

# The *Premium Support Scheme*

## Terms and conditions

### What is the Premium Support Scheme?

The Premium Support Scheme (PSS) is an Australian Commonwealth Government initiative. If you are eligible, you will receive a reduction in your gross medical indemnity insurance costs (GMIIIC).

### How does the scheme work?

The scheme is optional. We invite members to opt in to the scheme prior to each renewal but you may choose to opt in after the policy period has commenced. This opt in is completed by an online application that can be found on our website. These applications are assessed by us and any PSS subsidy is given as a reduction off your GMIIIC.

### What is the eligibility criteria?

You may be eligible for the PSS if you are:

- a medical practitioner whose GMIIIC exceeds 7.5% of your gross private billings (standard eligibility criteria)
- a procedural general practitioner practising in an area that is classified a Modified Monash Model (MMM) 3-7
- a procedural general practitioner who was eligible for a PSS subsidy payment on 30 June 2020 because they were practising in an area classified as a Remote, Rural or Metropolitan Area (RRMA) 3-7
- working primarily in the public sector, but you have cover for private practice services that you are not indemnified for under a right to private practice agreement, and your gross billings for these services are greater than \$1,000 during the premium period
- working in the public sector and do not generate private practice billings, but you incur costs to maintain cover for claims arising from past private practice.

You will not be eligible for the PSS if you earn no billings from private practice and your GMIIIC arise solely from cover for legal expenses and gratuitous services such as prescriptions and referrals.

**Please note, for the purpose of calculating a subsidy the gross medical indemnity costs exclude any risk surcharge amount.**

Your eligibility for the PSS subsidy may stop if you:

- have provided information that we or the Commonwealth know, or have reason to believe is inaccurate
- fail to pay the GMIIIC that you are responsible for within the timeframe specified by us
- have not provided your actual gross private billings information within the timeframe specified by us
- have not repaid an overpayment of a PSS subsidy within the timeframe specified by us
- have an outstanding debt for an overpayment of a PSS subsidy for a previous premium period
- practised as a doctor outside Australia for a total of six months or more (including holiday and sick leave) during the premium period

If you are no longer eligible for the PSS subsidy you will be liable for the full amount of your GMIIIC.

### What do I need to do

To opt into the scheme, you must complete the opt-in form via our website. By opting into the scheme, you agree to the Commonwealth paying a PSS subsidy to Avant on your behalf.

If you wish for any PSS subsidy to be applied to your medical indemnity insurance renewal then you must provide the required information to us prior to the renewal period and in a timeframe specified by us.

Once participating, you need to let us know if any of your details change so that we can update your details and revise the PSS subsidy if required.

At the end of each premium period, you must provide a declaration of your actual gross private billings. We will contact you to provide you with the details that we need. If you do not provide this declaration you will be liable to pay the full GMIIIC by the deadline.

Any declarations and amendments must be finalised within 12 months of the end of that premium period. You can opt in to the scheme up to 12 months after the policy period has ended if you provide your actual gross private billings.

## What information do I need to supply?

By opting in to the PSS you are agreeing to provide us and the Commonwealth information required to assess your eligibility and administer the PSS. This information includes, but is not limited to:

- your estimated gross private billings for the premium period
- a declaration of your actual gross private billings for any previous premium period (or part of a premium period) for which a PSS subsidy was made
- the costs payable to other insurers for run-off or retroactive cover for any previous premium period which are payable by you
- your area of practice
- your provider number(s)
- details on whether you practise in an area classified as a Modified Monash Model (MMM) 3-7.

If your circumstances change and you become ineligible for the PSS or your subsidy decreases because your declared gross private billings differ to your estimate, then you will be liable for your GMIIIC and need to repay any subsidy.

## Further information

Further information about the PSS and frequently asked questions can be found at [www.health.gov.au](http://www.health.gov.au).

## How we use your personal information

By electing to opt in to the PSS, you agree to your personal information being shared by us with the Commonwealth, as represented by the Department of Health and Services Australia.

We and the Commonwealth may be required by law to disclose personal information to the Australian Prudential Regulation Authority and the Australian Government Actuary. We may also be required to provide information to parliament or a parliamentary committee, or to meet other reporting requirements.

We acknowledge our responsibilities in the proper handling of personal information we collect and hold, and will not act or engage in any practice that would breach the *Privacy Act 1988 (Cth)*. A copy of our privacy policy is available on our website.

By electing to opt in to the PSS you agree to participate in audits which are initiated by the Commonwealth in relation to your stated gross private billings and other information provided by you.