

1987/216



**THE SOCIAL SECURITY (HOSPITAL BENEFITS) REGULATIONS  
1979, AMENDMENT NO. 6**

---

PAUL REEVES, Governor-General

**ORDER IN COUNCIL**

At Wellington this 20th day of July 1987

Present:

HIS EXCELLENCY THE GOVERNOR-GENERAL IN COUNCIL

PURSUANT to the Social Security Act 1964, His Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, hereby makes the following regulations.

---

**REGULATIONS**

**1. Title and commencement**—(1) These regulations may be cited as the Social Security (Hospital Benefits) Regulations 1979, Amendment No. 6, and shall be read together with and deemed part of the Social Security (Hospital Benefits) Regulations 1979\* (hereinafter referred to as the principal regulations).

(2) These regulations shall come into force on the 1st day of August 1987, and shall apply to hospital treatment provided on or after that date. In respect of hospital treatment provided before that date, the principal regulations shall continue to apply as if these regulations had not been made.

\*S.R. 1979/144

Amendment No. 1: (Revoked by S.R. 1981/274)  
Amendment No. 2: (Revoked by S.R. 1984/227)  
Amendment No. 3: (Revoked by S.R. 1984/227)  
Amendment No. 4: (Revoked by S.R. 1986/271)  
Amendment No. 5: S.R. 1986/271

**2. Interpretation**—(1) Regulation 2 of the principal regulations is hereby amended by revoking the definitions of the terms “geriatric patient” and “long-term medical patient”, and substituting the following definitions:

“‘Disabled patient’ means a person who—

“(a) Has not attained the age of 65 years; and

“(b) Is a patient in a private hospital; and

“(c) In the opinion of the specialist attending that person or (where there is no such specialist) the medical practitioner attending that person, is suffering from a chronic disabling illness that requires treatment 24 hours a day; and

“(d) In the opinion of the Medical Officer of Health, formed after consideration of a written assessment made by the specialist attending that person or (where there is no such specialist) the medical practitioner attending that person, could not more appropriately obtain, elsewhere than in a hospital, the treatment that that person requires:

“‘Geriatric patient’ means a person who—

“(a) Has attained the age of 65 years; and

“(b) Is a patient in a private hospital; and

“(c) In the opinion of the Medical Officer of Health, formed after consideration of a written assessment made by the specialist attending that person or (where there is no such specialist) the medical practitioner attending that person, could not more appropriately obtain, elsewhere than in a hospital, the treatment that that person requires:

“‘Hospice patient’ means a person who—

“(a) In the opinion of the specialist attending that person or (where there is no such specialist) the medical practitioner attending that person, is suffering from a terminal illness; and

“(b) Is a patient in a private hospital.”

(2) The said regulation 2 is hereby amended by inserting, after the definition of the term “private hospital”, the following definition:

“‘Specialist’ means a medical practitioner who is entered in the register of specialists kept under the Medical Practitioners (Registration of Specialists) Regulations 1971†:”.

**3. Fees payable**—(1) Regulation 3 of the principal regulations is hereby amended by revoking subclause (1), and substituting the following subclause:

“(1) In respect of hospital treatment afforded in any private hospital there shall be payable by the Department—

“(a) For hospital treatment (other than as a surgical patient) afforded to a disabled patient, the sum of \$27.75 for every day on which treatment has been afforded:

“Provided that the said sum shall also be payable in respect of each day (not exceeding 2 days in any period of 1 month) during which the disabled patient is absent from the hospital on leave:

“(b) For hospital treatment afforded to a geriatric patient, the sum of \$27.75 for every day on which treatment has been afforded:

“Provided that the said sum shall also be payable in respect of each day (not exceeding 2 days in any period of 1 month) during which the geriatric patient is absent from the hospital on leave:

“(c) For hospital treatment (other than as a surgical patient) afforded to a hospice patient, the sum of \$27.75 for every day on which treatment has been afforded:

“(d) Subject to section 105 of the Social Security Act 1964, for hospital treatment afforded to a maternity patient, the sum of \$31 for every day on which treatment has been afforded:

“Provided that for the purposes of this subclause the day of admission to hospital and the day of discharge from hospital shall together be counted as 1 day, except where the day of discharge immediately follows the day of admission.”

(2) Regulation 3 (2) of the principal regulations is hereby amended by omitting the words “paragraph (b) instead of paragraph (e)”, and substituting the words “paragraph (d)”.

(3) The Social Security (Hospital Benefits) Regulations 1979, Amendment No. 5 are hereby consequentially revoked.

P. G. MILLEN,  
Clerk of the Executive Council.

---

#### EXPLANATORY NOTE

*This note is not part of the regulations, but is intended to indicate their general effect.*

These regulations, which come into force on 1 August 1987, abolish the present benefits payable in respect of medical and surgical treatment in private hospitals, and introduce new benefits. The benefits now payable are for disabled patients (under 65), geriatric patients (65 and over), hospice patients, and maternity patients, all of which terms are defined in the regulations. Only geriatric patients and maternity patients will receive benefits for surgical treatment.

---

Issued under the authority of the Regulations Act 1936.

Date of notification in *Gazette*: 23 July 1987.

These regulations are administered in the Department of Health.