

# Application to **Suspend Membership** – Financial Hardship



## **If you are experiencing hard times and cannot afford your policy, HIF are here to help.**

There are two different types of suspensions that HIF members are able to apply for if they are experiencing financial difficulties:

### **Option One – Unemployment Suspension:**

You can suspend your membership due to unemployment for a maximum period of 12 continuous months. Supporting documentation in the form of a health care card, supporting documents from Centrelink or other documentation may be reasonably required by HIF.

**Please note:** Your policy may be suspended only where twelve (12) months has elapsed since the reactivation from a previous suspension for the same reason.

### **Option Two – Financial Hardship Suspension:**

If you are not in receipt of Unemployment Benefits, you can still apply to suspend your policy for 12 continuous months on Financial Hardship grounds. A written request including supporting documentation may be reasonably required by HIF.

**Please note:** the following rules apply to both types of suspension:

- Suspension under these fund rules is only available to Australian permanent residents.
- Your membership must be paid up to the date you are requesting the suspension to commence.
- You must have held at least three (3) months continuous membership with HIF prior to requesting the suspension to commence.

Only persons listed on the policy at the time of suspension will qualify for reinstatement.

During the period in which a membership is suspended:

- The membership will not be taken into account for the purpose of premium calculation;
- Benefits are not payable for period of approved suspension, and
- The period does not count for any purpose in relation to the membership, including waiting periods, benefit limitation periods and increased annual limits.

## **Important Information**

### **Are there any tax implications if I suspend my policy?**

If you suspend your membership, you may no longer be exempt from the Medicare Levy Surcharge. We recommend that you contact your Accountant or the Australian Tax Office to find out if possible additional tax will outweigh what you will save by suspending your membership.

### **What do I have to do to reinstate my membership?**

Nothing! We will look after all of this for you. Your policy will be reinstated on the same level of cover held prior to suspension from either the date you have requested on your application, or once the maximum period of approved suspension has been reached (whichever is the earliest date). Contributions will be payable from this date.

### **Will suspending my policy affect my Lifetime Health Cover (LHC) Loading?**

Suspension of your policy due to Financial Hardship or Unemployment will not impact on your existing LHC Loading.

### **Ready to apply for a suspension?**

Please complete the application form overleaf and email or post it to us along with the required supporting documentation.

*Information is correct as at 14 November 2022*

# Application to Suspend Membership – Financial Hardship



## Member details

Member number: \_\_\_\_\_ Title: \_\_\_\_\_  
First name: \_\_\_\_\_ Surname: \_\_\_\_\_  
Street address: \_\_\_\_\_ Suburb: \_\_\_\_\_  
State: \_\_\_\_\_ Postcode: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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## Details of suspension request

**Option One:** Unemployment Suspension

**Option Two:** Financial Hardship Suspension

***Please note:** Supporting documentation in the form of a health care card, supporting documents from Centrelink or other documentation may be reasonably required by HIF, please attach them to avoid possible delays in the process of your request.*

## I request that HIF suspend my cover for the following period

Suspension request from: \_\_\_\_\_ to \_\_\_\_\_

Please provide us with an explanation of your current situation to support you Financial Hardship suspension request.

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## Declaration

Please read the following important information and sign below:

I have read and understood the information contained in this application regarding the qualification criteria for HIF's Suspension rules, general conditions and possible tax implications.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Once you have completed the form, please email it to us at [hello@hif.com.au](mailto:hello@hif.com.au) or mail to Membership Processing, Health Insurance Fund of Australia GPO Box X2221 Perth WA 6847*