

Clinical category	Scope of cover (see Note 1)	Treatments that must be covered (MBS Items) (see Notes 1, 2 and 3)									
(provided by a registered podiatric surgeon)	ankle, provided by a registered podiatric surgeon, but limited to cover for: • accommodation; and • the cost of a prosthesis as listed in the prostheses list set out in the Private Health Insurance (Prostheses) Rules, as in force from time to time. Note: Insurers are not required to pay for any other benefits for hospital treatment for this clinical category but may choose to do so.										
Pregnancy and birth	Hospital treatment for investigation and treatment of conditions associated with pregnancy and child birth. Treatment for the baby is covered under the clinical category relevant to their condition. For example, respiratory conditions are covered under <i>Lung and chest</i>. Female reproductive conditions are listed separately under <i>Gynaecology</i>. Fertility treatments are listed separately under <i>Assisted reproductive services</i>. Miscarriage and termination of pregnancy is listed separately under <i>Miscarriage and termination of pregnancy</i>.	Treatments involving the provision of the following MBS items:								16399	16400
		16401	16404	16406	16407	16408	16500	16501	16502	16505	
		16508	16509	16511	16512	16514	16515	16518	16519	16520	
		16522	16527	16528	16533	16534	16564	16567	16570	16571	
		16573	16590	16591	16600	16603	16606	16609	16612	16615	
		16618	16621	16624	16627	82100	82105	82110	82115	82120	
		82125									
Skin	Hospital treatment for the investigation and treatment of skin, skin-related conditions and	Treatments involving the provision of the following MBS items:								14050	14053
		14100	14106	14109	14112	14115	14118	14124	18362	30023	

Clinical category	Scope of cover (see Note 1)	Treatments that must be covered (MBS Items) (see Notes 1, 2 and 3)									
	nails. The removal of foreign bodies is also included. Plastic surgery that is medically necessary and relating to the treatment of a skin-related condition is also included. For example: melanoma, minor wound repair and abscesses. Removal of excess skin due to weight loss is listed separately under <i>Weight loss surgery</i> . Chemotherapy and radiotherapy for cancer is listed separately under <i>Chemotherapy, radiotherapy and immunotherapy for cancer</i> .	30024	30026	30029	30032	30035	30038	30042	30045	30049	
		30052	30055	30064	30071	30099	30180	30183	30185	30186	
		30187	30189	30190	30192	30195	30196	30197	30202	30203	
		30205	30207	30210	30213	30214	30216	30219	30223	30676	
		30679	31000	31001	31002	31206	31211	31216	31220	31221	
		31225	31245	31250	31340	31345	31356	31357	31358	31359	
		31360	31361	31362	31363	31364	31365	31366	31367	31368	
		31369	31370	31371	31372	31373	31374	31375	31376	44136	
		46486	46489	46513	46516	46528	46531	46534	47904	47906	
		47912	47915	47916	47918	52000	52003	52006	52009	52039	
		52042	52051	52054							
Sleep studies	Hospital treatment for the investigation of sleep patterns and anomalies. For example: sleep apnoea and snoring.	Treatments involving the provision of the following MBS items: 12210 12213 12215 12217 12250							12203	12207	
Tonsils, adenoids and grommets	Hospital treatment of the tonsils, adenoids and insertion or removal of grommets.	Treatments involving the provision of the following MBS items: 41793 41797 41801							41632	41789	
Weight loss surgery	Hospital treatment for surgery that is designed to reduce a person's weight, remove excess skin due to weight loss and reversal of a bariatric procedure. For example: gastric banding, gastric bypass, sleeve gastrectomy.	Treatments involving the provision of the following MBS items: 30171 30172 30177 30179 31569 31572 31575 31584 31587 31590							30165	30168	
									31578	31581	

Schedule 6—Common treatments list

Note: Rule 11F is the principal provision that deals with what hospital treatments must be covered by an insurance policy that covers hospital treatment. The operation of rule 11F relies on this Schedule, as well as Schedule 5 and Schedule 7.

1 Common treatments list

For sub-subparagraph 11F (5) (b) (ii) (A), the common treatments list is set out in the following table:

Common treatments list									
3	4	20	23	24	35	36	37	43	44
	47	51	52	53	54	57	58	59	60
	65	92	93	95	96	99	104	105	106
	107	108	109	110	111	112	113	114	116
	117	119	120	122	128	131	132	133	135
	137	139	141	143	145	147	149	160	161
	162	163	164	173	179	181	183	185	187
	188	189	191	193	195	197	199	202	203
	206	212	214	215	218	219	220	221	222
	223	224	225	226	227	228	229	230	231
	232	233	235	236	237	238	239	240	243
	244	245	249	251	252	253	254	255	256
	257	259	260	261	262	263	264	265	266
	268	269	270	271	272	276	277	279	281
	282	283	285	286	287	288	291	293	296
	299	300	302	304	306	308	310	312	314
	316	318	319	330	332	334	336	338	353
	355	356	357	358	359	361	384	385	386
	387	388	389	410	411	412	413	414	415
	416	417	501	503	507	511	515	519	520
	530	532	534	536	585	588	591	594	599
	600	701	703	705	707	715	721	723	729
	731	732	733	735	737	739	741	743	745
	747	750	758	761	763	766	769	772	776
	788	789	792	812	820	822	823	825	826
	827	828	829	830	832	834	835	837	838
	867	868	869	871	872	873	876	880	881
	885	891	892	900	903	2100	2122	2125	2126
	2137	2138	2143	2147	2179	2195	2199	2220	2497
	2501	2503	2504	2506	2507	2509	2517	2518	2521
	2522	2525	2526	2546	2547	2552	2553	2558	2559
	2598	2600	2603	2606	2610	2613	2616	2620	2622
	2624	2631	2633	2635	2664	2666	2668	2673	2675
	2677	2799	2801	2806	2814	2820	2824	2832	2840
	2946	2949	2954	2958	2972	2974	2978	2984	2988
	2992	2996	3000	4001	5000	5003	5010	5020	5023
	5028	5040	5043	5049	5060	5063	5067	5200	5203
	5207	5208	5220	5223	5227	5228	5260	5263	5265

Common treatments list								
5267	6051	6052	6057	6058	6059	6060	6062	6063
6064	6065	6067	6068	6071	6072	6074	6075	6087
10905	10907	10910	10911	10912	10913	10914	10915	
10916	10918	10921	10922	10923	10924	10925	10926	
10927	10928	10929	10930	10945	10946	10947	10948	
11830	11835	12000	12003	13015	13020	13025	13030	
13210	13757	13870	13873	14200	14201	14202	14209	
17615	17620	17625	17640	17645	17650	17655	18216	
18219	18282	18284	18286	18288	18290	18292	18294	
18296	18298	30058	30061	30068	30072	30075	30078	
30081	30084	30087	30093	30094	30096	30097	30224	
30225	30321	30323	30329	30330	30332	30335	30336	
30388	30390	30391	30394	30403	30405	30611	31350	
31355	34538	36502	37607	37610	38456	39000	43915	
44130	46519	46525	51700	51703	52012	52015	52018	
52144	53600	75001	75004	75150	75153	82130	82135	
82140	82150	82151	82152	82200	82205	82210	82215	
82220	82221	82222	82223	82224	82225			

Schedule 7—Support treatments list

Note: Rule 11F is the principal provision that deals with what hospital treatments must be covered by an insurance policy that covers hospital treatment. The operation of rule 11F relies on this Schedule, as well as Schedule 5 and Schedule 6.

1 Support treatments list

For sub-subparagraph 11F (5) (b) (ii) (B), the support treatments list is set out in the following table:

Support treatments list								
6080	6081	10801	10802	10803	10804	10805	10806	10807
	10808	10809	10816	10931	10932	10933	10940	10941
	10942	10943	10944	10950	10951	10952	10953	10954
	10956	10958	10960	10962	10964	10966	10968	10970
	10984	10987	10988	10989	10990	10991	10992	10997
	11000	11003	11004	11005	11006	11009	11012	11015
	11018	11021	11024	11027	11200	11204	11205	11210
	11211	11215	11218	11219	11220	11221	11222	11224
	11225	11235	11237	11240	11241	11242	11243	11244
	11303	11304	11306	11309	11312	11315	11318	11324
	11327	11330	11332	11333	11336	11339	11503	11506
	11509	11512	11600	11602	11604	11605	11610	11611
	11612	11614	11615	11627	11700	11701	11702	11708
	11709	11710	11711	11712	11713	11715	11718	11719
	11720	11721	11722	11724	11725	11726	11727	11728

Support treatments list

12200	12201	12306	12312	12315	12320	12321	12322
12325	12326	12500	12503	12506	12509	12512	12515
12518	12521	12530	12533	13300	13303	13306	13309
13312	13318	13319	13703	13706	13709	13750	13755
13815	13818	13830	13839	13842	13847	13848	13851
13854	13857	13876	13881	13882	13885	13888	17610
17680	17690	18213	18222	18225	18226	18227	18228
18230	18232	18233	18234	18236	18238	18240	18242
18244	18248	18250	18252	18254	18256	18258	18260
18262	18264	18266	18268	18270	18272	18274	18276
18278	18280	20100	20102	20104	20120	20124	20140
20142	20143	20144	20145	20146	20147	20148	20160
20162	20164	20170	20172	20174	20176	20190	20192
20210	20212	20214	20216	20220	20222	20225	20230
20300	20305	20320	20321	20330	20350	20352	20355
20400	20401	20402	20403	20404	20405	20406	20410
20420	20440	20450	20452	20470	20472	20474	20475
20500	20520	20522	20524	20526	20528	20540	20542
20546	20548	20560	20600	20604	20620	20622	20630
20632	20634	20670	20680	20690	20700	20702	20703
20704	20705	20706	20730	20740	20745	20750	20752
20754	20756	20770	20790	20791	20792	20793	20794
20798	20799	20800	20802	20803	20804	20805	20806
20810	20815	20820	20830	20832	20840	20841	20842
20844	20845	20846	20847	20848	20850	20855	20860
20862	20863	20864	20866	20867	20868	20880	20882
20884	20886	20900	20902	20904	20905	20906	20910
20911	20912	20914	20916	20920	20924	20926	20928
20930	20932	20934	20936	20938	20940	20942	20943
20944	20946	20948	20950	20952	20953	20954	20956
20958	20960	21100	21110	21112	21114	21116	21120
21130	21140	21150	21155	21160	21170	21195	21199
21200	21202	21210	21212	21214	21216	21220	21230
21232	21234	21260	21270	21272	21274	21275	21280
21300	21321	21340	21360	21380	21382	21390	21392
21400	21402	21403	21404	21420	21430	21432	21440
21445	21460	21461	21462	21464	21472	21474	21480
21482	21484	21486	21490	21500	21502	21520	21522
21530	21532	21535	21600	21610	21620	21622	21630
21632	21634	21636	21638	21650	21652	21654	21656
21670	21680	21682	21685	21700	21710	21712	21714
21716	21730	21732	21740	21756	21760	21770	21772
21780	21785	21790	21800	21810	21820	21830	21832
21834	21840	21842	21850	21860	21865	21870	21872
21878	21879	21880	21881	21882	21883	21884	21885
21886	21887	21900	21906	21908	21910	21912	21914
21915	21916	21918	21922	21925	21926	21927	21930
21935	21936	21939	21941	21942	21943	21945	21949

Support treatments list

21952	21955	21959	21962	21965	21969	21970	21973
21976	21980	21981	21990	21992	21997	22001	22002
22007	22008	22012	22014	22015	22018	22020	22025
22031	22036	22040	22045	22050	22051	22055	22060
22065	22070	22075	22900	22905	23010	23021	23022
23023	23031	23032	23033	23041	23042	23043	23051
23052	23053	23061	23062	23063	23071	23072	23073
23081	23082	23083	23091	23101	23111	23112	23113
23114	23115	23116	23117	23118	23119	23121	23170
23180	23190	23200	23210	23220	23230	23240	23250
23260	23270	23280	23290	23300	23310	23320	23330
23340	23350	23360	23370	23380	23390	23400	23410
23420	23430	23440	23450	23460	23470	23480	23490
23500	23510	23520	23530	23540	23550	23560	23570
23580	23590	23600	23610	23620	23630	23640	23650
23660	23670	23680	23690	23700	23710	23720	23730
23740	23750	23760	23770	23780	23790	23800	23810
23820	23830	23840	23850	23860	23870	23880	23890
23900	23910	23920	23930	23940	23950	23960	23970
23980	23990	24100	24101	24102	24103	24104	24105
24106	24107	24108	24109	24110	24111	24112	24113
24114	24115	24116	24117	24118	24119	24120	24121
24122	24123	24124	24125	24126	24127	24128	24129
24130	24131	24132	24133	24134	24135	24136	25000
25005	25010	25015	25020	25025	25030	25050	25200
25205	30001	51300	51303	51306	51309	51312	51315
51318	51800	51803	53700	53702	53704	53706	55005
55007	55008	55010	55011	55013	55014	55016	55017
55019	55023	55025	55026	55028	55029	55030	55031
55032	55033	55036	55037	55038	55039	55048	55049
55054	55059	55060	55061	55062	55063	55064	55065
55067	55068	55069	55070	55073	55076	55079	55084
55085	55113	55114	55115	55116	55117	55118	55119
55120	55121	55122	55123	55125	55130	55131	55135
55136	55220	55221	55222	55223	55224	55226	55227
55228	55229	55230	55232	55233	55235	55236	55238
55244	55246	55248	55252	55274	55276	55278	55280
55282	55284	55292	55294	55296	55600	55601	55603
55604	55700	55701	55702	55703	55704	55705	55706
55707	55708	55709	55710	55711	55712	55713	55714
55715	55716	55717	55718	55719	55720	55721	55722
55723	55724	55725	55726	55727	55729	55730	55735
55736	55737	55739	55759	55760	55762	55763	55764
55765	55766	55767	55768	55769	55770	55771	55772
55773	55774	55775	55800	55801	55802	55803	55804
55805	55806	55807	55808	55809	55810	55811	55812
55813	55814	55815	55816	55817	55818	55819	55820
55821	55822	55823	55824	55825	55826	55827	55828

Support treatments list

55829	55830	55831	55832	55833	55834	55835	55836
55837	55838	55839	55840	55841	55842	55843	55844
55845	55846	55847	55848	55849	55850	55851	55852
55853	55854	55855	56001	56007	56010	56013	56016
56022	56028	56030	56036	56041	56047	56050	56053
56056	56062	56068	56070	56076	56101	56107	56141
56147	56219	56220	56221	56223	56224	56225	56226
56227	56228	56229	56230	56231	56232	56233	56234
56235	56236	56237	56238	56239	56240	56259	56301
56307	56341	56347	56401	56407	56409	56412	56441
56447	56449	56452	56501	56507	56541	56547	56553
56555	56619	56625	56659	56665	56801	56807	56841
56847	57001	57007	57041	57047	57201	57247	57341
57345	57350	57351	57355	57356	57360	57361	57362
57363	57506	57509	57512	57515	57518	57521	57524
57527	57529	57530	57532	57533	57535	57536	57538
57539	57700	57702	57703	57705	57706	57708	57709
57711	57712	57714	57715	57717	57721	57723	57901
57902	57903	57906	57909	57911	57912	57914	57915
57917	57918	57920	57921	57923	57924	57926	57927
57929	57930	57932	57933	57935	57938	57939	57941
57942	57944	57945	57947	57950	57953	57956	57959
57960	57962	57963	57965	57966	57968	57969	58100
58102	58103	58105	58106	58108	58109	58111	58112
58114	58115	58117	58120	58121	58123	58124	58126
58127	58300	58302	58306	58308	58500	58502	58503
58505	58506	58508	58509	58511	58521	58523	58524
58526	58527	58529	58700	58702	58706	58708	58715
58717	58718	58720	58721	58723	58900	58902	58903
58905	58909	58911	58912	58914	58915	58916	58917
58920	58921	58923	58927	58929	58933	58935	58936
58938	58939	58941	59103	59104	59300	59301	59303
59304	59306	59307	59309	59310	59312	59313	59314
59315	59318	59319	59700	59701	59703	59704	59712
59713	59715	59716	59718	59719	59724	59725	59733
59734	59739	59740	59751	59752	59754	59755	59763
59764	59970	59974	60000	60001	60003	60004	60006
60007	60009	60010	60012	60013	60015	60016	60018
60019	60021	60022	60024	60025	60027	60028	60030
60031	60033	60034	60036	60037	60039	60040	60042
60043	60045	60046	60048	60049	60051	60052	60054
60055	60057	60058	60060	60061	60063	60064	60066
60067	60069	60070	60072	60073	60075	60076	60078
60079	60100	60101	60500	60501	60503	60504	60506
60507	60509	60510	60918	60927	61109	61110	61302
61303	61306	61307	61310	61313	61314	61316	61317
61320	61328	61340	61348	61352	61353	61356	61360
61361	61364	61368	61369	61372	61373	61376	61381

Support treatments list

61383	61384	61386	61387	61389	61390	61393	61397
61401	61402	61405	61409	61413	61417	61421	61425
61426	61429	61430	61433	61434	61437	61438	61441
61442	61445	61446	61449	61450	61453	61454	61457
61458	61461	61462	61469	61473	61480	61484	61485
61495	61499	61505	61523	61529	61538	61541	61553
61559	61565	61571	61575	61577	61598	61604	61610
61620	61622	61628	61632	61640	61646	61647	61650
61651	61652	61653	61654	61655	61656	61657	61658
61659	61660	61661	61662	61663	61664	61665	61666
61667	61668	61669	61670	61671	61672	61673	61674
61675	61676	61677	61678	61679	61680	61681	61682
61683	61684	61685	61686	61687	61688	61689	61690
61691	61692	61693	61694	61695	61696	61697	61698
61699	61700	61701	61702	61703	61704	61705	61706
61707	61708	61709	61710	61712	61713	61714	61715
61716	61717	61718	61719	61729	63001	63004	63007
63010	63013	63014	63016	63017	63040	63043	63046
63049	63052	63055	63058	63061	63064	63067	63070
63073	63074	63075	63076	63077	63078	63079	63080
63081	63082	63083	63084	63085	63101	63104	63111
63114	63117	63119	63125	63128	63131	63134	63135
63136	63151	63154	63157	63158	63161	63164	63167
63170	63173	63176	63179	63182	63185	63186	63187
63188	63189	63190	63191	63192	63193	63194	63201
63204	63207	63208	63219	63222	63225	63228	63231
63234	63237	63240	63243	63257	63258	63259	63260
63261	63262	63263	63264	63265	63271	63274	63277
63280	63282	63283	63284	63285	63301	63304	63307
63310	63311	63313	63322	63325	63328	63331	63334
63337	63340	63341	63342	63343	63345	63346	63347
63348	63361	63364	63385	63388	63391	63392	63393
63394	63395	63396	63397	63398	63401	63404	63407
63408	63416	63419	63425	63428	63432	63433	63440
63443	63446	63447	63448	63449	63455	63457	63458
63461	63464	63467	63470	63473	63476	63479	63481
63482	63484	63486	63487	63488	63489	63490	63491
63494	63497	63498	63499	63501	63502	63504	63505
63507	63508	63510	63511	63513	63514	63516	63517
63519	63520	63522	63523	63541	63542	63543	63544
63547	63548	63551	63552	63554	63555	63557	63558
63560	63561	63740	63741	63743	63744	63746	63747
64990	64991	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

Support treatments list

65180	65181	66500	66503	66506	66509	66512	66517
66518	66519	66536	66539	66542	66545	66548	66551
66554	66557	66560	66563	66566	66569	66572	66575
66578	66581	66584	66587	66590	66593	66596	66605
66606	66607	66610	66623	66626	66629	66632	66635
66638	66639	66641	66642	66644	66647	66650	66651
66652	66653	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	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	69378	69379	69380	69381
69382	69383	69384	69387	69390	69393	69396	69400
69401	69405	69408	69411	69413	69415	69445	69451
69471	69472	69474	69475	69478	69481	69482	69483
69484	69488	69489	69491	69492	69494	69495	69496
69497	69498	69499	69500	71057	71058	71059	71060
71062	71064	71066	71068	71069	71071	71072	71073
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	71180
71183	71186	71189	71192	71195	71198	71200	71203
72813	72816	72817	72818	72823	72824	72825	72826
72827	72828	72830	72836	72838	72844	72846	72847
72848	72849	72850	72851	72852	72855	72856	72857
72858	72859	73043	73045	73047	73049	73051	73059
73060	73061	73062	73063	73064	73065	73066	73067
73070	73071	73072	73073	73074	73075	73076	73287
73289	73290	73291	73292	73293	73294	73295	73296
73297	73300	73305	73308	73309	73311	73312	73314
73315	73317	73318	73320	73321	73323	73324	73325
73326	73327	73332	73333	73334	73335	73336	73337
73338	73339	73340	73341	73342	73343	73345	73346
73347	73348	73349	73350	73521	73523	73525	73527
73529	73801	73802	73803	73804	73805	73806	73807

Support treatments list							
73808	73809	73810	73811	73828	73829	73830	73831
73832	73833	73834	73835	73836	73837	73839	73840
73844	73899	73900	73920	73922	73923	73924	73925
73926	73927	73928	73929	73930	73931	73932	73933
73934	73935	73936	73937	73938	73939	73940	74990
74991	74992	74993	74994	74995	74996	74997	74998
74999	75009	75012	75015	75018	75021	75023	81000
81005	81010	81110	81115	81120	81125	81300	81305
81310	81315	81320	81325	81330	81335	81340	81345
81350	81355	81360	82005	82010	82020	82025	82030
82035	82300	82306	82309	82312	82315	82318	82324
82327	82332						

Part 2—Amendments commencing on 1 April 2020

Private Health Insurance (Complying Product) Rules 2015

[5] Rule 11E (note to section heading)

Repeal the note.

[6] Rule 11F (note to section heading)

Repeal the note.

[7] Rule 11G (note to section heading)

Repeal the note.

[8] Rule 11H (note to section heading)

Repeal the note.

[9] Rule 21

Repeal the rule.

Schedule 4—Second tier administrative reforms

Private Health Insurance (Benefit Requirements) Rules 2011

[1] Clause 1 of Schedule 5

Repeal the clause, substitute:

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.

[2] After clause 1 of Schedule 5

Insert:

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.

[3] At the end of clause 2 of Schedule 5

Omit “facility”, insert “second-tier eligible hospital”.

[4] Subclause 3(3) of Schedule 5

Repeal the subclause, substitute:

- (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.

[5] Subclause 3(4) of Schedule 5

Repeal the subclause, substitute:

- (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.

[6] Subclause 3(6) of Schedule 5

Omit “facility”, substitute “second-tier eligible hospital”.

[7] **Clause 4 of Schedule 5**

Repeal the clause, substitute:

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).

Private Health Insurance (Health Insurance Business) Rules 2018

[8] **Rule 3**

Insert:

accredited means assessed as being fully compliant with the *National Safety and Quality Health Service Standards* by a body approved by the Australian Commission on Safety and Quality in Health Care to assess health service organisations against the *National Safety and Quality Health Service Standards*.

Hospital Casemix Protocol Data means the data provided by hospitals to insurers that is the subject of rule 4.

makes provision for informed financial consent: a hospital *makes provision for informed financial consent* if it has procedures in place to inform a patient or nominee, in writing, of what hospital charges, insurer benefits and out-of-pocket costs (where applicable) are expected in respect of the hospital treatment. A patient or nominee must be informed:

- (a) for scheduled admissions—at the earliest opportunity before admission for the hospital treatment; or
- (b) for unplanned admissions—as soon after the admission as the circumstances reasonably permit.

minimum benefit means the minimum benefit calculated in accordance with clause 3 of Schedule 5 of the *Private Health Insurance (Benefit Requirements) Rules 2011*.

National Safety and Quality Health Service Standards means the standards developed by the Australian Commission on Safety and Quality in Health Care.

Note: Development of the *National Safety and Quality Health Service Standards* is a function of the Australian Commission on Safety and Quality in Health Care under paragraph 9 (1) (e) of *National Health Reform Act 2011*.

[9] After Part 2

Insert:

Part 2A Second-tier eligible hospitals class

7A. Second-tier eligible hospitals class

For the purposes of subsection 121-8 (1) of the Act, second-tier eligible hospitals constitutes a class of hospital (the *second-tier eligible hospitals class*).

7B. Application fee

For the purposes of paragraph 121-8 (2) (b) of the Act, the application fee is \$850 for each hospital that the application seeks to have included in the second-tier eligible hospitals class.

7C. Assessment criteria

For the purposes of subsection 121-8A (1) of the Act, to be included in the second-tier eligible hospitals class, a hospital must:

- (a) be a private hospital; and
- (b) be accredited; and
- (c) not bill patients directly for the minimum benefit payable by the patient's insurer; and
- (d) make provision for informed financial consent; and
- (e) submit Hospital Casemix Protocol Data to health insurers electronically with every claim for second-tier default benefits.

Note: If a hospital is included in the second-tier eligible hospitals class by the Minister under section 121-8A of the Act, it will be a second-tier eligible hospital for the purposes of Schedule 5 to the *Private Health Insurance (Benefit Requirements) Rules 2011*, and therefore eligible to claim second-tier default benefits as specified in that Schedule.

7D. Notification of change in circumstances

A hospital that is included in the second-tier eligible hospitals class must notify the Department in writing of any change in circumstances that may prevent that hospital from continuing to meet the assessment criteria set out in rule 7C as soon as practicable.

7E. Transitional arrangements

- (1) A hospital that is a facility for the purposes of clause 4 of Schedule 5 to the *Private Health Insurance (Benefit Requirements) Rules 2011* immediately before the commencement of Schedule 4 to the *Private Health Insurance (Reforms) Amendment Rules 2018* is taken to be included in the second-tier eligible hospitals class.
- (2) A hospital referred to in subrule (1) is taken to be included in the second-tier eligible hospitals class until the eligibility expiry date for that hospital.

-
- (3) Despite subrule (2), if the date on which a hospital's accreditation will expire falls within the 12 months following the hospital's eligibility expiry date, then the hospital is taken to be included in the second-tier eligible hospitals class until the day on which that hospital's accreditation will expire.

- (4) In this rule:

eligibility expiry date means the date on which the hospital's approval on the list of second-tier eligible facilities existing on 1 January 2019 expires.

Note: Hospitals that are specified in the Second Tier Advisory Committee approved list on 1 January 2019 will be second-tier eligible hospitals for the purposes of Schedule 5 of the *Private Health Insurance (Benefit Requirements) Rules 2011*, and therefore eligible to claim second-tier default benefits as specified in that Schedule. Unless subrule (3) applies, when the approval under the pre-existing arrangements expires, the hospital will be required to apply under s 121-8 of the Act to be included in the second-tier eligible hospitals class.

Schedule 5—Removal of coverage of some natural therapies

Private Health Insurance (Health Insurance Business) Rules 2018

[1] Rule 3

Insert:

excluded natural therapy treatment means any of the following treatments:

- (a) Alexander technique;
- (b) aromatherapy;
- (c) Bowen therapy;
- (d) Buteyko;
- (e) Feldenkrais;
- (f) Western herbalism;
- (g) homeopathy;
- (h) iridology;
- (i) kinesiology;
- (j) naturopathy;
- (k) Pilates;
- (l) reflexology;
- (m) Rolfing;
- (n) shiatsu;
- (o) tai chi;
- (p) yoga.

[2] At the end of Rule 8

Add:

; and (e) excluded natural therapy treatment.

[3] Rule 11

Repeal the rule, substitute:

11. General treatment—excluded treatment

- (1) For paragraph 121-10 (3) (b) of the Act, the following treatments or classes of treatment are specified:
 - (a) treatment which primarily takes the form of sport, recreation or entertainment, other than treatment that is part of a chronic disease management program or a health management program if the programs have been approved by the private health insurer;
 - (b) excluded natural therapy treatment.
- (2) In this rule:

health management program means a program that is intended to ameliorate a person's specific health condition or conditions, but does not include treatment that is excluded natural therapy treatment.

Schedule 6—Information provision

Private Health Insurance (Incentives) Rules 2012 (No. 2)

[1] Rule 4 (note)

Omit “standard information statement”, substitute “private health information statement”.

[2] Rule 4 (definition of *Australian Government Rebate on private health insurance*)

Repeal the definition, substitute:

Australian Government Rebate on private health insurance means:

- (a) the premiums reduction scheme; or
- (b) the private health insurance tax offset.

[3] Rule 7

Repeal the rule.

[4] Paragraph 8(1)(a)

Repeal paragraph 8(1)(a), substitute:

- (a) if a participant in respect of a complying health insurance policy on issue from the insurer during any time in the previous financial year requests the following information from a participating insurer:
 - (i) the amount of the premium paid for the policy during the previous financial year;
 - (ii) the reduction, under the premiums reduction scheme, for the premium;
- the participating insurer must issue to the participant a statement in accordance with rule 9;

[5] Subparagraph 8(1)(c)(ii)

Omit “annual”.

[6] Rule 9

Repeal the rule, substitute:

9. Requirements for statements to participants

- (1) A statement under paragraph 8 (1) (a) must:
 - (a) be in writing; and
 - (b) set out, clearly and distinctly:
 - (i) if requested by the participant—the amount of the premium paid for the policy during a particular financial year; and
 - (ii) if requested by the participant—the amount of the reduction under the premiums reduction scheme for the premium; and
 - (c) be provided within 14 days of receipt of the request; and

-
- (d) be provided:
 - (i) by post; or
 - (ii) if the participant has requested that the information be provided in another manner—if reasonably practicable, in the manner requested by the participant.

Example: If requested by the participant, the information may be provided in an electronic format, including via a web page.

- (2) A statement under paragraph 8 (1) (a) may be accompanied by other information.

Private Health Insurance (Lifetime Health Cover) Rules 2017

[7] Subrule 8(1)

Repeal the subrule, substitute:

- 1) For the purposes of paragraph 40 (1) (a) of the Act, the following requirements are specified:
 - (a) the insurer must provide information about increases under Part 2-3 in the amounts of premiums payable for the policy holder's hospital cover in respect of the policy holder, if requested by the policy holder;
 - (b) the insurer must provide the following information to a policy holder affected by section 34-1 or section 34-5 of the Act, if requested by the policy holder:
 - (i) the amount by which the policy holder's premiums payable for hospital cover are increased as a result of the operation of those sections;
 - (ii) the private health insurer's record of the number of days the policy holder has not had hospital cover since his or her lifetime health cover base day, other than days to which paragraph 34-20 (1) (a) of the Act applies.

Note: Paragraph 34-20 (1) (a) of the Act deals with permitted days without hospital cover.

[8] Subrule 8(3)

Repeal the subrule, substitute:

- 3) The information required to be provided by subrule 8 (1) must:
 - (a) be provided:
 - (i) by post; or
 - (ii) if the policy holder has requested that the information be provided in another manner—if reasonably practicable, in the manner requested by the policy holder; and
 - (b) in the case of joint policy holders, set out the details applying to the joint policy holder making the request; and
 - (c) be provided to the policy holder within 14 days of receipt of the request.

Example: For subparagraph (a) (ii), if requested by the policy holder, the information may be provided in an electronic format, including via a web page.

Schedule 7—Amendments relating to accredited podiatrists

Private Health Insurance (Complying Product) Rules 2015

[1] **Rule 4 (definition of *accredited podiatrist*)**

Repeal the definition (including the note).

[2] **Rule 4**

Insert:

registered podiatric surgeon means a podiatric surgeon who holds specialist registration in the specialty of podiatric surgery under the National Law.

Note: The registration requirements for a registered podiatric surgeon for the purpose of these Rules are the same registration requirements for podiatric surgeons as set out in rule 8 of the Private Health Insurance (Accreditation) Rules as made from time to time.

[3] **Subrule 8(1) (table item 2, column headed “Kind of policy”, subparagraph (b)(ii))**

Omit “an accredited podiatrist”, substitute “a registered podiatric surgeon”.

Private Health Insurance (Prostheses) Rules 2018 (No. 2)

[4] **Rule 4 (definition of *accredited podiatrist*)**

Repeal the definition (including the note).

[5] **Rule 4**

Insert:

registered podiatric surgeon means a podiatric surgeon who holds specialist registration in the specialty of podiatric surgery under the National Law.

Note: The registration requirements for a registered podiatric surgeon for the purpose of these Rules are the same registration requirements for podiatric surgeons as set out in rule 8 of the Private Health Insurance (Accreditation) Rules as made from time to time.

[6] **Paragraph 7(a)**

Omit “an accredited podiatrist”, substitute “a registered podiatric surgeon”.

EXPLANATORY STATEMENT

Issued by the Authority of the Minister for Health

Private Health Insurance Act 2007

Private Health Insurance (Reforms) Amendment Rules 2018

Authority

Section 333-20 of the *Private Health Insurance Act 2007* (the Act) authorises the Minister for Health, by legislative instrument, to make *Private Health Insurance Rules* providing for matters required or permitted by the corresponding Chapter, Part or section to be provided; or necessary or convenient to be provided in order to carry out or give effect to that Chapter, Part or section. The *Private Health Insurance (Reforms) Amendment Rules 2018* (the Amendment Rules) makes amendments to the *Private Health Insurance Rules* as referred to in the table presented below:

Private Health Insurance Rules	Chapter/Part/section
Private Health Insurance (Incentives) Rules	Part 2-2, section 206-1, Part 6-4
Private Health Insurance (Lifetime Health Cover) Rules	Part 2-3
Private Health Insurance (Complying Product) Rules	Chapter 3 and section 188-1
Private Health Insurance (Benefit Requirements) Rules	Part 3-3
Private Health Insurance (Health Insurance Business) Rules	Part 4-2
Private Health Insurance (Prostheses) Rules	Part 3-3

The Amendment Rules are a legislative instrument for the purposes of the *Legislation Act 2003*.

Background

On 13 October 2017, the Government announced a package of reforms designed to make private health insurance simpler and more affordable for all Australians. The *Private Health Insurance Legislation Amendment Act 2018* amended the *Private Health Insurance Act 2007* and associated legislation to enable a number of reforms, as well as establishing a framework to support the implementation of some reforms through subordinate legislation.

The Amendment Rules include amendments associated with the commencement of the following reforms (and related matters):

- age-based premium discounts for hospital cover
- improving information provisions for consumers
- introduction of product tiers and clinical categories for hospital cover
- the administration of second-tier default benefits arrangements for hospitals