

Health Care Insurance Ltd.

ACN 009 579 088

Annual report for the financial year ended
30 June 2019



Health Care Insurance Ltd.

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Health Care Insurance Ltd.

Directors' report

The directors of Health Care Insurance Ltd ("HCI") submit herewith the annual report of the company for the year ended 30 June 2019. In order to comply with the provisions of the *Corporations Act 2001*, the directors report as follows:

Information about the directors

The names and particulars of the directors of the company during or since the end of the financial year are:

Name	Experience	Committee Memberships
Greg Spinks B.A. Dip. Psych. Dip.Ed. MAPS, MAICD	- National Manager Business Services, Australian Paper - Member of the Australian Psychological Society - Registered Psychologist - HCI Director appointed 19 October 2009	- Board Chair - Chair of Performance and Remuneration Committee
Carolyn Harris B. Bus; FCPA; MBA; GAICD	- Business Manager, Tasmanian Dairy Industry Authority - HCI Director appointed 19 December 2016.	- Deputy Board Chair - Chair of the Audit Committee
Paul Smith B.Sc (For)	- Former General Manager Operations, Forestry Tasmania - Chair of Multicap Tasmania - HCI Director appointed 30 June 2008.	- Chair of Risk Committee - Member of Performance and Remuneration Committee
Megan Bramich B.Comm (Acc); CPA; MAICD	- Supply Chain Commercial Manager, Lion Dairy Drinks Pty Ltd - HCI Director appointed 18 December 2017	- Member Audit Committee - Member Performance and Remuneration Committee
Phillip Boon B.Comm; GAICD	- CIO - Group Manager Australian Paper, formerly Commercial System Manager, Paperlinx. - HCI Director appointed 15 May 2000.	- Member of the Audit Committee
Mark Fishwick Grad. Cert. Bus.; MAICD	- Business Development Officer Past National President Apex - HCI Director appointed 19 November 2001.	- Member of the Risk Committee
Paul Gladman MBA; GAICD	- Non-Executive director of mental health counselling service On the Line - Former CEO of CBHS Health Fund Limited, former Interim General Manager for HCI. - HCI Director appointed 17 December 2018.	- Member of the Risk Committee

The above named directors held office during the whole of the financial year and since the end of the financial year except for:

- Paul Gladman - appointed 17 December 2018

Health Care Insurance Ltd.

Directors' report (continued)

Principal activities

The principal activities of HCI during the financial year consisted of the provision of private health insurance to members.

No significant changes in the nature of HCI's activity occurred during the financial year.

Short term objectives

HCI's short term objectives are to:

- implement appropriate structures to ensure compliance with current industry prudential reviews and otherwise in accordance with good practice corporate governance;
- develop a positive, member-centric culture at all levels of the business;
- control current material business risks; and
- develop an appropriate product suite that will enable the fund to best service the interest of current and future members.

Long term objectives

HCI's long term objectives are to:

- to give our members peace of mind that we are there for them when they need us most;
- grow its membership base throughout Australia; and
- ensure that it remains a robust and sustainable business.

Strategy for achieving the objectives

To achieve these objectives, HCI has adopted the following strategies:

- **Simplify** our business structures, process and products;
- **Grow** through a strong brand proposition, community engagement and offering a competitive product suite that both serves the interest of members and delivers suitable margins for the business;
- **Sustain** by maintaining adequate capital that, in the unlikely occurrence of a major risk event, would allow HCI to continue to comply with minimum prudential requirements and strategically manage the interests of members and reviewing governance structures regularly in light of developments in best practice and regulatory reform;
- **Connect** and develop relationships with members and other stakeholders that facilitate a simple, transparent and efficient environment for transacting with the business.

How principal activities assisted in achieving the objectives

The principal activities assisted HCI in achieving its objectives by delivering competitive health insurance products to the market that served the interests of members. The principal activities will continue to assist HCI achieve its objectives by ensuring that its product suite is balanced to both serve the interests of members, deliver suitable margins for the business and remove complexity.

Performance measures

The following measures are used within HCI to monitor performance:

- a documented risk management framework that includes regular reporting against metrics considered appropriate to assess the risk profile of the business;
- a documented business plan with specified objectives and regular reporting against metrics to demonstrate progress against these objectives; and
- regular financial reporting to both the Board and regulatory bodies as required.

Health Care Insurance Ltd.

Directors' report (continued)

Members' guarantee

HCI is a company limited by guarantee. In the event of, and for the purpose of winding up of the company, the amount capable of being called up from each member and any person or association who ceased to be a member in the year prior to the winding up, is limited to \$1 for members that are corporations and \$1 for all other members, subject to the provisions of HCI's constitution.

At 30 June 2019 the collective liability of members was \$6,264 (2018: \$6,656).

Review of operations

A summary of the underwriting result and comprehensive income for the year are set out below:

	2019 \$	2018 \$
Member contributions	26,676,688	24,752,282
Member benefits expense	(23,063,907)	(22,567,635)
Underwriting results before operating expenses	3,612,781	2,184,647
Total comprehensive income for the year	1,487,538	95,927

Commentary on the operations and the results of those operations are set out as below:

HCI advanced on its strategic journey of controlling emerging business risks throughout the year by embedding robust governance frameworks and controlling the Company's growth profile and product performance.

This has laid a solid foundation for HCI to pursue sustainable growth that will enable member-oriented delivery of simple, high value private health insurance to members nationwide.

Directors' meetings

The following table sets out the number of directors' meetings (including meetings of committees of directors) held during the financial year and the number of meetings attended by each director (while they were a director or committee member). During the financial year, 8 board meetings, 2 audit committee meetings, 2 risk management committee and 2 performance and remuneration committee meetings were held.

Directors	Directors meetings		Audit Committee		Risk Committee		Performance and Remuneration Committee	
	Eligible to attend	Attended	Eligible to attend	Attended	Eligible to attend	Attended	Eligible to attend	Attended
Greg Spinks	8	8	-	-	1	1	2	2
Carolyn Harris	8	5	2	2	1	-	-	-
Paul Smith	8	6	-	-	2	2	2	1
Megan Bramich	8	7	2	2	1	1	2	2
Phillip Boon	8	8	2	2	1	1	-	-
Mark Fishwick	8	8	-	-	2	2	-	-
Paul Gladman	4	4	-	-	1	1	-	-

Changes in state of affairs

Other than as disclosed in this report or in the accompanying financial statements and notes thereto, in the opinion of the directors, there have been no significant changes in the state of affairs of the Company during the year.

Health Care Insurance Ltd.

Directors' report (continued)

Subsequent events

At the date of this report, there were no matters or circumstances that have arisen since the end of the financial year that have significantly affected or may affect the operations of the company, the results of those operations or the state of affairs of the Company in future financial years.

Likely developments and expected results of operations

The directors are not aware of any likely developments or expected results that should be disclosed at this time.

Indemnification of officers and auditors

During the financial year, the company paid a premium in respect of a contract insuring the directors of the company (as named above), the company secretaries, Robert Wood and Jessica Lyons, and all executive officers of the company and of any related body corporate against a liability incurred as such a director, secretary or executive officer to the extent permitted by the Corporations Act. The contract of insurance prohibits disclosure of the nature of the liability and the amount of the premium.

The company has not otherwise, during or since the end of the financial year, except to the extent permitted by law, indemnified or agreed to indemnify an officer or auditor of the company or of any related body corporate against a liability incurred as such an officer or auditor.

Auditor's independence declaration

The auditor's independence declaration is included on page 7.

This directors' report is signed in accordance with a resolution of directors made pursuant to s.298(2) of the *Corporations Act 2001*.

On behalf of the Directors



Greg Spinks
Chairman
25 September 2019
Burnie

Board of Directors
Health Care Insurance Ltd
25 Cattley Street
Burnie TAS 7320

25 September 2019

Dear Directors,

Auditor's Independence Declaration to Health Care Insurance Ltd

In accordance with section 307C of the *Corporations Act 2001*, I am pleased to provide the following declaration of independence to the directors of Health Care Insurance Ltd.

As lead audit partner for the audit of the financial statements of Health Care Insurance Ltd for the year ended 30 June 2019, I declare that to the best of my knowledge and belief, there have been no contraventions of:

- the auditor independence requirements of the *Corporations Act 2001* in relation to the audit
- any applicable code of professional conduct in relation to the audit.

Yours sincerely

Deloitte Touche Tohmatsu
DELOITTE TOUCHE TOHMATSU



S Dare
Partner

Health Care Insurance Ltd.

Statement of profit or loss and other comprehensive income

for the year ended 30 June 2019

	Note	2019 \$	2018 \$
Member contributions		26,676,688	24,752,282
Member benefits expense		(23,361,127)	(22,465,541)
Net Risk Equalisation Special Account rebate income / (expense)		297,220	(102,094)
Net underwriting result	4 (a)	3,612,781	2,184,647
Other income		1,096	2,951
Employee benefits expense	15 (a)	(1,043,961)	(1,203,085)
Depreciation and amortisation expenses		(97,982)	(67,860)
Other expenses	9	(1,714,795)	(1,575,995)
Profit before interest and investment income		757,139	(659,342)
Interest and investment income	10	730,399	684,240
Profit for the year		1,487,538	24,898
Other comprehensive income		-	71,029
Total comprehensive income for the year		1,487,538	95,927

The above statement of profit or loss and other comprehensive income is to be read in conjunction with the attached notes.

Health Care Insurance Ltd.

Statement of financial position

as at 30 June 2019

	Note	2019 \$	2018 \$
Current assets			
Cash and cash equivalents	11 (d)	2,250,615	1,514,076
Trade and other receivables	11 (b)	1,002,297	995,547
Financial assets at fair value through profit or loss	7	17,417,781	16,645,490
Other assets		62,911	76,934
Total current assets		20,733,604	19,232,047
Non-current assets			
Property, plant and equipment	12	1,169,768	1,190,147
Intangible assets	13	50,696	54,955
Total non-current assets		1,220,464	1,245,102
Total assets		21,954,068	20,477,149
Current liabilities			
Trade and other payables	11 (c)	1,031,718	856,707
Claims liabilities	5	1,483,650	1,732,500
Unearned contribution liability	6	3,555,047	3,496,508
Employee entitlement provision	15 (b)	65,343	57,880
Total current liabilities		6,135,758	6,143,595
Non-current liabilities			
Employee entitlement provision	15 (b)	11,608	14,390
Total Non-Current Liabilities		11,608	14,390
Total liabilities		6,147,366	6,157,985
Net assets		15,806,702	14,319,164
Equity			
Asset revaluation reserve	14	71,029	71,029
Retained earnings		15,735,673	14,248,135
Total equity		15,806,702	14,319,164

The above statement of financial position is to be read in conjunction with the attached notes.

Health Care Insurance Ltd.

Statement of changes in equity

for the year ended 30 June 2019

	Asset revaluation reserve \$	Retained earnings \$	Total \$
Balance as at 1 July 2017	-	14,223,237	14,223,237
Profit for the year	-	24,898	24,898
Other comprehensive income for the year, net of tax	71,029		71,029
Balance as at 30 June 2018	71,029	14,248,135	14,319,164
Profit for the year	-	1,487,538	1,487,538
Other comprehensive income for the year, net of tax	-	-	-
Balance as at 30 June 2019	71,029	15,735,673	15,806,702
<i>Note</i>	14		

The above statement of changes in equity is to be read in conjunction with the accompanying notes.

Health Care Insurance Ltd.

Statement of cash flows

for the year ended 30 June 2019

	Note	2019 \$	2018 \$
Cash flows from operating activities			
Contributions received from members		26,744,339	24,752,459
Benefits paid to members		(23,609,977)	(22,577,197)
Receipts from / (Payments to) Health Benefits Risk Equalisation Trust		270,170	(503,598)
Payments to suppliers and employees		(2,661,991)	(2,821,658)
Other receipts		-	102,433
GST refunds		170,845	163,827
Net cash provided by / (used in) operating activities		913,386	(883,734)
Cash flows from investing activities			
Interest and dividend income		628,558	582,785
Investment expenses		(70,119)	(68,029)
Proceeds from sale of financial assets		6,260,447	7,221,446
Purchase of financial assets		(6,923,816)	(8,964,672)
Purchase of plant, equipment and intangibles		(90,917)	(140,645)
Proceeds from sale of plant, equipment and intangibles		19,000	-
Net cash used in investing activities		(176,847)	(1,369,115)
Net change in cash and cash equivalents		736,539	(2,252,849)
Cash and cash equivalents at the beginning of the year		1,514,076	3,766,925
Cash and cash equivalents at the end of the year	11 (d)	2,250,615	1,514,076

The above statement of cash flows is to be read in conjunction with the accompanying notes

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

1 Application of new and revised accounting standards

(a) Amendments to AASBs and new Interpretations that are mandatorily effective for the current year

In the current year, the Company has applied all amendments to AASBs issued by the Australian Accounting Standards Board (AASB) that are mandatorily effective for an accounting period that begins on or after 1 July 2018, and therefore relevant for the current year end. The impact of the new standards that are expected to significantly impact reporting have been further disclosed below:

AASB 9 'Financial Instruments'

In the current year, the Company has applied AASB 9 Financial Instruments (as revised in July 2014) and the related consequential amendments to other AASB Standards that are effective for an annual period that begins on or after 1 January 2018. The transition provisions of AASB 9 allow an entity not to restate comparatives, which has been adopted given the minimal impact caused by AASB 9 on the Company.

All recognised financial assets that are within the scope of AASB 9 are required to be measured subsequently at amortised cost or fair value on the basis of the entity's business model for managing the financial assets and the contractual cash flow characteristics of the financial assets. The Company previously measured investments at fair value through profit or loss and these investments continue to be measured on the same basis under AASB 9.

Financial assets classified as loans and receivables under AASB 139, that were measured at amortised cost, continue to be measured at amortised cost under AASB 9 as they are held within a business model to collect contractual cash flows and these cash flows consist solely of payments of principal and interest on the principal amount outstanding.

In relation to the impairment of financial assets, AASB 9 requires an expected credit loss model, as opposed to an incurred credit loss model under AASB 139. The expected credit loss model requires the Company to account for expected credit losses and changes in those expected credit losses at each reporting date to reflect changes in credit risk since initial recognition of the financial assets. In other words, it is no longer necessary for a credit event to have occurred before credit losses are recognised but given the minimal trade receivables subject to credit terms at balance date and in the comparative period such analysis is not material.

Given the Company's only financial liabilities are measured at amortised cost, AASB 9 has had no impact on the classification and measurement of the Company's financial liabilities.

There were no financial assets or financial liabilities which the Company had previously designated as at Fair Value through Profit or Loss ('FVTPL') under AASB 139 that were subject to reclassification or which the Company has elected to reclassify upon the application of AASB 9. There were no financial assets or financial liabilities which the Company has elected to designate as at FVTPL at the date of initial application of AASB 9.

The application of AASB 9 has had no impact on the cash flows of the Company.

(b) Standards and Interpretations in issue not yet adopted

At the date of authorisation of the financial statements, the Standards and Interpretations listed below were in issue but not yet effective:

Standard/Interpretation	Effective for annual reporting periods beginning on or after	Expected to be initially applied
AASB 15 'Revenue from contracts with customers' [Not-for-Profit Entities]	1-Jan-19	30-Jun-20
AASB 1058 'Income of not-for profit entities'	1-Jan-19	30-Jun-20
AASB 16 'Leases'	1-Jan-19	30-Jun-20
AASB 2018-3 Amendments to Australian Accounting Standards – Reduced Disclosure Requirements	1-Jan-19	30-Jun-20
AASB 17 'Insurance Contracts'	1-Jan-20	30-Jun-21

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Notes to the financial statements

for the year ended 30 June 2019

1 Application of new and revised accounting standards (continued)

(b) Standards and Interpretations in issue not yet adopted (continued)

The directors do not expect that the adoption of the Standards listed above will have a material impact on the financial statements of the Company in future periods, except as discussed below:

AASB 17 'Insurance Contracts'

This standard is effective for reporting periods beginning on or after 1 January 2021 and will replace AASB 4 Insurance Contracts, AASB 1023 General Insurance Contracts and AASB 1038 Life Insurance Contracts. The Company plans to apply AASB 17 for the annual period beginning 1 July 2021.

The standard introduces three new measurement approaches for accounting for insurance contracts. These include the Building Block Approach for long term contracts, the Premium Allocation Approach for short term contracts and a Variable Fee Approach for direct participating products. The Company has started an initial assessment of the potential impact on its consolidated financial statements. Disclosure changes and impacts on the profit and loss are expected.

AASB 15 'Revenue from contract with customers' [Not-for-Profit Entities] and AASB 1058 'Income for Not-for-Profit Entities'

AASB 1058 clarifies and simplifies the income recognition requirements that apply to not-for-profit (NFP) entities, in conjunction with AASB 15. The new income recognition requirements shift the focus from a reciprocal/non-reciprocal basis to a basis of assessment that considers the enforceability of a contract and the specificity of performance obligations. The core principle of the new income recognition requirements in AASB 1058 is when a NFP entity enters into transactions where the consideration to acquire an asset is significantly less than the fair value of the asset principally to enable the entity to further its objectives, the excess of the asset recognised (at fair value) over any 'related amounts' is recognised as income immediately.

An example of a 'related amount' is AASB 15 and in cases where there is an 'enforceable' contract with a customer with 'sufficiently specific' performance obligations, income is recognised when (or as) the performance obligations are satisfied under AASB 15, as opposed to immediate income recognition under AASB 1058. Under AASB 15, an entity recognises revenue when (or as) a performance obligation is satisfied, i.e. when 'control' of the goods or services underlying the particular performance obligation is transferred to the customer. AASB 15 introduces a 5-step approach to revenue recognition, which is more prescriptive than AASB 118.

It is rare that HCI would acquire assets for significantly less than the fair value of the assets and the majority of the HCI's revenue is currently recognised under AASB 1023 'General Insurance Contracts', with non-insurance revenue comprising immaterial revenue streams. As a result of this directors of the Company do not expect a material impact on the financial statements as a result of the future adoption of these standards.

AASB 16 'Leases'

AASB 16 provides a comprehensive model for the identification of lease arrangements and their treatment in the financial statements for both lessors and lessees. AASB 16 will supersede the current lease guidance including AASB 117 Leases and the related Interpretations when it becomes effective for accounting periods beginning on or after 1 January 2019. The date of initial application of AASB 16 for the Company will be 30 June 2020.

The directors of the company plan to utilise any practical expedients available on transition to AASB 16 to not reassess whether the contract is or contains a lease. AASB 16 is expected to change how the Company accounts for leases previously classified as operating leases under AASB 117, which were off-balance sheet, however the full impact of the impact of AASB 16 on the balance sheet is not expected to be material given the Company's current operations.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

2 Critical accounting judgements and estimates

In the application of the Company's accounting policies, which are described in note 3, the directors of the Company are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates. The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised.

(a) Key sources of estimation uncertainty

The key assumptions concerning the future, and other key sources of estimation uncertainty at the end of the reporting period, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below or elsewhere in the financial statements:

Outstanding claims liability

Refer to note 5.

Unearned risk liability

Refer to note 6(b).

Fair value of investments

Refer to note 7.

3 Summary of significant accounting policies

(a) Statement of compliance

These financial statements are general purpose financial statements which have been prepared in accordance with the *Corporations Act 2001* and Australian Accounting Standards – Reduced Disclosure Requirements, and comply with other requirements of the law. For the purposes of preparing the financial statements, the Company is a not-for-profit entity limited by guarantee.

The financial statements were authorised for issue by the directors on 20 September 2019.

(b) Basis of Preparation

The financial report has been prepared on the basis of historical cost, with the exception of financial assets measured at fair value through profit and loss, land and buildings which are measured at fair value, and claims liabilities which are measured at the present value of expected future payments. All amounts are presented in Australian dollars, unless otherwise noted.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

4 Insurance underwriting

(a) Insurance underwriting result

	2019	2018
	\$	\$
Member contributions	26,676,688	24,752,282
Member benefits expense:		
Member claims expense	(23,354,054)	(22,563,215)
State levies	(59,073)	(53,326)
Unexpired risk movement	52,000	151,000
Net risk equalisation special account rebate income / (expense)	297,220	(102,094)
Underwriting results before operating expenses	3,612,781	2,184,647

Member contributions accounting policy

Member contributions comprises premiums from private health insurance contracts held by members.

Member contributions are recognised in the statement of profit or loss and other comprehensive income when payment for health insurance cover falls due in accordance with the terms of the membership conditions. Member contributions are recognised from the cover date over the period of the contract. The cover date is from when the insurer accepts the risk from the member, under the insurance contract. Member contributions are measured at the fair value of the consideration received and revenue is recognised on a systematic basis in accordance with the pattern of the incidence of risk expected over the term of the contract.

The proportion of the contribution received or receivable not earned in the income statement at the reporting date is recognised in the balance sheet as unearned contribution liabilities. Any non-current portion is discounted based on expected settlement dates, however as noted below this is minimal.

Contributions on unclosed business are brought to account using estimates based on payment cycles nominated by the member.

The Australian Government provides a rebate for contributions paid by eligible resident private health insurance members and pays this rebate directly to the Company under the Premium Rebate Scheme. This rebate is recognised within member contributions in the statement of profit or loss and other comprehensive income. Rebates due from the government but not received at balance date are recognised as trade and other receivables.

Member benefits expense accounting policy

Member benefits expenses comprise member claims expenses paid during the year together with related handling costs, state levies and the unexpired risk movement during the period. The Risk Equalisation Special Account levy for Australian health insurance business (as noted below), is shown as a separate line on the profit or loss and other comprehensive income, given the account can alternate between income or expense.

Net risk equalisation special account levies and rebates accounting policy

Under legislation, all private health insurers must participate in the Risk Equalisation Special Account, which shares a proportion of the hospital and medical claims of all members aged 55 years and over and those memberships with high costs claims meeting the high cost claim criteria in any one year between all health insurers.

The Australian Prudential Regulation Authority (APRA) determines the amount payable to or receivable from the Risk Equalisation Special Account after the end of each quarter. Provisions for estimated amounts payable or receivable are provided for periods where determinations have not yet been made. This includes an estimate of risk equalisation for unrepresented and outstanding claims.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

5 Claims liabilities

(a) Outstanding claims liability

	2019	2018
	\$	\$
Outstanding claims	1,361,000	1,546,000
Claims handling	78,000	96,000
RESA allowance	(26,000)	8,000
Risk margin	70,650	82,500
	1,483,650	1,732,500

Movements in outstanding claims liability

Movements in the balance are as follows:

Balance at beginning of period (1 July)	1,732,500	1,411,200
Claims incurred during the year	23,276,000	22,502,000
Claims paid in respect of the current year	(21,915,000)	(20,972,000)
Claims incurred for prior years	76,000	105,000
Claims paid in respect of prior years	(1,622,000)	(1,274,000)
Margin on central estimate	(11,850)	15,300
RESA allowance adjustment	(34,000)	(63,000)
Claims handling costs	(18,000)	8,000
Balance at end of period (30 June)	1,483,650	1,732,500

Outstanding claims liability accounting policy

The outstanding claims liability (provision) represents claims received but not assessed and claims incurred but not received. The liability (provision) at balance date, is based on an actuarial assessment that considers historic patterns of claim incidence and processing. It is measured as a 'central estimate' of the present value of expected future payments arising from claims incurred at the end of each reporting period under insurance cover issued, plus a risk margin reflecting the inherent uncertainty in the central estimate.

Based on historical experience, approximately 85% of outstanding claims are received within 2 months of balance date, and accordingly only 15% of the outstanding claims provision requires an estimate. Accordingly reasonable changes in assumptions would not have a material impact on the outstanding claims balance. Given the short decay, no discounting of claims is usually applied as the difference between the undiscounted value of claims payments and the present value of claims payments is not likely to be material.

The liability also allows for an estimate of claims handling costs which includes the expected costs of negotiation of claims settlement and administrative expenses of the claims department attributable to these future claims.

Key sources of estimation uncertainty

The outstanding claims liability estimate, is a key accounting judgement as a result of the determining the expected future patterns based on historical evidence. Allowances are made, however, given sources of estimation are based on historic trends a level of uncertainty is always inherent in the central estimate. The outstanding claims estimate is derived using all data combined in an aggregate model. As such diversification benefits have been implicitly allowed for in the process.

The determined risk margin of 5.0% (2018: 5.0%) is based on an analysis of historic evidence and calculated using the actuarial assistance. The risk margin has been estimated to equate to the Company's objective of achieving a probability of adequacy of at least 75% (2018: 75%).

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

6 Unearned contribution liability and unexpired risk liability

(a) Unearned contribution liability

	2019	2018
	\$	\$
Unearned contributions	3,500,999	3,409,328
Unearned unclosed business	54,048	35,180
	3,555,047	3,444,508

Liability adequacy testing did not result in any deficiency as at 30 June 2019 and 30 June 2018.

Unearned contribution liability accounting policy

The unearned contribution liability represents contributions written that relate to periods of risk in future accounting periods. Unearned contributions are released to profit and loss and other comprehensive income as revenue consistent with note 5 (a) over the term of the period of cover.

(b) Unexpired risk liability

	2019	2018
	\$	\$
Unexpired risk liability	-	52,000
	-	52,000

Unexpired risk liability accounting policy

A liability adequacy test is required to be performed in respect of the unearned contributions and insurance contracts renewable before the next pricing review. At balance date, the adequacy of the unearned contributions balance is tested by considering current estimates of all expected future cash flows relating to future claims arising from the rights and obligations created under the current insurance coverage.

If the sum of the present value of the expected future cash flows relating to future claims plus the additional risk margin to reflect the inherent uncertainty in the central estimate exceeds the unearned contributions then the unearned contribution is deemed to be deficient, with the deficiency being recorded in the income statement and an unexpired risk liability created.

This test is also extended beyond recognised unearned contributions to include contributions renewable until the next repricing review, which occurs 1 April each year.

Key sources of estimation uncertainty

Unexpired risk liability involves estimation of the expected future cash flows relating to claims and therefore involves a certain level of subjectivity in determination. To avoid management subjectivity in this estimation, management consult with a third party actuary to provide a statistical approach to testing and calculating unexpired risk liability.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

7 Financial assets at fair value through profit or loss

(a) Financial assets at fair value through profit or loss

	2019	2018
	\$	\$
Term deposits	4,500,000	4,700,000
Australian equities	1,968,680	1,814,930
Fixed income	10,949,101	10,130,560
	17,417,781	16,645,490

Financial assets at fair value through profit or loss accounting policy

AASB 1023 General Insurance Contracts requires that all assets backing insurance liabilities be measured at fair value through profit or loss. All of the Company's financial assets were so classified throughout the reporting period. When financial assets are recognised initially, they are measured at fair value in the statement of financial position with any resultant unrealised profits and losses recognised in the statement of profit or loss and other comprehensive income.

All of HCI's investments are in fixed income bonds, Australian equities or term deposits. A financial asset is derecognised when the rights to receive cash flows from the asset have expired; or the Company retains the right to receive cash flows from the asset and either, the Company has transferred substantially all the risks and rewards of the asset, or the Company has neither transferred nor retained substantially all the risks and rewards of the asset, but has transferred control of the asset.

Key sources of estimation uncertainty

The value of investments that are not traded in an active market are determined by the unit fund managers using valuation techniques. Such techniques include the use of recent arm's length transactions, reference to the current fair value of a substantially similar other instrument, discounted cash flow technique or any other valuation technique that provides a reliable estimate of prices obtained in actual market transactions.

8 Categories of financial assets and financial liabilities

(a) Classes and categories of financial instruments and their fair values

The following table combines information about:

- classes of financial assets and liabilities based on the nature and characteristics; and
- the fair values of financial instruments (where carried at fair value)

	2019	2018
	\$	\$
Financial assets		
Cash and cash equivalents	2,250,616	1,514,076
Financial assets at fair value through profit or loss		
Australian equities	1,968,680	1,814,930
Term deposits	4,500,000	4,700,000
Fixed income	10,949,101	10,130,560
	17,417,781	16,645,490
Amortised cost		
Trade and other receivables	1,002,297	995,547
Financial liabilities		
Amortised cost		
Trade and other payables	1,031,718	856,707

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

9 Function of expense

The Company's function of expenses can be broken down as follows:

	2019	2018
	\$	\$
Information, technology and communications	654,162	588,369
Compliance costs	468,774	399,221
Marketing and advertising	208,887	117,000
Administrative expenses	382,972	471,405
	1,714,795	1,575,995

10 Interest and investment income

	2019	2018
	\$	\$
Interest income (on investments)	510,039	511,660
Dividends	105,616	73,099
Net gain/(loss) on disposal of financial assets	(22,900)	20,475
Net gain/(loss) on fair value movements on financial assets	137,644	79,006
	730,399	684,240

Net gains and losses on fair value movements of financial assets

Gains or losses arising from changes in the fair value of financial assets designated as 'fair value through profit or loss' are presented net in the interest and investment income balance in the period the adjustment arises.

Interest and dividend income

Interest income is accrued using the effective interest method and recognised in the period to which it is earned. Dividend income arising from investments in Australian Equities are also accrued and recognised when declared.

11 Working capital

(a) Capital management

The Company is required to hold liquid financial instruments in order to maintain sufficient capital to comply with APRA's Solvency and Capital Adequacy Prudential Standards under the *Private Health Insurance (Prudential Supervision) Act 2015*. The standards require the fund to maintain liquid assets to meet capital adequacy under stressed scenarios.

The Company's financial assets that are measured through profit or loss are disclosed in note 8, all other financial assets are measured at amortised cost as the assets are being held to collect contractual cash flows - these include trade receivables. Financial liabilities - including trade payables are measured at amortised cost.

(b) Trade and other receivables

	2019	2018
	\$	\$
Contributions in arrears	70,483	75,917
Allowance for impairment	(45,000)	(45,000)
	25,483	30,917
Unclosed Business - Unearned	54,048	35,180
Government rebate scheme	648,925	671,471
Risk equalisation special account	155,167	128,117
Interest receivable	101,264	114,167
GST refundable	16,330	15,695
Sundry receivables	1,080	-
	1,002,297	995,547

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

11 Working capital (continued)

Trade and other receivables accounting policy

Trade and other receivables are recognised initially at fair value and subsequently measured at amortised cost using the effective interest rate method, less provision for impairment. Trade receivables are non-interest bearing and generally due for settlement within 7-30 days.

Collectability of trade and other receivables is reviewed on an ongoing basis. Debts which are known to be uncollectible are written off by reducing the carrying amount directly. A provision for impairment is used where there is objective evidence that the Company will not be able to collect all amounts due according to the original terms of the receivables.

Objective evidence of impairment for contributions in arrears is 63 days past due. Objective evidence of impairment for trade receivables and other receivables is 60 to 90 days past due.

Goods and service taxes accounting policy

Revenues, expenses and assets are recognised net of the amount of goods and services tax (GST), except:

- where the amount of GST incurred is not recoverable from the taxation authority, it is recognised as part of the cost of acquisition of an asset or as part of an item of expense; or

- for receivables and payables which are recognised inclusive of GST.

The net amount of GST recoverable from, or payable to, the taxation authority is included as part of receivables or payables.

Cash flows are included in the statement of cash flows on a gross basis. The GST component of cash flows arising from investing and financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cash flows.

(c) Trade and other payables

	2019	2018
	\$	\$
Risk Equalisation Special Account	-	-
Sundry payables and accrued expenses	1,031,718	856,707
	1,031,718	856,707

Trade and other payables accounting policy

Trade and other payables are recognised initially at fair value and then subsequently measured at amortised cost using the effective interest method. Trade and other payables are unsecured, non-interest bearing and are normally settled within 30 days.

(d) Cash and cash equivalents

	2019	2018
	\$	\$
Cash on hand	849	1,649
Cash at bank	2,249,767	1,512,427
	2,250,616	1,514,076

Cash and cash equivalents accounting policy

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

12 Property, plant and equipment

Reconciliation of movements

	Freehold land & Buildings (at fair value)	Plant and equipment	Total
	\$	\$	\$
Gross Carrying Amount			
Balance as at 1 July 2017	960,000	428,578	1,388,578
Additions	-	74,998	74,998
Revaluation	15,000	-	15,000
Disposals	-	-	-
Balance as at 30 June 2018	975,000	503,576	1,478,576
Additions	-	123,110	123,110
Revaluation	-	-	-
Disposals	-	(113,771)	(113,771)
Balance as at 30 June 2019	975,000	512,915	1,487,915
Accumulated Depreciation			
Balance as at 1 July 2017	42,309	234,289	276,598
Depreciation expense	13,720	54,140	67,860
Revaluation	(56,029)	-	(56,029)
Impairment Expense	-	-	-
Balance as at 30 June 2018	-	288,429	288,429
Depreciation expense	13,720	73,038	86,758
Revaluation	-	-	-
Disposals	-	(57,040)	(57,040)
Balance as at 30 June 2019	13,720	304,427	318,147
Net Book Value			
As on 30 June 2018	975,000	215,147	1,190,147
As on 30 June 2019	961,280	208,488	1,169,768

Property, plant and equipment accounting policy

Freehold land and buildings (excluding investment properties) are stated in the statement of financial position at their revalued amounts, being the fair value at the date of revaluation, less any accumulated depreciation and accumulated impairment losses. Revaluations are performed with sufficient regularity such that the carrying amount does not differ materially from that which would be determined using fair values at the reporting date.

Any revaluation increase arising on the revaluation of such land and buildings is credited to the properties revaluation reserve, except to the extent that it reverses a revaluation decrease for the same asset previously recognised as an expense, in which case the increase is credited to profit or loss to the extent of the decrease previously expensed. A decrease in carrying amount arising on the revaluation of such land and buildings is charged as an expense to the extent that it exceeds the balance, if any, held in the properties revaluation reserve relating to a previous revaluation of that asset.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

12 Property, plant and equipment (continued)

Property, plant and equipment accounting policy (continued)

Depreciation

Depreciation on revalued buildings is recognised in profit or loss. On the subsequent sale or retirement of a revalued property, the attributable revaluation surplus remaining in the properties revaluation reserve is transferred directly to retained earnings.

Freehold land is not depreciated. Fixtures and equipment are stated at cost less accumulated depreciation and accumulated impairment loss. Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives, using the straight-line method, on the following bases:

- Buildings 4% per annum
- Plant and equipment 10% – 33% per annum

The estimated useful lives, residual values and depreciation method are reviewed at the end of each reporting period, with the effect of any changes in estimate accounted for on a prospective basis.

Disposal

The gain or loss on disposal of property, plant and equipment is calculated as the difference between the carrying amount of the asset at the time of disposal and the net proceeds on disposal (including incidental costs). These gains or losses are included in profit or loss and other comprehensive income. When revalued assets are sold, it is Company policy to transfer any amounts included in other reserves in respect of those assets to retained earnings.

13 Intangible assets

	2019	2018
	\$	\$
Computer software		
Cost	149,304	142,339
Accumulated amortisation	(98,608)	(87,384)
	50,696	54,955

Intangible assets - computer software accounting policy

Intangible assets arising from computer software are stated in the statement of financial position at cost less accumulated amortisation.

Amortisation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives, using the straight-line method, at 30-40% per annum

The estimated useful lives, residual values and amortisation method are reviewed at the end of each reporting period, with the effect of any changes in estimate accounted for on a prospective basis.

14 Asset revaluation reserve

	2019	2018
	\$	\$
Opening balance 1 July	71,029	-
Revaluations	-	71,029
Balance 30 June	71,029	71,029

Asset revaluation reserve

The asset revaluation reserve arises on the revaluation of land and buildings. When revalued land or buildings are sold, the portion of the properties revaluation reserve that relates to that asset is transferred directly to retained earnings. Items of other comprehensive income included in the properties revaluation reserve will not be reclassified subsequently to profit or loss.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

15 Employee expenses and entitlements

	2019	2018
	\$	\$
(a) Employee benefits expense		
The Company's employee benefits expense comprises the following:		
Short-term employee benefits		
Salaries and wages	828,979	1,008,345
Directors remuneration and meeting expenses	132,555	110,231
	961,534	1,118,576
Post-employment benefits	82,427	84,509
Total employee benefits expenses	1,043,961	1,203,085
(b) Provisions for employee entitlements		
Current employee entitlements	65,343	57,880
Non-current employee entitlements	11,608	14,390
	76,951	72,270

Short-term and other long-term employee benefits accounting policy

Provision is made for HCI's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

Employee benefits expected to be settled more than one year after the end of the reporting period have been measured at the present value of the estimated future cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may satisfy vesting requirements. Cash flows are discounted using market yields on high quality corporate bond rates incorporating bonds rated AAA or AA by credit agencies, with terms to maturity that match the expected timing of cash flows. Changes in the measurement of the liability are recognised in profit or loss.

16 Key management personnel compensation

The aggregate compensation made to directors and other members of key management personnel of the Company is set out below:

	2019	2018
	\$	\$
Short-term employee benefits		
Salaries and fees	292,618	530,319
Other benefits	-	-
	292,618	530,319
Post-employment benefits		
Superannuation	27,134	35,926

Key management personnel are those who have the responsibility for planning, directing and controlling the activities of the Company and consist of the Directors and the General Manager.

Health Care Insurance Ltd.

Notes to the financial statements

for the year ended 30 June 2019

17 Related party transactions

During the year, HCI received health insurance premiums of \$26,339 (2018: \$27,329) from key management personnel and their relatives on normal commercial terms and conditions. That is to say, on terms and conditions no more favourable than those available to others.

The discount available to HCI directors is no more than what is available to staff and is less than the maximum discount that a health fund is able to offer to members under the *Private Health Insurance Act 2007*.

18 Operating lease arrangements

Lease arrangements

HCI has no operating lease commitments at 30 June 2019.

	2019 \$	2018 \$
Payments recognised as an expense		
Lease and sub-lease payments recognised as an expense	-	-
Non-cancellable operating lease commitments		
No later than 1 year	-	3,342
Later than 1 year and no later than 5 years	-	-
later than 5 years	-	-
	<u>-</u>	<u>3,342</u>

19 Commitments and contingencies

Capital commitments

At balance date the company had \$ nil capital expenditure commitments (2018: \$nil)

Contingent liabilities

At balance date the company had no contingent liabilities

20 Subsequent events

At the date of this report, there were no matters or circumstances that have arisen since the end of the financial year that have significantly affected or may affect the operations of the Company, the result of those operations or the state of affairs of the Company, in future financial years.

21 Corporate information and Members' Guarantee

Health Care Insurance Ltd is a company incorporated under the *Corporations Act 2001* and is limited by guarantee. In the event of the wind up of HCI the constitution states that each member is required to contribute a maximum of \$1 each towards meeting any outstanding obligations of the Company. At 30 June 2019 the number of Member of HCI were 6,264 (2017: 6,656).

HCI is domiciled in Australia. The company's registered office and its principal place of business are as follows:

Registered office:

25 Cattley Street
Burnie, Tasmania

Principal place of business:

25 Cattley Street
Burnie, Tasmania

Health Care Insurance Ltd.

Directors' declaration

for the year ended 30 June 2019

The Directors of the Company declare that:

- (a) in the directors' opinion, there are reasonable grounds to believe that the Company will be able to pay its debts as and when they become due and payable; and
- (b) in the directors' opinion, the attached financial statements and notes thereto are in accordance with the *Corporations Act 2001*, including compliance with accounting standards and giving a true and fair view of the financial position and performance of the Company

Signed in accordance with a resolution of directors made pursuant to s295 (5) of the *Corporations Act 2001*.

On behalf of the Directors



Greg Spinks
Chairman

25 September 2019

Independent Auditor's Report to the Members of Health Care Insurance Ltd

Opinion

We have audited the financial report of Health Care Insurance Ltd (the "Entity"), which comprises the statement of financial position as at 30 June 2019, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion the accompanying financial report of the Entity, is in accordance with the *Corporations Act 2001*, including:

- (i) giving a true and fair view of the Entity's financial position as at 30 June 2019 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards – Reduced Disclosure Requirements and the *Corporations Regulations 2001*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Entity in accordance with the auditor independence requirements of the *Corporations Act 2001* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We confirm that the independence declaration required by the *Corporations Act 2001*, which has been given to the directors of the Entity, would be in the same terms if given to the directors as at the time of this auditor's report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Information

The directors are responsible for the other information. The other information comprises the information included in the Entity's annual report for the year ended 30 June 2019, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent

with the financial report or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Directors for the Financial Report

The directors of the Entity are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Regime and the *Corporations Act 2001* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the ability of the Entity to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Entity or to cease operations, or has no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Entity to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Deloitte Touche Tohmatsu
DELOITTE TOUCHE TOHMATSU



S Dare
Partner
Chartered Accountants
Launceston, 25 September 2019