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## Legislative Instrument

# LODGMENT OF PRIVATE HEALTH INSURANCE INFORMATION IN ACCORDANCE WITH THE *PRIVATE HEALTH INSURANCE ACT 2007*

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In the exercise of the powers and functions delegated to me by the Commissioner of Taxation by Instrument of Delegation signed and dated 6 June 2014 and of the powers and functions I exercise in my own right, I, Stephen John Vesperman, Deputy Commissioner of Taxation, make this determination under Section 282-30 of the *Private Health Insurance Act 2007*.

**Stephen Vesperman**  
Deputy Commissioner of Taxation

Dated: 24 June 2014

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### 1. **Revocation of previous instrument**

*Lodgment of Private Health Insurance Information in Accordance with the Private Health Insurance Act 2007 – F2013L01587*, registered on the 19<sup>th</sup> August 2013, is revoked on the commencement of this determination.

### 2. **Name of Determination**

This determination is the *Lodgment of Private Health Insurance Information in Accordance with the Private Health Insurance Act 2007*.

### 3. **Commencement**

This determination commences on 01 July 2014.

### 4. **Application**

In accordance with section 282-30 of the *Private Health Insurance Act 2007*, I require the Chief Executive Medicare, within 120 days after the end of each financial year, to give me the following information:

- (a) in relation to each complying private health insurance policy, the name, date of birth and address details of each person who was insured for that financial year for private health insurance rebate and/or Medicare Levy Surcharge purposes; and
- (b) other information for each person insured for that financial year, including:
  - (ba) the name and contact details of the health fund that issued the policy under which they were insured;
  - (bb) the identification code of the fund that issued the policy;

- (bc) the fund membership number of the policy under which the person was insured;
- (bd) the unique personal identifier allocated to the person by the fund that issued the policy;
- (be) their policy role;
- (bf) where relevant, their share of premiums eligible for Australian Government rebate paid in the financial year to a health fund in respect of the policy;
- (bg) where relevant, their share of Australian Government rebate received in respect of the policy;
- (bh) where relevant, their share premiums eligible for Australian Government rebate (which is the sum of premiums eligible for Australian Government rebate paid and Australian Government rebate received);
- (bi) where relevant, the benefit code (which indicates the maximum age based rebate percentage applicable to the associated premium amounts);
- (bj) where relevant, their period of complying hospital cover provided;  
and
- (bk) where relevant, the type of policy under which they were insured.

**5. Determination**

This determination applies to the Chief Executive Medicare.