HEALTH INSURANCE LEVIES (AMENDMENT) ACT, 1983, No. 162

New South Wales



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Act No. 162, 1983.

An Act to amend the Health Insurance Levies Act, 1982, to reduce the levy on organisations carrying on health benefits business in New South Wales and to establish a voluntary ambulance insurance plan, and for other purposes. [Assented to, 31st December, 1983.]

See also Ambulance Services (Amendment) Act, 1983.

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Health Insurance Levies (Amendment).

BE it enacted by the Queen's Most Excellent Majesty, by and with the advice and consent of the Legislative Council and Legislative Assembly of New South Wales in Parliament assembled, and by the authority of the same, as follows:—

Short title.

1. This Act may be cited as the "Health Insurance Levies (Amendment) Act, 1983".

Commencement.

- 2. (1) Except as provided by subsection (2), this Act shall commence on the date of assent to this Act.
- (2) Section 5, in its application to Schedules 1 and 2 (6), and Schedules 1 and 2 (6) shall commence on 1st February, 1984.

Principal Act.

3. The Health Insurance Levies Act, 1982, is referred to in this Act as the Principal Act.

Schedules.

- 4. This Act contains the following Schedules:—
 - SCHEDULE 1.—Amendments to the Principal Act Relating to the Levy.
 - SCHEDULE 2.—Amendments to the Principal Act Relating to the State Ambulance Insurance Plan.
 - SCHEDULE 3.—Savings, Transitional and Other Provisions.

Amendment of Act No. 159, 1982.

5. The Principal Act is amended in the manner set forth in Schedules 1 and 2.

Savings, transitional and other provisions.

6. Schedule 3 has effect.

SCHEDULE 1.

(Sec. 5.)

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE LEVY.

(1) (a) Long title—

Omit "hospital" where firstly occurring, insert instead "health".

(b) Long title—

Omit "hospital benefit funds from certain hospital and", insert instead "health benefit funds and other persons from".

(2) Section 3—

From the matter relating to Part IV, omit "FEES", insert instead "AMBULANCE FEES".

(3) (a) Section 4 (1), definition of "basic health benefits"—

Omit the definition of "basic hospital benefits", insert instead:—

"basic health benefits" means those benefits payable to a contributor by an organisation in accordance with the basic private table or basic table of the organisation;

(b) Section 4 (1), definition of "health benefits fund"—

Omit the definition of "hospital benefits fund", insert instead:—
"health benefits fund" means a fund out of which an

organisation makes payments to contributors for periods of accommodation and maintenance in hospitals, and for surgical, therapeutic or other medical or health treatment, service or procedure in hospitals;

SCHEDULE 1-continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE LEVY—continued.

- (c) Section 4 (1), definitions of "monthly levy", "organisation"— Omit "hospital" wherever occurring, insert instead "health".
- (d) Section 4 (1), definition of "out-patient service"—
 Omit the definition.
- (e) Section 4 (1), definition of "prescribed rate"—
 Omit the definition, insert instead:—

"prescribed rate" means—

- (a) for January, 1983—40 cents;
- (b) for any month thereafter in 1983—70 cents;
- (c) for January 1984—75 cents; and
- (d) thereafter—32 cents, as adjusted from time to time in accordance with Schedule 2;
- (f) Section 4 (3) (a), (b)—

Omit the paragraphs, insert instead:—

- (a) the amount of any contributions received by the organisation from persons permanently resident outside New South Wales shall not be included in A in the definition of "monthly levy" in subsection (1);
- (b) the amount of any contributions received by the organisation from persons—
 - (i) who are, otherwise than by the operation of this Act, exempt from the payment of fees for the provision of ambulance services in pursuance of the Ambulance Services Act, 1976; and
 - (ii) who are members of such classes of persons so exempt as are prescribed,

shall not be included in A in that definition; and

SCHEDULE 1-continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE LEVY—continued.

(g) Section 4 (5)—

After section 4 (4), insert:—

- (5) Where the amount of weekly contribution required to be paid to an organisation by a single person for the purpose of securing entitlement to basic health benefits differs for different classes of contributors, the amount of weekly contribution for the purposes of B in the definition of "monthly levy" in subsection (1) shall be the larger or largest of the different amounts.
- (4) Sections 4 (2), 4 (3), 7 (2), 7 (6), 8 (1), 10, 11, 12 (1) (a), 19, 20 (2)—

Omit "hospital" wherever occurring, insert instead "health".

(5) Section 12 (1) (a)—

Omit "or in the Australian Capital Territory or the Northern Territory".

(6) Section 15—

Omit the section, insert instead:—

Money to be paid into Consolidated Fund.

- 15. All money recovered under this Part shall be paid by the Chief Commissioner into the Consolidated Fund.
- (7) Part IV, heading—

Omit "FEES", insert instead "AMBULANCE FEES".

(8) (a) Section 17 (1)—

Omit the subsection.

SCHEDULE 1—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE LEVY—continued.

(b) Section 17 (3)—

Omit the subsection, insert instead:-

- (3) Subsection (2) does not affect the operation of—
- (a) section 10 of the Workers' Compensation Act, 1926; or
- (b) Division 2 of Part II of the Motor Vehicles (Third Party Insurance) Act, 1942.
- (9) Section 18—

Omit the section, insert instead:—

Declarations.

18. A person is, notwithstanding section 17, liable for payment in respect of an ambulance service referred to in section 17 (2) unless a declaration is made by or on behalf of the person in or to the effect of the form approved by the Health Administration Corporation constituted by the Health Administration Act, 1982.

(10) (a) Schedule 2, clause 1 (1), definition of "year"—

Omit the definition, insert instead:—

"year" means-

- (a) the period commencing on and including 1st February, 1984, and ending on and including 31st January, 1985; or
- (b) a subsequent period commencing on and including 1st February and ending on and including the next following 31st January.
- (b) Schedule 2, clause 1 (4)—

Omit "1st January" wherever occurring, insert instead "1st February".

SCHEDULE 1—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE LEVY—continued.

(11) Schedule 3, clause 4—Omit the clause.

SCHEDULE 2.

(Sec. 5.)

Amendments to the Principal Act Relating to the State Ambulance Insurance Plan.

(1) Section 3—

After the matter relating to Part III, insert:—
PART IIIA.—STATE AMBULANCE INSURANCE PLAN—ss. 16a—
16h.

- (2) (a) Section 4 (1), definition of "authorised agent"—
 - After the definition of "ambulance service", insert:—

 "authorised agent" means an authorised agent under section
 16c;
 - (b) Section 4 (1), definition of "contributor"—

Omit the definition, insert instead:—

"contributor" means-

(a) in relation to a health benefits fund conducted by an organisation, a person who is a contributor to that fund in accordance with the rules of the organisation, and includes a person from whom or on whose behalf contributions are made; or

SCHEDULE 2—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE STATE AMBULANCE INSURANCE PLAN—continued.

- (b) in relation to the State Ambulance Insurance Plan, a person who is a member of that Plan in accordance with the provisions of or made under this Act;
- (c) Section 4 (1), definition of "regulations"—
 Omit "Act.", insert instead "Act;".
- (d) Section 4 (1), definition of "State Ambulance Insurance Plan"—

 After the definition of "regulations", insert:—

 "State Ambulance Insurance Plan" means the State

 Ambulance Insurance Plan established by section 16A.
- (3) (a) Section 7 (2) (a)—
 After "organisation", insert "or by an authorised agent".
 - (b) Section 7 (2) (b)—

 After "benefits fund" wherever occurring, insert "or the State
 Ambulance Insurance Plan, as the case may be".
 - (c) Section 7 (6)—
 After "contributors", insert "or which is an authorised agent".
- (4) Section 8 (1) (a)—
 After "contributors", insert "or the business of an authorised agent".
- (5) Part IIIA—
 After Part III, insert:—

SCHEDULE 2—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE STATE AMBULANCE INSURANCE PLAN—continued.

PART IIIA.

STATE AMBULANCE INSURANCE PLAN.

Establishment of plan.

16A. There is hereby established, for the purposes of this Act, a State Ambulance Insurance Plan.

Contributors.

- 16B. (1) Any person who is not—
 - (a) a contributor to a health benefits fund conducted by an organisation to which section 10 applies; or
 - (b) a person who is otherwise exempt from the payment of fees for the provision of ambulance services in pursuance of the Ambulance Services Act, 1976,

is eligible to become a member of the State Ambulance Insurance Plan.

- (2) There shall be the following 2 classes of membership of the State Ambulance Insurance Plan:—
 - (a) Single membership comprising a single person;
 - (b) Family membership comprising a person and the dependants of the person.
- (3) A reference in subsection (2) (b) to the dependants of a person is a reference to the spouse of the person and to such other persons as are prescribed as dependants of the person.

Authorised agents.

- 16c. (1) In this section, "prescribed organisation" means—
 - (a) the Hospitals Contribution Fund of Australia;

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Health Insurance Levies (Amendment).

SCHEDULE 2—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE STATE AMBULANCE INSURANCE PLAN—continued.

- (b) the N.I.B. Health Funds Limited;
- (c) the Western District Health Fund;
- (d) the Wollongong Hospital and Medical Benefits Contribution Fund; or
- (e) an organisation (including a society, body or group of persons which does not conduct a health benefits fund) prescribed by the regulations.
- (2) The Minister for Health may appoint a prescribed organisation as an authorised agent for the purposes of collecting contributions and performing other functions under the State Ambulance Insurance Plan and may enter into an agreement with any such organisation for those purposes.
- (3) The Minister for Health may revoke any such appointment and terminate any such agreement if the prescribed organisation which is appointed as an authorised agent fails to comply with any requirement—
 - (a) made by or under this Act;
 - (b) specified in the agreement; or
 - (c) made by the Minister for Health from time to time and notified in writing to that organisation.
- (4) Where an organisation referred to in subsection (1) (a), (b), (c) or (d) changes its name and the Minister for Health is satisfied that the change of name is not accompanied by any change in the nature of the organisation, the Minister for Health may, by notice published in the Gazette, so certify and, subject to subsection (5), as from the date that the notice is so published, the reference in subsection (1) (a), (b), (c) or (d), as the case may be, shall be read and construed as a reference to the organisation under that changed name.

SCHEDULE 2—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE STATE AMBULANCE INSURANCE PLAN—continued.

(5) The power of the Minister for Health under subsection (4) may be exercised in relation to an organisation under a changed name as if the organisation, under that changed name, were referred to in subsection (1).

Commission for authorised agents.

- 16D. (1) An authorised agent which collects contributions from contributors to the State Ambulance Insurance Plan is entitled to retain, as commission, such amount from each weekly contribution as may be determined from time to time by the Minister for Health, with the concurrence of the Minister, and notified in writing to the authorised agent.
- (2) An amount determined under subsection (1) may differ according to such factors as are specified in the determination.

Amount of contribution.

- 16E. (1) The amount of weekly contribution (including commission) required to be paid for membership of the State Ambulance Insurance Plan shall be—
 - (a) in the case of single membership—the prescribed rate for the month during which the contribution becomes due and payable; or
 - (b) in the case of family membership—an amount equal to twice the prescribed rate for the month during which the contribution becomes due and payable.

SCHEDULE 2—continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE STATE AMBULANCE INSURANCE PLAN—continued.

- (2) The regulations may specify the circumstances in which a person who has not paid any contribution which has become due and payable ceases to be a member of the State Ambulance Insurance Plan.
- (3) Contributions under the State Ambulance Insurance Plan are not payable in respect of any period before 1st February, 1984.

Remittance of contributions by authorised agents.

16F. An authorised agent which collects any contributions from contributors to the State Ambulance Insurance Plan shall, after deducting the amount of any commission which the authorised agent is entitled to retain under section 16D, remit the balance of the contributions to the Chief Commissioner at such times and in such manner as may be specified in an agreement with the authorised agent under section 16C (2) or as may be determined by the Chief Commissioner.

Money to be paid into Consolidated Fund.

16G. All money received by the Chief Commissioner under this Part shall be paid by the Chief Commissioner into the Consolidated Fund.

Regulations.

16H. The regulations may make provision for or with respect to the conduct and operation of the State Ambulance Insurance Plan.

SCHEDULE 2-continued.

AMENDMENTS TO THE PRINCIPAL ACT RELATING TO THE STATE AMBULANCE INSURANCE PLAN—continued.

(6) (a) Section 17 (2)—

Omit the subsection, insert instead:—

- (2) Notwithstanding anything to the contrary in the Ambulance Services Act, 1976, no fee shall be payable by a person in respect of an ambulance service provided to the person in pursuance of that Act if the person was, at the time the service was provided—
 - (a) a contributor to a health benefits fund conducted by an organisation to which section 10 applies; or
 - (b) a contributor to the State Ambulance Insurance Plan.
- (b) Section 17 (4)—

After section 17 (3), insert:—

- (4) Nothing in this section shall be construed as conferring on a person any entitlement to the provision of an ambulance service.
- (7) Schedule 3, clause 5—

Omit the clause.

SCHEDULE 3.

(Sec. 6.)

SAVINGS, TRANSITIONAL AND OTHER PROVISIONS.

Interpretation.

1. Expressions used in this Schedule shall, except in so far as the context or subject-matter otherwise indicates or requires, have the meanings ascribed to those expressions in the Principal Act.

SCHEDULE 3--continued.

SAVINGS, TRANSITIONAL AND OTHER PROVISIONS—continued.

Determination of levy prior to May, 1984.

2. For the purpose of determining the monthly levy for any month prior to May, 1984, a reference in the definition of "monthly levy" in section 4 (1) of the Principal Act to basic health benefits shall be read and construed as a reference to basic hospital benefits within the meaning of that Act, as in force immediately before 1st February, 1984.

Prescribed rate of levy for January, 1984.

3. For the purposes of the Principal Act, the prescribed rate for January, 1984, shall be 75 cents notwithstanding anything to the contrary in Schedule 2 to that Act, as in force before the date of assent to this Act.