



Reporting Standard HRS 101.0

Regulatory Income Statement – Supplementary Information

Objective of this Reporting Standard

This Reporting Standard sets out requirements for the provision of information to APRA relating to a private health insurer's supplementary information for its regulatory income statement.

It includes associated specific instructions and must be read in conjunction with *Prudential Standard HPS 115 Capital Adequacy: Insurance Risk Charge* (HPS 115), and *Prudential Standard HPS 340 Insurance Liability Valuation* (HPS 340).

Authority

1. This Reporting Standard is made under section 13 of the *Financial Sector (Collection of Data) Act 2001*.

Purpose

2. The information reported to APRA under this Reporting Standard is used by APRA for the purpose of prudential supervision.

Application and commencement

3. This Reporting Standard applies to all private health insurers for reporting periods ending on or after ~~31 March 2026~~ 1 July 2023.

Information required

4. A private health insurer must provide APRA with the information required by this Reporting Standard for each reporting period.

Method of submission

5. The information required by this Reporting Standard must be given to APRA:
 - (a) in electronic format using an electronic method available on APRA's website; or
 - (b) by a method notified by APRA prior to submission.

Reporting periods and due dates

6. Subject to paragraph 7, a private health insurer must provide the information required by this Reporting Standard:
 - (a) in respect of each calendar quarter (i.e. the periods ending 30 September, 31 December, 31 March and 30 June); and
 - (b) in respect of each year ending 30 June.
7. If, having regard to the particular circumstances of a private health insurer, APRA considers it necessary or desirable to obtain information more or less frequently than as provided by subparagraph 6(a) or 6(b), APRA may, by notice in writing, change the reporting periods, or specify reporting periods, for the particular private health insurer.
8. The information required by this Reporting Standard must be provided to APRA:
 - (a) in the case of quarterly information under subparagraph 6(a), within 28 calendar days after the end of the reporting period to which the information relates;
 - (b) in the case of annual information under subparagraph 6(b), by 30 September each year; or
 - (c) in the case of information provided in accordance with paragraph 7, within the time specified by notice in writing.
9. APRA may, in writing, grant a private health insurer an extension of a due date, in which case the new due date will be the date on the notice of extension.

Note: For the avoidance of doubt, if the due date for a particular reporting period falls on a day other than a usual business day, a private health insurer is nonetheless required to submit the information required no later than the due date.

Quality control

10. All information provided by a private health insurer under this Reporting Standard must be subject to systems, processes and controls developed by the private health insurer for the internal review and authorisation of that information. It is the responsibility of the Board and senior management of the private health insurer to ensure that an appropriate set of policies and procedures for the authorisation of information submitted to APRA is in place.

Annual audit requirements

11. The information submitted for the purposes of paragraph 8(b) is to be subject to external audit to ensure consistency with the private health insurer's statutory financial accounts and faithful application of the capital standards.
12. Audit certification and opinion must be provided to by 30 September each year.
13. If a private health insurer received a qualified auditor's report for a health benefits fund, the general fund, or the private health insurer for the previous year (previous report), the current year's auditor's report must state whether the auditor has examined the issues identified and is satisfied that the private health insurer has taken the appropriate steps to rectify the matters raised in the previous report.
14. The auditor's report must:
 - (a) state details of the program adopted to carry out the audit; and
 - (b) include the name of, and be signed by, the auditor who takes responsibility for the accuracy of the report.

Authorisation

15. A person who submits the information required under this Reporting Standard must be suitably authorised by an officer of the private health insurer.

Variations

16. APRA may, in writing, vary the reporting requirements of this Reporting Standard in relation to a private health insurer.

Transition

17. A private health insurer must report under the old reporting standard in respect of a transitional reporting period. For these purposes:

old reporting standard means the reporting standard revoked in the determination making this Reporting Standard; and

transitional reporting period means a reporting period under the old reporting standard:

- (a) which ended before 1 July 2023; and
- (b) in relation to which the private health insurer was required, under the old reporting standard, to report by a date on or after the date of revocation of the old reporting standard.

Note: For the avoidance of doubt, if a private health insurer was required to report under an old reporting standard, and the reporting documents were due before the date of revocation of the old reporting standard, the private health insurer is still required to provide any overdue reporting documents in accordance with the old reporting standard.

Interpretation

18. In this Reporting Standard:

(a) unless the contrary intention appears, words and expressions have the meanings given to them in *Prudential Standard CHPS 001 Defined terms* ~~Definitions~~ (~~CHPS 001~~); and

(b) the following definitions are applicable:

AASB references relate to the Australian Accounting Standards made by the Australian Accounting Standards Board;

APRA means the Australian Prudential Regulation Authority established under the *Australian Prudential Regulation Authority Act 1998*;

officer has the same meaning as in the Act;

private health insurer has the same meaning as in the Act;

reporting period means a period mentioned in paragraph 6 or, if applicable, paragraph 7; and

the Act means the *Private Health Insurance (Prudential Supervision) Act 2015*.

19. Unless the contrary intention appears, a reference to an Act, Prudential Standard, Reporting Standard, Australian Accounting or Auditing Standard is a reference to the instrument as in force from time to time.

Reporting Standard HRS 101.0

Regulatory Income Statement – Supplementary Information

General instructions

Purpose

This reporting standard contains details related to revenue and expenses for each ***health benefits fund*** or the ***general fund***. The data collected by APRA supplements information provided in *Reporting Standard HRS 310.0 Statement of Profit or Loss and Other Comprehensive Income*, and is not intended to be aggregated to produce a financial performance result.

Reporting tables

Tables described in this reporting standard list each of the data fields required to be reported. The data fields are listed sequentially in the column order that they will appear in the reported data set. Constraints on the data that can be reported for each field have also been provided.

Any specific combination of values in a table must not appear on more than one row in that table when reported.

Definitions

Terms highlighted in ***bold italics*** indicate that the definition is provided in these instructions.

A

<i>Accrued premium</i>	This refers to <i>accrued premium</i> as defined in <i>CHPS 001</i> .
<i>Accrued premium discounts amount</i>	The value of the effects on the HIB <i>accrued premium</i> (as recognised in <i>Table 1: Insurance Revenue – HIB Accrued Premium by state</i>) by discounts which are intended to be offered on an ongoing basis and/or to persons who have already purchased a policy. An example would be offering a discount for all policy holders paying electronically.
<i>Accrued premium promotions amount</i>	The value of the effects on the HIB <i>accrued premium</i> (as recognised in <i>Table 1: Insurance Revenue – HIB Accrued Premium by state</i>) by promotions which are offered to a person at the time the person first purchases a policy. An example would be offering a free period of cover to a new member.
<i>Adjustments to retained earnings due to</i>	This is the value of aggregate adjustments to retained earnings due to changes in accounting policies or accounting treatment.

change in accounting policies / standards (Retained earnings item type)	
Agency business (Health-related business non-insurance activities)	This is revenues of the private health insurer fund type related to agency business , as defined under <i>Private Health Insurance (Health Benefits Fund Policy) Rules 2015</i> .
Asset class type	The asset class types are: • interest rate investments (direct); • equities (direct); • property (direct); • loans (direct); • indirect investments; and • other investments.

C

Claims handling expenses amount	This has the same meaning as claims handling expenses as defined in <u>CHPS</u> 001.
Claims incurred amount	This has the same meaning as claims incurred as defined in <u>CHPS</u> 001.
Class of business	Relates to insurance business only. This can be: • hospital treatment; or • general treatment.
Commissions & fees (Other business expenses type)	This is the value of fees and/or commissions paid to agents, brokers or aggregators.
Costs of goods/services: Dental business (Other business expenses type)	These are all expenses directly or indirectly attributed to the provision of dental business goods and/or services to both policy holders and non-policy holders of the private health insurer.

<i>Costs of goods/services: Hospitals & Medical Centres</i> <i>(Other business expenses type)</i>	These are the costs of all hospital and medical centre business goods and/or services provided to both policy holders and non-policy holders of the private health insurer.
<i>Costs of goods/services: Optical business</i> <i>(Other business expenses type)</i>	These are the costs of all optical business goods and/or services provided to both policy holders and non-policy holders of the private health insurer.
<i>Costs of goods/services: Other</i> <i>(Other business expenses type)</i>	These are the costs of all other health related business goods and/or services provided to both policy holders and non-policy holders of the private health insurer.

D

<i>Dividends declared or paid</i>	Report dividends which are declared or paid by the private health insurer. A dividend is the amount paid out of a company's profits to its shareholders (interim and final dividend). The annual dividend equals the final dividend plus the interim dividend if declared.
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E

<i>Employee costs</i> <i>(Other business expenses type)</i>	This is the value of items such as recruitment, wages and salaries, superannuation expenses, share-based payment expense, other long-term benefits expense, termination benefits expense, social security costs, contractor and on costs, and training.
<i>Equities (direct)</i> <i>(Asset class type)</i>	<i>Equities (direct)</i> are comprised of equity securities and of subordinated debt securities. Equity securities are, as defined by the Australian Accounting Standards, contracts that evidence a residual interest in the assets of an entity after deducting all its liabilities. This includes equity securities lent or sold by the entity under repurchase agreements, where the transaction does not result in the transfer of the rights of ownership of the securities away from the entity to another party. Subordinated debt is a debt security where the claim to repayment ranks lower in priority to other claims.
<i>External sources</i>	This means all HRB non-insurance revenue that is earned from: - revenue from non-policy holders of the private health insurer; - revenue to cover services provided by the private health insurer; and

<i>(Health-related business non-insurance revenue type)</i>	revenue from policy holders of the private health insurer for services not covered by the insurance premium.
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G

<i>Gains/losses on investments amount</i>	This is the total of all movements in assets values during the reporting period, from both revaluation and market movements <u>(includes both realised and unrealised gains/losses)</u> . This amount must be recorded net of associated investment expenses and fees.
<i>General fund</i> <i>(Private health insurer fund type)</i>	<i>General fund</i> has the same meaning as in CH PS 001.
<i>General treatment</i> <i>(Class of business)</i>	<i>General treatment</i> has the same meaning as in the <i>Private Health Insurance Act 2007</i> (PHI Act).
<i>Gross accrued premium</i>	This is the value of <i>accrued premium</i> , gross of ceded revenue, for <i>health-related insurance business</i> .
<i>Gross claims incurred amount</i>	This is the value of <i>health-related insurance business</i> claims incurred, gross of reinsurance recoveries.

H

<i>Health benefits fund</i> <i>(Private health insurer fund type)</i>	<i>Health benefits fund</i> has the same meaning as in the Act.
<i>Health-related business non-insurance activities</i>	<i>Health-related business non-insurance activities</i> are: - optical business; - dental business; - hospitals and medical centres; <i>agency business</i>; and <i>other non-insurance health-related business</i>.
<i>Health-related business non-</i>	This is the gross revenue for the <i>health-related business non-insurance revenue type</i> .

<i>insurance revenue amount</i>	
<i>Health-related business non-insurance revenue type</i>	The <i>health-related business non-insurance revenue types</i> are: • <i>External sources</i> • <i>Insurer policy holder benefits</i>
<i>Health-related insurance business type</i>	The <i>health-related insurance business types</i> are: • <i>overseas visitor cover</i> • <i>overseas student health cover</i>
<i>Hospital category</i>	The <i>hospital category</i> must be one of the following, which have the same meaning as in the <i>Private Health Insurance (Complying Product) Rules 2015</i> : • Gold; • Silver +; • Silver; • Bronze +; • Bronze; • Basic +; or • Basic.
<i>Hospital treatment</i> <i>(Class of business)</i>	<i>Hospital treatment</i> has the same meaning as in the PHI Act.

I

<i>Indirect investments</i> <i>(Asset class type)</i>	<i>Indirect investments</i> are unit trusts or managed investment schemes invested in by the <i>private health insurer fund type</i> , or mandates individually managed on behalf of the <i>private health insurer fund type</i> .
<i>Insurer policy holder benefits</i> <i>(Health-related business non-insurance revenue type)</i>	This is the value of health-related business non-insurance services provided to policy holders of the private health insurer, where that service is covered by their insurance premiums.
<i>Interest rate investments (direct)</i>	<i>Interest rate investments (direct)</i> are debt securities held by the <i>private health insurer fund type</i> as at the relevant date. A debt security is a transferable instrument evidencing a relationship of indebtedness. It is

<i>(Asset class type)</i>	characterised by having a definable return that is not based on the economic performance of the issuing entity.
<i>Investment income amount</i>	This is the total income, including interest and dividends, collected from investments over the reporting period. Income must be recorded net of associated expenses and fees.

L

<i>Loans (direct)</i> <i>(Asset class type)</i>	This is the value of <i>loans (direct)</i> . <i>Loans (direct)</i> includes financial leases and mortgages, and are typically non-negotiable on the secondary market.
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M

<i>Major other source</i> <i>(Net other operational revenue type)</i>	This is the largest other operational source, ranked by gross revenue.
<i>Marketing and publicity</i> <i>(Other business expenses type)</i>	This is the value of items such as publications, advertising, sponsorship, publicity, and health maintenance promotion programmes.

N

<i>Net other operational revenue amount</i>	This means all operational revenue other than HIB and HRB, net of expenses, attributable to the <i>private health insurer fund type</i> .
<i>Net other operational revenue type</i>	The <i>net other operational revenue types</i> are: • <i>major other source</i>; and • <i>secondary other source</i>.
<i>Net RETFSA amount</i>	The net RETFSA (Risk Equalisation Special Account Trust Fund) amount is the value of risk equalisation payments/receipts, movements of provisions in the risk equalisation component of outstanding claims liability and movements of provisions for risk equalisation transfers, where provisions are determined in accordance with HPS 340.

O

Operations & administration <i>(Other business expenses type)</i>	This is the value of items such as self-occupied property expenses, IT and computing, postage, telephones, accounting audit and other professional feed and membership subscriptions.
Other business expenses amount	This means the <i>other business expenses types</i> attributable to the <i>private health insurer fund type</i> .
Other business expenses type	The <i>other business expenses types</i> are: • <i>commissions & fees;</i> • <i>marketing and publicity;</i> • <i>employee costs;</i> • <i>operations & administration;</i> • <i>share of corporate overheads;</i> • <i>other management expenses;</i> • <i>costs of goods/services: Optical business;</i> • <i>costs of goods/services: Dental business;</i> • <i>costs of goods/services: Hospitals & Medical Centres;</i> and • <i>costs of goods/services: Other.</i>
Other management expenses <i>(Other business expenses type)</i>	This is the value of any expenses related to conducting the <i>private health insurer business type</i> , other than those separately reported as <i>other business expenses type</i> .
Other investments <i>(Asset class type)</i>	<i>Other investments</i> are those that have not been reported elsewhere in: • <i>interest rate investments (direct);</i> • <i>equities (direct);</i> • <i>property (direct);</i> • <i>loans (direct);</i> or • <i>indirect investments.</i>
Other management expenses <i>(Other business expenses type)</i>	This is the value of any expenses related to conducting the <i>private health insurer business type</i>, other than those separately reported as <i>other business expenses type</i>.
Other non-insurance health-related business	This means non-insurance revenues of the <i>private health insurer fund type</i> related to health-related business, as defined in the Act, other than those related to dental services, optical services, health services provided in hospital and medical centres or <i>agency business</i> .

<i>(Health-related business non-insurance activities)</i>	
<i>Other retained earnings movements</i>	This consists of all movements in retained earnings movements not specifically categorised as the following <i>retained earnings item types</i>: • <i>profit / loss after income tax attributable to members of the company;</i> • <i>adjustments to retained earnings due to change in accounting policies / standards;</i> • <i>reduction in retained earnings on share buy back;</i> • <i>transfers to / from reserves;</i> • <i>transfers to / from parent entity;</i> • <i>dividends declared or paid;</i> and • <i>transfers to / from other funds.</i>
<i>Overseas student health cover (OSHC)</i> <i>(Health-related insurance business)</i>	<i>Overseas student health cover</i> refers to <i>overseas student health insurance contracts</i> and has the meaning in the <i>Private Health Insurance (Health Insurance Business) Rules 2018</i> .
<i>Overseas visitor cover (OVC)</i> <i>(Health-related insurance business)</i>	<i>Overseas visitor cover</i> is the total of certain overseas visitors and specified temporary visa holder health insurance contracts. Certain overseas visitors and specified temporary visa holder health insurance contracts have the meaning in the <i>Private Health Insurance (Health Insurance Business) Rules 2018</i>.

P

<i>Private health insurer business type</i>	The <i>private health insurer business types</i> are: • <i>health insurance business;</i> • <i>health-related insurance business;</i> or • <i>health-related business – non-insurance.</i>
<i>Private health insurer fund type</i>	This is either <i>health benefits fund</i> or <i>general fund</i>.
<i>Profit / loss after income tax attributable to members of the company</i>	Report this item in accordance with AASB 101.81B (a) (ii) for the <i>private health insurer fund type</i>.

<i>(Retained earnings item type)</i>	
<i>Property (direct)</i> <i>(Asset class type)</i>	<i>Property (direct)</i> is property held by the <i>health benefits fund</i> or <i>general fund</i> , in accordance with the classification and measurement basis under the relevant Australian Accounting Standards.

R

<i>Reduction in retained earnings on share buy back</i>	This is the value of the reduction in the private health insurer's retained earnings due to the buy back, or repurchase, of shares on issue during the relevant period. This represents the portion of the consideration used for share buy backs that is allocated to retained earnings.
<i>Reinsurance premiums ceded amount</i>	This is the value of <i>health-related insurance business accrued premium</i> ceded to a reinsurer.
<i>Reinsurance recoveries amount</i>	This is the value reinsurance recoveries in respect of claims incurred for <i>health-related insurance business</i> .
<i>Retained earnings amount</i>	This means the <i>retained earnings amount</i> for the <i>private health insurer fund type</i> .
<i>Retained earnings at the beginning of the reporting period</i> <i>(Retained earnings item type)</i>	This is the value, as at the relevant date, of retained earnings at the beginning of the current reporting period.
<i>Retained earnings at the end of the reporting period</i>	<i>Retained earnings at the end of the reporting period</i> is a derived value and is calculated as the sum of: • <i>retained earnings at the beginning of the reporting period</i>; • <i>profit / loss after income tax attributable to members of the company</i>; • <i>adjustments to retained earnings due to change in accounting policies / standards</i>; • <i>reduction in retained earnings on share buy back</i>; • <i>transfers to / from reserves</i>; • <i>transfers to / from parent entity</i>; • <i>dividends declared or paid</i>;

	• <i>transfers to / from other funds</i>; and • <i>other retained earnings movements</i>.
Retained earnings item type	The <i>retained earnings item types</i> are: • <i>retained earnings at the beginning of the reporting period</i>; • <i>profit / loss after income tax attributable to members of the company</i>; • <i>adjustments to retained earnings due to change in accounting policies / standards</i>; • <i>reduction in retained earnings on share buy back</i>; • <i>transfers to / from reserves</i>; • <i>transfers to/ from parent entity</i>; • <i>dividends declared or paid</i>; • <i>transfers to / from other funds</i>; and • <i>other retained earnings movements</i>.

S

Secondary other source <i>(Net other operational revenue type)</i>	This is the second largest other operational source, ranked by gross revenue.
Share of corporate overheads <i>(Other business expenses type)</i>	This is the value of overhead expenses of another entity borne by the <i>private health insurer fund type</i> .
State ambulance levies	State levies are all <i>state ambulance levies</i> payable by the <i>health benefits fund</i> .

T

Transfers to / from other funds <i>(Retained earnings item type)</i>	Report the value of funds transferred to or received from a <i>health benefits fund</i> or <i>general fund</i> of the private health insurer during the reporting period.
Transfers to / from parent entity	Report the value of dividends or funds transferred to or received from the parent entity during the reporting period. Transfers from parent entity only includes funds that are capital contributions from the parent entity and are not required to be repaid.

<i>(Retained earnings item type)</i>	
<i>Transfers to / from reserves</i> <i>(Retained earnings item type)</i>	Report the value of funds that have been transferred to (from) retained earnings from (to) reserves during the reporting period.

Specific instructions

Table 1: Insurance Revenue – HIB Accrued Premium by state

Reporting basis

This table applies to *health benefits funds* only.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i> . This is in the event a private health insurer has multiple <i>health benefits funds</i> . In the event a private health insurer has only one <i>health benefits fund</i> , its name should be the same as the private health insurer.
2	Class Of Business	• <i>Hospital treatment</i> • <i>General treatment</i>	Report the <i>class of business</i> .
3	State And Territory Of Australia	• NSW • VIC • QLD • SA • WA • TAS	Report by state and territory of Australia.

	Name	Valid values	Description
		• ACT • NT	
4	Accrued Premium Amount	Whole dollars	Report the <i>accrued premium</i> amount. Report this item net of any reinsurance.

Table 2: Insurance Revenue – HIB Accrued Premium by Hospital Category

Reporting basis

This table applies to *health benefits funds* only.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i> . This is in the event a private health insurer has multiple <i>health benefits funds</i> . In the event a private health insurer has only one <i>health benefits fund</i> , its name should be the same as the private health insurer.
2	Hospital Category	• Gold • Silver + • Silver • Bronze + • Bronze • Basic + • Basic	Report the <i>hospital category</i> .
3	Accrued Premium Amount	Whole dollars	Report the <i>accrued premium</i> amount.

	Name	Valid values	Description
			Private health insurers may use approximate methods and take into account overall materiality in apportioning this item by <i>hospital category</i>. Report this item net of any reinsurance.

Table 3: Insurance Revenue – HIB Discounts and Promotions

Reporting basis

This table applies to *health benefits funds* only.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i> . This is in the event a private health insurer has multiple <i>health benefits funds</i> . In the event a private health insurer has only one <i>health benefits fund</i> , its name should be the same as the private health insurer.
2	Accrued Premium Discounts Amount	Whole dollars	Report the <i>accrued premium discounts amount</i> .
3	Accrued Premium Promotions Amount	Whole dollars	Report the <i>accrued premium promotions amount</i> .

Table 4: Insurance Revenue – HRIB Accrued Premium

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	<i>Health benefits fund</i> <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Health-Related Insurance Business Type	<i>Overseas visitor cover</i> <i>Overseas student health cover</i>	Report the <i>health-related insurance business type</i> .
4	Gross Accrued Premium Amount	Whole dollars	Report the <i>gross accrued premium</i> amount.

	Name	Valid values	Description
5	Reinsurance Premiums Ceded Amount	Whole dollars	Report the <i>reinsurance premiums ceded amount</i> . Report the <i>reinsurance premiums ceded amount</i> as a positive value.

Table 5: Health-Related Business Revenue - Non-Insurance Activities

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	• <i>Health benefits fund</i> • <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Health-Related Business Non-Insurance Activities Type	• Optical business • Dental business • Hospitals and medical centres • <i>Agency business</i> • <i>Other non-insurance health-related business</i>	Report the <i>health-related business non-insurance activities</i> type.

	Name	Valid values	Description
4	Health-Related Business Non-Insurance Revenue Type	• <i>External sources</i> • <i>Insurer policy holder benefits</i>	Report the <i>health-related business non-insurance revenue type</i> .
5	Health-Related Business Non-Insurance Revenue Amount	Whole dollars	Report the <i>health-related business non-insurance revenue amount</i> .

Table 6: Net Other Operational Revenue - Non-HRB

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	• <i>Health benefits fund</i> • <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has <i>multiple health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Net Other Operational Revenue Type	• <i>Major other source</i> • <i>Secondary other source</i>	Report the <i>net other operational revenue type</i> .
4	Net Other Operational Revenue Description	Free text	Report the source of the <i>net other operational revenue amount</i> .

	Name	Valid values	Description
5	Net Other Operational Revenue Amount	Whole dollars	Report the <i>net other operational revenue amount</i> .

Table 7: Net Investment Income

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	• <i>Health benefits fund</i> • <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Asset Class Type	• <i>Interest rate investments (direct)</i> • <i>Equities (direct)</i> • <i>Property (direct)</i> • <i>Loans (direct)</i> • <i>Indirect investments</i> • <i>Other investments</i>	Report the <i>asset class type</i> .

	Name	Valid values	Description
4	Investment Income Amount	Whole dollars	Report the <i>investment income amount</i> .
5	Gains/Losses On Investments Amount	Whole dollars	Report the <i>gains/losses on investments amount</i> . Report gains on investments as a positive value. Report losses on investments as a negative value.

Table 8: Insurance Claims - HIB by state

Reporting basis

This table applies to *health benefits funds* only.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i> . This is in the event a private health insurer has multiple <i>health benefits funds</i> . In the event a private health insurer has only one <i>health benefits fund</i> , its name should be the same as the private health insurer.
2	State And Territory Of Australia	• NSW • VIC • QLD • SA • WA • TAS • ACT • NT	Report by state and territory of Australia.
3	Hospital Treatment Claims Incurred Amount	Whole dollars	Report the <i>claims incurred amount</i> for <i>hospital treatment</i> only.

	Name	Valid values	Description
4	Net RE TF <u>SA</u> Amount	Whole dollars	Report the <i>net RETF<u>SA</u> amount</i>. Report <i>net RETF<u>SA</u> amount</i> as a positive value where RETF<u>SA</u> is a net payable. Report <i>net RETF<u>SA</u> amount</i> as a negative value where RETF<u>SA</u> is a net receipt. Although NSW and ACT are in the same RETF<u>SA</u> jurisdiction, the total net RETF<u>SA</u> in that jurisdiction should be apportioned between NSW and ACT according to the split of the residency of the <i>health benefit fund's</i> hospital SEUs as at the reporting date.
5	State Ambulance Levies Amount	Whole dollars	Report the <i>state ambulance levies</i> amount.
6	General Treatment Claims Incurred Amount	Whole dollars	Report the <i>claims incurred amount</i> for <i>general treatment</i> only.

Table 9: Insurance Claims - Hospital Category

Reporting basis

This table applies to *health benefits funds* only.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i> . This is in the event a private health insurer has multiple <i>health benefits funds</i> . In the event a private health insurer has only one <i>health benefits fund</i> , its name should be the same as the private health insurer.
2	Hospital Category	• Gold • Silver + • Silver • Bronze + • Bronze • Basic + • Basic	Report the <i>hospital category</i> .
3	Hospital Treatment Claims Incurred Amount	Whole dollars	Report the <i>claims incurred amount</i> for <i>hospital treatment</i> .

	Name	Valid values	Description
			Private health insurers may use approximate methods and take into account overall materiality in apportioning this item by <i>hospital category</i> .
4	Net RE TF <u>SA</u> Amount	Whole dollars	Report the <i>net RETF<u>SA</u> amount</i>. Private health insurers may use approximate methods and take into account overall materiality in apportioning this item by <i>hospital category</i>. Report <i>net RETF<u>SA</u> amount</i> as a positive value where RETF<u>SA</u> is a net payable. Report <i>net RETF<u>SA</u> amount</i> as a negative value where RETF<u>SA</u> is a net receipt.
5	State Ambulance Levies Amount	Whole dollars	Report the <i>state ambulance levies</i> amount. Private health insurers may use approximate methods and take into account overall materiality in apportioning this item by <i>hospital category</i>.

Table 10: Insurance Claims – HRIB

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	• <i>Health benefits fund</i> • <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Health-Related Insurance Business Type	• <i>Overseas visitor cover</i> • <i>Overseas student health cover</i>	Report the <i>health-related insurance business type</i> .
4	Gross Claims Incurred Amount	Whole dollars	Report the <i>gross claims incurred amount</i> .

	Name	Valid values	Description
5	Reinsurance Recoveries Amount	Whole dollars	Report the <i>reinsurance recoveries amount</i> .

Table 11: Other Business Expenses

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	• <i>Health benefits fund</i> • <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Private Health Insurer Business Type	• <i>Health insurance business</i> • <i>Health-related insurance business</i> • <i>Health-related business – non-insurance</i>	Report the <i>private health insurer business type</i>. <i>Health insurance business</i> does not apply where the <i>private health insurer fund type</i> is <i>general fund</i>.
4	Other Business Expenses Type	• <i>Commissions & fees</i> • <i>Marketing and publicity</i>	Report the <i>other business expenses type</i> .

	Name	Valid values	Description
		• <i>Employee costs</i> • <i>Operations & administration</i> • <i>Share of corporate overheads</i> • <i>Other management expenses</i> • <i>Costs of goods/services: Optical business</i> • <i>Costs of goods/services: Dental business</i> • <i>Costs of goods/services: Hospitals & Medical Centres</i> • <i>Costs of goods/services: Other</i>	Only the following items apply where the <i>private health insurer business type</i> is <i>health insurance business</i> or <i>health-related insurance business</i>: • <i>Commissions & fees</i> • <i>Marketing and publicity</i> • <i>Employee costs</i> • <i>Operations & administration</i> • <i>Share of corporate overheads</i> • <i>Other management expenses</i> All items apply where the <i>private health insurer business type</i> is <i>health-related business – non-insurance</i>.
5	Other Business Expenses Amount	Whole dollars	Report the <i>other business expenses amount</i> .

Table 12: Other Business Expenses – Claims Handling Expenses

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	<i>Health benefits fund</i> <i>General fund</i>	Report the <i>private health insurer fund type</i> .
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Private Health Insurer Business Type	<i>Health insurance business</i> <i>Health-related insurance business</i>	Report the <i>private health insurer business type</i>. <i>Health insurance business</i> does not apply where the <i>private health insurer fund type</i> is <i>general fund</i>.
4	Claims Handling Expenses Amount	Whole dollars	Report the <i>claims handling expenses amount</i> .

Table 13: Retained Earnings at the end of the Reporting Period

Reporting basis

This table applies to *health benefits funds* and the *general fund*.

Units of measurement

Report values in whole Australian dollars.

	Name	Valid values	Description
1	Private Health Insurer Fund Type	• <i>Health benefits fund</i> • <i>General fund</i>	Report the <i>private health insurer fund</i> type.
2	Private Health Insurer Fund Name	Free text	Report the name of the <i>private health insurer fund type</i>. This is in the event a private health insurer has multiple <i>health benefits funds</i>. In the event a private health insurer has only one <i>health benefits fund</i>, its name should be the same as the private health insurer. For the <i>general fund</i>, report the same name as the private health insurer.
3	Retained Earnings Item Type	• <i>Retained earnings at the beginning of the reporting period</i> • <i>Profit / loss after income tax attributable to members of the company</i> • <i>Adjustments to retained earnings due to change in accounting policies / standards</i> • <i>Reduction in retained earnings on share buy back</i>	Report the <i>retained earnings item type</i> .

	Name	Valid values	Description
		• <i>Transfers to / from reserves</i> • <i>Transfers to / from parent entity</i> • <i>Dividends declared or paid</i> • <i>Transfers to / from other funds</i> • <i>Other retained earnings movements</i>	
4	Retained Earnings Amount	Whole dollars	Report the <i>retained earnings amount</i>. Report decreases to <i>retained earnings item types</i> as negative values. Report increases to <i>retained earnings item types</i> as positive values.