



Private Health Insurance (Council Administration Levy) Amendment Rule 2012 (No. 1)¹

Private Health Insurance (Council Administration Levy) Act 2003

I, Tanya Plibersek, Minister for Health, make the following rule under section 9A of the *Private Health Insurance (Council Administration Levy) Act 2003*.

Dated 20 June 2012

Tanya Plibersek
Minister for Health

1 Name of rule

This rule is the *Private Health Insurance (Council Administration Levy) Amendment Rule 2012 (No. 1)*.

2 Commencement

This rule commences on 1 July 2012.

3 Amendment of *Private Health Insurance (Council Administration Levy) Rules 2007*

Schedule 1 amends the *Private Health Insurance (Council Administration Levy) Rules 2007*.

Schedule 1 Amendments

(section 3)

[1] Subrule 5 (1)

omit

(1) For

insert

For

[2] Paragraphs 5 (1) (a) and (b)

omit

calculated

insert

worked out

[3] Rule 5, note

omit

calculate

insert

work out

[4] Rules 6 and 7

substitute

6 Rate for a single policy

- (1) The rate for a single policy for each quarter of a financial year mentioned in column 2 of the following table is the amount in cents worked out using the formula in column 3 of the table.

Item	Financial year	Formula
1	2012–2013	$\frac{155\,650\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$
2	2013–2014	$\frac{155\,175\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$
3	2014–2015	$\frac{155\,475\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$

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Item	Financial year	Formula
4	2015–2016	$\frac{155\,775\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$

(2) However, if the rate worked out for a single policy on issue from an insurer is more than 50 cents for the quarter, the rate for the policy is 50 cents.

(3) In this rule:

single coverage policies means the aggregate number of single policies on issue from all private health insurers on the census day.

joint coverage policies means the aggregate number of all joint policies on issue from all private health insurers on the census day.

7 Rate for a joint policy

(1) The rate for a joint policy for each quarter of a financial year mentioned in column 2 of the following table is the amount in cents worked out using the formula in column 3 of the table.

Item	Financial year	Formula
1	2012–2013	$2 \times \frac{155\,650\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$
2	2013–2014	$2 \times \frac{155\,175\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$
3	2014–2015	$2 \times \frac{155\,475\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$
4	2015–2016	$2 \times \frac{155\,775\,000}{\text{single coverage policies} + (2 \times \text{joint coverage policies})}$

(2) However, if the rate worked out for a joint policy on issue from an insurer is more than \$1 for the quarter, the rate for the policy is \$1.

(3) In this rule:

single coverage policies means the aggregate number of single policies on issue from all private health insurers on the census day.

joint coverage policies means the aggregate number of all joint policies on issue from all private health insurers on the census day.

Note

- All legislative instruments and compilations are registered on the Federal Register of Legislative Instruments kept under the *Legislative Instruments Act 2003*. See www.comlaw.gov.au.