## Period – 1 July 2017 to 30 June 2018 ONLY complete this Form if you wish to apply for the Premium Support Scheme 2004 (PSS)



ONL	t complete this Form if you wish to apply for the Fremium Support Scheme 2004 (FSS).			ALWAYS
NA	ME: MEMBER N	IO:		
SPI	ECIALTY:			
PR	ACTICE ADDRESS:			
Deta	ils are available from our website <u>www.miga.com.au</u> and via the Australian Governme	nt's we	ebsite <u>www</u>	health.gov.au.
1.	Gross Income (See over for definition)			
1.1	Do you practise predominantly in the public sector?		☐ Yes	☐ No
1.2	Gross Income from treatment of <b>private</b> patients <b>for which you require insurance from MIGA.</b>			
	<b>Note:</b> Medicare billings represent Gross Income from the treatment of private patients.	\$		
1.3	Gross Income from treatment of <b>public</b> patients in public hospitals <b>for which you require insurance from MIGA.</b>	\$		
1.4	Gross Income from treatment of <b>public</b> patients in your rooms, in private hospitals	Φ.		
	or other health care facilities for which you require insurance from MIGA.	<b>\$</b>		
2.	Procedural General Practitioners			
2.1	Are you a Procedural GP practising in a rural or remote area (RRMA 3-7) as defined by the Department of Health?		☐ Yes	□ No
2.2	Do you provide non-therapeutic cosmetic services, ie services that are not listed in the General Medical Services table under the <i>Health Insurance Act 1973</i> ?		☐ Yes	□ No
3.	Other Insurer Payments			
3.1	Will you be paying premium to <b>another insurer</b> in the 2017/2018 year <b>for run-off or retroactive cover?</b>		☐ Yes	□ No
3.2	If Yes, please advise total premium (excluding GST and Stamp Duty)		\$	
3.3	Have you been overpaid a PSS subsidy in a <b>previous</b> premium period and not repaid the other insurer(s)?		☐ Yes	□ No
	If Yes, please provide the total amount of the overpayment.		\$	
4.	Overseas Practice			
4.1	Do you expect to practise outside Australia for a total of 6 months or more within the premium period irrespective of whether you require insurance for such work or not?			
	For further information refer to Section 11 of the Categories of Insurance Guide availal on our website at <a href="www.miga.com.au">www.miga.com.au</a> .	ole	☐ Yes	□ No
5.	Provider Number	_		
5.1	Please record your primary Medicare Provider No:	<b>]</b> )		
DE	CLARATION			
that	clare the information provided by me in this Form is true and correct and I underst before completing this Form I have read and understood the following Import nium Support Scheme 2004 (PSS).			
Ple	ase sign and date here:			
Sig	nature: Date	:		
MIG/ GPO	Free call: 1800 777 156 Box 2048 ADELAIDE SA 5001 Facsimile: 1800 839 284			Application Form s@miga.com.au

Email: clientser ABN 41 007 547 588 **Gross Income** means the total of all billings generated by you from all areas of practice for **which you require medical indemnity cover** for the Policy Period (in your name or for which you are personally liable), including without limitation:

- i) Medicare benefits; and
- ii) payments by individuals, the Commonwealth Department of Veterans' Affairs, workers' compensation schemes and third party and/or vehicle insurers; and
- iii) income earned for medical practice overseas that is covered by the Policy

whether retained by you or otherwise and before any apportionment of any expenses and/or tax.

If as part of practice, you derive income from any other sources (such as professional fees, incentive payments, etc) this income must be included in the declaration of Gross Income.

**Public Patient** means an individual to whom the Insured provides health care treatment, advice or service under the terms of an agreement with a public hospital (within the meaning of the *Health Insurance Act 1973*), an area health service or a State or Territory Government, <u>unless the agreement or the billing process has the effect of not classifying the individual</u> as a public patient.

## **IMPORTANT NOTICES IN RELATION TO THE PSS**

If at any time you elect to participate in the PSS for the premium period:

- you consent to MIGA receiving payments of PSS subsidy on your behalf
- you must provide MIGA with a statutory declaration as to your Actual Income no later than 12 months after the end of the Policy Period
  - if you receive a PSS subsidy for the 2017/2018 Policy Period and you do not comply with this requirement, you must repay any PSS subsidy received. In the event you do not repay a PSS subsidy as and when it falls due, you will not be eligible to participate in the PSS and it may affect your entitlement to insurance from MIGA, both now and in the future
- you must notify MIGA in writing immediately if your circumstances change during the Policy Period or if you become aware that the information on which your Estimated Income was calculated is incorrect

- by providing information on Estimated Income and Actual Income as those terms are defined under the PSS you consent to the personal information contained in this Form being used for the purposes of information sharing and audits under the PSS
- your eligibility may be terminated for any non-payment of a Run-Off Cover Scheme payment that you are liable to pay
- overpayment of a PSS subsidy (for any reason) will result in you having a liability to pay to MIGA an amount for any underpaid premium (or other costs of obtaining medical indemnity cover) that result from MIGA returning the amount of the overpayment to the Department of Human Services
- where information you provide to MIGA is inaccurate or changes and requires an adjustment to your entitlement to a PSS subsidy of less than \$100.00, you consent to MIGA not processing such an adjustment midterm.

If you do not elect to participate in the PSS now, MIGA will not reduce your premium by any PSS entitlement you may have. You can elect to participate in the PSS later; but

- if you wish MIGA to calculate your entitlement based on your Estimated Income, you must provide those details to MIGA
  in a timely manner so that MIGA can make an application for PSS on your behalf no later than 2 months after the end
  of the Policy Period; or
- if you wish MIGA to calculate your entitlement based on your Actual Income, you must provide those details to MIGA within 12 months after the end of the Policy Period.

Irrespective of when you elect to participate, you must comply with the Important Notices in relation to the PSS detailed above.

Regardless of whether you are entitled to, or receive a PSS subsidy, you remain liable at all times to MIGA for payment of the full premium.

<u>Note:</u> MIGA is required under the terms of the Medical Indemnity Act 2002 to provide upon request to the Commonwealth Department of Health and the Department of Human Services, any information that you provide (including any information in this Form) that may be relevant to determining an entitlement to an indemnity or subsidy scheme payment under that legislation.

GPO Box 2048 ADELAIDE SA 5001

© MIGA PSS Application Form Email: clientservices@miga.com.au ABN 41 007 547 588

\_ . . .

Form date 21 March 2017 Page 2 of 2

Telephone: 1800 777 156

Facsimile: 1800 839 284