



**THE SOCIAL SECURITY (HOSPITAL OUTPATIENT  
TREATMENT) FEES REGULATIONS 1991, AMENDMENT NO. 1**

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CATHERINE A. TIZARD, Governor-General

ORDER IN COUNCIL

At Wellington this 2nd day of March 1992

Present:

THE HON. P. R. BURDON PRESIDING IN COUNCIL

PURSUANT to section 123 of the Social Security Act 1964, Her Excellency the Governor-General, acting by and with the advice and consent of the Executive Council, hereby makes the following regulations.

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REGULATIONS

**1. Title and commencement**—(1) These regulations may be cited as the Social Security (Hospital Outpatient Treatment) Fees Regulations 1991, Amendment No. 1, and shall be read together with and deemed part of the Social Security (Hospital Outpatient Treatment) Fees Regulations 1991\* (hereinafter referred to as the principal regulations).

(2) These regulations shall be deemed to have come into force on the 1st day of February 1992, and shall apply in respect of prescribed outpatient treatment provided on or after that date.

**2. New regulations inserted**—The principal regulations are hereby amended by inserting, after regulation 4, the following regulations:

“4A. **Rates chargeable if card not produced**—If a person—

“(a) Is entitled to hold a Group 1 card or a Group 2 card; and

“(b) That person or any dependent child of that person receives prescribed outpatient treatment; and

“(c) Is unable to produce that card to the area health board—the area health board may charge that person at the rate payable by a person who is not entitled to hold a card.

“4B. **Refunds**—(1) Where a fee is charged under these regulations for prescribed outpatient treatment provided to a person and that person, at that time,—

“(a) Was entitled to hold a Group 1 card or a Group 2 card; or

“(b) Was a dependent child of a person entitled to hold a Group 1 card or a Group 2 card; and

“(c) Was not in possession of, or could not produce, the relevant card because of circumstances reasonably beyond his or her control—

and the fee charged is greater than that chargeable under these regulations to a holder of that appropriate card, the Director-General of Social Welfare may refund to the person who paid the fee the difference between those amounts.

“(2) The Director-General of Social Welfare shall not make a refund under subclause (1) of this regulation unless—

“(a) The person claiming the refund produces a receipt or other evidence of having paid the greater fee to the area health board; and

“(b) The Director-General of Social Welfare is satisfied that, at the time of the provision of that prescribed outpatient treatment,—

“(i) The person treated was entitled to hold a Group 1 card or a Group 2 card, or was the dependent child of a person entitled to hold a Group 1 card or a Group 2 card; and

“(ii) The person provided with the treatment was not in possession of, or could not produce, the relevant card because of circumstances reasonably beyond his or her control.”

MARIE SHROFF,  
Clerk of the Executive Council.

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#### EXPLANATORY NOTE

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

These regulations, which are deemed to have come into force on 1 February 1992,—

(a) Empower area health boards to charge persons who do not produce a Group 1 card or a Group 2 card the fee payable by a person not entitled to hold a card:

(b) Provide for a refund by the Director-General of Social Welfare to be paid to a person who has paid a higher fee than the person should have paid because of not producing a card.

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Issued under the authority of the Acts and Regulations Publication Act 1989.

Date of notification in *Gazette*: 5 March 1992.

These regulations are administered in the Department of Health.