554, 63557, 63560, 63563, 63564, 63740, 63741, 63743, 65060, 65066, 65070, 65072, 65075, 65078, 65079, 65081, 65082, 65084, 65087, 65090, 65093, 65096, 65099, 65102, 65105, 65108, 65109, 65110, 65111, 65114, 65117, 65120, 65123, 65126, 65129, 65137, 65142, 65144, 65147, 65150, 65153, 65156, 65157, 65158, 65159, 65162, 65165, 65166, 65171, 65175, 65176, 65177, 65178, 65179, 65180, 65181, 66500, 66503, 66506, 66509, 66512, 66517, 66518, 66519, 66522, 66523, 66536, 66539, 66542, 66545, 66548, 66551, 66554, 66557, 66560, 66563, 66566, 66569, 66572, 66575, 66578, 66581, 66584, 66585, 66586, 66587, 66590, 66593, 66596, 66605, 66606, 66607, 66623, 66626, 66629, 66632, 66635, 66638, 66639, 66641, 66642, 66644, 66647, 66650, 66651, 66652, 66653, 66654, 66655, 66656, 66659, 66660, 66662, 66663, 66665, 66666, 66667, 66671, 66674, 66677, 66680, 66683, 66686, 66695, 66696, 66697, 66698, 66701, 66704, 66707, 66711, 66712, 66714, 66715, 66716, 66719, 66722, 66723, 66724, 66725, 66728, 66731, 66734, 66743, 66749, 66750, 66751, 66752, 66755, 66756, 66757, 66758, 66761, 66764, 66767, 66770, 66773, 66776, 66779, 66780, 66782, 66783, 66785, 66788, 66789, 66790, 66791, 66792, 66800, 66803, 66804, 66805, 66806, 66812, 66815, 66816, 66817, 66819, 66820, 66821, 66822, 66825, 66826, 66827, 66828, 66829, 66830, 66831, 66832, 66833, 66834, 66835, 66836, 66837, 66838, 66839, 66840, 66841, 66900, 69300, 69303, 69306, 69309, 69312, 69316, 69317, 69318, 69319, 69321, 69324, 69325, 69327, 69328, 69330, 69331, 69333, 69336, 69339, 69345, 69354, 69357, 69360, 69363, 69379, 69383, 69384, 69387, 69390, 69393, 69396, 69400, 69401, 69405, 69408, 69411, 69413, 69415, 69421, 69422, 69445, 69451, 69471, 69472, 69474, 69475, 69478, 69481, 69482, 69483, 69484, 69488, 69489, 69491, 69492, 69494, 69495, 69496, 69497, 69498, 69499, 69500, 69505, 71057, 71058, 71059, 71060, 71062, 71064, 71066, 71068, 71069, 71071, 71072, 71073,

---

**Type C procedures – list of MBS items**

---

71074, 71075, 71076, 71077, 71079, 71081, 71083, 71085, 71087, 71089, 71090, 71091, 71092, 71093, 71095, 71096, 71097, 71099, 71101, 71103, 71106, 71119, 71121, 71123, 71125, 71127, 71129, 71131, 71133, 71134, 71135, 71137, 71139, 71141, 71143, 71145, 71146, 71147, 71148, 71149, 71151, 71153, 71154, 71155, 71156, 71157, 71159, 71163, 71164, 71165, 71166, 71167, 71168, 71169, 71170, 71175, 71180, 71183, 71186, 71189, 71192, 71195, 71198, 71200, 71203, 72813, 72814, 72816, 72817, 72818, 72823, 72824, 72825, 72826, 72827, 72828, 72830, 72836, 72838, 72844, 72846, 72847, 72848, 72849, 72850, 72851, 72852, 72855, 72856, 72857, 73043, 73045, 73047, 73049, 73051, 73059, 73060, 73061, 73062, 73063, 73064, 73065, 73070, 73071, 73072, 73074, 73075, 73076, 73287, 73289, 73290, 73291, 73292, 73293, 73294, 73295, 73296, 73297, 73298, 73299, 73300, 73304, 73305, 73306, 73308, 73309, 73311, 73312, 73314, 73315, 73317, 73318, 73320, 73321, 73323, 73324, 73332, 73333, 73334, 73335, 73336, 73337, 73338, 73339, 73340, 73341, 73342, 73343, 73344, 73345, 73346, 73347, 73348, 73349, 73350, 73351, 73352, 73353, 73354, 73355, 73356, 73357, 73358, 73359, 73360, 73361, 73362, 73363, 73364, 73365, 73366, 73367, 73368, 73369, 73370, 73371, 73372, 73373, 73374, 73375, 73376, 73377, 73378, 73379, 73380, 73381, 73382, 73383, 73384, 73385, 73386, 73387, 73388, 73389, 73391, 73392, 73393, 73394, 73395, 73396, 73397, 73398, 73399, 73401, 73402, 73403, 73404, 73405, 73406, 73410, 73411, 73412, 73413, 73416, 73417, 73418, 73419, 73420, 73421, 73422, 73423, 73424, 73427, 73428, 73429, 73430, 73431, 73432, 73433, 73434, 73435, 73436, 73437, 73438, 73439, 73440, 73441, 73442, 73443, 73444, 73445, 73446, 73447, 73448, 73451, 73452, 73453, 73454, 73455, 73456, 73457, 73458, 73459, 73460, 73461, 73462, 73521, 73523, 73525, 73527, 73529, 73801, 73802, 73803, 73804, 73805, 73806, 73807, 73808, 73809, 73810, 73811, 73812, 73813, 73825, 73826, 73920, 73922, 73923, 73924, 73925, 73926, 73927, 73928, 73929, 73930, 73931, 73932, 73933, 73934, 73935, 73936, 73937, 73938, 73939, 73940, 74992, 74993, 74994, 74995, 74996, 74997, 74998, 74999, 82100, 82105, 82110, 82115, 82116, 82130, 82135, 82140, 82226, 82227, 82228, 91868, 91869, 91870, 91871, 91872, 91873, 91874, 91875, 91876, 91877, 91878, 91879, 91880, 91881, 91882, 91883, 91884

---

## Schedule 4—Nursing-home type patient accommodation: hospitals in all States/Territories

### 1. Circumstances

- (1) For rule 5 of Part 2 of these Rules, the circumstances specified for hospital treatment to which this Schedule applies are that the treatment is provided:
- (a) to a nursing-home type patient; and
  - (b) at a hospital.

Note: The definition of hospital treatment in section 121-5 of the Act includes that the treatment is provided either at the hospital or provided or arranged with the direct involvement of a hospital. This Schedule sets out benefit requirements only for treatment provided at the relevant hospital — see paragraph 121-5(1)(c) of the Act.

### 2. Interpretation

*Nursing-home type patient*, in relation to a hospital, means a patient who has been provided with hospital treatment whether:

- (a) acute care; or
- (b) accommodation and nursing care, as an end in itself; or
- (c) a mixture of both,

for a continuous period of hospitalisation exceeding 35 days (*35-day period*), but a patient receiving acute care immediately after the 35-day period does not become a nursing-home type patient unless the period of acute care ends and the patient is then provided with accommodation and nursing care, as an end in itself, as part of a continuous period of hospitalisation.

Note 1: 'Continuous period of hospitalisation' is defined in rule 3 of Part 1 of these Rules.

Note 2: Clause 4 deals with nursing-home type patients whose care needs change to requiring acute care.

Note 3: If there is disagreement as to whether a patient is, or is not, a nursing-home type patient, an insured person, a private health insurer or a health care provider may make a complaint to the Private Health Insurance Ombudsman under Part 6-2 of the Act. The Ombudsman has various powers to deal with complaints, including conducting mediation if the complainant agrees.

### 3. Application

- (1) Clause 2 of this Schedule applies to a patient who on or after the day on which the *Private Health Insurance (Benefit Requirements) Amendment Rules 2007 (No. 4)* commence:
- (a) returns to hospital for hospital treatment at a hospital not later than 7 days after receiving hospital treatment at that hospital or another hospital; or
  - (b) is otherwise admitted to a hospital for hospital treatment at the hospital.

- (2) If subclause (1) does not apply to a patient, the definition of 'nursing-home type patient' in these Rules before the commencement of the *Private Health Insurance (Benefit Requirements) Amendment Rules 2007 (No. 4)* continues to apply to that patient.

Note: Clause 4 deals with nursing-home type patients whose care needs change to requiring acute care.

#### 4. Provision of acute care

If a nursing-home type patient is provided with acute care at the hospital (the *first hospital*), or at another hospital, the patient:

- (a) ceases to be a nursing-home type patient only for the days on which the acute care is provided; and
- (b) again becomes a nursing-home type patient when the provision of acute care ends and the patient is then provided with accommodation and nursing care as an end in itself, whether at the first hospital or another hospital.

#### 5. Ceasing and resuming hospital treatment

If a nursing-home type patient, or a person referred to in paragraph 4(a), leaves hospital but returns to a hospital, whether or not at the same hospital, not more than 7 days later and is provided with hospital treatment at the hospital, the patient is a nursing-home type patient for each subsequent day that the patient is provided with accommodation and nursing care, as an end in itself, until the patient ceases to be provided with hospital treatment at a hospital for a period of more than 7 days.

Note: If the relevant period of hospitalisation is broken by more than 7 days, clause 2 of this Schedule may again apply to the person.

#### 6. Minimum benefit

The minimum benefit for hospital treatment provided in the circumstances described in this Schedule is the amount set out in Table 1 or 2 of this Schedule for that hospital treatment.

**Table 1**

<b>Public hospital: State/Territory</b>	<b>Minimum benefit per night</b>
Australian Capital Territory	\$147.45
New South Wales	\$179.10
Northern Territory	\$155.59
Queensland	\$145.80
South Australia	\$146.00
Tasmania	\$188.75
Victoria	\$160.00
Western Australia	\$152.85

**Table 2**

Private hospitals	\$32.45
-------------------	---------

## Schedule 5—Second-tier default benefits

### 1. Interpretation

- (1) In this Schedule:

**authorised officer** means a departmental officer authorised by the Secretary of the Department to make a determination under subclause 1A (2), (3) or (4) or to review a determination under subclause 1B(3).

**comparable** has the meaning given by subclause 1A(6).

**Hospital Casemix Protocol Data** has the meaning given by rule 4 of the *Private Health Insurance (Health Insurance Business) Rules 2018*.

**second-tier eligible hospital** means a hospital in the class set out in rule 7A of the *Private Health Insurance (Health Insurance Business) Rules 2018*.

- (2) In this Schedule, except in subclauses 1A(8) and (9), the Australian Capital Territory is taken to be part of New South Wales, and the Northern Territory is taken to be part of South Australia.

#### 1A. Categorisation of private hospitals

- (1) If, as at 1 January 2019, a departmental officer authorised by the Secretary of the Department for the purpose has, in anticipation of the commencement of this provision, caused to be published on the Department's website a list of all the hospitals for which a declaration is in force under subsection 121-5(6) of the Act that places each hospital in a category set out in subclause (7), then each hospital is taken to be determined to be in that category.
- (2) If such a list has not been published, then as soon as practicable an authorised officer must determine which category of hospital from the categories set out in subclause (7) each private hospital for which a declaration is in force under subsection 121-5(6) of the Act is to be placed in, and cause a list of the hospitals in each category to be published on the Department's website.
- Note: If a patient is admitted to a hospital between 1 January 2019 and 31 August 2019 insurers may continue to work out the average charge on the basis of the provisions of this Schedule as in force immediately before the commencement of Schedule 4 to the *Private Health Insurance (Reforms) Amendment Rules 2018*. However, insurers must use the Department's published list of hospitals under subclause (1) or (2) to determine in which category a hospital claiming second-tier default benefits is placed.
- (3) If a private hospital is declared under subsection 121-5(6) of the Act after 1 January 2019, an authorised officer must determine which category of hospital from the categories set out in subclause (7) that private hospital is to be placed in.
- (4) If a hospital has been placed in a category by a determination under this clause, an authorised officer may before 1 June of a particular year

determine a different category of hospital from the categories set out in subclause (7) that the private hospital is to be placed in.

- (5) A list of the hospitals in each category as of 1 August of each year must be published on the Department's website.
- (6) Private hospitals are *comparable* if they are placed in the same category by a determination made under subclause (1), (2), (3) or (4).
- (7) For the purposes of this clause, the categories are the following:
  - (a) private hospitals that provide psychiatric care, including treatment of addictions, for at least 50% of the episodes of hospital treatment, and do not fall into category (g);
  - (b) private hospitals that provide rehabilitation care for at least 50% of the episodes of hospital treatment, and do not fall into categories (a) or (g);
  - (c) private hospitals that do not fall into categories (a), (b) or (g), with up to and including 50 licensed beds;
  - (d) private hospitals that do not fall into categories (a), (b) or (g), with more than 50 licensed beds and up to and including 100 licensed beds;
  - (e) private hospitals that do not fall into categories (a), (b) or (g), with more than 100 licensed beds, without an accident and emergency unit or a specialised cardiac care unit or an intensive care unit;
  - (f) private hospitals that do not fall into categories (a), (b) or (g), with more than 100 licensed beds, with either (or any combination of) an accident and emergency unit or a specialised cardiac care unit or an intensive care unit;
  - (g) private hospitals that provide episodes of hospital treatment only for periods of not more than 24 hours.
- (8) If State or Territory legislation in the State or Territory where the private hospital is located regulates the number of beds or patients that a private hospital is permitted—in subclause (7), a reference to *licensed beds* is a reference to the beds or patients that a private hospital is permitted, under State or Territory legislation in the State or Territory where the private hospital is located.
- (9) If State or Territory legislation in the State or Territory where the private hospital is located does not regulate the number of beds or patients that a private hospital is permitted—in subclause (7), a reference to *licensed beds* is a reference to the beds and bed equivalents the private hospital operates.
- (10) An authorised officer must calculate proportions for the purposes of paragraphs (7)(a) and (b):
  - (a) if Hospital Casemix Protocol Data is available for the private hospital—using the most recent year of Hospital Casemix Protocol Data available to the Department for the private hospital; and



- (b) otherwise—on the basis of any relevant information available to the Department about the episodes of hospital treatment at the private hospital.

### **1B. Internal review of a categorisation determination**

- (1) A private hospital subject to a determination made under subclause 1A(1), (2), (3) or (4) may request internal review of its categorisation by the determination.
- (2) An application for internal review under subclause (1) must be made in writing within 28 days after the day the determination is notified to the hospital.
- (3) If an application for internal review is made, an authorised officer (who must not be the authorised officer who made the original determination) must:
  - (a) review the determination; and
  - (b) either confirm the determination or make a fresh one within 28 days after the day on which the application was received by the Department.

## **2. Circumstances**

For rules 4 and 5 of Part 2 of these Rules, the circumstances for hospital treatment to which this Schedule applies are that the treatment is provided to a patient who is not a nursing-home type patient and the treatment is provided at a second-tier eligible hospital.

**Note:** The definition of hospital treatment in section 121-5 of the Act includes that the treatment is provided either at the hospital or provided or arranged with the direct involvement of a hospital. This Schedule sets out benefit requirements only for treatment provided at the relevant hospital — see paragraph 121-5(1)(c) of the Act.

## **3. Minimum benefit**

- (1) Despite anything in Schedules 1, 2 or 3, but subject to subclause (2) of this clause, the minimum benefit for hospital treatment provided in the circumstances described in clause 2 of this Schedule is the amount worked out in accordance with this clause.
- (2) Where hospital treatment is provided in the circumstances described in clause 2 of this Schedule, but:
  - (a) the minimum benefit worked out in accordance with this clause for the hospital treatment is below the amount determined in accordance with Schedules 1, 2 or 3 of these Rules; or
  - (b) an amount for the hospital treatment cannot be worked out in accordance with this clause,

the minimum benefit for that hospital treatment is the amount worked out in accordance with Schedules 1, 2 or 3 for that hospital treatment.

- (3) If a hospital ceases to be a second-tier eligible hospital for the purposes of this Schedule, the minimum benefit in relation to an episode of hospital treatment for an insured person who was an admitted patient at the hospital or booked for hospital treatment at the hospital (as opposed to merely being on the hospital’s waiting list) before the day that the hospital ceased to be a second-tier eligible hospital is the minimum benefit that would have applied if the hospital continued to be a second-tier eligible hospital at the time the treatment was provided.
- (4) Subject to subclauses (2) and (8), the minimum benefit payable by an insurer for an episode of hospital treatment at a second-tier eligible hospital for which the admission date was between 1 September of a particular year (the *first year*) and 31 August of the next year is an amount no less than 85% of the average charge for the equivalent episode of hospital treatment, under that insurer’s negotiated agreements as in force on 1 August of the first year, with all private hospitals:
- (a) that:
    - (i) if the second-tier eligible hospital is on the list published on the Department’s website under subclause 1A(5)—were comparable on 1 August of the first year with the second-tier eligible hospital; and
    - (ii) otherwise—are in the same category as the second-tier eligible hospital in the list published on the Department’s website under subclause 1A(5) as at 1 August of the first year; and
  - (b) that are in the same State as the second-tier eligible hospital.
- Note: See clause 4 for a transitional arrangement for admissions to second-tier eligible hospitals between 1 January 2019 and 31 August 2019.
- (5) The formula for calculating the *average charge for the equivalent episode of hospital treatment* by an insurer in each State is as follows:

$$R_j = \frac{\sum_{i=1}^n R_{ji}}{n}$$

- Where: j = group of equivalent episodes of hospital treatment under the insurer's negotiated agreements;
- i = group of the insurer's negotiated agreements in force on 1 August of the first year with comparable private hospitals in the State;
- n = the number of the insurer's negotiated agreements in force on 1 August of the first year with comparable private hospitals in the State;
- R<sub>ji</sub> = charge for episode of hospital treatment type j in the negotiated agreement i
- R<sub>j</sub> = average charge for episode of hospital treatment type j.

- (6) In subclause (4), each ***episode of hospital treatment*** must be identified using the patient classification system and payment structure in the majority of the relevant insurer's negotiated agreements in force on 1 August of the first year with all comparable private hospitals in the State in which the second-tier eligible hospital is located.
- (7) In subclause (4), for the purpose of calculating the ***average charge for the equivalent episode of hospital treatment*** in a State:
- (a) the charge will include the sum of the amount payable by the insurer under that insurer's negotiated agreement and any excess or co-payment amounts payable by members, in accordance with the insurer's rules; and
- Note: Policy holders' financial obligations under such levels of cover will still apply.
- (b) must not include any charges:
- (i) referred to in the insurer's negotiated agreements for medical devices and human tissue products; and
- (ii) that are minimum benefits for medical devices and human tissue products as specified for the purpose of item 4 of the table in subsection 72-1(2) of the Act, and
- (iii) referred to in the insurer's negotiated agreements for hospital treatment provided to nursing-home type patients.
- (8) Subject to subclause (2), if an insurer has less than 5 negotiated agreements in force on 1 August of the first year with a particular category of comparable private hospitals in a State, then all of that insurer's negotiated agreements with all classes of private hospitals in that State are to be used to calculate the minimum benefit.

#### 4. Transitional

- (1) If a patient is admitted to a second-tier eligible hospital between 1 January 2019 and 31 August 2019:
- (a) an insurer may instead work out the average charge on the basis of the repealed provisions; and
- (b) if the insurer does so, ***comparable*** has the same meaning as in the repealed provisions.
- (2) For subclause (1), the ***repealed provisions*** are the provisions of this Schedule as in force immediately before the commencement of Schedule 4 to the *Private Health Insurance (Reforms) Amendment Rules 2018*.

Note: For the purpose of determining which category the second-tier eligible hospital to which the patient was admitted is placed in, an insurer must use the Department's determination in respect of that hospital under subclause 1A(1), (2), (3) or (4).

## Endnotes

Endnote 1—About the endnotes

---

## Endnotes

### Endnote 1—About the endnotes

The endnotes provide information about this compilation and the compiled law.

The following endnotes are included in every compilation:

Endnote 1—About the endnotes

Endnote 2—Abbreviation key

Endnote 3—Legislation history

Endnote 4—Amendment history

### Abbreviation key—Endnote 2

The abbreviation key sets out abbreviations that may be used in the endnotes.

### Legislation history and amendment history—Endnotes 3 and 4

Amending laws are annotated in the legislation history and amendment history.

The legislation history in endnote 3 provides information about each law that has amended (or will amend) the compiled law. The information includes commencement details for amending laws and details of any application, saving or transitional provisions that are not included in this compilation.

The amendment history in endnote 4 provides information about amendments at the provision (generally section or equivalent) level. It also includes information about any provision of the compiled law that has been repealed in accordance with a provision of the law.

### Editorial changes

The *Legislation Act 2003* authorises First Parliamentary Counsel to make editorial and presentational changes to a compiled law in preparing a compilation of the law for registration. The changes must not change the effect of the law. Editorial changes take effect from the compilation registration date.

If the compilation includes editorial changes, the endnotes include a brief outline of the changes in general terms. Full details of any changes can be obtained from the Office of Parliamentary Counsel.

### Misdescribed amendments

A misdescribed amendment is an amendment that does not accurately describe how an amendment is to be made. If, despite the misdescription, the amendment can be given effect as intended, then the misdescribed amendment can be incorporated through an editorial change made under section 15V of the *Legislation Act 2003*.

If a misdescribed amendment cannot be given effect as intended, the amendment is not incorporated and “(md not incorp)” is added to the amendment history.

**Endnote 2—Abbreviation key**

ad = added or inserted	o = order(s)
am = amended	Ord = Ordinance
amdt = amendment	orig = original
c = clause(s)	par = paragraph(s)/subparagraph(s) /sub-subparagraph(s)
C[x] = Compilation No. x	pres = present
Ch = Chapter(s)	prev = previous
def = definition(s)	(prev...) = previously
Dict = Dictionary	Pt = Part(s)
disallowed = disallowed by Parliament	r = regulation(s)/rule(s)
Div = Division(s)	reloc = relocated
ed = editorial change	renum = renumbered
exp = expires/expired or ceases/ceased to have effect	rep = repealed
F = Federal Register of Legislation	rs = repealed and substituted
gaz = gazette	s = section(s)/subsection(s)
LA = <i>Legislation Act 2003</i>	Sch = Schedule(s)
LIA = <i>Legislative Instruments Act 2003</i>	Sdiv = Subdivision(s)
(md) = misdescribed amendment can be given effect	SLI = Select Legislative Instrument
(md not incorp) = misdescribed amendment cannot be given effect	SR = Statutory Rules
mod = modified/modification	Sub-Ch = Sub-Chapter(s)
No. = Number(s)	SubPt = Subpart(s)
	<u>underlining</u> = whole or part not commenced or to be commenced

## Endnotes

### Endnote 3—Legislation history

---

### Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance (Benefit Requirements) Amendment Rules 2011	31 Oct 2011 (F2011L02160)	1 November 2011	
Private Health Insurance (Benefit Requirements) Amendment Rules 2011 (No. 10)	19 Dec 2011 (F2011L02731)	20 December 2011	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 1)	20 March 2012 (F2012L00604)	20 March 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 2)	11 April 2012 (F2012L00822)	12 April 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 3)	20 April 2012 (F2012L00905)	21 April 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 4)	20 June 2012 (F2012L01264)	1 July 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 5)	18 Sept 2012 (F2012L01887)	20 September 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 6)	31 Sept 2012 (F2012L02111)	1 November 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 7)	31 Sept 2012 (F2012L02114)	1 November 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 8)	7 Nov 2012 (F2012L02151)	8 November 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 9)	17 Dec 2012 (F2012L02502)	18 December 2012	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2012 (No. 10)	2 Jan 2013 (F2013L00003)	3 January 2013	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 1)	19 March 2013 (F2013L00497)	20 March 2013	—

## Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 2)	27 June 2013 (F2013L01190)	1 July 2013	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 3)	4 July 2013 (F2013L01321)	5 July 2013	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 4)	19 September 2013 (F2013L01714)	20 September 2013	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 5)	27 September 2013 (F2013L01714)	1 October 2013	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 6)	31 October 2013 (F2013L01866)	1 November 2013	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2013 (No. 7)	16 December 2013 (F2013L02113)	1 January 2014	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2014 (No. 1)	19 March 2014 (F2014L00309)	20 March 2014	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2014 (No. 2)	24 June 2014 (F2014L00801)	1 July 2014	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2014 (No. 3)	23 July 2014 (F2014L01016)	24 July 2014	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2014 (No. 4)	17 September 2014 (F2014L01235)	20 September 2014	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2014 (No. 5)	29 October 2014 (F2014L01434)	1 November 2014	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2014 (No. 6)	22 December 2014 (F2014L01775)	1 January 2015	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2015 (No. 1)	20 March 2015 (F2015L00324)	20 March 2015	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2015 (No. 2)	24 June 2015 (F2015L00926)	1 July 2015	—

## Endnotes

### Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance (Benefit Requirements) Amendment Rules 2015 (No.3)	28 August 2015 (F2015L01356)	1 September 2015	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2015 (No.4)	17 September 2015 (F2015L01451)	20 September 2015	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2015 (No.5)	29 October 2015 (F2015L01711)	1 November 2015	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2015 (No.6)	23 December 2015 (F2015L02118)	1 January 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.1)	18 March 2016 (F2016L00352)	20 March 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No. 2)	28 April 2016 (F2016L00589)	1 May 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.3)	2 June 2016 (F2016L00979)	3 June 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.4)	29 June 2016 (F2016L01101)	1 July 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.5)	16 September 2016 (F2016L01446)	20 September 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.6)	20 September 2016 (F2016L01463)	20 September 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.7)	31 November 2016 (F2016L01665)	1 November 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.8)	1 December 2016 (F2016L01846)	1 December 2016	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2016 (No.9)	15 December 2016 (F2016L01967)	1 January 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.1)	1 February 2017 (F2017L00084)	1 February 2017	—



## Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.2)	17 March 2017 (F2017L00242)	20 March 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.3)	21 April 2017 (F2017L00461)	1 May 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.4)	26 May 2017 (F2017L00603)	27 May 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.5)	30 June 2017 (F2017L00830)	1 July 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.6)	7 July 2017 (F2017L00894)	8 July 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.7)	20 September 2017 (F2017L01217)	20 September 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.8)	30 October 2017 (F2017L01401)	1 November 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.9)	27 November 2017 F2017L01527)	1 December 2017	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2017 (No.10)	8 December 2017 (F2017L01603)	1 January 2018	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No.1)	20 March 2018 (F2018L00323)	20 March 2018	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No.2)	30 April 2018 (F2018L00544)	1 May 2018	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No.3)	28 June 2018 (F2018L00927)	1 July 2018 (s 2)	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No. 4)	19 Sept 2018 (F2018L01315)	20 Sept 2018 (s 2)	—
Private Health Insurance (Reforms) Amendment Rules 2018	11 Oct 2018 (F2018L01414)	Sch 4 (items 1–7): 1 Jan 2019 (s 2(1) item 8)	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No. 5)	26 Oct 2018 (F2018L01474)	1 Nov 2018 (s 2)	—

## Endnotes

### Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance (Benefit Requirements) Amendment Rules 2018 (No. 6)	19 Dec 2018 (F2018L01797)	20 Dec 2018 (s 2(1) item 1)	—
Private Health Insurance (Benefit Requirements) Amendment Rules 2019 (No. 1)	21 Jan 2019 (F2019L00048)	1 Feb 2019 (s 2(1) item 1)	—
Private Health Insurance (Benefit Requirements) Amendment Rules (No. 2) 2019	20 Mar 2019 (F2019L00327)	Sch 1: 20 Mar 2019 (s 2(1) item 2) Sch 2: 1 July 2019 (s 2(1) item 3)	—
<b>as amended by</b>			
Private Health Insurance Legislation Amendment Rules (No. 1) 2019	29 Apr 2019 (F2019L00639)	Sch 2: 30 Apr 2019 (s 2(1) item 3)	—
Private Health Insurance (Benefit Requirements) Amendment Rules (No. 3) 2019	1 Apr 2019 (F2019L00493)	1 Apr 2019 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 1) 2019	29 Apr 2019 (F2019L00639)	Sch 1: 1 May 2019 (s 2(1) item 2)	—
Private Health Insurance Legislation Amendment (No. 2) Rules 2019	28 June 2019 (F2019L00925)	Sch 1: 1 July 2019 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment (No. 3) Rules 2019	19 Sept 2019 (F2019L01221)	Sch 1: 20 Sept 2019 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 4) 2019	30 Oct 2019 (F2019L01384)	Sch 1: 1 Nov 2019 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 1) 2020	28 Feb 2020 (F2020L00190)	Sch 1: 1 Mar 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 2) 2020	19 Mar 2020 (F2020L00272)	Sch 1: 20 Mar 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 3) 2020	30 Apr 2020 (F2020L00539)	Sch 1 (items 1–9): 1 May 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 4) 2020	30 June 2020 (F2020L00862)	Sch 1: 1 July 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 5) 2020	31 July 2020 (F2020L00978)	Sch 1: 1 Aug 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 6) 2020	29 Sept 2020 (F2020L01244)	Sch 1 and 2: 30 Sept 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 7) 2020	30 Oct 2020 (F2020L01378)	Sch 1 and 2: 1 Nov 2020 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 1) 2021	25 Feb 2021 (F2021L00155)	Sch 1: 1 Mar 2021 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 2) 2021	19 Mar 2021 (F2021L00264)	Sch 2: 20 Mar 2021 (s 2(1) item 1)	—

## Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance Legislation Amendment Rules (No. 3) 2021	25 June 2021 (F2021L00856)	Sch 1: 1 July 2021 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 4) 2021	30 June 2021 (F2021L00906)	Sch 2 and 3: 1 July 2021 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 5) 2021	17 Sept 2021 (F2021L01295)	Sch 2: 20 Sept 2021 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 6) 2021	26 Oct 2021 (F2021L01461)	Sch 2 and 3: 1 Nov 2021 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 7) 2021	22 Dec 2021 (F2021L01879)	Sch 2 and 3: 1 Jan 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 1) 2022	28 Jan 2022 (F2022L00080)	Sch 2 and 3: 1 Mar 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 2) 2022	1 Mar 2022 (F2022L00230)	Sch 2: 1 Mar 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 3) 2022	11 Mar 2022 (F2022L00303)	Sch 2: 20 Mar 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 4) 2022	31 Mar 2022 (F2022L00462)	1 Apr 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 5) 2022	28 Apr 2022 (F2022L00635)	Sch 2 and 3: 1 July 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 6) 2022	30 June 2022 (F2022L00897)	Sch 1: 1 July 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 7) 2022	30 June 2022 (F2022L00924)	1 July 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 8) 2022	5 July 2022 (F2022L00954)	Sch 2: 6 July 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 9) 2022	27 July 2022 (F2022L01010)	Sch 1: 1 Aug 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 10) 2022	7 Sept 2022 (F2022L01182)	Sch 2: 20 Sept 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 11) 2022	29 Sept 2022 (F2022L01279)	1 Oct 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 12) 2022	27 Oct 2022 (F2022L01404)	Sch 2: 1 Nov 2022 (s 2(1) item 1)	—
<b>as repealed by</b>			
Private Health Insurance Legislation Amendment Rules (No. 13) 2022	31 Oct 2022 (F2022L01417)	Sch 3: 1 Nov 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 13) 2022	31 Oct 2022 (F2022L01417)	Sch 2: 1 Nov 2022 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 1) 2023	28 Feb 2023 (F2023L00173)	Sch 2: 1 Mar 2023 (s 2(1) item 1)	—

## Endnotes

### Endnote 3—Legislation history

<b>Name</b>	<b>Registration</b>	<b>Commencement</b>	<b>Application, saving and transitional provisions</b>
Private Health Insurance Legislation Amendment Rules (No. 3) 2023	16 Mar 2023 (F2023L00232)	17 Mar 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 2) 2023	17 Mar 2023 (F2023L00252)	Sch 2: 20 Mar 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment (Prostheses—Repeal and Consequential Amendments) Rules 2023	29 June 2023 (F2023L00891)	Sch 2 (item 1): 1 July 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 4) 2023	29 June 2023 (F2023L00901)	Sch 1: 1 July 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 5) 2023	30 June 2023 (F2023L00926)	Sch 2: 1 July 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 6) 2023	27 July 2023 (F2023L01036)	28 July 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 7) 2023	18 Sept 2023 (F2023L01257)	Sch 2: 20 Sept 2023 (s 2(1) item 1) Sch 3: 1 Nov 2023 (s 2(1) item 2)	—
Private Health Insurance Legislation Amendment Rules (No. 8) 2023	26 Oct 2023 (F2023L01411)	Sch 2: 1 Nov 2023 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 1) 2024	16 Feb 2024 (F2024L00179)	Sch 2: 1 Mar 2024 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 2) 2024	18 Mar 2024 (F2024L00326)	Sch 2: 20 Mar 2024 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 3) 2024	18 June 2024 (F2024L00701)	Sch 2: 1 July 2024 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 4) 2024	28 June 2024 (F2024L00824)	Sch 1: 1 July 2024 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 5) 2024	19 Sept 2024 (F2024L01186)	Sch 2: 20 Sept 2024 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 6) 2024	1 Oct 2024 (F2024L01259)	1 Oct 2024 (s 2(1) item 1)	—
Private Health Insurance Legislation Amendment Rules (No. 7) 2024	18 Oct 2024 (F2024L01330)	Sch 2: 1 Nov 2024 (s 2(1) item 1)	—

## Endnote 4—Amendment history

## Endnote 4—Amendment history

Provision affected	How affected
<b>Schedule 1</b>	
Part 1, Subclause 2(2)	am F2012L01264; F2013L01190; F2014L00801; F2015L00926; F2016L01101; F2017L00830
Part 2, Subclause 4(3)	am F2012L02114; F2012L02151; F2013L01190; F2013L01321; F2014L00801; F2015L01356; F2015L01711; F2015L02118; F2016L00589; F2016L01101 F2016L01665; F2016L01846; F2017L00603; F2017L01401
Part 2, Subclause 5(2)(a)	am. F2017L01401
Part 2, Subclause 6(3)	am F2012L00604; F2012L01264; F2012L02114; F2012L02502; F2013L00497; F2013L01190; F2013L01321; F2014L00801; F2014L01016; F2014L01434; F2015L01356; F2015L02118; F2016L00589; F2016L00979; F2016L01101; F2016L01846; F2017L00461; F2017L00603; F2017L00830; F2017L01401
<b>Schedule 2</b>	
Clause 2, Table	rs F2012L01264; F2013L01190; F2014L00801; F2015L00926; F2016L01101; F2017L00830
<b>Schedule 3</b>	
Part 1, Subclause 2(2), Table 1	rs F2012L01264; F2013L01190; F2014L00801; F2015L00926; F2017L00830
Part 1, Subclause 2(2), Table 2	rs F2012L01264; F2013L01190; F2014L00801; F2015L00926; F2016L01101; F2017L00830
Part 2, Paragraph 4(1)(a)	am. F2012L00604; F2016L00979; F2016L01101; F2017L01401
Part 2, Paragraph 4(1)(c)	ad. F2015L01356
Part 2, Subclause 5(1)	am F2012L00604; F2012L00905; F2012L01264; F2012L02114; F2012L02502; F2013L01321; F2013L01753; F2014L01434; F2015L01356; F2016L00979; F2016L01101; F2016L01665; F2017L00461; F2017L00603; F2017L00830; F2017L01401; F2018L00544
Part 3, Clause 8	am F2012L00604; F2012L00905; F2012L01264; F2012L02114; F2013L00497; F2013L01190; F2013L01321; F2013L01866; F2014L00309; F2014L00801; F2014L01434; F2015L00926; F2015L01356; F2015L02118; F2016L01101; F2016L01665; F2016L01846; F2017L00084; F2017L00603; F2017L01217; F2017L01401; F2017L01527; F2018L00544
<b>Schedule 4</b>	
Clause 6, Table 1	am F2012L00604; F2012L01264; F2012L01887; F2012L02111; F2013L00497; F2013L01190; F2014L00309; F2014L00801; F2014L01235; F2015L00324; F2015L00926; F2015L01451; F2016L00352; F2016L01101; F2016L01446; F2016L01463; F2017L00242; F2017L00830; F2017L00894; F2017L01217; F2018L00323
Clause 6, Table 2	rs F2013L01714 am. F2012L00604; F2012L01887; F2013L00497; F2013L01714; F2014L00309; F2014L01235; F2015L00324; F2015L01451; F2016L00352; F2016L01446; F2017L00242; F2017L01217; F2018L00323
<b>Schedule 5</b>	
Subclause 1(1)	am. F2013L00003

## Endnotes

### Endnote 4—Amendment history

Provision affected	How affected
Clause 4, Table	am. F2011L02731; F2012L00604; F2012L00822; F2012L01264; F2012L01887; F2012L02502 rs. F2013L00003
Subclause 4(1)	am. F2013L00497; F2013L01190; F2013L02113; F2014L00309; F2014L00801; F2014L01016; F2014L01235; F2014L01775; F2015L00324; F2015L00926; F2015L01451; F2015L02118; F2016L00352; F2016L01101; F2016L01446; F2016L01967; F2017L00242; F2017L00830; F2017L01217; F2017L01603; F2018L00323 rs. F2013L01753

### Endnote 4—Amendment history from 1 July 2018

Provision affected	How affected
<b>Part 1</b>	
s 2.....	rep LIA s 48D
<b>Schedule 1</b>	
Schedule 1.....	am F2018L00927; F2018L01474; F2018L01797; F2019L00925; F2019L01384; F2020L00190; F2020L00539; F2020L00862; F2020L01244; F2020L01378; F2021L00155; F2021L00856; F2021L00906; F2021L01461; F2022L00080; F2022L00635; F2022L00897; F2022L00954; F2022L01404; F2022L01417; F2023L00901; F2023L00926; F2023L01257; F2023L01411; F2024L00179; F2024L00701; F2024L00824
<b>Schedule 2</b>	
Schedule 2 heading	rs F2020L00862
Schedule 2.....	am F2018L00927; F2019L00925; F2020L00862; F2021L00856; F2022L00897; F2023L00901; F2024L00824
<b>Schedule 3</b>	
Schedule 3.....	am F2018L00927; F2018L01474; F2018L01797; F2019L00048; F2019L00493; F2019L00639; F2019L00925; F2019L01384; F2020L00190; F2020L00539; F2020L00862; F2020L00978; F2020L01244; F2020L01378; F2021L00155; F2021L00856; F2021L00906; F2021L01461; F2021L01879; F2022L00080; F2022L00230 ed C75 am F2022L00462; F2022L00635; F2022L00897; F2022L00924; F2022L01010; F2022L01279; F2022L01404; F2022L01417; F2023L00232; F2023L00901; F2023L00926; F2023L01036; F2023L01257; F2023L01411; F2024L00179; F2024L00701; F2024L00824; F2024L01330
<b>Schedule 4</b>	
Schedule 4.....	am F2018L00927; F2018L01315; F2019L00327; F2019L00925; F2019L01221; F2020L00272; F2020L00862; F2021L00264; F2021L00856; F2021L01295; F2022L00303; F2022L00897; F2022L01182; F2023L00252; F2023L00901; F2023L01257; F2024L00326; F2024L00824 ed C92 am F2024L01186 (Sch 2 item 2 md not incorp); F2024L01259

Endnote 4—Amendment history

Provision affected	How affected
<b>Schedule 5</b>	
Schedule 5.....	am F2018L00927; F2018L01315; F2018L01797 ed C53 am F2018L01414; F2023L00891