



24 September 2020

**TO: ALL PRIVATE HEALTH INSURERS (PHIS)**

**REPORTING STANDARD HRS 605.0 PRIVATE HEALTH INSURANCE REFORMS DATA COLLECTION (HRS 605.0) – CONSULTATION ON FURTHER CHANGES**

The Australian Prudential Regulation Authority (APRA) will collect data under HRS 605.0 on behalf of the Department of Health (the Department) on private health insurance reform measures (reforms) announced by the Department in October 2017.

APRA announced on 31 March 2020 that it would postpone the implementation of HRS 605.0 to allow PHIs to devote resources to handling the impacts of COVID-19<sup>1</sup>. APRA paused the implementation of HRS 605.0 with Excel-based collection continuing. APRA is proposing two small amendments to HRS 605.0 after receiving feedback from industry as PHIs prepared for implementation.

APRA and the Department have drafted two key changes to HRS 605.0. These changes are relatively minor but will improve the usefulness of HRS 605.0 data. The changes are:

- Removing co-payment from Tables 2 and 3;
- Adding an additional dimension (column) to Table 4 to separately collect psychiatric services; and
- Updating relevant definitions.

A marked-up copy of HRS 605.0 accompanies this letter.

APRA and the Department propose the first collection for this new HRS 605.0 will be for the quarter ending March 2021.

APRA and the Department welcome feedback on the proposals, which are open to a one month public consultation.

PHIs are requested to provide feedback, or any questions or concerns by 26 October 2020 to the Senior Manager, Data Frameworks and Strategy at [DataConsultations@apra.gov.au](mailto:DataConsultations@apra.gov.au).

Yours sincerely,

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General Manager  
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<sup>1</sup> [Reporting Standard HRS 605.0 Private Health Insurance Reforms Data Collection \(HRS 605.0\) – Postponed implementation and further changes](#)