

medicare

Application for a Medicare Entitlement Statement

For the purpose of this form, the applicant is the person who is **applying** for the Medicare Entitlement Statement.

When to use this form

The *Income Tax Assessment Act 1936* makes the Medicare levy payable by individuals residing in Australia who are eligible for Medicare. Persons who are **not eligible** for Medicare can apply for an exemption from the Medicare levy in their income tax return.

To apply for an exemption from the Medicare levy, the Australian Taxation Office requires a person to acknowledge that they have been issued with a Medicare Entitlement Statement when completing their income tax return.

Even if a person is not eligible for Medicare, they may still not be eligible for an exemption if they maintain a dependant that is eligible for Medicare. The Australian Taxation Office makes the determination on whether a person is eligible for an exemption.

Persons not eligible for Medicare

Before applying for a Medicare Entitlement Statement, the applicant will need to determine that they were not eligible for Medicare for all or part of the given financial year.

A person may not be eligible for Medicare if, at any point during that given financial year, they:

- were a permanent resident of Australia who
 - had been living outside Australia for 12 months, or more,
 and
 - had not come back to live in Australia permanently
- held a temporary visa and had not applied for permanent residency
- were an Australian citizen who had been living overseas for 5 years or more
- were a New Zealand citizen who spent less than 6 months in Australia within a 12 month period
- were not eligible under a Reciprocal Health Care Agreement.
 Countries include: Belgium, Finland, Italy, Malta, the
 Netherlands, Norway, Slovenia, Sweden and the United
 Kingdom (including Northern Ireland).

To determine Medicare eligibility, visit the Department of Human Services website **humanservices.gov.au/medicareentitlement**

How to apply

- A separate application form is required for each financial year.
 (A financial year runs from 1 July to 30 June.)
- When the application has been assessed and processed we will
 advise of the outcome. If the application is approved we will
 issue a Medicare Entitlement Statement, which will certify that
 the applicant was not eligible for Medicare benefits for a
 specified period. We will also advise if we do not approve the
 application or require more information.

- A person should only apply for a Medicare Entitlement
 Statement for a **previous** financial year. A person should not
 apply for a Medicare Entitlement Statement for the current
 financial year unless they are leaving Australia and will be
 submitting a final income tax return before the end of the
 financial year.
- If a tax agent prepares the application, the tax agent must complete the tax agent details in this application form.

Documents required

The following documents must be submitted when lodging this form:

Failing to do so will result in a delay in the assessment of the application.

- a certified copy of the photo page of the applicant's passport.
- visa evidence for the given financial year endorsed in passport/email or letter from the Department of Home Affairs.

Documents that **may be** required depending on the applicant's circumstances:

- certified copy of the applicant's current or expired European Health Insurance card or other evidence of health insurance.
- letter/email from the Department of Home Affairs confirming an application for permanent residency has been lodged, approved, refused or withdrawn.
- letter/email from the Migration Review Tribunal confirming an appeal has been lodged against a refused decision.

Certified documents

What is a certified document?

A certified copy is a copy of an original document that has been verified as being a true copy after the original document has been sighted by an authorised person.

Who can certify documents?

A number of people can certify documents. Examples include:

- legal practitioners
- medical practitioners
- pharmacists
- police officers
- justice of the peace.

For a complete list of people who can certify documents, go to ag.gov.au/Publications/Statutory-declarations/Pages/List-of-authorised-witnesses.aspx

For more information

For more information about the Medicare Entitlement Statement, go to humanservices.gov.au/medicareentitlement



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Application for a Medicare Entitlement Statement

Filling in this form	6 Provide the applicant's name as it appears on their passport
 Please use black or blue pen Print in BLOCK LETTERS Where you see a box like this Go to 5 skip to the 	Dr
question number shown. You do not need to answer the questions in between.	First given name
For instructions on how to complete this form on screen, see 'Instruction' button on page 1.	Second given name
1 Is a tax agent completing this application on the applicant's behalf?	
No Go to 5 Yes	7 Applicant's gender Male
2 Does the applicant give permission for their tax agent to supply and receive information related to this application? No	Female Applicant's date of birth
Yes	/ /
Tax agent's details	Applicant's daytime phone number ()
When sending documents by email, documents: • must be in PDF format, and	Applicant's email
must not be password protected. If you are sending applications for multiple applicants, a separate	@
email must be sent for each applicant. If the applicant has multiple applications for different financial years, they can be sent in one email.	10 Applicant's residential address in Australia
Questions 3 and 4 must be completed by the tax agent. 3 Name of company	
Name of company	Postcode
Name of tax agent who is completing this application	 This question must be completed if one of the following applies: applicant has left Australia permanently, or
Tax agent's daytime phone number	applicant is in Australia but their postal address is different to their residential address, or
	a tax agent is completing this application.
4 Have you read and understood the Privacy notice contained in this form?	What postal address would the applicant like all correspondence sent to?
Yes 🗌	
Applicant's details	
	Postcode
The applicant is the person who is applying for the Medicare Entitlement Statement.	Country (if not Australia)
5 Does the applicant have a current or expired Medicare card?	Correspondence related to this application will be forwarded to this address.
Yes Provide the applicant's Medicare card number and reference number	12 Is the postal address provided in question 11 a tax agent's address?
Applicant's Medicare card number	No 🗆

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Eli	gibility for Medic	care			oplication 2 (if the applicant has lodged more than one ormanent residency application)	
13	What was the applimore before arrivin	icant's country of residence for (ng in Australia?	6 months or	A	Date application lodged / /	
14	(State total number	applicant residing in that country r of years and/or months in num			Attach evidence (letter/email) from the Department of Home Affairs confirming the lodgment date.	
15	Does the applicant insurance in Belgiu (e.g. European Heal A.I.R.E registration) No Yes	hold current or expired health im, Italy, the Netherlands, Norwalth Insurance card, Tessera Sani ? Attach certified copies of the meansurance documentation with the	y or Slovenia taria or dical	С	considered by the Department of Home Affairs, still ongoing? No Yes Go to 18	s:
16	Is the applicant from	m Finland, Malta or Norway?			Withdrawn Date / / Go to	
	No D				Refused Date / / Go to	
17	No Has the applicant lo	applicant enter Australia on a sto Yes odged an application for permar It visa) with the Department of H	nent residency		Attach evidence (letter/email) from the Department of Home Affairs confirming the permanent residency application was approved withdrawn or refused.	
	this includes applic 820/801) and (subc No Go to 18 Yes Give deta	8	as (subclass	D		
	Application 1	ans bolow			Yes Attach evidence that the applicant has lodged an appeal.	
	B Is the applicate considered by ongoing?	ch evidence (letter/email) from t artment of Home Affairs confirm ment date. Ition for permanent residency the y the Department of Home Affair	ing the 18 at is being	with		vith
	No L	o to 18		100	Date application lodged	
	C Indicate if the	e application for permanent resid NE only	_		/ /	
	Approved [Date / /	Go to 19 Cla	imir	ing period	_
	Withdrawn	Date / /	Go to 19 19	•	A separate application must be completed for each financial year.	
	Refused	Date / /	Go to D	•		,
		ch evidence (letter/email) from th artment of Home Affairs confirm		•	All periods must be in the same financial year.	
	perm	nanent residency application was drawn or refused.		Whic	nich financial year is the applicant applying for?	
		cant lodged an appeal against tl	hat	1 Ju	July 20 to 30 June 20	
	decision?	and the same supplies and supplies the		G	Attach evidence of visa - endorsed in passport/ema or letter from the Department of Home Affairs.	ail
	No Lyes D	Attach evidence that the has lodged an appeal.	applicant 20		the applicant leaving Australia permanently before the en- e current financial year?	d of

Yes Expected departure date

		-	I declare that:
21	Before submitting an application make sure that:		I have attached all relevant documents.
	A separate application is lodged for each financial year (if applicable)		 the information I have provided in this form is complete and correct.
	All questions in the form have been completed		 for the period(s) specified in question 19, I was a resident of Australia for taxation purposes, and at the same time I
	The application form has been signed and dated Which of the following documents are you providing with this application?		was not eligible for Medicare benefits, nor Medicare benefits under a Reciprocal Health Care Agreement.
			I understand that:
	A certified copy of the photo page of the applicant's passport		• giving false or misleading information is a serious offence.
			 information regarding this application is exchanged
	Visa evidence - endorsed in passport/email or letter from the Department of Home Affairs		between the Australian Government Department of Human Services and the Australian Taxation Office.
	A certified copy of evidence of a current or expired Health Insurance card/medical insurance card or letter showing expiry date (if you answered Yes at question 15)		 the Australian Government Department of Human Services may contact the Department of Home Affairs to obtain information relating to my immigration status (if required). Applicant's signature
	A letter/email from the Department of Home Affairs		L
	confirming application for permanent residency lodgment date(s)		Date
	(if you answered Yes at question 17A)		
	A copy of a letter/email from the Department of Home		
	Affairs confirming the application for permanent residency		Returning your form
	has been either approved, withdrawn or refused (if you answered No at question 17B)		Check that all required questions are answered and that the form
			is signed and dated.
	A copy of a letter/email from the Migration Review Tribunal confirming an appeal has been lodged		Scan and email your completed application form and other
	(if you answered Yes at question 17D)		documents as a PDF to MES@humanservices.gov.au
			All documents sent by email:
		100	

Obligations

Checklist

22 Privacy notice

Your personal information is protected by law (including the Privacy Act 1988) and is collected by the Australian Government Department of Human Services for the assessment and administration of payments and services. This information is required to process your application or claim.

Your information may be used by the department, or given to other parties where you have agreed to that, or where it is required or authorised by law (including for the purpose of research or conducting investigations).

You can get more information about the way in which the department will manage your personal information, including our privacy policy, at humanservices.gov.au/privacy

must be in PDF format, and

23 Declaration

must **not** be password protected.

If you are sending applications for multiple applicants, a separate email must be sent for each applicant. If the applicant has multiple applications for different financial years, they can be sent in one email.

Please be aware that there may be risks with sending personal information through unsecured networks and email channels.

or

Post to:

Department of Human Services Medicare Entitlement Statement Unit GPO Box 9822 ADELAIDE SA 5001