**Division 90—Introduction**

**90‑1  What this Part is about**

Private health insurers have obligations to people insured under their complying health insurance products and people seeking to become insured under those products. Private health insurers also have to keep the Department, the Council and the Private Health Insurance Ombudsman informed about their health insurance business.

**Division 93—Giving information to consumers**

**93‑1  Maintaining up to date standard information statements**

             (1)  A private health insurer must ensure that it maintains at all times an \*up to date \*standard information statement:

                     (a)  for each \*product subgroup of each \*complying health insurance product that it makes available; and

                     (b)  for each product subgroup of each complying health insurance product under which it insures people.

          (1A)  A single \*standard information statement may be the standard information statement for more than one \*product subgroup of a \*complying health insurance product if the premiums payable under policies in the subgroups the statement covers are the same.

             (2)  The \*standard information statement for a \*product subgroup of a \*complying health insurance product is ***up to date***at a particular time, if, at that time, the information in the statement is accurate.

             (3)  A private health insurer commits an offence if there is no \*standard information statement for a\*product subgroup of a \*complying health insurance product of the insurer.

Penalty:  60 penalty units.

             (4)  A private health insurer commits an offence if:

                     (a)  there is a \*standard information statement for a \*product subgroup of a \*complying health insurance product of the insurer; and

                     (b)  the standard information statement is not \*up to date.

Penalty:  60 penalty units.

             (5)  Strict liability applies to subsections (3) and (4).

Note:          For ***strict liability***, see section 6.1 of the *Criminal Code*.

**93‑5  Meaning of *standard information statement***

             (1)  A ***standard information statement***for a \*product subgroup of a \*complying health insurance product is a statement about the product subgroup that contains the information, and is in the form, set out in the Private Health Insurance (Complying Product) Rules.

             (2)  The Private Health Insurance (Complying Product) Rules may set out methods by which\*standard information statements are to be made available to people who ask for information about \*complying health insurance products.

**93‑10  Making standard information statements available**

                   A private health insurer must ensure that, if a person asks an \*officer, employee or agent of the insurer for information about a \*complying health insurance product of the insurer:

                     (a)  the person is told about the \*standard information statement for the \*product subgroup that is likely to apply to the person and how to obtain a copy of the statement; and

                     (b)  if the person asks for a copy—the person is given an \*up to date copy of the statement for that subgroup.

**93‑15  Giving information to newly insured people**

             (1)  A private health insurer must ensure that, when an \*adult first becomes insured under a\*complying health insurance policy of the insurer, the adult is given:

                     (a)  an \*up to date copy of the \*standard information statement for the \*product subgroup that the policy belongs to, by a method (if any) set out in the Private Health Insurance (Complying Product) Rules; and

                     (b)  details about what the policy \*covers and how benefits provided under it are worked out; and

                     (c)  a statement identifying the \*health benefits fund to which the policy is referable.

             (2)  If more than one \*adult becomes insured under a single \*complying health insurance policy of a private health insurer, the insurer is taken to comply with subsection (1) if the insurer complies with that subsection in relation to only one of those adults.

**93‑20  Keeping insured people up to date**

             (1)  A private health insurer must ensure that an \*adult insured under a \*complying health insurance policy issued by the insurer is given the \*standard information statement for the\*product subgroup that the policy belongs to, at least once every 12 months.

             (2)  A private health insurer must ensure that, if a proposed change to the insurer’s \*rules:

                     (a)  is or might be detrimental to the interests of an insured person; and

                     (b)  will require an update to the \*standard information statements for a \*complying health insurance product of the insurer;

an \*adult insured under each \*complying health insurance policy in the product:

                     (c)  is informed about the proposed change a reasonable time before the change takes effect; and

                     (d)  is given the updated standard information statement for the \*product subgroup that the policy belongs to as soon as practicable after the statement is updated.

             (3)  A private health insurer must ensure that, if an \*adult who is insured under a \*complying health insurance policy of the insurer asks an \*officer, employee or agent of the insurer for information about what the policy covers or the benefits the policy provides, the adult is given the information as soon as practicable.

             (4)  If a private health insurer changes the \*health benefits fund to which a \*complying health insurance policy of the insurer is \*referable, the insurer must ensure that:

                     (a)  before the change takes effect, an \*adult insured under the policy is given a statement identifying the health benefits fund to which the policy will be referable as a result of the change; or

                     (b)  within 2 weeks after the change takes effect, an adult insured under the policy is given a statement identifying the health benefits fund to which the policy is referable as a result of the change.

Note:          The health benefits fund to which a policy is referable may change in accordance with Division 146.

             (5)  If more than one \*adult is insured under a single \*complying health insurance policy of a private health insurer, the insurer is taken to comply with subsection (1), (2) or (4) if the insurer complies with the subsection in relation to only one of those adults.

**93‑25  Giving advance notice of detrimental changes to rules**

             (1)  A private health insurer must ensure an \*adult insured under a \*complying health insurance policy issued by the insurer is informed about any proposed change to the insurer’s \*rules (other than a change to which subsection 93‑20(2) applies), a reasonable time before the change takes effect, if the proposed change is or might be detrimental to the interests of an insured person.

             (2)  If more than one \*adult is insured under a single \*complying health insurance policy of a private health insurer, the insurer is taken to comply with subsection (1) if the insurer complies with that subsection in relation to only one of those adults.

**93‑30  Failure to give information to consumers**

             (1)  A private health insurer commits an offence if:

                     (a)  the insurer is required under section 93‑10, 93‑15, 93‑20 or 93‑25 to ensure that a particular thing happens in relation to a particular person; and

                     (b)  the thing does not happen in relation to the person.

Penalty:  60 penalty units.

             (2)  Strict liability applies to subsection (1).

Note:          For ***strict liability***, see section 6.1 of the *Criminal Code*.

**Division 96—Giving information to the Department, the Council and the Private Health Insurance Ombudsman**

**96‑1  Giving standard information statements on request**

                   A private health insurer must ensure that, if:

                     (a)  the Secretary of the Department; or

                     (b)  the Council; or

                     (c)  the Private Health Insurance Ombudsman;

requests the private health insurer for the \*standard information statements for a \*complying health insurance product of the insurer, the insurer gives the person who made the request \*up to date copies of the statements, as soon as practicable after being asked and by the method (if any) specified by the person.

**96‑5  Giving standard information statements for new products**

                   A private health insurer must ensure that copies of the \*standard information statements for a\*complying health insurance product of the insurer are given to:

                     (a)  the Secretary of the Department; and

                     (b)  the Council; and

                     (c)  the Private Health Insurance Ombudsman;

no later than the first day on which the insurer first begins to make the \*product available.

**96‑10  Giving updated standard information statements**

                   A private health insurer must ensure that, if the \*standard information statements for a\*complying health insurance product of the insurer are updated, copies of the updated statements are given to:

                     (a)  the Secretary of the Department; and

                     (b)  the Council; and

                     (c)  the Private Health Insurance Ombudsman;

as soon as practicable after the statement is updated.

**96‑15  Giving additional information on request**

             (1)  Any of the following:

                     (a)  the Secretary of the Department;

                     (b)  the Council;

                     (c)  the Private Health Insurance Ombudsman;

may request a private health insurer for specified information about, or in relation to, a\*complying health insurance product or products, or a \*complying health insurance policy, of the insurer.

             (2)  The request must:

                     (a)  be in writing; and

                     (b)  specify the time by which the information requested is to be given.

             (3)  The request may specify the manner and form in which the information requested is to be given.

             (4)  A private health insurer must ensure that the request is complied with, by the time specified in the request or any longer time allowed by the person who made the request.

**96‑20  Failure to give information to Department, Council or Private Health Insurance Ombudsman**

             (1)  A private health insurer commits an offence if:

                     (a)  the insurer is required under section 96‑1, 96‑5, 96‑10 or 96‑15 to ensure that a particular thing is given to a particular person; and

                     (b)  the thing is not given to the person.

Penalty:  60 penalty units.

             (2)  Strict liability applies to subsection (1).

Note:          For ***strict liability***, see section 6.1 of the *Criminal Code*.

**96‑25  Giving information required by the Private Health Insurance (Complying Product) Rules**

                   The Private Health Insurance (Complying Product) Rules may set out any or all of the following:

                     (a)  information in relation to \*complying health insurance products;

                     (b)  persons to whom the information is to be given (who may include, but need not be limited to, the Secretary of the Department, the Council or the Private Health Insurance Ombudsman);

                     (c)  the time within which, or the intervals at which, the information is to be given to a person;

                     (d)  the manner and form in which the information is to be given to a person.