

NAME OF LEVY	ADMINISTERED ON	FREQUENCY	ADMINISTERED
Private Health Insurance Risk Equalisation	Each health benefits fund of each private health insurer	21 February, 21 May, 21 August, 21 November each year	This is a reinsurance levy for private health insurers. The amounts are determined according to a formula in Private Health Insurance (Risk Equalisation Policy) Rules, taking into account age and number of insured persons, types of policies and amount of benefits paid during a quarter
Private Health Insurance Complaints	Health insurance business of private health insurers	1 January, 1 April, 1 July, 1 October each year	The levy amount depends on the market share (the number of policy holders) of each private health insurer. The levy amounts are determined according to formulas for single and joint policies contained in Private Health Insurance (Complaints Levy) Rules
Private Health Insurance Council Administration	Each private health insurer	28 February, 28 May, 28 August, 28 November each year	The levy amount depends on the market share (the number of policy holders) of each private health insurer. The levy amounts are determined according to formulas for single and joint policies contained in the Private Health Insurance (Council Administration Levy) Rules
Private Health Insurance Prostheses Application and Listing Fee	The person (sponsor) who has applied for a prostheses to be listed, or to continue to be listed	Application or new listing fees on receipt. Ongoing listing fees on 15 March and 15 September each year	There are initial and on-going listing fees for each prosthesis. The levy amounts are listed in the Private Health Insurance (Prostheses Application and Listing Fee) Rules
Therapeutic Goods (Charges)	Sponsors and manufacturers of therapeutic goods that are listed on the Australian Register of Therapeutic Goods	Application or new listing fees on receipt. Ongoing product and licence charges are listed annually.	Therapeutic goods are grouped by type. Fees are imposed according to the type of therapeutic good.

National Industrial Chemical Notification and Assessment Scheme (NICNAS)	The person or company who applied to have a chemical listed on the Australian Inventory of Chemical Substances	Application fees on receipt. Registration fees are paid annually, prior to the commencement of the NICNAS regulatory cycle ( 1 Sept to 30 Aug)	This is a charge for registration on the Register of Industrial Chemical Introducers. It may be charged as an excise, a duty of customs or as a general charge (where not an excise or duty). The charge is based on the value of chemicals introduced in the year. Where the value is more than \$500,000 and less than \$5 million the charge is \$1,441. Where the value is equal to or over \$5 million the charge is \$8,500. In any other case an amount may be prescribed. The charges are set in the <i>Industrial Chemicals (Registration Charge - General) Act 1997</i> , the <i>Industrial Chemicals (Registration Charge - Excise) Act 1997</i> and the <i>Industrial Chemicals (Registration Charge - Customs) Act 1997</i> .
National Anti-Doping Scheme	The relevant national sporting association	As drug tests of athletes/sports persons are undertaken, in accordance with NAD Scheme guidelines	The fee is imposed on a fee-for-service basis, but is not taxation.
Health Insurance (Pathology) (Fees) Act 1991	Fees are imposed on a person who applies for approval of premises by the Minister as an accredited pathology laboratory. Fees are also imposed on a person who applies for acceptance by the Minister of an undertaking to be an approved pathology authority or a person who applies for acceptance by the Minister of an undertaking to be an approved pathology practitioner.	At any time after approval as an accredited pathology laboratory, or acceptance of an undertaking to be an approved pathology authority or approved pathology practitioner.	There are several flat fees. The fee for acceptance of an undertaking to be an approved pathology practitioner is \$500. The fee for acceptance on an undertaking to be an approved pathology authority is \$1,500. The fee for approval as an accredited pathology laboratory is based on the category of accreditation allocated and is between \$750 and \$2,500. Amounts are set in the <i>Health Insurance (Pathology) (Fees) (Act) 1991</i> .

<p>Health Insurance (Approved Pathology Specimen Collection Centres) Tax Act 2000</p>	<p>The tax is payable by the approved pathology authority that applies for the approval to conduct an eligible collection centre.</p>	<p>Before the grant of approval</p>	<p>This is a tax on the approval of an approved pathology authority to conduct an eligible collection centre on premises the authority owns, leases or sub-leases or is otherwise entitled to occupy. The tax for a year is \$1000. The tax for a period of less than one year is calculated as a proportion of \$1,000 based on the number of days for which approval is granted.</p>
<p>Health and Other Services Compensation Charge</p>	<p>The charge is payable by the person entitled to reimbursement under the award of compensation</p>	<p>N/A</p>	<p>The purpose of the charge is the recovery of past payments of Medicare benefits, nursing home benefits and residential care subsidy payments from legal judgments and settlements. Where a person has been awarded compensation in a legal judgement or settlement in relation to an injury which entitles them to reimbursement for medical expenses incurred treating the injury, and the person has received a medicare benefit, nursing home benefit or residential care subsidy for professional services or care relating to the injury, a charge is imposed on their compensation. The charge is equal to the Medicare benefit, the nursing home benefit or the residential care subsidy.</p>

<p>Medical Indemnity (Run-Off Cover Support Payment) Act 2004</p>	<p>The tax is payable by each medical indemnity insurer.</p>	<p>Annually</p>	<p>The tax is a specified percentage (15% or lower) of the medical indemnity insurer's premium income for the period of 12 months ending on 31 May in a financial year. The percentage is currently specified at 5% in the <i>Medical Indemnity (Run-Off Cover Support Payment) Regulations 2008</i>. An insurer's premium income is the sum of all the premiums paid to the insurer during the year for medical indemnity cover provided for medical practitioners under contracts of insurance.</p>
<p>Nursing Home Charges (Imposition) Act 1994</p>	<p>The person selling the nursing home (the vendor).</p>	<p>The Secretary provides the vendor with a written notice stating the day on which the charge is payable.</p>	<p>This is a charge on the vendor of a nursing home if an investigation ordered by the Secretary determines that the the vendor has received a Commonwealth benefit which may be taken into account, in accordance with the <i>National Health Act 1953</i>, to decrease fees when determining the scale of fees in respect of a nursing home. The amount of the charge is equal to the Commonwealth benefit received. The Secretary is required to order certain investigations if she receives notice of the intended sale of an approved nursing home or if a nursing home has been sold.</p>

Recognition as a consultant physician or specialist by Minister	The person applying for recognition	On application	Section s3E of the <i>Health Insurance Act 1973</i> allows medical practitioners not ordinarily domiciled in Australia to apply to the Minister for a determination that the practitioner should be recognised as a consultant physician or specialist for the purposes of the Act. The fee for application is \$30 and is set in the <i>Health Insurance Regulations 1975</i> .
Approval as a billing agent	The person or body applying for approval - can be a health fund, a hospital, an organisation or an individual.	On application	This is an application fee for approval as a billing agent. Billing agents act on behalf of a person who has received hospital treatment as a private patient to claim Medicare benefits and private health insurance medical benefits. Billing agents may claim the Medicare benefit direct from Medicare Australia and any fund 'gap' benefit direct from the private health funds. The application fee for a person or body who has previously been approved is \$1,000 and in any other case is \$500.
Accreditation application fee	Approved providers of residential aged care services	Varies with period of accreditation - generally once every 3 years	Fee is payable to the Aged Care Standards and Accreditation Agency Ltd for assessment of an aged care service as part of the accreditation process. Fee varies according to number of residential care places allocated to the service.
Certification application fee	Approved providers of residential aged care services	Once only.	Fee is payable when an approved provider applies for certification of a residential care service. Fee varies according to number of residential care places allocated to the service.

Aged Care (Bond Security) levy	Approved providers of residential care services who charge accommodation bonds for entry.	To date, no levy has been imposed.	The <i>Aged Care (Bond Security) Levy Act 2006</i> allows for the imposition of a levy to recover an amount paid to care recipients by the Commonwealth under the Accommodation Bond Guarantee Scheme if an approved provider becomes insolvent and is unable to refund bond balances that have fallen due for repayment.
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