

Health Insurance Levies Act 1982 No 159

[1982-159]



New South Wales

Status Information

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Provisions in force

The provisions displayed in this version of the legislation have all commenced.

Notes—

- **See also**
[State Revenue Legislation Amendment Bill 2010](#)

Authorisation

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Contents

Long title	4
Part 1 Preliminary	4
1 Name of Act	4
2 Commencement	4
3 Taxation Administration Act 1996	4
4 Definitions	4
5 Crown bound	6
Part 2 (Repealed)	6
Part 3 Levies	6
10 Monthly levy payable	6
10A Calculation of monthly levy	6
11 Requirement to furnish a monthly return	7
11A Assessment of monthly levy by organisations in certain circumstances	8
12-15 (Repealed)	8
16 Adjustment of prescribed rate	8
Part 3A State Ambulance Insurance Plan	8
16A Establishment of plan	8
16B Contributors	8
16C Authorised agents	9
16D Commission for authorised agents	10
16E Amount of contribution	10

16F Remittance of contributions by authorised agents	10
16G Annual adjustment	11
16H Regulations	11
Part 4 Exemption from ambulance fees	11
17 Exemption from ambulance fees	12
18 Declarations	12
Part 5 Miscellaneous	12
19 Records to be kept.....	12
20–24 (Repealed)	12
25 Transitional provisions	12
26 Regulations.....	13
Schedule 1 (Repealed)	13
Schedule 2 Adjustment of prescribed rate	13
Schedule 3 Transitional provisions	17

Health Insurance Levies Act 1982 No 159



New South Wales

An Act to impose a levy on organisations carrying on health benefits business in New South Wales; to make provision to free contributors to health benefits funds and other persons from ambulance fees; and for other purposes.

Part 1 Preliminary

1 Name of Act

This Act may be cited as the *Health Insurance Levies Act 1982*.

2 Commencement

- (1) Sections 1 and 2 shall commence on the date of assent to this Act.
- (2) Except as provided by subsection (1), this Act shall commence on 1 January 1983.

3 Taxation Administration Act 1996

This Act is to be read together with the *Taxation Administration Act 1996* which makes provision for the administration and enforcement of this Act and other taxation laws.

4 Definitions

- (1) In this Act, except in so far as the content or subject-matter otherwise indicates or requires:

ambulance service means a service related to the work of rendering first aid to, and the transport of, sick and injured persons, but does not include a service of a class prescribed for the purposes of this definition.

authorised agent means an authorised agent under section 16C.

basic health benefits means those benefits payable to a contributor by an organisation in accordance with an applicable benefits arrangement (within the meaning of the *Private Health Insurance Act 2007* of the Commonwealth) of the organisation.

Chief Commissioner means the Chief Commissioner of State Revenue referred to in

section 60 of the *Taxation Administration Act 1996*.

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 (including a person who, in accordance with those rules, for the time being remains a contributor even though in arrears with his or her contributions), and includes a person for whom or on whose behalf contributions are made, or
- (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.

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.

levy means a monthly levy or an additional levy under this Act.

month means any of the 12 months of the year.

organisation means a society, body or group of persons, whether corporate or unincorporate, which conducts a health benefits fund.

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) for any month thereafter and before July 1997—32 cents, as adjusted from time to time in accordance with Schedule 2, and
- (e) for July 1997 and for any month thereafter—83 cents, as adjusted from time to time in accordance with Schedule 2.

record means:

- (a) a documentary record, or
- (b) a record made by an electronic, electromagnetic, photographic or optical process, or
- (c) any other kind of record.

regulations means regulations under this Act.

State Ambulance Insurance Plan means the State Ambulance Insurance Plan established by section 16A.

- (2) An organisation shall, for the purposes of this Act, be deemed to carry on the business in New South Wales of providing health benefits to contributors if:
- (a) for the purposes of, or purposes related to, the enrolment of contributors to a health benefits fund conducted by it or the payment of benefits to any such contributors:
 - (i) it uses premises in New South Wales, or
 - (ii) it uses, in New South Wales, the services of a servant or an agent, or
 - (b) any of the contributors to a health benefits fund conducted by it are permanently resident in New South Wales.
- (3) Notes included in this Act do not form part of this Act.
- (4), (5) (Repealed)

5 Crown bound

This Act binds the Crown not only in right of New South Wales but also, so far as the legislative power of Parliament permits, the Crown in all its other capacities.

Part 2

6-9 (Repealed)

Part 3 Levies

10 Monthly levy payable

An organisation which, on the first day in any month, carries on the business in New South Wales of providing health benefits to contributors is liable to pay to the Chief Commissioner, on or before the 15th day of that month, the monthly levy calculated in accordance with section 10A.

10A Calculation of monthly levy

- (1) The monthly levy for a month is the amount calculated in accordance with the following formula:

$$L = (S + 2F) \times C \times D \times 1/7$$

where:

L is the monthly levy in dollars.

S is the number of single contributors at the beginning of the month.

F is the number of contributing families at the beginning of the month.

C is the prescribed rate in force during the month.

D is the number of days in the month.

(2) In subsection (1):

contributing family means a family or group whose members are contributors with respect to a health benefits fund by virtue of a single policy of insurance.

single contributor means a contributor who is not a member of a contributing family.

(3) In determining the values of S and F in the formula given in subsection (1), single contributors, or members of a contributing family all of whom:

(a) are permanently resident outside New South Wales, or

(b) are members of one or more of the following classes of contributors:

(i) persons who contribute to an organisation for the purpose of securing entitlement only to benefits other than basic health benefits,

(ii) persons who hold one or more of the following cards issued to them by the Commonwealth:

- Concession Card
- Health Benefits Card
- Pensioner Health Benefits and Transport Concession Card
- Pharmaceutical Benefits Concession Card and Social Security Card

(iii) persons who are in receipt of a service pension under Part III of the *Veterans' Entitlements Act 1986* of the Commonwealth,

are not to be counted.

(4) If a monthly levy comprises, in addition to a number of dollars, a number of cents, the number of cents is to be disregarded.

11 Requirement to furnish a monthly return

Any organisation which carries on the business in New South Wales of providing health benefits to contributors shall furnish, together with each monthly levy under section 10, a return in a form approved by the Chief Commissioner.

Maximum penalty: 50 penalty units.

11A Assessment of monthly levy by organisations in certain circumstances

- (1) If an organisation is liable to pay a monthly levy under section 10 but is unable to determine accurately the number of contributors for the purpose of calculating the amount of the levy, the organisation is to make an estimate of the number of its contributors for the purpose of paying the levy.
- (2) The organisation must, once the precise number of contributors becomes known to it, inform the Chief Commissioner of the number of contributors.
- (3) The organisation:
 - (a) must then assess the difference between the amount paid and the amount of the monthly levy, and
 - (b) must pay any additional amount required or it may apply for a refund if the amount paid exceeds the monthly levy.
- (4) (Repealed)

12-15 (Repealed)

16 Adjustment of prescribed rate

Schedule 2 has effect.

Part 3A State Ambulance Insurance Plan

16A Establishment of plan

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

16B Contributors

- (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,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 includes a reference to the spouse of the person and to any other person who is a dependent child (within the meaning of section 10AA of the *Health Insurance Act 1973* of the Commonwealth) in relation to the person.

(4) In this section:

spouse of a person includes a de facto partner of that person.

Note—

“De facto partner” is defined in section 21C of the *Interpretation Act 1987*.

16C Authorised agents

(1) In this section, **prescribed organisation** means:

(a) the Hospitals Contribution Fund of Australia,

(b) the N.I.B. Health Funds Limited,

(c) the Western District Health Fund,

(d) the Wollongong Hospital and Medical Benefits Contribution Fund,

(d1) Grand United Friendly Society Limited, 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.

- (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).

16D Commission for authorised agents

- (1) An authorised agent which collects contributions from contributors to the State Ambulance Insurance Plan is entitled to a commission on contributions, being such amount 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.

16E Amount of contribution

- (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.
- (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 1 February 1984.

16F Remittance of contributions by authorised agents

An authorised agent must, on or before the 15th day of each month:

- (a) lodge a return with the Chief Commissioner, in a form approved by the Chief Commissioner, for that month, and
- (b) pay to the Chief Commissioner an amount calculated in accordance with the following formula:

$$A = (S + 2F) \times C \times D \times 1/7 - E$$

where:

A is the amount in dollars to be paid to the Chief Commissioner.

S is the number of contributors to single membership at the beginning of the month.

F is the number of contributors to family membership at the beginning of the month.

C is the prescribed rate in force during the month.

D is the number of days in the month.

E is the authorised agent's commission (determined in accordance with section 16D) on contributions for the month.

16G Annual adjustment

- (1) If the amount paid to the Chief Commissioner by an authorised agent under section 16F for a year exceeds the actual amount payable by the authorised agent for that year, the authorised agent may apply for a refund of an amount equal to the difference and the Chief Commissioner is to refund that difference.
- (2) If the actual amount payable by an authorised agent for a year exceeds the amount paid to the Chief Commissioner by the authorised agent for the year under section 16F, the authorised agent is to pay the difference to the Chief Commissioner by the date on which the authorised agent is required to lodge a return for the first month of the next year.
- (3) In this section:

actual amount payable for a year means the total of all contributions to the State Ambulance Insurance Plan for the year collected by an authorised agent, less the total of all commission deducted from those contributions by the authorised agent in accordance with section 16D.

year means a period commencing on and including 1 February and ending on and including the following 31 January.

16H Regulations

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

Part 4 Exemption from ambulance fees

17 Exemption from ambulance fees

- (1) (Repealed)
- (2) Notwithstanding anything to the contrary in Chapter 5A of the *Health Services Act 1997*, 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.
- (3) Subsection (2) does not affect the operation of:
 - (a) Division 3 of Part 3 of the *Workers Compensation Act 1987*, or
 - (b) Division 2 of Part 2 of the *Motor Vehicles (Third Party Insurance) Act 1942*.
- (4) Nothing in this section shall be construed as conferring on a person any entitlement to the provision of an ambulance service.

18 Declarations

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*.

Part 5 Miscellaneous

19 Records to be kept

An organisation which carries on the business in New South Wales of providing health benefits to contributors shall:

- (a) keep such records as may be prescribed containing such particulars as may be prescribed relating to that business, and
- (b) (Repealed)

Maximum penalty: 50 penalty units.

20-24 (Repealed)

25 Transitional provisions

Schedule 3 has effect.

26 Regulations

- (1) The Governor may make regulations, not inconsistent with this Act, for or with respect to any matter that by this Act is required or permitted to be prescribed or that is necessary or convenient to be prescribed for carrying out or giving effect to this Act.
- (2) A provision of a regulation may:
 - (a) apply generally or be limited in its application by reference to specified exceptions or factors,
 - (b) apply differently according to different factors of a specified kind, or
 - (c) authorise any matter or thing to be from time to time determined, applied or regulated by any specified person or body,or may do any combination of those things.
- (3) A regulation may impose a penalty not exceeding 20 penalty units for an offence against the regulation.

Schedule 1 (Repealed)

Schedule 2 Adjustment of prescribed rate

(Section 16)

1 Definitions

- (1) In this Schedule, except in so far as the context or subject-matter otherwise indicates or requires:

adjustment percentage, in relation to a year, means (subject to clauses 2 (2) and 3 (1) (b)) the percentage for that year, calculated in accordance with clause 2 or specified pursuant to clause 3 (1) (a).

year means:

- (a) the period commencing on and including 1 February 1984 and ending on and including 31 January 1985, or
 - (b) a subsequent period commencing on and including 1 February and ending on and including the next following 31 January.
- (2) Where the prescribed rate is to be adjusted under this Schedule by reference to the adjustment percentage for a year, a reference (however expressed) in this Act to adjusting the prescribed rate is a reference to increasing or reducing the prescribed rate, as the case may require, according to whether the adjustment percentage represents an overall increase or reduction.

(3) In this Schedule, a reference to:

- (a) the March quarter of a year is a reference to January, February and March of that year,
- (b) the June quarter of a year is a reference to April, May and June of that year,
- (c) the September quarter of a year is a reference to July, August and September of that year, and
- (d) the December quarter of a year is a reference to October, November and December of that year.

(4) A reference in this Schedule to the operative date in a year is a reference to 1 February in that year or such later date in that year as the Governor determines by order published in that Gazette before 1 February in that year.

2 Calculation of adjustment percentage

(1) For the purposes of the definition of **adjustment percentage** in clause 1 (1), the percentage for a year (referred to in this clause as the **relevant year**) shall be calculated in accordance with the following formula:

$$P = 0.75 p(L) + 0.25 p(I)$$

where:

- (a) **P** is the percentage to be obtained,
- (b) **p(L)** is the annual percentage change in the average weekly earnings for employees or a class of employees, for New South Wales, being the percentage change determined by reference to the amount shown for the September quarter of the relevant year to the amount shown for the September quarter of the previous year:
 - (i) except as provided by subparagraph (ii)—in the group of amounts set out under the heading “All males”, for New South Wales, in the series of Average Weekly Earnings (Original), issued by the Australian Statistician, or
 - (ii) where some other group of amounts or of numbers (being a group of amounts or of numbers contained in a publication which relates to the average weekly earnings for employees or a class of employees, for New South Wales, and which is issued by the Australian Statistician) is prescribed for the purposes of this subparagraph—in the group of amounts or of numbers so prescribed,
- (c) **p(I)** is the annual percentage change in the price of goods and services, being the percentage change determined by reference to the index number shown for the September quarter of the relevant year to the index number shown for the

September quarter of the previous year:

- (i) except as provided by subparagraph (ii)—in the group of numbers set out as the index numbers for Sydney in the Consumer Price Index (All Groups Index) issued by the Australian Statistician, or
 - (ii) where some other group of numbers or of amounts (being a group of numbers or of amounts which relate to the price of goods and services, and which is issued by the Australian Statistician) is prescribed for the purposes of this subparagraph—in the group of numbers or of amounts so prescribed.
- (2) Where the percentage calculated for a year in accordance with this clause is smaller than 0.1 per cent, or is nil, there shall be deemed to be no adjustment percentage for that year.
- (3) Where pursuant to subclause (2), but not otherwise, there is deemed to be no adjustment percentage for a year, then, for the purposes of calculating the adjustment percentage for the next year:
- (a) the amounts or numbers referred to in subclause (1) and shown for the September quarter of the firstmentioned year shall be deemed not to have been published in the documents so referred to, and
 - (b) the amounts or numbers shown for the September quarter of the last year for which there was an adjustment percentage (including a year in which there would have been an adjustment percentage if this Act had been in force at that time or if clause 3 (1) (b) had not been enacted) and published in the documents so referred to shall be deemed also to be the amounts or numbers so published for the September quarter of the firstmentioned year.
- (4) If at any time, whether before or after the commencement of this Schedule, the Australian Statistician has published for a particular quarter an amount or number in substitution for an amount or number previously published by the Australian Statistician in respect thereof:
- (a) except as provided in paragraph (b)—the publication of the later amount or number shall be disregarded, or
 - (b) if the Minister so directs—regard shall, after the direction is given, be had to the later and not to the earlier amount or number so published,
- for the purposes of this Schedule.
- (5) Notwithstanding subclause (4), if at any time after the commencement of this Schedule the Australian Statistician changes the reference base in connection with any amounts or numbers included in any document published by the Australian Statistician and referred to in subclause (1), then, for the purposes of the application

of this clause after the change takes place, regard shall, unless the Minister otherwise directs, be had to amounts or numbers published in terms of the new reference base instead of the former reference base.

- (6) Where a percentage that is to be calculated in accordance with this clause is or includes a fraction of one-tenth of 1 per cent:
 - (a) if that fraction is less than one-half of one-tenth of 1 per cent—that fraction shall be disregarded, and
 - (b) if that fraction is not less than one-half of one-tenth of 1 per cent—that fraction shall be treated as one-tenth of 1 per cent.
- (7) Where any annual percentage change referred to in subclause (1) cannot, for the purpose of calculating an adjustment percentage for a year, be ascertained before 1 January in the following year because any information referred to in that subclause is not available, the Governor may, by order published in the Gazette, specify a percentage, which shall be deemed to be the annual percentage change ascertained in accordance with this Schedule.
- (8) An order may be made for the purposes of subclause (7) only if the Minister certifies to the Governor:
 - (a) that the information was not available as referred to in that subclause, and
 - (b) that the percentage to be specified in the order was calculated in accordance with estimates made having regard to, and by reference to, such relevant information as was reasonably available.

3 Governor may specify a different percentage

- (1) Subject to this clause, the Governor may, by regulation:
 - (a) specify a percentage for a year, by way of increase or reduction as specified therein, which shall for the purposes of this Schedule be deemed to be the adjustment percentage for that year, by way of increase or reduction as so specified, instead of any adjustment percentage calculated for that year in accordance with clause 2, or
 - (b) declare that there shall be no adjustment percentage for a year, in which case there shall for the purposes of this Schedule be deemed to be no such percentage.
- (2) A regulation made for the purposes of subclause (1) (a) shall not have effect in respect of the adjustment percentage for a year if the application of the percentage specified in the regulation would result in the prescribed rate being greater than the prescribed rate that would be applicable from the operative date in the following year had this clause never been in force.

- (3) A regulation made for the purposes of subclause (1) shall not have effect in respect of the adjustment percentage for a year unless it is published in the Gazette before the operative date in the following year.

4 Adjustment of prescribed rate

- (1) Subject to this Schedule, where there is an adjustment percentage for a year, the prescribed rate (as adjusted by the previous operation, if any, of this subclause) is hereby adjusted, on and from the operative date in the following year, by that percentage.

Editorial note—

For adjusted prescribed rate under this clause and clause 5, see Gazettes No 1 of 7.1.2000, p 127; No 28 of 25.1.2001, p 372; No 30 of 25.1.2002, p 460; No 264 of 27.12.2002, p 11451; No 12 of 16.1.2004, p 199; No 7 of 14.1.2005, p 135; No 7 of 13.1.2006, p 362; No 11 of 19.1.2007, p 202; No 9 of 18.1.2008, p 143; No 23 of 30.1.2009, p 523 and No 200 of 11.12.2009, p 6067.

- (2) Where the prescribed rate, after it is adjusted under subclause (1), includes a fraction of a cent:
- (a) which is not greater than one-half of one cent—that fraction shall be disregarded, and
 - (b) which is greater than one-half of one cent—that fraction shall be treated as one cent.

5 Chief Commissioner to publicise adjustments

Where there is an adjustment percentage for a year, the Chief Commissioner shall, before the operative date in the following year, publish in the Gazette a notice of the prescribed rate as adjusted in accordance with this Schedule on and from the operative date in the following year.

6 Savings

An adjustment of the prescribed rate in accordance with this Schedule does not affect the liability of any organisation to pay a monthly levy in respect of a month before the adjustment takes effect, in accordance with this Act, and that organisation is liable to pay any such levy in all respects as if that adjustment had not been made.

Schedule 3 Transitional provisions

(Section 25)

Part 1 Provisions consequent on enactment of [Health Insurance](#)

Levies Act 1982

1 (Repealed)

2 Due date for first levy

The due date in accordance with section 10 for the payment of the monthly levy in respect of the month of January in 1983 shall, notwithstanding anything to the contrary in that section, be 31 January 1983.

3 Exemption from fees—date of operation

- (1) Section 17 (1) does not apply to out-patient services provided before 1 January 1983.
- (2) Section 17 (2) does not apply to ambulance services provided before 1 February 1983.

Part 2 Provision consequent on enactment of [Health Insurance Levies \(Administration\) Amendment Act 1983](#)

3A References to Commissioner or Assistant Commissioner for Health Insurance Levies

- (1) On and from the commencement of this clause, in any Act (other than this Act) or in any regulation, by-law or statutory instrument or in any document, whether of the same or of a different kind:
 - (a) a reference to the Commissioner for Health Insurance Levies, being a reference to the Commissioner referred to in section 6 of this Act, as in force before the commencement of this clause, or
 - (b) a reference to the Assistant Commissioner for Health Insurance Levies,is to be read and construed as a reference to the Chief Commissioner for Health Insurance Levies or the Commissioner for Health Insurance Levies, respectively, referred to in section 6 of this Act, as amended by the [Health Insurance Levies \(Administration\) Amendment Act 1983](#).
- (2) This clause is taken to have commenced on 22 April 1983 (the day appointed and notified under section 2 (2) of the [Health Insurance Levies \(Administration\) Amendment Act 1983](#)).
- (3) Subclauses (1) and (2) re-enact (with minor modification) clause 4 of Schedule 2 to the [Health Insurance Levies \(Administration\) Amendment Act 1983](#). Subclauses (1) and (2) are transferred provisions to which section 30A of the [Interpretation Act 1987](#) applies.

Part 3 Provision consequent on enactment of [State Revenue](#)

Legislation (Further Amendment) Act 1992

4 Application of amendments made by [State Revenue Legislation \(Further Amendment\) Act 1992](#)

A variation, taking effect on or after 1 February 1993 and before 1 July 1994, of the prescribed rate:

- (a) applies in relation to the month in which payment of the monthly levy is payable, in so far as it affects the calculation of the levy payable by reason of carrying on the business of providing health benefits to contributors during the 3 months immediately preceding that date, and
- (b) applies in relation to the month during which such a business is carried on, in so far as it affects the calculation of the levy payable by reason of carrying on that business during any month after that date.

Part 4 Provision consequent on enactment of [State Revenue Legislation \(Amendment\) Act 1994](#)

5 Application of amendments made by [State Revenue Legislation \(Amendment\) Act 1994](#)

- (1) Without limiting the generality of section 30 of the [Interpretation Act 1987](#), the amendments to this Act made by the [State Revenue Legislation \(Amendment\) Act 1994](#) do not affect:
 - (a) any liability (which arose before 1 July 1994) to pay a monthly levy on or before the date on which it would have been due if the amendments had not taken effect, and
 - (b) the requirement to furnish a return with that monthly levy in accordance with section 11 as in force immediately before the commencement of the amendments.
- (2) An adjustment of the prescribed rate applies to the calculation of the monthly levy for the month in which the adjustment is made only if the adjustment takes effect on the first day of that month.

Part 5 Provision consequent on enactment of [State Revenue Legislation Further Amendment Act 1999](#)

6 Application of amendments

- (1) The amendments made to Part 3A by the amending Act do not apply in respect of contributions to the State Ambulance Insurance Plan that are received by an authorised agent before 1 February 2000.
- (2) Accordingly, such a contribution, the membership of the contributor and the commission on the contribution is not to be included in the calculation of the

following:

- (a) the amount payable to the Chief Commissioner under the section 16F, as substituted by the amending Act,
 - (b) any adjustment under section 16G.
- (3) The provisions of Part 3A, as in force immediately before 1 February 2000, continue to apply in respect of any contribution to the State Ambulance Insurance Plan received by an authorised agent before 1 February 2000.
- (4) In this clause:

amending Act means the [State Revenue Legislation Further Amendment Act 1999](#).