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1. Review the enclosed policy brochure to ensure it meets your health insurance needs
2. Buy direct at **comparethemarket.com.au**; or
3. Call **1800 46 29 55** to speak to one of our Health Insurance Specialists

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# Privacy Policy

Effective: 21 December 2001

## Table Of Contents

<b>Privacy Principles</b>	3
1. Collection	3
2. Use and disclosure	3
3. Data quality	5
4. Data security	5
5. Openness	5
6. Access and correction	5
7. Identifiers	6
8. Anonymity	7
9. Transborder data flow	7
10. Sensitivity information	7
<b>Audit and Document Flow – Health Insurance Division</b>	9
Application for membership	9
The Federal Government Rebate Benefit application	9
Direct debit request (PD-C form)	10
Salary deduction authority	11
Change of cover authority	11
Certificate of medical attendant (pre-existant form)	12
Certificate of dental attendant (pre-existant form)	12
Claim form - dental/ancillary	13
Claim form - medical gap from provider	13
Claim form – hospital	14
Cancellation form	14
Declaration of Arrears	15
Student Declaration	15
Clearance Certificates	16
Member Service Review Committee	16
Acute Care Advisory Committee	17
Computer data base access	17
Electronic Claiming System (HICAPS & IBA)	17
Australia Post	17
Bpay	18
Australian Regional Health Group	18
<b>Confidentiality Agreements</b>	19
Staff	19
Directors	19
Agents	19
Software Vendor	19
<b>Procedures &amp; Escalation Steps</b>	19
Personal Contact	20
Incoming Telephone Calls	20
Third party Enquiry	21
Denying Access	21
Enquiring/Claiming on behalf of another person	21
Access Information Upon Request	22
<b>Privacy Officer</b>	23
<b>Audit</b>	23
<b>Complaints Procedures</b>	19
<b>Appendix</b>	24
1. Employee Confidentiality and Privacy Agreement	24
2. Agent Confidentiality and Privacy Agreement	25
3. Medical Practitioner Certification Form (Pre-existing form)	26
4. Privacy Leaflet	27
5. Client Authority	28

## Privacy Policy

GMHBA Limited implemented the following Privacy Policy following a review by the Audit & Compliance Committee on 26<sup>th</sup> November 2001. The policy is based on and complies with the ten National Privacy Principles.

### 1 Collection

1.1 GMHBA Limited will not collect personal information unless the information is necessary for one or more of its functions or activities.

1.2 GMHBA Limited will collect personal information only by lawful and fair means and not in an unreasonably intrusive way.

1.3 At or before the time (or, if that is not practicable, as soon as practicable after) GMHBA Limited collects personal information about an individual from the individual, GMHBA Limited will take reasonable steps to ensure that the individual is aware of:

- (a) the identity of the organisation and how to contact it; and
- (b) the fact that he or she is able to gain access to the information; and
- (c) the purposes for which the information is collected; and
- (d) the organisations (or the types of organisations) to which the organisation usually discloses information of that kind; and
- (e) any law that requires the particular information to be collected; and
- (f) the main consequences (if any) for the individual if all or part of the information is not provided.

1.4 If it is reasonable and practicable to do so, GMHBA Limited will collect personal information about an individual only from that individual.

1.5 If GMHBA Limited collects personal information about an individual from someone else, it will take reasonable steps to ensure that the individual is or has been made aware of the matters listed in subclause 1.3 except to the extent that making the individual aware of the matters would pose a serious threat to the life or health of any individual.

### 2 Use and disclosure

2.1 GMHBA Limited will not use or disclose personal information about an individual for a purpose (the secondary purpose) other than the primary purpose of collection unless:

- (a) both of the following apply:
  - (i) the secondary purpose is related to the primary purpose of collection and, if the personal information is sensitive information, directly related to the primary purpose of collection;
  - (ii) the individual would reasonably expect the organisation to use or disclose the information for the secondary purpose; or
- (b) the individual has consented to the use or disclosure; or
- (c) if the information is not sensitive information and the use of the information is for the secondary purpose of direct marketing:
  - (i) it is impracticable for the organisation to seek the individual's consent before that particular use; and
  - (ii) the organisation will not charge the individual for giving effect to a request by the individual to the organisation not to receive direct marketing communications; and
  - (iii) the individual has not made a request to the organisation not to receive direct marketing communications; and
  - (iv) in each direct marketing communication with the individual, the organisation draws to the individual's attention, or prominently displays a notice, that he or she may express a wish not to receive any further direct marketing communications; and
  - (v) each written direct marketing communication by the organisation with the individual (up to and including the communication that involves the use) sets out the organisation's business address and telephone number and, if the communication with the individual is made by fax, telex or other electronic means, a number or address at which the organisation can be directly contacted electronically; or

- (d) if the information is health information and the use or disclosure is necessary for research, or the compilation or analysis of statistics, relevant to public health or public safety:
  - (i) it is impracticable for the organisation to seek the individual's consent before the use or disclosure; and
  - (ii) the use or disclosure is conducted in accordance with guidelines approved by the Commissioner under section 95A for the purposes of this subparagraph; and
  - (iii) in the case of disclosure — the organisation reasonably believes that the recipient of the health information will not disclose the health information, or personal information derived from the health information; or
- (e) the organisation reasonably believes that the use or disclosure is necessary to lessen or prevent:
  - (i) a serious and imminent threat to an individual's life, health or safety; or
  - (ii) a serious threat to public health or public safety; or
- (f) the organisation has reason to suspect that unlawful activity has been, is being or may be engaged in, and uses or discloses the personal information as a necessary part of its investigation of the matter or in reporting its concerns to relevant persons or authorities; or
- (g) the use or disclosure is required or authorised by or under law; or
- (h) the organisation reasonably believes that the use or disclosure is reasonably necessary for one or more of the following by or on behalf of an enforcement body:
  - (i) the prevention, detection, investigation, prosecution or punishment of criminal offences, breaches of a law imposing a penalty or sanction or breaches of a prescribed law;
  - (ii) the enforcement of laws relating to the confiscation of the proceeds of crime;
  - (iii) the protection of the public revenue;
  - (iv) the prevention, detection, investigation or remedying of seriously improper conduct or prescribed conduct;
  - (v) the preparation for, or conduct of, proceedings before any court or tribunal, or implementation of the orders of a court or tribunal.

2.2 If GMHBA Limited uses or discloses personal information under paragraph 2.1(h), it will make a written note of the use or disclosure.

2.3 Subclause 2.1 operates in relation to personal information that GMHBA Limited has collected from a related body corporate as if the organisation's primary purpose of collection of the information were the primary purpose for which the related body corporate collected the information.

2.4 Despite subclause 2.1, GMHBA Limited may disclose health information about the individual to a person who is responsible for the individual if:

- (a) the individual:
  - (i) is physically or legally incapable of giving consent to the disclosure; or
  - (ii) physically cannot communicate consent to the disclosure; and
- (b) a natural person (the carer) providing the health service for the organisation is satisfied that either:
  - (i) the disclosure is necessary to provide appropriate care or treatment of the individual; or
  - (ii) the disclosure is made for compassionate reasons; and
- (c) the disclosure is not contrary to any wish:
  - (i) expressed by the individual before the individual became unable to give or communicate consent; and
  - (ii) of which the carer is aware, or of which the carer could reasonably be expected to be aware; and
- (d) the disclosure is limited to the extent reasonable and necessary for a purpose mentioned in paragraph (b).

2.5 For the purposes of subclause 2.4, a person is responsible for an individual if the person is:

- (a) a parent of the individual; or
- (b) a child or sibling of the individual and at least 18 years old; or
- (c) a spouse or de facto spouse of the individual; or

- (d) a relative of the individual, at least 18 years old and a member of the individual's household; or
- (e) a guardian of the individual; or
- (f) exercising an enduring power of attorney granted by the individual that is exercisable in relation to decisions about the individual's health; or
- (g) a person who has an intimate personal relationship with the individual; or
- (h) a person nominated by the individual to be contacted in case of emergency.

2.6 In subclause 2.5:

child of an individual includes an adopted child, a step-child and a foster-child, of the individual.

parent of an individual includes a step-parent, adoptive parent and a foster-parent, of the individual.

relative of an individual means a grandparent, grandchild, uncle, aunt, nephew or niece, of the individual.

sibling of an individual includes a half-brother, half-sister, adoptive brother, adoptive sister, step-brother, step-sister, foster-brother and foster-sister, of the individual.

### 3 Data quality

GMHBA Limited will take reasonable steps to make sure that the personal information it collects, uses or discloses is accurate, complete and up-to-date.

### 4 Data security

- 4.1 GMHBA Limited will take reasonable steps to protect the personal information it holds from misuse and loss and from unauthorised access, modification or disclosure.
- 4.2 GMHBA Limited will take reasonable steps to destroy or permanently de-identify personal information if it is no longer needed for any purpose for which the information may be used or disclosed under National Privacy Principle 2.

### 5 Openness

- 5.1 GMHBA Limited will set out in a document clearly expressed policies on its management of personal information. The organisation will make the document available to anyone request it.

A copy of the Privacy leaflet is attached at appendix 4

- 5.2 On request by a person, GMHBA Limited will take reasonable steps to let the person know, generally, what sort of personal information it holds, for what purposes, and how it collects, holds, uses and discloses that information.

### 6 Access and correction

- 6.1 If GMHBA Limited holds personal information about an individual, it will provide the individual with access to the information on request by the individual, except to the extent that:
  - (a) in the case of personal information other than health information—providing access would pose a serious and imminent threat to the life or health of any individual; or
  - (b) in the case of health information—providing access would pose a serious threat to the life or health of any individual; or
  - (c) providing access would have an unreasonable impact upon the privacy of other individuals; or
  - (d) the request for access is frivolous or vexatious; or
  - (e) the information relates to existing or anticipated legal proceedings between the organisation and the individual, and the information would not be accessible by the process of discovery in those proceedings; or
  - (f) providing access would reveal the intentions of the organisation in relation to negotiations with the individual in such a way as to prejudice those negotiations; or
  - (g) providing access would be unlawful; or

- (h) denying access is required or authorised by or under law; or
  - (i) providing access would be likely to prejudice an investigation of possible unlawful activity; or
  - (j) providing access would be likely to prejudice:
    - (i) the prevention, detection, investigation, prosecution or punishment of criminal offences, breaches of a law imposing a penalty or sanction or breaches of a prescribed law; or
    - (ii) the enforcement of laws relating to the confiscation of the proceeds of crime; or
    - (iii) the protection of the public revenue; or
    - (iv) the prevention, detection, investigation or remedying of seriously improper conduct or prescribed conduct; or
    - (v) the preparation for, or conduct of, proceedings before any court or tribunal, or implementation of its orders;
 by or on behalf of an enforcement body; or
  - (k) an enforcement body performing a lawful security function asks the organisation not to provide access to the information on the basis that providing access would be likely to cause damage to the security of Australia.
- 6.2 However, where providing access would reveal evaluative information generated within GMHBA Limited in connection with a commercially sensitive decision-making process, the organisation may give the individual an explanation for the commercially sensitive decision rather than direct access to the information.
- 6.3 If GMHBA Limited is not required to provide the individual with access to the information because of one or more of paragraphs 6.1(a) to (k) (inclusive), the organisation will, if reasonable, consider whether the use of mutually agreed intermediaries would allow sufficient access to meet the needs of both parties.
- 6.4 If GMHBA Limited charges for providing access to personal information, those charges:
- (a) will not be excessive; and
  - (b) will not apply to lodging a request for access.
- 6.5 If GMHBA Limited holds personal information about an individual and the individual is able to establish that the information is not accurate, complete and up-to-date, the organisation will take reasonable steps to correct the information so that it is accurate, complete and up-to-date.
- 6.6 If the individual and GMHBA Limited disagree about whether the information is accurate, complete and up-to-date, and the individual asks the organisation to associate with the information a statement claiming that the information is not accurate, complete or up-to-date, GMHBA Limited will take reasonable steps to do so.
- 6.7 GMHBA Limited will provide reasons for denial of access or a refusal to correct personal information.

## 7 Identifiers

- 7.1 GMHBA Limited will not adopt as its own identifier of an individual an identifier of the individual that has been assigned by:
- (a) an agency; or
  - (b) an agent of an agency acting in its capacity as agent; or
  - (c) a contracted service provider for a Commonwealth contract acting in its capacity as contracted service provider for that contract.
- 7.1A However, subclause 7.1 does not apply to the adoption by GMHBA Limited of a prescribed identifier in prescribed circumstances.
- 7.2 GMHBA Limited will not use or disclose an identifier assigned to an individual by an agency, or by an agent or contracted service provider mentioned in subclause 7.1, unless:
- (a) the use or disclosure is necessary for the organisation to fulfil its obligations to the agency; or
  - (b) one or more of paragraphs 2.1(e) to 2.1(h) (inclusive) apply to the use or disclosure; or
  - (c) the use or disclosure is by a prescribed organisation of a prescribed identifier in prescribed circumstances.

### 7.3 In this clause:

identifier includes a number assigned by GMHBA Limited to an individual to identify uniquely the individual for the purposes of the organisation's operations. However, an individual's name or ABN (as defined in the A New Tax System (Australian Business Number) Act 1999) is not an identifier.

## 8 Anonymity

Wherever it is lawful and practicable, individuals will have the option of not identifying themselves when entering transactions with GMHBA Limited.

## 9 Transborder data flows

GMHBA Limited may transfer personal information about an individual to someone (other than the organisation or the individual) who is in a foreign country only if:

- (a) the organisation reasonably believes that the recipient of the information is subject to a law, binding scheme or contract which effectively upholds principles for fair handling of the information that are substantially similar to the National Privacy Principles; or
- (b) the individual consents to the transfer; or
- (c) the transfer is necessary for the performance of a contract between the individual and the organisation, or for the implementation of pre-contractual measures taken in response to the individual's request; or
- (d) the transfer is necessary for the conclusion or performance of a contract concluded in the interest of the individual between the organisation and a third party; or
- (e) all of the following apply:
  - (i) the transfer is for the benefit of the individual;
  - (ii) it is impracticable to obtain the consent of the individual to that transfer;
  - (iii) if it were practicable to obtain such consent, the individual would be likely to give it;
 or
- (f) the organisation has taken reasonable steps to ensure that the information which it has transferred will not be held, used or disclosed by the recipient of the information inconsistently with the National Privacy Principles.

## 10 Sensitive information

10.1 GMHBA Limited will not collect sensitive information about an individual unless:

- (a) the individual has consented; or
- (b) the collection is required by law; or
- (c) the collection is necessary to prevent or lessen a serious and imminent threat to the life or health of any individual, where the individual whom the information concerns:
  - (i) is physically or legally incapable of giving consent to the collection; or
  - (ii) physically cannot communicate consent to the collection; or
- (d) if the information is collected in the course of the activities of a non-profit organisation—the following conditions are satisfied:
  - (i) the information relates solely to the members of the organisation or to individuals who have regular contact with it in connection with its activities;
  - (ii) at or before the time of collecting the information, the organisation undertakes to the individual whom the information concerns that the organisation will not disclose the information without the individual's consent; or
- (e) the collection is necessary for the establishment, exercise or defence of a legal or equitable claim.

10.2 Despite subclause 10.1, GMHBA Limited may collect health information about an individual if:

- (a) the information is necessary to provide a health service to the individual; and
- (b) the information is collected:
  - (i) as required by law (other than this Act); or
  - (ii) in accordance with rules established by competent health or medical bodies that deal with obligations of professional confidentiality which bind the organisation.

10.3 Despite subclause 10.1, GMHBA Limited may collect health information about an individual if:



- (a) the collection is necessary for any of the following purposes:
  - (i) research relevant to public health or public safety;
  - (ii) the compilation or analysis of statistics relevant to public health or public safety;
  - (iii) the management, funding or monitoring of a health service; and
- (b) that purpose cannot be served by the collection of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained; and
- (c) it is impracticable for the organisation to seek the individual's consent to the collection; and
- (d) the information is collected:
  - (i) as required by law (other than this Act); or
  - (ii) in accordance with rules established by competent health or medical bodies that deal with obligations of professional confidentiality which bind the organisation; or
  - (iii) in accordance with guidelines approved by the Commissioner under section 95A for the purposes of this subparagraph.

10.4 If GMHBA Limited collects health information about an individual in accordance with subclause 10.3, the organisation will take reasonable steps to permanently de-identify the information before the organisation discloses it.

10.5 In this clause:

non-profit organisation means a non-profit organisation that has only racial, ethnic, political, religious, philosophical, professional, trade, or trade union aims.

## **AUDIT AND DOCUMENTATION FLOW – HEALTH INSURANCE DIVISION**

### **Membership Application Forms**

1. Membership application forms are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. All staff at the Fund office receive application forms from applicants or their representatives who apply in person at the Fund office, through a Sales Representative, by post or via the Customer Service Centre. Applicant may also lodge forms at any of the Fund's agents. The agents forward the application forms to the Fund for processing. A New Member kit is then issued to the member, which includes the Privacy Leaflet, GMHBA Brochure, GMHBA Member Guide, Key Features Guide and a Welcome Letter. Staff are bound by the privacy clause in their employment agreements. Privacy agreements are in place with all Fund agents.
3. Applications from applicants or their representatives who present in person to the Fund office are processed and entered into the computer at the time by the attending staff. All staff process applications received through the post or from agents.
4. Completed application forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
5. On expiry of the mandatory retention period, application for membership forms are then transferred to an off site location – Advanced Record Management, 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 100 years - LHC regulation.
6. Access – All staff have access to the computer membership details. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to membership data is a necessity.
7. Reason for collection - Membership data collection and maintenance is required to enable validation and processing of claims, to comply with the National Health Act, and for reporting to regulatory bodies.

### **The Federal Government Rebate Application Forms**

1. The Federal Government Rebate application forms are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. All staff at the Fund office receive the Federal Government Rebate application forms from applicants or their representatives who apply in person at the Fund office, through a Sales Representative or by post. Applicants may also lodge forms at any of the Fund's agents. The agents forward the forms to the Fund for processing. Staff are bound by the privacy clause in their employment agreements. Privacy agreements are in place with all Fund agents.
3. Applications from applicants or their representatives who present in person to the Fund office are processed and entered into the computer at the time by the attending staff. All staff process applications received through the post or from agents.
4. Completed forms are kept at the Fund Office in a secure filing system for the mandatory retention period.

5. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
6. Members Federal Government Rebate data is electronically transmitted to the Health Insurance Commission. An authorized staff member is in sole control of the transmission of data to the Health Insurance Commission. A separate authorized staff member resolves rejections from the Health Insurance Commission. Data transmitted between GMHBA Limited and the Health Insurance Commission is encrypted and only the authorized staff and the Information Technology Department have the security level to transmit The Federal Government Rebate Benefits data.
7. Access – All staff have access to the computer The Federal Government Rebate details. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to The Federal Government Rebate Benefits data is a necessity.
8. Reason for collection - The Federal Government Rebate data collection and maintenance is necessary to comply with the National Health Act and the Health Insurance Commission, claiming the 30% Federal Government rebate on behalf of the member, and for reporting to regulatory bodies.

#### **Direct Debit Request (PD-C Forms)**

1. Direct Debit request forms are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. All staff at the Fund office receive Direct Debit request forms from applicants or their representatives who apply in person at the Fund office, or by post. Applicants may also lodge forms at any of the Fund's agents. The agents forward the forms to the Fund for processing. Staff are bound by the privacy clause in their employment agreements. Privacy agreements are in place with all Fund agents.
3. Direct Debit requests from applicants or their representatives who present in person to the Fund office are processed and entered into the computer at the time by the attending staff. All staff process Direct Debit requests received through the post or from agents.
4. A separate staff member verifies the Direct Debit data entered into the computer at a later date.
5. Completed forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
6. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
7. An authorized staff member is in sole control of the transmission of data to the Commonwealth Bank of Australia. A Separate authorized staff member resolves rejections from the Commonwealth Bank of Australia. Data transmitted between the GMHBA Limited and the Commonwealth Bank of Australia is encrypted and only the authorized staff and the Information Technology Department have the security level to transmit Direct Debit data.
8. Access – All staff have access to the computer Direct Debit details. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to Direct Debit data is a necessity.
9. Reason for collection – Direct Debit data collection and maintenance is required to enable GMHBA Limited to comply with the member's request to direct debit their nominated account for periodic subscription payments.

### **Salary Deduction Authority**

1. Salary Deduction authority forms for the payment of subscriptions are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. Salary Deduction authority forms are available through the Fund offices or the Sales Representative.
3. All staff at the Fund office receive signed completed Salary Deduction authority forms from persons or their representatives who lodge the forms in person at the Fund office, or by post. Sales Representative's also receive signed completed salary deduction authority forms whilst servicing group schemes. Staff are bound by the privacy clause in their employment agreements.
4. On receipt of completed Salary Deduction forms at the Fund office, the relevant details are entered into the computer against the appropriate membership. All staff process Salary Deduction authority forms.
5. After computer input, the authority form is forwarded to the employees paymaster with a covering letter, or alternatively the form is delivered in person by the Member.
6. The employer retains the completed authority form.
7. If the employee leaves the place of employment or the salary deduction is cancelled, the GMHBA Limited records are amended accordingly.
8. Access – All staff have access to the computer salary deduction details. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to salary deduction data is a necessity.
9. Reason for collection – Salary deduction data collection and maintenance is required to enable GMHBA Limited to comply with the member/employee's request to pay the subscription of the nominated membership via deductions from their salary.

### **Change of Cover Authority**

1. Change of cover authority forms are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. Change of cover authority forms are included in the fund brochure, or are available through the Fund office.
3. All staff at the Fund office receive signed completed change of cover authority forms from persons or their representatives who lodge the forms in person at the Fund office, by post or via the Customer Service Centre. Sales Representative's also receive signed completed change of cover authority forms whilst servicing group schemes or individual members. Forms can be lodged at any of the Fund's agents and are then forwarded to the Fund office for processing. Staff are bound by the privacy clause in their employment agreements. Privacy agreements are in place with all Fund agents.
4. On receipt of completed change of cover authority forms at the Fund office, the relevant details are entered into the computer against the appropriate membership. All staff process change of cover authority forms.
5. Completed change of cover authority forms are kept at the Fund Office in a secure filing system for the mandatory retention period.

6. On expiry of the mandatory retention period, application for membership forms are then transferred to an off site location – Advanced Record Management, 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 100 years - LHC regulation.
7. Access – All staff have access to the computer change of cover data base history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to change of cover data is a necessity.
8. Reason for collection – Change of cover data collection and maintenance is required to enable GMHBA Limited to comply with the members cover authorisation and to correctly assess benefit entitlement.

#### **Certificate of Medical Attendant (Pre-existent form)**

1. The GMHBA Limited has adopted the Pre-Existing Ailment Guidelines. A copy of Medical Practitioner Certification form, which has been approved by the Health Insurance Industry, is attached at appendix 3.
2. Medical practitioner certifications (Pre-existent forms) are only processed at the Fund's office at 60-68 Moorabool Street Geelong.
3. Medical practitioner certification forms are available through the Funds offices.
4. If a claim or pending treatment may be subject to the pre-existent rule the Fund request that a certificate of medical attendant form be completed to assist in determining the benefit entitlement. The process of notification to the patient is detailed in the Pre-Existing Ailment Guidelines.
5. The form must firstly be signed by the patient authorizing release of relevant medical information by their medical practitioner. The member is advised either personally or by cover letter the reasons the information is required and collected.
6. Providing the patient authorizes the release of information, the form is forwarded to the relevant medical practitioner for completion.
7. All staff at the Fund office receive completed medical practitioner certification forms from persons or their representatives who lodge the form in person at the Fund office, from providers, or by post. Staff are bound by the privacy clause in their employment agreements.
8. On receipt of completed medical practitioner certification form at the Fund office, determination is made by authorized staff only and in certain circumstances forwarded to the funds Medical Advisor for review on benefit entitlement, with the relevant details are then entered into the computer against the appropriate membership.
9. Completed medical practitioner certification forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
10. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
11. Access – All staff have access to the pre-existent information stored in membership comments history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity. However only authorized staff has the authority to comment externally on pre-existent conditions and determinations.
12. Reason for collection – The collection and maintenance of personal and sensitive information relating to pre-existent or possible pre-existent conditions is essential to enable GMHBA Limited to correctly assess benefit entitlements during the 12 months pre-existent waiting period.

#### **Certificate of Dental Attendant (Pre-existent form)**

1. Certificate of dental attendant (Pre-existent forms) are only processed at the Fund's office at 60-68 Moorabool Street Geelong.
2. Certificate of dental attendant forms are only available through the Funds offices.
3. If a claim or pending treatment may be subject to the pre-existent rule, the Fund requests that a certificate of dental attendant forms be completed to assist in determining the benefit entitlement.
4. The form must firstly be signed by the patient authorizing release of relevant dental information by their dental practitioner. The member is advised either personally or by cover letter the reasons the information is required and collected.
5. Providing the patient authorizes the release of information, the form is forwarded to the relevant medical practitioner for completion.
6. All staff at the Fund office receive completed certificate of dental attendant forms from persons or their representatives who lodge the forms in person at the Fund office, from providers, or by post. Staff are bound by the privacy clause in their employment agreements.
7. On receipt of completed certificate of dental attendant forms at the Fund office, determination is made by authorized staff only on benefit entitlement, and the relevant details are entered into the computer against the appropriate membership.

8. Completed certificate of dental attendant forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
9. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
10. Access – All staff have access to the pre-existent information stored in membership comments history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity. However only authorized staff has the authority to comment externally on pre-existent conditions and determinations.
11. Reason for collection – The collection and maintenance of information relating to pre-existent or possible pre-existent conditions is essential to enable GMHBA Limited to correctly assess benefit entitlements during the 12 months pre-existent waiting period.

#### **Claim Form - Dental/Ancillary**

1. Claim forms (Dental/Ancillary) are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. Claims forms are readily available from the Fund office and all agents.
3. All staff at the Fund office receive claim forms from the claimant or their representatives who lodge the forms in person at the Fund office, from agents, or by post. Staff are bound by the privacy clause in their employment agreements. Privacy agreements are in place with all Fund agents.
4. All staff are involved in the assessment, checking, and claims data entry.
5. All provider accounts are returned to the claimant either at point of cash payment or attached to the benefit cheque and benefit payment advice.
6. Completed claim forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
7. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
8. Access – All staff have access to the claimants computer claims history file. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
9. Reason for collection – Claims data collection and maintenance is necessary to comply with the National Health Act, for reporting to regulatory bodies, auditing, fraud control, and statistical analysis.

#### **Claim Form – Medical Gap- from Providers**

1. Claim forms (Medical Gap - from Providers) are only processed at the Fund's office at 60-68 Moorabool Street GEELONG, Vic 3220.
2. Claims forms are only available from the Fund office.
3. Medical providers participating in the GMHBA Limited Medical Gap Cover (direct billing scheme) forward patient accounts to GMHBA Limited. At pre-admission, the personnel (Medical Practitioner or staff member) complete the claim form and advise the patient of the claiming process along with the "known" patient gap if applicable. The claim form and relevant provider accounts are forwarded to the Funds office for processing. The claims are processed by authorized staff members only. Staff at both the Health Insurance division of GMHBA Limited and Hospital's are bound by the privacy clauses in their employment agreements.
4. Personal data relating to the patient and the treatment are transmitted to the Health Insurance Commission to facilitate the claiming of the Medicare benefit on behalf of the patient.

5. Completed claim forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
6. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
7. Access – All staff have access to the claimants computer claims history file. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
8. Reason for collection – Claims data collection and maintenance is necessary to comply with the National Health Act, claim Medicare benefit, for reporting to regulatory bodies, auditing, fraud control, and statistical analysis.

#### **Claim Form – Hospital**

1. Claim forms (Hospital) are only processed at the Fund's office at 60-68 Moorabool Street GEELONG, Vic 3220.
2. Claims forms are only available through the Fund office or applicable hospital (on admission or discharge).
3. Hospital claim forms are completed by the hospital on behalf of the patient. The completed claim form and hospital account are forwarded to the Fund office for processing. The claims are processed by the Hospital Claims Assessor or authorized personnel only. Staff at both the Health Insurance division of GMHBA Limited and Hospital's are bound by the privacy clauses in their employment agreements.
4. The hospital account is retained by the fund and a benefit advice is forwarded to the member.
5. It is a requirement that personal data relating to the patient and the treatment be transmitted to the Commonwealth Department of Health and Aged Care (HCP reporting).
6. Completed claim forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
7. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years.
8. Access – All staff have access to the claimants computer claims history file. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
9. Reason for collection – Claims data collection and maintenance is necessary to comply with the National Health Act, for reporting to regulatory bodies, auditing, fraud control, and statistical analysis.

#### **Cancellation Forms**

1. Cancellation forms are only processed at the Fund's office at 60-68 Moorabool Street GEELONG, Vic 3220.
2. Cancellation forms are only available through the Funds offices.
3. All staff at the Fund office receive signed (by the member) cancellation forms from the claimant or their representatives who lodge the forms in person at the Fund office, from agents, or by post. Staff are bound by the privacy clause in their employment agreements. Privacy agreements are in place with all Fund agents.
4. Cancellation details are entered into the computer
5. Completed Cancellation forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
6. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 100 years.
7. Access – All staff have access to the claimants terminated membership history file. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
8. Reason for collection – The collection and maintenance of information relating to Cancellations is essential to enable GMHBA Limited to comply with the member's request to terminate their membership.

### **Declarations of Arrears**

1. Certificate for Declaration of Arrears are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. Declaration of Arrears are only available through the Fund offices.
3. All staff at the fund office receive signed (by the member) and completed Declaration of Arrears from persons or their representatives who lodge the form in person at the Fund office, or by post. Staff are bound by the privacy clause in their employment agreements.
4. On receipt of completed Declaration of Arrears at the Fund office, determination is made by an authorised staff member only on acceptance, with the relevant details entered into the computer against the appropriate membership.
5. Completed Declaration of Arrears forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
6. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 1 year.
7. Access - All staff have access to the Declaration of Arrears information stored in membership comments history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
8. Reason for collection – The collection and maintenance of information relating to Declaration of Arrears is essential to enable GMHBA Limited to comply with the GMHBA Limited – By Laws and Regulations.

### **Student Declarations**

1. Student Declaration forms for the determinations of eligible dependants are only processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. Student Declaration forms are available through the fund offices.
3. All staff at the fund office receive signed and completed Student Declaration form from persons or their representatives who lodge the form in person at the Fund office, or by post. Staff are bound by the privacy clause in their employment agreements.
4. On receipt of completed Student Declaration at the Fund office, determination is made by an authorised staff member only on acceptance, with the relevant details entered into the computer against the appropriate membership.
5. Completed Student Declaration forms are kept at the Fund Office in a secure filing system for the mandatory retention period.
6. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 4 year.



7. Access - All staff have access to the Student Declaration information stored in membership comments history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
8. Reason for collection – The collection and maintenance of information relating to Student Declaration is essential to enable GMHBA Limited to comply with the GMHBA Limited – By Laws and Regulations.

#### **Clearance Certificates**

1. Clearance Certificates are processed at the Fund's offices as follows:
  - Geelong - 60-68 Moorabool Street
  - Belmont - 178 High Street
  - Norlane - BellPost Shopping Centre, Anakie Road
  - Newcomb - Bellarine Village, Queenscliff Road
  - Ballarat – 62 Bridge Mall
  - Bendigo – Shop 10 Fountain Court
  - Colac – 178 Murray Street
  - Perth (WA) – Suite 7, Atrium Building 168 St Georges Terrace
  - Portland – 112a Percy Street
  - Hamilton – 182 Gray Street
  - Warrnambool – 114 Lava Street
  - Werribee – Wyndham Private Medical Centre, 242 Hoppers Lane
2. Clearance Certificates are available through the previous Fund offices on request or alternatively your joining fund can request a certificate on your behalf with the completion of a Clearance Certificates request.
3. All staff at the fund office receive completed Clearance Certificates from persons or their representatives who lodge the form in person at the Fund office, or by post. Staff are bound by the privacy clause in their employment agreements.
4. On receipt of a Clearance Certificates at the Fund office, determination is made by an authorised staff member only on acceptance, with the relevant details entered into the computer against the appropriate membership.
5. Completed Clearance Certificates are kept at the Fund Office in a secure filing system for the mandatory retention period.
6. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 7 years
7. Access - All staff have access to the Clearance Certificates information stored in membership comments history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
8. Reason for collection – The collection and maintenance of information relating to Clearance Certificates is essential to enable GMHBA limited to comply and correctly calculate member's premiums in accordance with Lifetime Health Cover Certified Age of Entry, which is required under the Lifetime Health Cover Legislation. The claims history document contains information about claims made by each person on the membership and is used to ensure annual limits are not exceeded when you transfer from your previous fund.

#### **Member Service Review Committee**

1. The Member Service Review Committee (MSRC) provides members with an alternative option (prior to the Private Health Insurance Ombudsman) when not completely satisfied on an outcome or are requesting benefit payment outside the GMHBA Limited – By Laws and Regulations.
2. GMHBA Members are directed to put their case forward in writing with the relevant information relating to the request and to support the circumstances involved.
3. There are 6 members on the Committee, 4 of whom are Senior Supervisors, together with an Executive Manager and a Senior Manager. MSRC meet every Wednesday where possible to review individual cases. Information and outcomes are entered into the computer system against the appropriate membership. Staff are bound by the privacy clause in their employment agreements.
4. Completed documentation is kept at the Fund Office in a secure filing system for the mandatory retention period.
5. On expiry of the mandatory retention period, the forms are then transferred to an off site location – Advanced Record Management - 140 Broderick Road CORIO, Vic 3214. The forms are then shredded or destroyed under supervision of an authorized person after a certain period. Destruction period is after 5 year.

6. Access - All staff have access to the Member Service Review Committee information stored in membership comments history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.
7. Reason for collection – The collection and maintenance of information relating to Member Service Review Committee is essential to enable GMHBA Limited to review and comply with the GMHBA Limited – By Laws and Regulations.

#### **Acute Care Advisory Committee**

The Acute Care Advisory committee (ACAC) was established in August 1989 following an amendment of the Health Insurance Act, which replaced separate committees in each state. The state committees had been set up in 1984 by the inclusion of Section 3B in the Health Insurance Act (1973).

Under the provisions of the National Health Act 1973, a declared level of benefit is payable by health insurance funds towards the cost of members' daily hospital fees. After 35 days, this benefit is reduced to the equivalent of that paid for a nursing home type patient. However, where it can be established that the patient is in need of acute care, the fund benefit will be maintained at the declared level beyond 35 days.

If GMHBA considers that the patient is not in need of acute care but is a nursing home type patient, to reduce the level of benefit paid, the fund must refer the certificate to the Delegate of the Secretary of the Department. The form must firstly be signed by the patient authorising release of information by the medical practitioner. The Delegate then refers them to ACAC for review and a recommendation.

There are 13 members on the Committee, 5 of whom are general practitioners, together with a specialist in palliative care, 2 paediatricians with extensive experience, 2 psychiatrists in private hospital practice, a geriatrician, a consultant physician and a public health administrator.

The Private Health Insurance Administration Council (PHIAC) collects a fee of \$150.00 towards administrative expenses for each referral.

#### **Computer Data Base Access**

All staff has access to member and dependant's claims, financial, cover, personal details and sensitive information history. Being a small organization, multi-skilled staff is essential for efficient utilization of human resources and management, and as such access to the information is a necessity.

GMHBA Limited software vendor Hambs System Limited also has access to the entire database to enable appropriate software support and maintenance.

#### **Electronic Claiming System - HICAPS (Health Insurance Claims and Payment System) & IBA**

HICAPS & IBA is a direct claiming system between the Dental/Ancillary Providers and GMHBA Limited. At the point of treatment, the provider or staff member requests from the patient their electronic HICAPS card. The card enables the provider to validate the patients cover, benefit eligibility, the benefit payable on the treatment provided, and facilitates direct claiming. The Fund advises the members at the time of issuing the card the HICAPS direct claiming system. Member participation is optional and entirely voluntary per episode of treatment.

#### **Australia Post**

##### **Premium Payment**

Australia Post is a payment option for members to pay their premiums either by cash or EFTPOS. The GMHBA renewal and reminder notice is bar coded and displays the Australia Post logo to enable members to utilise this payment option. Member participation is optional and entirely voluntary per premium payment.

Data transmitted from Australia Post to GMHBA is encrypted and only authorised staff and the Information Technology Department have this security level.

##### **Change Of Address**

A Member who changes their address with Australia Post has the option to authorise Australia Post to notify GMHBA limited this has occurred. The personal details that are only required are their full name and membership number.

Privacy agreements are in place with all Fund agents.

**BPay**

BPay is a payment option for members to pay their premiums either by Telephone or Internet Banking. The GMHBA renewal and reminder notice displays the BPay logo, the Biller Code (GMHBA identification number - issued by CBA) and Ref Number to enable members to utilise this payment option. Member participation is optional and entirely voluntary per premium payment.

Data transmitted from BPay to GMHBA Limited is encrypted and only authorised staff and the Information Technology Department have this security level.

Privacy agreements are in place with all Fund agents

**Australian Regional Health Group**

The Australian Regional Health Group (ARHG) acts on behalf of "the member funds" (8 health funds including GMHBA) to negotiate private hospital agreements.

Directors of ARHG and private hospitals are bound by the privacy clause in the agreements.

**Confidentiality**

Each party agrees to keep confidential the contents of this Agreement and not to disclose any part of such contents to any third party (except to professional advisors or as required by any applicable law or regulation) without prior written consent of the other party.

## **CONFIDENTIALITY AGREEMENTS**

### **Staff Confidentiality Agreement – Health Insurance Division**

All staff at the Health Insurance Division of GMHBA Limited have signed employment agreements.

A copy of the agreement is attached at appendix 1.

#### **CONFIDENTIALITY**

The employee:

- will not either during the continuance of his/her employment or thereafter divulge to any person any information concerning the affairs of GMHBA or its members and their dependants except that which is necessary to effectively carry out his/her duties as an employee of GMHBA.
- comply at times with the NPP in relation to GMHBA members and their dependants during the continuance of his/her employment or thereafter.
- comply with the confidentiality agreement within the Two Way Agreement that GMHBA has entered into with the HIC.

#### **CLEAN DESK PROCEDURE**

All staff have been instructed at the end of each working day, work stations/office desks are to be cleared and left neat and tidy. No personal or sensitive information will be left out on display.

#### **Directors - GMHBA Limited**

Directors of GMHBA Limited have signed confidentiality agreements.

"The Board records remain the property of GMHBA. The Director must not at any time disclose any confidential information in the Board records to any person other than the other directors or the authorised officers of GMHBA except in proceedings to which the Director or GMHBA is a party, or if compelled by law to do so".

#### **Agents - GMHBA Limited**

Agents of GMHBA Limited have signed confidentiality agreements embracing the agents, staff, contractors, and associated persons.

A copy of the agreement is attached at appendix 2.

#### **Computer Software Vendor - GMHBA Limited – (Hambs System Limited)**

Hambs Systems Limited provides and supports GMHBA Limited Health Insurance computer software. The software product is exclusive to the private health insurance industry. Hambs Systems Limited have access to GMHBA Limited entire database. Confidentiality clauses are in place between the Funds and Hambs Systems Limited.

## **PRIVACY PROCEDURES AND ESCALATION STEPS**

### **Privacy Escalation**

Any type of privacy issue in the first instance should be dealt with by the staff member concerned.

If the staff member cannot deal or requires advice this matter should then be referred to your immediate Branch Manager/ Supervisor or Team Leader.

If at this stage Branch Manager/ Supervisor or Team Leader cannot resolve the issue, then it should be referred to either the Executive Manager, Member Service's – Jacqueline Armitage or Manager, Member Satisfaction – Karen O'Neil.

If the member then disagrees with the outcome at this point it should then be referred to the Privacy Officer – Melissa Leahy.

### **Complaints Procedures**

Complaints about an act or practice by GMHBA Limited that is believed to interfere with the privacy of the individual will be referred to the Privacy Policy Officer for investigation and resolution after the appropriate steps have taken place (as stated above). Information relating to the complaint must be entered into the computer system in the Communication Register.

Should the individual remain dissatisfied with the Officer's resolution, the individual may refer the matter to the Privacy Commissioner.

## **Steps for Identification**

### **Personal Contact**

#### **Step One**

Hand over the GMHBA Privacy Leaflet.

"Due to the Privacy Act amended effective 21 December 2001, GMHBA is required by law to provide you with this leaflet which explains the new laws about protecting your privacy."

If member requests further information, then refer them to the leaflet.

As from 16/04/05 as members are generally aware of privacy identification confirmation steps, handing over the leaflet and advising verbal statement is no longer required (this also adds to length of service times). Therefore, step two will actually be step one.

#### **Step Two**

Confirm identity of customer.

Personal information cannot be divulged to anyone other than the person themselves without their consent. It is therefore important to establish the identity of the person requesting the information.

"Because of Privacy Legislation requirement, I need to confirm your identity. Would you mind giving me your full name, address, date of birth and GMHBA membership number, or would you have your drivers licence with you?"

Name, address and date of birth are essential. The Membership number is highly recommended however it is optional. Alternatively photograph identification will suffice.

If the person is not prepared to, or is unable to provide the required identification, the private information cannot be divulged. Alternatively, and only if appropriate, the person could be advised that the information will be forwarded by post. The information must be forwarded to the member or dependant involved, not to an address nominated by the inquirer. An entry in the Communication Register must be documented.

If identity of customer is confirmed, then you may proceed with transaction.

### **Incoming Telephone Calls**

#### **Step One**

"Due to the Privacy Act amended effective 21 December 2001, GMHBA is required by law to confirm your identity"

As from 16/04/05 as members are generally aware of privacy identification confirmation steps, advising verbal statement is no longer required (this also adds to call times). Therefore, step two will actually be step one.

#### **Step Two**

Confirm identity of customer.

Personal information cannot be divulged to anyone other than the person themselves without their consent. It is therefore important to establish the identity of the person requesting the information.

"Because of Privacy Legislation requirement, I need to confirm your identity. Would you mind giving me your full name, address, date of birth and GMHBA membership number?"

Name, address and date of birth are essential and the Membership number is highly recommended however it is optional.

If the person is not prepared to, or is unable to provide the required identification, the private information cannot be divulged. Alternatively, and only if appropriate, the person could be advised that the information will be forwarded by post. The information must be forwarded to the member or dependant involved, not to an address nominated by the inquirer. An entry in the Communication Register must be documented.

#### **Step Three**

"Would you like me to forward you GMHBA's Privacy Leaflet?"

#### **Step Four**

If identity of customer is confirmed, then you may proceed with transaction, ensuring that an entry in the Communication Register is documented, as per normal.

#### **Third Party Enquires**

From a **Third Party** (Providers, etc) – Except where NPP provides otherwise, personal information of members or dependants cannot be divulged to third parties, without prior approval from the person involved.

#### **Communication Register Entry**

Information entered into the Communication Register must be accurate and factual. Opinions from the staff member are not to be entered. This is very important as members can now gain access to the notes entered in these fields. Please do not enter comments like "this member has no idea or is a fruitcake".

#### **Denying Access**

When the situation arises that a member cannot confirm his/her identity (i.e. access is denied) this will need to be entered in Memo's under comment/warning (displayed).

**Member Enquiring/Claiming On Behalf Of Another Person** - (Two separate memberships held within GMHBA i.e. husband and wife, parent and child)

#### **Client Authority**

Effective August 2002, please find attached a form implemented due to National Privacy Principles. This form is titled **CLIENT AUTHORITY** and is required for persons other than those listed on the membership, to access personal and sensitive information about the membership in question and claim on the members behalf. In addition, this form should only be used where a member requests that their nominated agent claims on their behalf for an indefinite period. If in the instance, its just a once off claim, then the Agents Authority on the GMHBA claim form will be sufficient and NO Client Authority is required. Please read and familiarise yourself with the information on this form.

**E.g. Agent** - somebody other than those active members which includes dependants 18 and over, listed on the membership

Please note that this form does not allow an agent to alter the members cover etc however, it will allow the agent to claim and access personal information, until the member requests in writing that the arrangement will cease.

Below are some examples of when this form should be used:

- Agent - Mother/Father claiming on behalf of children (who are no longer dependant of parents cover)
- Agent - who could be a next door neighbour wanting to claim for elderly member
- Agent - Partner claiming on behalf of member (partner is not presently covered under this membership)

**NB:** This form does not replace Power of Attorney's (POA) or Spousal Authority. If a person has POA or Spousal Authority this will enable them to access all details and request transfers of covers, change of address etc.

#### **Confirm identity of Agent**

Personal information cannot be divulged to anyone other than the persons listed on the membership as stated above or the agent without the consent. It is therefore important to establish the identity of the person requesting the information.

"Because of Privacy Legislation requirement, I need to confirm your identity. Would you mind giving me your full name, address, date of birth and GMHBA membership number, or would you have your drivers licence with you?"

Name, address and date of birth are essential. The Membership number is highly recommended however it is optional. Alternatively photograph identification will suffice.

When processing confirmation of an agent, staff will need to check details entered on the Hambs system and confirm identity of agent. The same steps that you are presently taking to confirm identity will continue as stated above.

### **Memos - ID's and Spouse Authority & Comment/Warning Displayed**

On completion of the Client Authority Form, information will need to be entered on the Hambs system under Memos - ID's and Spouse Authority - Client Authority, with additional information required for the privacy check to be entered under Memos - Comment/Warning Displayed (for examples see Policy & Procedure titled: **Client Authority Form**).

**IMPORTANT INFORMATION:** IT IS THE STAFF'S RESPONSIBILITY TO ENSURE THAT OUR MEMBERS ARE BEING EDUCATED TO COMPLY AT ALL TIMES WITH THE PRIVACY ACT ALONG WITH THE NATIONAL PRIVACY PRINCIPLES EFFECTIVE 21 DECEMBER 2001

PROTECTING THE MEMBER'S PRIVACY AND CONFIDENTIALITY OF THEIR PERSONAL INFORMATION IS IMPORTANT TO GMHBA.....

### **Accessing Information Upon Request**

Below are different examples of customer's requests to access information, and they have been broken down into 3 stages.

#### **Stage One – Information, which is easily accessible**

- "What is my date paid to?"
- "What is my level of cover?"
- "How much do I have left to claim on Chiropractic for the remainder of this year?"

These types of requests can be dealt with on the spot

#### **Stage Two – Information which may not be easily accessible**

Stage Two requests are regarding data, which may not be easily accessible, as it can relate to queries, which cover the last 12 months – 24 months.

It is essential for staff to establish exactly what the Customer is requesting, and ensure that the request is responded to within 14 days.

#### **E.g. "I would like a print out of my receipt history for the last 2 years"**

1. Advise customer that information will be posted out within 14 days
2. Generate information
3. Generate standard letter titled stage 2 privacy request

#### **E.g. "I would like a summary of all claims paid in the last 2 years"**

1. Advise customer that information will be posted out within 14 days
2. Request claims history
3. Generate standard letter titled stage 2 privacy request

#### **E.g. "I would like to view all notes about my family you have recorded on your system"**

1. Advise customer that information will be posted out within 14 days
2. Generate information
3. Generate standard letter titled stage 2 privacy request

These types of queries if required can be referred to immediate Supervisor/Branch Manager.

Stage Three requests will usually be “out of the ordinary”, as usually they will relate to information covering a period greater than 2 years.

All Stage Three requests will need to be in writing, and these will then need to be forwarded to the Privacy Officer – Melissa Leahy, who will ensure that the request will be responded to within 30 days of the date of the letter.

**Eg. Member querying a transfer within their health insurance membership which took place 5 years ago, and therefore wants access to the Transfer Form.**

**Eg. Member wanting to know if they have claimed on a service rendered 4 years ago (information has since been purged off the Whics Open System)**

Advise customer that request is to be in writing and addressed to GMHBA's Privacy Officer.

If customer lodges their request in writing at a branch, then the recipient of the letter will generate a standard letter of acknowledgment titled stage 3 privacy acknowledgment, advising the customer that a response will be forwarded to them within 30 days of the date of their request.

Depending on the type of request and whether or not the information is easily accessible a charge will most likely apply. These types of request will be reviewed case by case with the applicable charges as follows:

- \$20.00 initialising the request
- \$20.00 for every half hour thereafter

Refer customer's letter to Privacy Officer – Melissa Leahy, who will then provide information to customer, along with a non-standard letter.

#### **Standard Response Letters**

There will be three standard letters to accompany Stage 2 and 3 requests. Stage 2 requests are to be sent a letter titled **ME stage 2 privacy request** along with the information requested by the member. Stage 3 written request from member will first be acknowledged with a letter titled **ME stage 3 privacy acknowledgment**. Once information is obtained and sent to member, the letter **ME stage 3 privacy request** is to be enclosed

#### **Privacy Officer**

GMHBA Limited has appointed a Senior Manager – Melissa Leahy as its Privacy Officer from 22 July 2003 previous to this appointment – Mr Ian Morison.

#### **Audit**

GMHBA Limited internal audit has been conducted prior to 21 December 2001. An audit will be actioned after 21 December 2001 to confirm GMHBA Limited is compliant and ongoing audits every 12 months to ensure compliance.

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## **Appendix 1**

### **Employee Confidentiality And Privacy Agreement**

**AGREEMENT** made the \_\_\_\_\_ day of \_\_\_\_\_ 2001 by

\_\_\_\_\_  
Name of \_\_\_\_\_  
Address

### **RECITALS**

- a) GMHBA Limited (GMHBA) is a registered Health Benefit Organisation.
- b) The Employee is an employee of GMHBA.
- c) This agreement is entered into to reflect confidentiality and to ensure compliance with the National Privacy Principles (NPP) and with the confidentiality agreement within the Two-Way Agency Agreement that GMHBA has entered into with the Health Insurance Commission (HIC).

### **OPERATIVE PART**

The Employee will:

1. not either during the continuance of his/her employment or thereafter divulge to any person any information concerning the affairs or business of GMHBA or its members and their dependants except that which is necessary to effectively carry out his/her duties as an employee of GMHBA.
2. comply at all times with the NPP in relation to GMHBA members and their dependants during the continuance of his/her employment or thereafter.
3. comply with the confidentiality agreement within the Two Way Agreement that GMHBA has entered into with the HIC.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Witness name in block letters

\_\_\_\_\_  
Signature of Authorised Company Person      Company Person name in block letters

**Appendix 2****AGENCY CONFIDENTIALITY and PRIVACY AGREEMENT**

AGREEMENT made the \_\_\_\_\_ day of \_\_\_\_\_ 2001 by

PARTIES:

GMHBA LIMITED (ABN 98 004 417 092)  
 of 60-68 Moorabool Street Geelong, in the State of Victoria ("GMHBA ")  
 \_\_\_\_\_ trading as \_\_\_\_\_ (ABN \_\_\_\_\_) of  
 \_\_\_\_\_ in the State of Victoria ("Agent")

RECITALS:

- a) GMHBA Limited (GMHBA) is a registered Health Benefit Organisation
- b) The Agent is a recognized agency for GMHBA.
- c) This agreement is entered into to reflect confidentiality and to ensure compliance with the National Privacy Principles (NPP).

**OPERATIVE PART:**

The Agent will:

1. not either during the continuance of the agency or thereafter divulge to any person any information concerning the affairs or business of GMHBA or its members and their dependants except that which is necessary to effectively carry out their duty.
2. comply at times with the NPP and the Privacy Policy in relation to GMHBA members and their dependants during the continuance of the agency or thereafter.
3. shall ensure that all Agent staff, contractors or any persons with access to GMHBA agency operations and/or GMHBA members and their dependants information comply with clauses 1 and 2 above.

**THE COMMON SEAL of GMHBA LIMITED )**

(ABN 98 004 417 092) was affixed in accordance with its constitution.

.....  
 Signature of Authorised Person  
 (BLOCK LETTERS)

.....  
 Position of Authorised Person  
 (BLOCK LETTERS)

Signed by \_\_\_\_\_

.....

In the presence of .....  
 Witness name in block letters

.....  
 Signature of witness

Note: Under the National Health Act 1953, a pre-existing condition, is an ailment, illness or condition, the signs and/or symptoms of which, in the opinion of a medical practitioner appointed by the health fund, existed at any time during the six months preceding the day on which the contributor (patient) began contributions to their current hospital table.

### Consent by patient for release of information

Member Name:		Membership No:	
Address:			
Suburb:	State:	P/Code:	
Date of Birth:			
Signed:		Phone:	
Certification by Medical Practitioner			
Patient Name:		Date:        /        /	
Date of Hospital Admission (or proposed admission):        /        /		to:        /        /	
Principal Condition (reason for hospitalisation):			
Nature of Operation (if any):			
Associated Conditions (if any):			
Date of patient's first attendance for this illness:        /        /			
Signs or symptoms of the condition (i.e. In 2.a above) when first seen:			
consisted of:			
had commenced on:        /        /			
had been present for: .....days .....weeks .....months ..... years			
Are you the patient's usual General Practitioner? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, did you refer the patient to a specialist? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please fill in the details below.			
Date of referral:        /        /			
Specialist Name:		Phone:	
Specialist Address:			
Are you the Specialist by whom the patient was treated? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, who referred the patient to you?		Date of referral:        /        /	
Specialist Name:		Phone:	
Specialist Address:			
Medical Practitioner Name:		Phone Number:	
Address:			
Suburb:	State:	P/Code:	
Signature:		Date:        /        /	

## **Appendix 4**

### **NEW LAWS ABOUT PRIVACY**

Protecting your privacy and the confidentiality of your personal and sensitive information is important to us.

### **AN IMPORTANT MESSAGE TO ALL OUR CUSTOMERS**

At GMHBA, your right to privacy has always been important to us. This Leaflet explains the type of personal and sensitive information we keep on record and how we may use this information. This Leaflet also provides some general details about your privacy rights along with our rights and obligations.

On the 21 December 2001, new National Privacy Principles will start to apply. GMHBA's documentation will specify how and why we collect the information and what the information is used for. (Refer to NPP 1.3, at rear of leaflet)

### **WHY DO GMHBA REQUIRE YOUR PERSONAL INFORMATION?**

The personal and sensitive information that is collected by GMHBA comprises of name, address, contact details and information specific to your health insurance.

The information collected allows GMHBA to assess your health claims, administer your health insurance and help us to improve our relationship with you.

### **DISCLOSURE OF YOUR PERSONAL AND SENSITIVE INFORMATION TO THIRD PARTIES**

GMHBA relies on third party suppliers (hospitals, providers, mail-houses etc) to provide information and carry out specialised activities. Whilst your personal information may be provided to these third parties to enable them to perform their agreed activities, they are bound by confidentiality agreements and are prohibited from using this information for any other purpose.

### **HOW GMHBA MAY USE THIS INFORMATION**

GMHBA will use your personal and sensitive information to:

- Help us process your application for any new product.
- Efficiently manage and administer all products and services.

### **DIRECT MARKETING AND YOUR PRIVACY**

From time to time GMHBA may advise you of information on products or services that may be relevant or of some interest to you. When GMHBA contacts you we try to strive to achieve Health Insurance Industry best practice.

### **CONTACTING GMHBA ABOUT YOUR RIGHTS, ACCESS AND CORRECTION OF PERSONAL INFORMATION.**

GMHBA aims to ensure that your personal information is accurate, up to date and complete.

You can request personal and sensitive information that we keep on record

Please contact our customer service centre on

1300 136 652 EST 8.30am-5pm, Mon-Fri.

### **NPP 1.3: COLLECTION STATEMENT**

At or before the time (or, if that is not practicable, as soon as practicable after) GMHBA Limited collects personal information about an individual from the individual, GMHBA Limited will take reasonable steps to ensure that the individual is aware of:

- (a) the identity of the organisation and how to contact it; and
- (b) the fact that he or she is able to gain access to the information; and
- (c) the purpose for which the information is collected; and
- (d) the organisation (or the types of organisations) to which the organisation usually discloses information of that kind; and
- (e) any law that requires the particular information to be collected; and
- (f) the main consequences (if any) for the individual if all or part of the information is not provided.

**Appendix 5****Client Authority Form**

Due to the introduction of the National Privacy Principles, your authority is required for persons, other than those listed on the membership, to access personal and sensitive information about your membership and claim on your behalf. To enable us to provide this information to a nominated agent, we require the following information.

NB: This authority will remain current until notification in writing is received to cancel or amend agent details.

**Member Details:**

**Full name of member:** \_\_\_\_\_

**Member number:** \_\_\_\_\_

**Nominated Agent Details:**

**Full name of agent:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**Suburb:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Postcode:** \_\_\_\_\_

**Agent date of birth:**        /        /

**Declaration:**

I consent to the release of my health and personal information to my agent named above and authorise my agent to claim benefits on my behalf. This authority will continue until such time as I provide GMHBA with notification that I wish the arrangement to change.

The information that will be released includes:

- Details of my membership of GMHBA;
- Details of my health treatment;
- Details of the health practitioner who provided the treatment; and
- Details of amounts paid to myself or a health practitioner.

I understand that only information which is required to claim benefits on my behalf will be released.

**Member Signature:** \_\_\_\_\_

**Date:**        /        /

**Agent Signature:** \_\_\_\_\_

**Date:**        /        /

**Witness Signature:** \_\_\_\_\_

**Date:**        /        /



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