



# INSTRUCTION GUIDE

## Approved Form - HRF 520.0 Responsible Persons Information

9 September 2019

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# Introduction

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## Approved form

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This form is for notifications under sections 108 and 125 of the *Private Health Insurance (Prudential Supervision) Act 2015* (Act), rules 17 and 17A of the *Private Health Insurance (Prudential Supervision) Rules 2019* (Rules) and paragraphs 55-57 of *Prudential Standard CPS 520 Fit and Proper* (CPS 520) (or versions of that Act, those Rules or that Standard as in force from time to time). This form is approved and made under section 172 of the Act and paragraph 58 of CPS 520.

For the purposes of this approved form, 'responsible person' means persons listed in Attachment G of CPS 520 (as defined by paragraph 20 of that Prudential Standard).

## Responsible person information

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Private health insurers are required to notify APRA of information relating to responsible persons under sections 108 and 125 of the Act, rules 17 and 17A of the Rules and paragraphs 55-57 of CPS 520 and to ensure that this information remains correct for all responsible persons. This form must be submitted to provide new and revised responsible person information to APRA within the applicable timeframe(s) specified in the Act, Rules or CPS 520 for any change to information previously notified to APRA or any new responsible person appointment. Notifications under section 108 of the Act must be made within 14 days of appointment or cessation, notifications under rules 17 and 17A of the Rules and paragraph 55 of CPS 520 must be made within 28 days of any change or new appointment, and notifications under paragraph 57 of CPS 520 must occur within 10 business days of assessment.

In order to assist entities in complying with the requirement to ensure that information provided to APRA remains correct for all responsible persons, the form can be submitted at any time, however it will be provided on an annual basis to all entities submitting annual returns via D2A. Entities can use the annual form to correct and update the information they have provided to APRA throughout the year.

In completing HRF 520.0, entities should also refer to *Prudential Practice Guide HPG 520 Fit and Proper* as appropriate.

This instruction guide has been prepared to assist in the completion and lodgement of HRF 520.0. For ease of use, the Guide has been split into two main sections:

- (a) General directions and notes – this guidance provides principles that should be applied to all items throughout HRF 520.0; and
- (b) Specific instructions – this guidance should be applied to the specific items which relate to each reporting entity.

## General directions and notes

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Most address and responsible person information will be pre-populated in D2A based on the most recent notification provided to APRA. Pre-populated data should therefore be reviewed and, if necessary, amended to ensure the information is current and correct.

## Lodgement and authentication codes

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Once HRF 520.0 has been completed and submitted to APRA, an authentication code is generated in D2A from information entered into the Form. The authentication code and date submitted appear in the footer of each page of the return. Any change of information entered or resubmission of the return will result in a change to the authentication code.

A receipt indicating successful lodgement of the return will be provided via email. There may be a slight delay in a receipt being provided if the submission is made in the last week of October. This is because it is the busiest week of form submissions for D2A. While waiting for the receipt to be generated, please do not resubmit your return.

## Validation

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'Error: Mandatory rules' indicates an error in an item, for example, a specific role must be included in a table. These errors must be corrected before the return can be lodged.

## Reporting entity

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This form is to be completed by all private health insurers.

## Reporting period

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The form is provided on an annual basis with the period end date on the return being 30 June. However, the form must also be completed at any time when the information supplied to APRA under CPS 520, the Act and Rules is no longer correct for any of the responsible persons of the private health insurer. In the latter case the form must be used to provide revised information within either 10, 14 or 28 days (as applicable to the relevant information under the Act, Rules or CPS 520) of any change, change of details, new appointment or revised fit and proper assessment for a responsible person. When the form is refreshed the most recent period end date may be selected.

# Specific instructions

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## 1. Address details for the reporting entity

### Important!

The details in item 1 will be pre-populated based on the information previously provided by the entity in HRF 520.0. Please review the pre-populated data and make corrections where necessary.

### 1.1. Registered address of the reporting entity

Record the registered address of the reporting entity. This address must be a street address.

### 1.2. Postal address for correspondence of the reporting entity

Record the postal address of the reporting entity.

### 1.3 States in which the private health insurer operates

Mark the tickbox for all states the private health insurer operates in.

### 1.4 Telephone

Record the telephone number of the reporting entity.

### 1.5 Email and web address

Record the email and website address of the reporting entity.

## 2. Responsible Persons information (i.e. directors, executives and senior managers)

### Important!

The details in item 2 will be pre-populated based on the information provided by the entity under CPS 520, the Act and Rules. Please review the pre-populated data and make corrections where the information is incorrect or out of date.

### 2.1. Title and name

Record the title and names of the responsible persons.

### 2.2. Former name(s)

Record the former name(s), if any, of any existing or newly reported responsible persons.

### **2.3. Date of birth**

Record the dates of birth of the responsible persons.

### **2.4. Phone**

Record the contact numbers (including area code) of the responsible persons.

### **2.5. Email**

Record the email addresses of the responsible persons.

### **2.6. Type of responsible person**

Record the type of responsible person (Director, Executive Officer, Senior Manager). For the purposes of this form, a 'responsible person' in section 2 of this Instruction Guide relates to responsible persons as defined in Attachment G of CPS 250 (excluding Appointed Auditor and Appointed Actuary which are covered in sections 3 and 4 below in this Instruction Guide).

This question includes a person who has or exercises senior management responsibilities as set out in CPS 520. It also includes internal auditors.

### **2.7. Position title**

Record the employment position titles of the responsible persons. If the position of a responsible person has changed within the entity, the old role should be ended with the appropriate end date, and the new position should be notified with the appropriate start date.

### **2.8. Main responsibilities**

Record the main responsibilities of any newly reported or existing responsible persons.

### **2.9. Start / End date**

Record the date a person commenced being a responsible person if you are notifying APRA of a new responsible person or a change in a person's position within the entity.

Record the date a person ceased being a responsible person if you are notifying APRA of someone who has ceased to be a responsible person.

### **2.10. Notification that a person is no longer fit and proper**

Where an end date is recorded for a person who has ceased to be a responsible person, indicate 'yes' or 'no' if the reason the person ceased being a responsible person is because they are no longer fit and proper.

### **2.11. Assessed under Fit and Proper policy**

Record whether new persons have been assessed under the entity's Fit and Proper Policy. The tickbox should be marked 'I' in the instance where a person holding an interim appointment has not yet been assessed.

### 3. Appointed Auditor details

If the entity is a private health insurer, record the auditor appointed under the Prudential Standard HPS 310 Audit and Related Matters (Appointed Auditor).

Paragraph 1(c) of Attachment G in CPS 520 provides that a responsible person of a private health insurer includes an Appointed Auditor who provides any report in relation to the private health insurer that is required to be prepared by an auditor under the prudential standards made under the Act or reporting standards under the *Financial Sector (Collection of Data) Act 2001*.

#### 3.1. Title and name

Record the names of the Appointed Auditor.

#### 3.2. Date of birth

Record the date of birth of the Appointed Auditor.

#### 3.3. Phone

Record the contact number (including area code) of the Appointed Auditor.

#### 3.4. Email

Record the email address of the Appointed Auditor.

#### 3.5. Position title

Record the employment position title of the Appointed Auditor.

#### 3.6. Start / End date

Record the date a person commenced being an Appointed Auditor if you are notifying APRA of a new Appointed Auditor. Record the date a person ceased being an Appointed Auditor if you are notifying APRA of someone who has ceased to be an Appointed Auditor.

#### 3.7. Assessed under Fit and Proper Policy

Record whether a new or existing Appointed Auditor has been assessed under the entity's Fit and Proper Policy. The tickbox should be marked '1' in the instance where an Appointed Auditor holding an interim appointment has not yet been assessed.

#### 3.8. Audit firm

Record the name of the appointed audit firm for the entity.

#### 3.9. Audit firm ABN

Record the Australian Business Number (ABN) of the appointed audit firm.



## **4. Appointed Actuary details**

Record the actuary appointed under section 108 of the Act (Appointed Actuary).

### **4.1. Title and name**

Record the names of the Appointed Actuary.

### **4.2. Date of birth**

Record the date of birth of the Appointed Actuary.

### **4.3. Phone**

Record the contact number (including area code) of the Appointed Actuary.

### **4.4. Email**

Record the email address of the Appointed Actuary.

### **4.5. Position title**

Record the employment position title of the Appointed Actuary.

### **4.6. Start/end date**

Record the date a person commenced being an Appointed Actuary if you are notifying APRA of a new actuary.

Record the date a person ceased being an Appointed Actuary if you are notifying APRA of someone who has ceased to be an Appointed Actuary.

### **4.7. Assessed under Fit and Proper Policy**

Record whether a new Appointed Actuary has been assessed under the entity's Fit and Proper Policy. The tickbox should be marked '1' in the instance where an Appointed Actuary holding an interim appointment has not yet been assessed.

### **4.8. Organisation Name**

Record the name of the actuarial firm for the entity. If the Appointed Actuary is employed by the insurer, record the insurer's name.

### **4.9. Organisation ABN**

Record the ABN of the actuarial firm. If the Appointed Actuary is employed by the insurer, record the insurer's ABN.

### **4.10. Qualifications and experience**

Record whether the new or existing Appointed Actuary has provided a copy of their qualifications and experience, as required by section 108 of the Act, to APRA separately at the time of lodgement. Qualifications should be lodged separately to the reporting entity's responsible supervisor at the time of lodging this form (via SecureDoc or any other agreed method of receipt with APRA).

## **5. Billing contact information**

This information is requested on a voluntary basis and will assist APRA in ensuring the annual financial levy invoice is addressed to the correct person and location.

### **5.1. Title and name**

Record the names of the nominated person to receive the annual APRA financial levy invoice.

### **5.2. Position title**

Record the employment position title of the contact person.

### **5.3. Phone**

Record the contact number (including area code) of the contact person.

### **5.4. Email**

Record the email address of the contact person.

### **5.5. Fax**

Record the fax number (including area code) of the contact person.

### **5.6. Preference to receive invoice via mail, email, fax**

Indicate the preferred format in which the entity would like to receive the invoices. The options are via mail, email or fax.

### **5.7. Billing address of the reporting entity**

Record the address to which invoices are to be addressed.

## **6. Crisis management contact details**

This information is requested on a voluntary basis and will assist APRA in contacting the entity in an emergency.

### **6.1. Title and name**

Record the names of the nominated primary and secondary crisis contact persons.

### **6.2. Position title**

Record the employment position titles of the primary and secondary crisis contact persons.

### **6.3. Mobile phone**

Record the mobile phone numbers of the primary and secondary crisis contact persons.

### **6.4. Direct phone**

Record the contact numbers (including area code) of the primary and secondary crisis contact persons.

### **6.5. Email**

Record the email addresses of the primary and secondary crisis contact persons.

### **6.6. Recovery site phone number**

Record the phone number of the nominated recovery site for the entity.

# Glossary

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## Table style

|                           |   |
|---------------------------|---|
| <b>Act</b>                | <i>Private Health Insurance (Prudential Supervision) Act 2015.</i>  |
| <b>CPS 520</b>            | <i>Prudential Standard CPS 520 Fit and Proper</i>   |
| <b>FSCOD</b>              | <i>Financial Sector (Collection of Data) Act 2001</i>   |
| <b>HPS 310</b>            | <i>Prudential Standard HPS 310 Audit and Related Matters</i>  |
| <b>reporting entity</b>   | means a body that is registered as a private health insurer under Division 3 of Part 2 of the Act.  |
| <b>responsible person</b> | For the purposes of this form, a 'responsible person' referred to in this Instruction Guide relates to responsible persons as defined in Attachment G of CPS 250. |
| <b>Rules</b>              | <i>Private Health Insurance (Prudential Supervision) Rules 2019</i>   |



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