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**Notification No. B 39** — The MediShield Life Scheme (Amendment) Bill is published for general information. It was introduced in Parliament on 14 October 2024.



# MediShield Life Scheme (Amendment) Bill

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**Bill No. 39/2024.**

*Read the first time on 14 October 2024.*

A BILL

*intituled*

An Act to amend the MediShield Life Scheme Act 2015.

Be it enacted by the President with the advice and consent of the Parliament of Singapore, as follows:

## Short title and commencement

1. This Act is the MediShield Life Scheme (Amendment) Act 2024 and comes into operation on a date that the Minister appoints by notification in the *Gazette*.

### 5 Amendment of section 2

2. In the MediShield Life Scheme Act 2015 (called in this Act the principal Act), in section 2 —

(a) in subsection (1), replace the definition of “approved medical institution” with —

10 ““approved medical institution” means a medical institution that is approved under section 3A;”;

(b) in subsection (1), in the definition of “authorised person”, in paragraph (b), replace “in order to assess the eligibility of any person insured or to be insured under the Scheme for any grant, subsidy or benefit under a relevant public scheme” with “for a purpose mentioned in section 28(1A)”;

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(c) in subsection (1), after the definition of “Central Provident Fund”, insert —

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““claimable medical treatment or services”, in relation to an approved medical institution, means any approved medical treatment or services —

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(a) in respect of which the approved medical institution is approved under section 3A; and

(b) that is provided in accordance with the conditions mentioned in section 3A;”;

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(d) in subsection (1), after the definition of “IRAS”, insert —

““licensable healthcare service” has the meaning given by section 3(1) of the Healthcare Services Act 2020;”;

(e) in subsection (1), after the definition of “means information”, insert —

““medical institution” means a provider of a licensable healthcare service that is licensed under the Healthcare Services Act 2020 to provide that licensable healthcare service;”;

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(f) replace subsection (4) with —

“(4) For the purposes of this Act, the following apply for the purposes of reckoning the age of an individual:

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(a) an individual is taken to have attained a particular age expressed in years on the relevant anniversary of the individual’s birth;

(b) a reference to the anniversary of the birth of an individual in paragraph (a) is a reference to the day on which the anniversary occurs;

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(c) where an individual was born on 29 February in any year, then in any subsequent year that is not a leap year, the anniversary of that individual’s birth is taken to be 1 March in that subsequent year;

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(d) if the day on which an individual was born cannot be ascertained but the month of the individual’s birth can be ascertained, the individual is taken to be born on the first day of the month in which the individual was born;

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(e) if the month in which an individual was born cannot be ascertained, the individual is taken to be born in January.”.

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### **Amendment of section 3**

3. In the principal Act, in section 3(1), replace “approved medical treatment or services received by the insured person in” with “any approved medical treatment or services that is a claimable medical treatment or services received by the insured person from”.

### **New sections 3A and 3B**

4. In the principal Act, after section 3, insert —

**“Approval of medical institution in respect of approved medical treatment or services**

3A.—(1) A medical institution may apply to the Minister, in any form and manner that the Minister requires, to be approved in respect of any approved medical treatment or services.

(2) Upon receiving an application under subsection (1), the Minister may —

(a) approve the medical institution in respect of any approved medical treatment or services that is or is part of a licensable healthcare service that the medical institution is licensed to provide under the Healthcare Services Act 2020, subject to any conditions that the Minister thinks fit, including conditions specifying the service delivery mode by which the medical treatment or services is to be provided; or

(b) refuse to grant the approval.

(3) In addition, the Minister may grant the approval mentioned in subsection (2)(a) on the Minister’s own initiative.

(4) To avoid doubt, where —

(a) a medical institution is licensed under the Healthcare Services Act 2020 to provide 2 or more licensable healthcare services (whether each of the same or a different type); and

- (b) the medical institution provides one or more approved medical treatments or services as part of each licensable healthcare service,

then, under subsection (2)(a) or (3) —

- (c) the Minister may, in respect of a licensable healthcare service, approve the medical institution for one or more of the approved medical treatments or services provided as part of that licensable healthcare service; 5
- (d) the Minister may approve different approved medical treatments or services under paragraph (c) for different licensable healthcare services; and 10
- (e) the Minister need not approve an approved medical treatment or services for the medical institution in respect of every one of its licensable healthcare services. 15

(5) To avoid doubt, where —

- (a) a medical institution is licensed under the Healthcare Services Act 2020 to provide a licensable healthcare service by 2 or more service delivery modes (called in this section authorised service delivery modes); and 20
- (b) the medical institution provides one or more approved medical treatments or services as part of the licensable healthcare service,

then, under subsection (2)(a) or (3) —

- (c) the Minister may, in respect of any approved medical treatment or services, approve the medical institution for that approved medical treatment or services when provided by any authorised service delivery mode, or only when provided by one or some of those authorised service delivery modes; 25 30
- (d) the Minister may in an approval under paragraph (c) specify different authorised service delivery modes for different approved medical treatments or services; and

(e) the Minister need not approve the medical institution for every one of those approved medical treatments or services.

(6) The Minister may at any time modify a condition of an approval imposed under this section.

(7) Where an approved medical institution ceases to be approved under the Healthcare Services Act 2020 to provide a licensable healthcare service by a service delivery mode, the Minister may, without giving the approved medical institution an opportunity to be heard, modify a condition of the approval imposed under this section for the purpose of providing that the approved medical treatment or services must not be provided by that service delivery mode.

(8) In this section —

“modify”, in relation to a condition of an approval, includes deleting, varying and substituting a condition, and adding a condition;

“service delivery mode” has the meaning given by section 2(1) of the Healthcare Services Act 2020.

### **Revocation or suspension of approval of medical institution in respect of approved medical treatment or services**

**3B.—**(1) The Minister may revoke an approval granted to a medical institution in respect of any approved medical treatment or services if —

(a) the approval has been obtained by the medical institution by fraud, or the medical institution has, in connection with the application for the grant of the approval, made a statement or provided any information or document that is false, misleading or inaccurate in a material particular;

(b) there is a reasonable likelihood that the medical institution is contravening or not complying with, or has contravened or failed to comply with, a condition



of the approval imposed under section 3A, or any provision of this Act;

- (c) the medical institution is, or is likely to be, declared a bankrupt (if a natural person) or has gone, or is likely to go, into compulsory or voluntary liquidation other than for the purpose of amalgamation or reconstruction; 5
- (d) the medical institution has made any assignment to, or composition with, the medical institution's creditors or is unable to pay its debts; 10
- (e) any of the following persons has been convicted, whether in Singapore or elsewhere, of an offence involving fraud or dishonesty, or of an offence the conviction for which involves a finding that the person convicted had acted fraudulently or dishonestly, whether the applicable offence is committed before, on or after the date of commencement of section 4 of the MediShield Life Scheme (Amendment) Act 2024: 15
  - (i) the medical institution; 20
  - (ii) any key appointment holder, Principal Officer or Clinical Governance Officer of the medical institution;
  - (iii) any medical practitioner employed or engaged by the medical institution to provide any approved medical treatment or services; 25
- (f) the licence granted to the medical institution under the Healthcare Services Act 2020 authorising the medical institution to provide the licensable healthcare service that the approved medical treatment or services is or is a part of, is revoked or suspended; 30
- (g) all of the following conditions are satisfied:
  - (i) the medical institution was approved under section 3A in respect of that approved medical

treatment or services on the condition that the approved medical treatment or services is provided by certain authorised service delivery modes (as defined in section 3A(5)(a));

5 (ii) in respect of the licensable healthcare service that the approved medical treatment or services is or is a part of, the medical institution ceases to be approved under the Healthcare Services Act 2020 to provide the licensable healthcare service by every one of those authorised service delivery modes;

(h) the Minister considers it in the public interest to do so; or

15 (i) any other ground that is prescribed by the Minister is satisfied.

(2) The Minister may, if the Minister considers it desirable to do so —

20 (a) suspend the approval of a medical institution in respect of any approved medical treatment or services for a specified period, instead of revoking the approval under subsection (1); and

(b) at any time —

(i) extend the suspension for a specified period; or

(ii) cancel the suspension.

25 (3) The Minister must not revoke an approval under subsection (1), or suspend an approval under subsection (2), without giving the medical institution concerned written notice of the Minister's intention to do so and a reasonable opportunity to make representations as to why the approval should not be revoked or suspended.

30 (4) Subsection (3) does not apply where the medical institution —

(a) if a natural person — has died or is adjudged bankrupt; or

(b) in any other case — has been dissolved or wound up or has otherwise ceased to exist.

(5) Where any approval of a medical institution for an approved medical treatment or services is revoked or suspended —

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(a) the approved medical treatment or services is not a claimable medical treatment or services in relation to that medical institution where it is provided during the period of suspension or on or after the date of revocation, unless the Minister otherwise permits; but

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(b) the revocation or suspension does not affect any claim for any such approved medical treatment or services provided before or after the period of suspension, or before the date of revocation.

(6) Where the Minister revokes or suspends any approval of a medical institution in respect of any approved medical treatment or services under this section, the medical institution must immediately inform all the patients and customers that are or may be provided the licensable healthcare service that the approved medical treatment or services is or is a part of, of the revocation or suspension.

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(7) For the purposes of this section —

(a) a medical institution that is a company is unable to pay its debts if it is deemed to be unable to pay its debts under section 125(2) of the Insolvency, Restructuring and Dissolution Act 2018;

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(b) a medical institution that is an unregistered company is unable to pay its debts if it is deemed to be unable to pay its debts under section 246(2) of the Insolvency, Restructuring and Dissolution Act 2018; and

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(c) a medical institution that is a limited liability partnership is unable to pay its debts if it is deemed to be unable to pay its debts under paragraph 3(2) of the Fifth Schedule to the Limited Liability Partnerships Act 2005.

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(8) In this section —

“Clinical Governance Officer”, “key appointment holder” and “Principal Officer” have the meanings given by section 2(1) of the Healthcare Services Act 2020;

5 “company” has the meaning given by section 4(1) of the Companies Act 1967;

“limited liability partnership” has the meaning given by section 4(1) of the Limited Liability Partnerships Act 2005;

10 “unregistered company” has the meaning given by section 245 of the Insolvency, Restructuring and Dissolution Act 2018.”.

#### **Amendment of section 4**

5. In the principal Act, in section 4 —

15 (a) in subsection (1), delete “of such amount as may be prescribed in the relevant regulations”; and

(b) after subsection (1), insert —

20 “(1A) The premium for each relevant insurance period is the amount specified in a prescribed manner, which may include a website.

(1B) For the purposes of subsection (1A), different rates of premiums may be specified for different classes of insured persons.”.

#### **Amendment of section 19**

25 6. In the principal Act, in section 19 —

(a) in subsection (1), replace paragraph (c) with —

“(c) provides any information to any person which is false or misleading in a material particular, knowing that —

- (i) the information provided is false or misleading in a material particular; and
- (ii) the information provided may —
  - (A) be included in a health declaration, means declaration or claim application made under the Scheme; 5
  - (B) affect the amount of any benefit or claim to be paid under the Scheme or whether any such benefit or claim is payable; or 10
  - (C) affect the amount of any grant, subsidy or benefit to be paid or given under a relevant public scheme or whether any such grant, subsidy or benefit is payable or may be given.”; 15
- (b) in subsection (3), replace “or any benefit or claim to be overpaid under the Scheme,” with “, any benefit or claim to be overpaid under the Scheme or a higher amount of any grant, subsidy or benefit to be given under a relevant public scheme,”; and 20
- (c) replace subsection (4) with —
  - “(4) In this section, “relevant amount” means — 25
    - (a) the amount by which any premium has been undercharged as a result of the offence, or that would have been so undercharged if the false or misleading declaration, application or information (as the case may be) had been accepted as correct; 30
    - (b) the amount of any benefit or claim under the Scheme that has been overpaid as a

result of the offence, or that would have been so overpaid if the false or misleading declaration, application or information (as the case may be) had been accepted as correct; or

- (c) the amount of any grant, subsidy or benefit under a relevant public scheme that has been wrongly given as a result of the offence, or that would have been so wrongly given if the false or misleading information had been accepted as correct.”.

### **Amendment of section 26**

7. In the principal Act, in section 26(5)(a), replace “who attended to that person at that medical institution” with “employed or engaged by that medical institution, who attended to that person”.

### **Amendment of section 27**

8. In the principal Act, in section 27(1), replace “who attended to the person concerned in that medical institution” with “employed or engaged by that medical institution, who attended to the person concerned”.

### **Amendment of section 28**

9. In the principal Act, in section 28 —

- (a) in subsection (1), replace “to assess the eligibility of any person for any grant, subsidy or benefit under a relevant public scheme” with “for any purpose mentioned in subsection (1A)”;

(b) after subsection (1), insert —

“(1A) The purpose mentioned in subsection (1) is any of the following:

- (a) to assess the eligibility of any person for any grant, subsidy or benefit under a relevant public scheme;

- (b) to determine if any of the powers in Part 3 should be exercised in relation to any person.”;
- (c) in subsection (3), after “under subsection (1)”, insert “for the purpose mentioned in subsection (1A)(a)”;
- (d) in subsection (4), replace “referred to in subsection (1)” with “mentioned in subsection (1A)(a)”;
- (e) in subsection (4)(a) and (b), after “subsection (1)”, insert “for that purpose”; and
- (f) in subsection (6), after “subsection (1)”, insert “(for the purpose mentioned in subsection (1A)(a))”.

### **New sections 33A and 33B**

**10.** In the principal Act, after section 33, insert —

#### **“Service of documents**

**33A.—**(1) A document (other than a demand note mentioned in section 11(2)) that is permitted or required by or under this Act to be served on a person may be served as described in this section.

(2) A document may be served on an individual —

- (a) by giving it to the individual personally;
- (b) by sending it by prepaid registered post to the address specified by the individual for the service of documents or, if no address is so specified, the individual’s residential address or business address;
- (c) by leaving it at the individual’s residential address with an adult person apparently residing there, or at the individual’s business address with an adult person apparently employed there;
- (d) by affixing a copy of the document in a conspicuous place at the individual’s residential address or business address;

(e) by sending it by fax to the fax number given by the individual as the fax number for the service of documents under this Act; or

(f) by sending it by email to the individual's email address.

5 (3) A document may be served on a partnership (other than a limited liability partnership) —

(a) by giving it to any partner or other similar officer of the partnership;

10 (b) by leaving it at, or by sending it by prepaid registered post to, the partnership's business address;

(c) by sending it by fax to the fax number used at the partnership's business address; or

15 (d) by sending it by email to the partnership's email address.

(4) A document may be served on a body corporate (including a limited liability partnership) or an unincorporated association —

20 (a) by giving it to the secretary or other similar officer of the body corporate or unincorporated association or the limited liability partnership's manager;

25 (b) by leaving it at, or by sending it by prepaid registered post to, the body corporate's or unincorporated association's registered office or principal office in Singapore;

(c) by sending it by fax to the fax number used at the body corporate's or unincorporated association's registered office or principal office in Singapore; or

30 (d) by sending it by email to the body corporate's or unincorporated association's email address.



- (5) Service of a document under this section takes effect —
- (a) if the document is sent by fax and a notification of successful transmission is received, on the day of the transmission;
  - (b) if the document is sent by email, at the time that the email becomes capable of being retrieved by the person; and
  - (c) if the document is sent by prepaid registered post, 2 days after the day the document was posted (even if it is returned undelivered).

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(6) A document may be served on a person under this Act by email only with that person’s prior written consent.

(7) This section does not apply to documents to be served in proceedings in court or whose manner of service is otherwise provided by or under this Act.

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(8) In this section —

“business address” means —

- (a) in the case of an individual, the individual’s usual or last known place of business in Singapore; and
- (b) in the case of a partnership (other than a limited liability partnership), the partnership’s principal or last known place of business in Singapore;

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“email address” means the last email address given by the addressee concerned as the email address for the service of documents under this Act;

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“residential address” means an individual’s usual or last known place of residence in Singapore and includes an address provided in accordance with section 31.

### **Service of demand notes**

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**33B.**—(1) A demand note may be served as described in this section.

- (2) A demand note may be served on a person —
- (a) by giving it to the person personally;
  - (b) by sending it by prepaid registered post to the address specified by the person generally for the service of documents permitted or required by or under this Act to be served or specifically for demand notes;
  - (c) if no address mentioned in paragraph (b) is so specified, by sending it by prepaid registered post to —
    - (i) the person’s residential address;
    - (ii) the person’s business address;
    - (iii) any correspondence address provided by the person —
      - (A) in relation to the administration of this Act; or
      - (B) in accordance with regulations made under section 34; or
    - (iv) if the person is an insured person who has not attained 21 years of age —
      - (A) the residential address of the insured person’s parent;
      - (B) the business address of the insured person’s parent; or
      - (C) any correspondence address mentioned in sub-paragraph (iii) provided by the insured person’s parent;
  - (d) by leaving it at the person’s residential address with an adult person apparently residing there, or at the person’s business address with an adult person apparently employed there;

(e) by affixing a copy of the demand note in a conspicuous place at the person's residential address or business address;

(f) by sending it by fax to the fax number given by the person generally for the service of documents permitted or required by or under this Act to be served or specifically for demand notes; or

(g) by sending it by email in any manner provided in subsection (3).

(3) For the purposes of subsection (2)(g), a demand note may be served on a person (*A*) —

(a) by sending it by email to the last email address given by *A* to the recovery body, as the email address for the service of demand notes under this Act, if *A* has given prior written consent to service in this manner; or

(b) by sending it by email to an email address of *A*, if —

(i) the recovery body sends *A* an email at that email address;

(ii) the email contains a prominent notice stating —

(A) that if *A* sends any reply to the recovery body from that email address, *A* is treated as consenting to service of any demand note on *A*, by sending it by email to that email address; and

(B) that *A* may, at any time, give the recovery body a notice in writing —

(BA) refusing service on *A* by email at that email address; and

(BB) specifying a valid address or valid email address at which *A* may be served with a demand note;

(iii) *A* sends a reply to the recovery body from that email address and does not give the recovery

body the notice mentioned in sub-paragraph (ii)(B) in that reply; and

(iv) in the period between the date *A* sends the reply and the date immediately before the day the demand note is served (both dates inclusive), *A* does not give the recovery body the notice mentioned in sub-paragraph (ii)(B).

(4) Service of a demand note on a person under this section takes effect —

(a) if the demand note is sent by fax and a notification of successful transmission is received, on the day of the transmission;

(b) if the demand note is sent by email, at the time that the email becomes capable of being retrieved by the person; and

(c) if the demand note is sent by prepaid registered post, 2 days after the day the demand note was posted (even if it is returned undelivered).

(5) In addition, the Minister may by regulations made under section 34 prescribe, in relation to an electronic service of a recovery body, that despite anything in the relevant written law, the provisions of the relevant written law (so far as relevant) apply in relation to the service by the recovery body of a demand note under this Act using the electronic service as they apply to the service of documents permitted or required to be served by the electronic service under the relevant written law, with any exceptions, modifications and adaptations that may be prescribed.

(6) Service of a demand note in accordance with any relevant written law as applied by regulations made for the purpose of subsection (5) takes effect at the time when an electronic record of it enters the person's account with the electronic service.

(7) This section does not affect the service of a demand note in accordance with any other written law or in any manner agreed by the person to be served.

(8) In this section —

“business address” has the meaning given by section 33A(8);

“demand note” means a demand note mentioned in section 11(2);

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“electronic service”, in relation to a recovery body, means any prescribed system established under any written law that enables the recovery body to serve any document, and includes —

(a) if the Board is prescribed as a recovery body, the electronic service platform provided under section 74(1) of the CPF Act; and

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(b) if IRAS is prescribed as a recovery body, the system established under section 29(1) of the Inland Revenue Authority of Singapore Act 1992;

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“parent”, in relation to an insured person, means any parent of an insured person who is required under section 4(1)(c)(ii) to pay any premium for the insured person;

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“relevant written law”, in relation to an electronic service, means —

(a) the written law under which the electronic service is established; and

(b) any written law that provides for the procedure for the use of the electronic service, the circumstances in which a document may be served through the electronic service, and the manner in which a person who has been served a document through the electronic service is to be notified of such service,

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and includes —

(c) if the electronic service platform provided under section 74(1) of the CPF Act is prescribed as an

electronic service, the CPF Act and any subsidiary legislation mentioned in section 74(4) or (5) of that Act; and

(d) if the system established under section 29(1) of the Inland Revenue Authority of Singapore Act 1992 is prescribed as an electronic service, any provision or subsidiary legislation mentioned in paragraph (a) or (c) of the definition of “relevant tax legislation” (for any document or information permitted or required under such legislation to be served or given) in section 29(7) of that Act;

“residential address” means a person’s usual or last known place of residence in Singapore and includes an address provided in accordance with section 31.”.

### **Amendment of section 34**

**11.** In the principal Act, in section 34(2) —

(a) in paragraph (b), replace “prescribe different rates of premiums for different classes of insured persons, including imposing” with “impose”;

(b) in paragraph (d), after “prescribe the circumstances for imposing and the manner of computing premiums”, insert “(which may be at different rates for different classes of insured persons)”; and

(c) delete paragraph (k).

### **Saving and transitional provisions**

**12.—**(1) Despite sections 2(a) and (c), 3 and 4, section 3 of the principal Act as in force immediately before the date of commencement of those sections (called in this subsection the relevant date) continues to apply to and in relation to any approved medical treatment or services received by an insured person before the relevant date in an approved medical institution (as defined in section 2(1) of the principal Act as in force immediately before the relevant date) as if those sections had not been enacted.

(2) For a period of 2 years after the date of commencement of any provision of this Act, the Minister may, by regulations, prescribe such additional provisions of a saving or transitional nature consequent on the enactment of that provision as the Minister may consider necessary or expedient.

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## EXPLANATORY STATEMENT

This Bill seeks to amend the MediShield Life Scheme Act 2015 (the Act) for the following main purposes:

- (a) to introduce a new definition of “medical institution”;
- (b) to amend the provisions relating to when a person is taken to attain a particular age;
- (c) to redefine the circumstances under which the costs incurred by an insured person for any approved medical treatment or services may be paid under the MediShield Life Scheme (the Scheme);
- (d) to provide that the Minister may approve a medical institution in respect of one or more approved medical treatments or services, subject to conditions;
- (e) to allow the amount of premium payable for insurance cover under the Scheme to be specified in a prescribed manner;
- (f) to expand the scope of the offence of providing information which is false or misleading in a material particular;
- (g) to allow means information to be used to determine if any of the powers in Part 3 of the Act should be exercised in relation to any person;
- (h) to provide for how documents permitted or required by or under the Act to be served may be served.

Clause 1 relates to the short title and commencement.

Clause 2 amends section 2(1) to define certain new terms to be used in the Act. In particular, the terms “approved medical institution”, “claimable medical treatment or services”, “licensable healthcare service” and “medical institution” are defined.

A “medical institution” refers to a provider of a licensable healthcare service (as defined in section 3(1) of the Healthcare Services Act 2020) that is licensed under the Healthcare Services Act 2020 to provide that licensable healthcare service.

An “approved medical institution” refers to a medical institution that is approved under the new section 3A (inserted by clause 4).

“Claimable medical treatment or services”, in relation to an approved medical institution, refers to any approved medical treatment or services —

- (a) in respect of which the approved medical institution is approved under the new section 3A; and
- (b) that is provided in accordance with the conditions mentioned in the new section 3A.

Clause 2 also makes a consequential amendment to the definition of “authorised person” in section 2(1) and replaces section 2(4) to set out new rules to determine the date when a person is taken to attain a particular age for the purposes of the Act.

Clause 3 amends section 3(1) to redefine the circumstances under which costs incurred by an insured person for any approved medical treatment or services may be paid under the Scheme. Under the amended section 3(1), the Scheme is for the purpose of paying the whole or part of the costs incurred by an insured person for any claimable medical treatment or services received by an insured person from an approved medical institution during the period when the insured person is insured under the Scheme.

Clause 4 inserts new sections 3A and 3B.

Under the new section 3A, the Minister may, whether on application by the medical institution or on the Minister’s own initiative, approve a medical institution in respect of any approved medical treatment or services that is or is part of the medical institution’s licensable healthcare services, subject to any conditions that the Minister thinks fit, including conditions specifying the service delivery mode by which the medical treatment or services is to be provided.

An example of how the new section 3A will operate is as follows:

Suppose a medical institution has been granted the following licences under the Healthcare Services Act 2020:

- (a) a licence to provide an outpatient medical service at permanent premises A and by remote provision (licence A);
- (b) a licence to provide an outpatient medical service at permanent premises B (licence B).

Under the new section 3A, the Minister —

- (a) may approve the medical institution as an approved medical institution in respect of only some of the approved medical treatments or services that are provided as part of the outpatient medical service under



licence A (whether provided at permanent premises A or by remote provision); but

- (b) may not approve the medical institution in respect of all other approved medical treatments or services that are provided as part of the outpatient medical service under licence A (whether provided at permanent premises A or by remote provision); and
- (c) may not approve the medical institution in respect of any approved medical treatment or services that are provided as part of the outpatient medical service under licence B.

By way of another example, the Minister may approve the medical institution as an approved medical institution in respect of only some of the approved medical treatments or services that are provided as part of the outpatient medical service under licence A, on the condition that those services are provided at permanent premises A. In other words, the following will not be claimable medical treatments or services vis-à-vis the medical institution:

- (a) all other approved medical treatments or services that are provided as part of the outpatient medical service under licence A, at permanent premises A;
- (b) all approved medical treatments or services that are provided as part of the outpatient medical service under licence A by remote provision;
- (c) all approved medical treatments or services that are provided as part of the outpatient medical service under licence B.

The new section 3B sets out the circumstances in which an approval granted under the new section 3A may be revoked. The Minister may suspend an approval instead of revoking it, and may extend or cancel the suspension. The new section 3B also sets out the consequences of the revocation or suspension of an approval.

Clause 5 amends section 4 to allow the amount of premium for each relevant insurance period to be specified in a prescribed manner, which may include a website.

Clause 6 amends section 19 to provide that a person commits an offence if the person provides any information which is false or misleading in a material particular, knowing that the information provided is false or misleading in a material particular, and knowing that the information provided may —

- (a) be included in a health declaration, means declaration or claim application made under the Scheme;
- (b) affect the amount of any benefit or claim to be paid under the Scheme or whether any such benefit or claim is payable; or

- (c) affect the amount of any grant, subsidy or benefit to be paid or given under a relevant public scheme or whether any such grant, subsidy or benefit is payable or may be given.

Clauses 7 and 8 make amendments to sections 26(5)(a) and 27(1), respectively, that are consequential on the new definition of the term “medical institution”.

Clause 9 amends section 28 to enable an authorised person to request means information to determine if any of the powers in Part 3 of the Act should be exercised in relation to any person.

Clause 10 inserts new sections 33A and 33B. The new section 33A provides generally for the service of documents under the Act. The new section 33B provides specifically for the service of demand notes under the Act.

Clause 11 makes amendments to section 34(2) that are consequential on the amendments to section 4 (by clause 5) and the new sections 33A and 33B (inserted by clause 10).

Clause 12 provides for a saving and transitional matter in relation to the amendments made by clauses 2(a) and (c), 3 and 4. The clause also empowers the Minister to make regulations to prescribe additional provisions of a saving or transitional nature consequent on the enactment of any provision of the Bill as the Minister may consider necessary or expedient. The Minister has power to do so only within 2 years after the date of commencement of the provision.

## EXPENDITURE OF PUBLIC MONEY

This Bill will not involve the Government in any extra financial expenditure.

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