NSW Ministry of Health



Application for urgent interim and final authorisation under s88(1) of the *Competition* and *Consumer Act 2010* (Cth)

Lodged by:

The State of New South Wales as represented by the Ministry of Health

29 April 2020

1 Application for authorisation

1.1 Background

This application is made to the Australian Competition and Consumer Commission (**ACCC**) by the State of New South Wales, as represented by the Ministry of Health (the **Ministry**).

It is made for the benefit of the following parties who are engaged or propose to become engaged in the Proposed Conduct:

- 1 State of New South Wales as represented by the Ministry;
- New South Wales Public Health Organisations, in respect of public hospitals and healthcare facilities in the NSW public health system (**Public Health Organisations**);
- 3 the Australian Private Hospitals Association and Day Hospitals Australia (Representative Bodies);
- 4 the private healthcare operators (**Private Operators**) identified in **Annexure 1**; and
- 5 any other person notified to the ACCC as intending to engage in the Proposed Conduct

(together, the Parties).

As the ACCC is aware, the Australian Federal Government has put in place a range of temporary measures to increase the capacity of public and private health services to respond to the COVID-19 pandemic (the **Pandemic**). These temporary measures require private healthcare providers to integrate with state and territory healthcare facilities as part of the response to the Pandemic, and also restrict them from performing some non-urgent elective surgeries. In return for this integration, the Federal Government has guaranteed the viability of private healthcare providers.

To facilitate the integration, private healthcare providers will enter into partnership agreements with state and territory governments to make infrastructure, medical equipment and supplies, workforce and additional resources fully available to those governments.

The Ministry is seeking authorisation to implement this integration of health services in New South Wales by:

- entering and giving effect to partnership agreements with private healthcare providers;
 and
- with the Public Health Organisations, coordinating the provision of healthcare services and the sharing and procurement of resources (including medical equipment, supplies and staff) across private and public healthcare facilities.

We note that the ACCC has already granted interim authorisation to a number of states and to the Northern Territory for the integration and coordination of public and private healthcare facilities through substantially similar partnership arrangements. As is the case in those jurisdictions, the implementation of this integrated and coordinated health response to the Pandemic will result in significant public benefits in New South Wales.

1.2 Application for urgent interim authorisation and final authorisation

The Ministry is applying for urgent interim authorisation and final authorisation under section 88(1) of the *Competition and Consumer Act 2010* (Cth) (**CCA**).

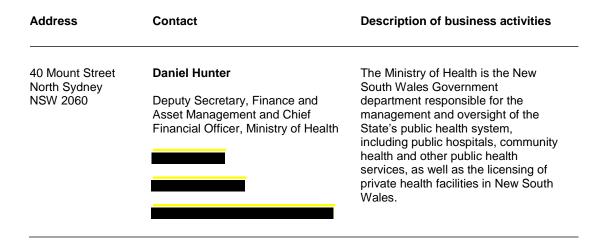
To implement the Federal Government's integration requirements as soon as possible and ensure that the NSW healthcare system can continue to efficiently and effectively respond to the Pandemic, the Ministry requests that interim authorisation be granted as a matter of urgency.

¹¹ Authorisations AA1000491-1, AA1000493-1, AA1000498-1, and AA1000499-1

2 Parties to the Proposed Conduct

2.1 Applicant

The State of New South Wales as represented by the Ministry of Health.



2.2 Email address for service of documents in Australia

Contact: Sarah Benbow (Partner, Herbert Smith Freehills)

Email address:

Telephone: T

M

2.3 Details of other persons who are engaged, or propose to become engaged, in the Proposed Conduct

In addition to the Ministry, the other persons who are engaged or who are likely to engage in the Proposed Conduct are identified in **Annexure 1**.

The Ministry may enter into separate partnership agreements with the Private Operators listed in Annexure 1.

3 Partnership agreements with Private Operators

The Federal Government measures requiring the integration of public and private healthcare facilities and guaranteeing the viability of private healthcare providers are critical to ensuring that each state and territory is in the best position to manage the increased demand for health care expected to result from the Pandemic and can provide the highest level of care to patients. These measures maximise the resources available to state and territory governments to meet the potential demand for healthcare during the Pandemic.

It is also possible that many private healthcare providers could have to reduce operations and stand down staff and resources, which would threaten their ongoing viability. This could be the case even when the present restrictions on non-urgent elective surgeries are eased on 27 April 2020,² as private healthcare providers will still be required to make their infrastructure,

² On 21 April 2020, the Prime Minster announced that, from 27 April 2020, category 2 and some important category 3 procedures can recommence across the public and private hospital sectors.

equipment and services available to the public sector and they are unlikely to return to normal (pre-Pandemic) operations while the Pandemic's effects are being felt.

The integration of private and public healthcare facilities will enable the Ministry to:

- maximise the capacity and resources of the NSW healthcare system, thereby
 minimising the risk that there will be insufficient capacity and resources to respond to
 the healthcare needs of patients during the Pandemic;
- provide healthcare services and manage equipment, medical supplies and staff in an efficient and effective manner; and
- support the viability of private healthcare providers in New South Wales to ensure that they can maintain their operations during, and following, the Pandemic.

3.1 Objectives of partnership agreements

The Ministry expects to separately enter into partnership agreements with individual Private Operators. The objectives of these partnership agreements will include:

- (a) integrating the Private Operators with the the Ministry's and the Public Health Organisations' response to the Pandemic to provide health services in accordance with their individual capabilities and capacities;
- (b) ensuring the viability of Private Operators during the Pandemic so that they are able to resume operations once it ends;
- ensuring that Private Operators make available sufficient capacity and resources and provide the healthcare services that are required by the Ministry or the Public Health Organisations to respond to the Pandemic;
- ensuring that the Private Operators provide healthcare services in accordance with standards of safety, quality and timeliness, including that patients are treated in the most appropriate setting to optimise health outcomes;
- (e) coordinating equipment, medical supplies and staffing resources to support the Ministry's and the Public Health Organisations' responses to the Pandemic;
- (f) ensuring that the Ministry and the Public Health Organisations obtain healthcare services and access to Private Operators' facilities, equipment and workforce in an efficient, cost-effective and flexible manner; and
- (g) collaborating in an environment that fosters innovation, continuous improvement, cost efficiency, transparency and open, honest and timely communication.(the **Objectives**).

3.2 Key features of partnership agreements

The Ministry expects to enter into substantially similar partnership agreements with each Private Operator. The key features of these agreements will include:

- (a) The Ministry will provide funding to the Private Operator on the condition that they provide certain services to the Ministry and Public Health Organisations, including:
 - (1) clinical services that are required to treat a patient referred to or transferred to the Private Operator by or one of the Public Health Organisations;
 - the provision of appropriate facilities, resources, supplies and other support services (including where the clinical treatment within the private facility is provided by clinicians from a Public Health Organisation); and
 - (3) any other Pandemic support services that are required by the Ministry or Public Health Organisations and that the Private Operator is capable of providing;
- (b) the Private Operator must maintain sufficient capacity and resources to meet the likely and anticipated volume of services required by the Ministry or Public Health Organisations;

- (c) the Ministry or Public Health Organisations may require the Private Operator to participate in service control, integration and continuity groups established by the Ministry to facilitate and share information about the coordination of healthcare services across the Private Operators and Public Health Organisations;
- (d) the Private Operator will retain operational control of their facilities (except in an emergency or a major default), however clinicians from a Public Health Organisation may perform clinical services at private facilities;
- (e) subject to its obligations to provide capacity, resources and services to the Ministry and Public Health Organisations, the Private Operator will continue to provide services to private patients in accordance with its normal business practices;
- (f) public patients will not be required to pay for any cost of treatment by, or using the resources or facilities of, a Private Operator; and
- (g) to the extent that it is in the control of the Private Operator, it must maintain the full workforce at each of its facilities and do all things reasonably necessary to ensure that it remains viable during the Pandemic and can resume operations when the Pandemic ends.

4 Conduct to be authorised

4.1 Proposed Conduct

The Ministry is seeking interim and final authorisation for it, the Private Operators, Public Health Organisations and the Representative Bodies to cooperate in implementing and giving effect to the integrated provision of healthcare across New South Wales, in accordance with the partnership agreements.

This will involve the following Proposed Conduct:

- (a) negotiating and entering into partnership agreements with the Private Operators;
- (b) consistent with the Objectives, coordinating:
 - (1) service and patient allocation between the Private Operators and Public Health Organisations;
 - (2) the restriction of the type of services provided by the Private Operators, or their capacity to provide services;
 - (3) the sharing, and allocation of resources, including staff and medical supplies and equipment, between the Private Operators and Public Health Organisations;
- (c) where it is necessary to facilitate the efficient integration and coordination of healthcare services across New South Wales and give effect to the partnership agreements, engaging in coordinated group discussions and sharing information with some or all of the Private Operators, Public Health Organisations and the Representative Bodies; and
- (d) engaging in any other conduct that is necessary to facilitate the efficient integration of healthcare services across New South Wales and give effect to the partnership agreements, at the request or direction of the Ministry or Public Health Organisations.

(the Proposed Conduct).

Authorisation is not sought for any coordination or agreement between Private Operators, including through the Representative Bodies, other than as requested or directed by the Ministry or Public Health Organisations, to give effect to the partnership agreements. The partnership agreements are not intended to permit the Private Operators to coordinate the pricing of services. They are also not intended to affect any competitive processes concerning the provision of services to private patients by the Private Operators.

As the ACCC is aware from the similar authorisation applications made in other jurisdictions, the Proposed Conduct is necessarily broad to ensure that the NSW healthcare system can respond quickly, effectively and efficiently to the rapidly evolving and unknown impacts of the Pandemic, within the parameters of the partnership agreements. However, the Ministry recognises the ACCC's desire for there to be sufficient transparency over the integration arrangements in these circumstances and is prepared to provide updates to the ACCC on an agreed basis.

While the Ministry does not intend to enter into a partnership agreement with the Representative Bodies, the Representative Bodies may facilitate communication and cooperation between the the Ministry, Public Health Organisations and Private Operators regarding the negotiation and implementation of partnership agreements.

4.2 Provisions of the *Competition and Consumer Act 2010* (Cth) that may apply to the Proposed Conduct

The relevant provisions of the *Competition and Consumer Act 2010* (Cth) that may apply to the Proposed Conduct are:

- Division 1 of Part IV (cartel conduct);
- Section 45 (contracts, arrangements or understandings that restrict dealings or affect competition);
- Section 45 (concerted practices);
- Section 46 (misuse of market power); and
- Section 47 (exclusive dealing).

4.3 Term of authorisation

Given the present uncertainty concerning the likely duration of the Pandemic and therefore the need for an integrated healthcare response, authorisation is initially sought for 12 months from the date of the ACCC's final determination. If the Pandemic and its effects continue beyond this period, it may be necessary for this term to be extended.

However, the Ministry does not intend that the Proposed Conduct will extend beyond the period necessary to respond to the Pandemic.

4.4 Persons who may be impacted by the Proposed Conduct

The following classes of persons may be impacted by the Proposed Conduct:

- public and private hospitals;
- individuals in New South Wales who may require healthcare services;
- healthcare workers in both public and private hospitals; and
- suppliers and potential suppliers of medical equipment, supplies or services.

5 Significant net public benefits

5.1 Substantial public benefits

As recognised by the ACCC in previous interim authorisation decisions relating to for substantially similar conduct,³ the Proposed Conduct will give rise to significant public benefits, including:

(a) enabling an effective and efficient integrated medical response to the Pandemic in New South Wales;

³ See Authorisations AA1000491-1,AA1000493-1, AA1000498-1 and AA1000499-1.

- (b) reducing the likelihood that Private Operators will have to reduce their operations as a result of funding issues caused by the impact of the Pandemic or Federal Government restrictions;
- (c) ensuring that there is sufficient healthcare available in New South Wales to respond to the anticipated clinical needs of patients during the Pandemic, so that all New South Wales patients will receive appropriate healthcare;
- (d) providing the Ministry and Public Health Organisations with service capacity oversight to distribute service delivery to meet periods of peak demand and minimise patient transfers between healthcare facilities, which will allow patients to receive the best possible care available at the time, including by ensuring there are adequate intensive care facilities available;
- (e) ensuring, to the extent possible, that medical and protective equipment and relevant supplies are available where needed to respond to the Pandemic, and
- (f) supporting Private Operators to continue operations and retain staff during and after the Pandemic, to ensure competition for the provision of private health services is preserved and consumers continue to have a choice of private or public care.

5.2 Net public benefits

The Ministry considers that no public detriments will arise from the Proposed Conduct and that it will create significant net public benefits.

The Proposed Conduct is unlikely to materially reduce competition in the supply of private hospital services given usual operations of Private Operators have been impacted by the Pandemic (including by the Federal Government measures). As described in this application, an Objective of the partnership agreements and the Proposed Conduct is to support the Private Operators in remaining viable during and following the Pandemic, thereby preserving competition between them for the future.

Given the exceptional circumstances brought about by the Pandemic, the proposed coordination of services across the Private Operators, and any sharing of information between them to facilitate this, is unlikely to be meaningful when the Pandemic ends and ordinary operations resume.

In these circumstances, the Proposed Conduct will lead to significant net public benefits.

6 Conclusion

For the reasons set out above, the Ministry applies for:

- Authorisation of the Proposed Conduct for a period of 12 months from the date on which authorisation is granted.
- Urgent interim authorisation, until the final authorisation commences.

Annexure 1 – Details of other persons who are engaged, or propose to become engaged, in the Proposed Conduct

In addition to the Ministry, the persons who are engaged or who are proposed to become engaged in the Proposed Conduct are:

The following New South Wales private healthcare operators (and their related bodies corporate) (**Private Operators**):

Overnight facilities

- Adventist Healthcare Limited
- Alpha Pacific Hospitals Pty Ltd
- Alpha Westmead Private Hospital Pty Limited
- Alwyn Holdings Pty Ltd
- AME Hospitals Pty Ltd
- AME Properties Pty Ltd
- Armidale Hospital Pty Limited
- Australian Hospital Care (Lady Davidson) Pty Ltd
- Bondi Newco Pty Ltd
- Brisbane Waters Administration Pty Limited
- Calvary Health Care Riverina Limited
- Captia Pty Limited
- Central Coast Private Hospital Pty Ltd
- Central Lakes Hospitals Pty Ltd
- Central West Medical Group Pty Ltd
- Charlestown Private Hospital Pty Ltd
- Delmar Private Hospital Pty Ltd
- East Sydney Day Hospital Pty Ltd
- Eastern Suburbs Private Hospital Pty Ltd
- Forster Private Hospital Pty Ltd
- Gordon Clinic Pty Limited
- HCOA Operations (Australia) Pty Limited
- Health Care Corporation Pty Ltd
- Healthe Care Dubbo Pty Ltd
- Healthe Care Hirondelle Pty Ltd
- Healthe Care Lingard Pty Ltd
- Healthe Care North Gosford Pty Ltd
- Health Care Speciality Holdings Pty Ltd
- Health Care Sugrical Holings Pty Ltd
- Healthscope Operations Pty Ltd
- Herglen Pty Ltd
- Hurstville Private Pty Ltd
- Hyperbaric Health Pty Ltd

- Insight Newco Pty Ltd
- Kaizen Hospitals (Holroyd) Pty Limited
- Kaizen Hospitals (Malvern) Pty Limited
- Kogarah Private Hospital Pty Ltd
- Lakeview Private Hospital Pty Ltd
- Lifehouse Australia Limited as Trustee for the Lifehouse Australia Trust
- Macquire Health Corporation Corporation Limited
- Macquarie Hospital Services Pty Ltd
- Maitland Private Hospital Pty Ltd
- Mayo Healthcare Group Pty Ltd
- Minchinbury Community Private Hospital Pty Limited
- MQ Health Pty Limited
- Mt Wilga Pty Ltd
- NBH Operator Co Pty Ltd
- Newcastle Private Hospital Pty Limited
- North Shore Private Hospital Pty Limited
- P.O.W. Hospital Pty Limited
- Peninsula Health Care Pty Limited
- Phiroan Pty Ltd
- Pittwatter Hospital Services Pty Ltd
- Presbyterian Church (NSW) Property Trust
- President Private Hospital Pty Limited
- Pruinosa Pty Ltd
- Ramsay Health Care Australia Pty Ltd
- Royal Rehabilitation Centre Sydney
- RR Private Limited
- Shellharbour Private Hospital Pty Limited
- Sidbeal Pty Ltd
- South Coast Private Pty Limited
- St John of God Hawkesbury District Health Campus Ltd
- St John of God Health Care Inc
- St Luke's Care
- St Vincent's Private Hospitals Ltd
- Sutherland Heart Clinic Pty Ltd
- Sydney Surgery Centre Pty Ltd
- The Congregation of the Religious Sisters of Charity Australia
- The Hills Clinic Pty Ltd
- The Hunter Valley Private Hospital Pty Ltd
- Trustees of the Roman Catholic Church of Diocese of Lismore
- Vexal Pty Ltd
- Waratah Private Hospital Pty Ltd

- Wesley Community Services Limited
- Westmead Rehabilitation Hospital Pty Ltd
- Wolper Jewish Hospital
- Woodose Pty Ltd

Day only facilities

- AAC Norwest Day Surgery Pty Ltd
- Albury Day Surgery Pty Ltd
- AMJO Medial Services Pty Ltd
- Andrew Chang Services Pty Ltd
- Angelo Tsirbas
- B. Braun Avitum Australia Pty Ltd
- Baardon Medical Services Pty Ltd
- Betryan Investments Pty Ltd
- Bredd Pty Limited
- Calvary Health Care Riverina Limited
- Campsie Day Surgery Pty Ltd
- Central Coast Surgery Pty Ltd
- Centre for Digestive Diseases Pty Ltd
- CFC Global Pty Ltd
- City West Day Surgery Pty Ltd
- Coffs Harbour Day Hospital Pty Ltd
- Cosmos Cosmetic Day Surgery Pty Ltd
- Cura Newco 5 Pty Ltd
- Dalmarte Pty Ltd
- Dee Why Endoscopy Pty Ltd
- Dr R Fitzsimons, Jennifer Arnold Pty Ltd, S.T. Chung & Co Pty Ltd, S M D M
 Pty Ltd, Dev Jyoti Pty Ltd
- Drs S & N Sachdev
- Duer Investments Pty Limited
- Eastern Heart Clinic Pty Limited
- Edward Sun Proprietary Limited, Richard Foster Pty Limited
- Elida Holdings Pty Ltd
- Endoscopy Service Pty Ltd
- Felpet Pty Ltd
- Fresenius Medical Care Australia Pty Ltd
- Galome Pty Ltd
- Genea Limited
- Genesis Cancer Care Victoria Pty Ltd
- Germoline Pty Ltd
- Ghabrial Medical Services Pty Ltd
- Hamilton Day Surgery Pty Ltd

- Hathorn Holdings Pty Ltd
- HCoA Operations (Australia) Pty Limited
- Healthwoods Day Surgery Pty Ltd
- Hereward Pty Ltd
- Hodgkinson, Darryl James
- Idameneo (123) Pty Ltd
- Integrated Clinical Oncology Network Pty Ltd
- IVF Australia Pty Ltd
- Kearns & Smith Eye Services Pty Ltd
- Kogarah Day Surgery Pty Ltd
- Lacular Pty Limited
- Lau, Dr A T S
- Lithgow Community Private Hospital Limited
- Liverpool Day Surgery Pty Ltd
- Luke Hazell Pty Ltd
- Madison Day Surgery Pty Ltd
- Marie Stopes International
- Mark Paul Kohout
- Miranda Day Surgery Pty Limited
- NDH Newco 1 Pty Ltd
- Newcastle Endoscopy Centre Pty Limited
- Newcastle Eye Hospital Pty Limited
- Newland Street Specialist Centre Pty Ltd
- Nexus Day Hospitals Pty Ltd
- Northern Cancer Institute (Frenchs Forest) Pty Limited
- Northern Cancer Institute Pty Ltd
- Oopchar Trading Pty Ltd
- Parramatta Eye Centre Pty Ltd
- PDS Investment Holdings Pty Limited
- Peter Anthony Martin Pty Ltd
- Port Macquarie Ophthalmic Surgery Pty Ltd
- Poruby Pty Limited
- Presmed Australia Pty Ltd
- Radiation Oncology Associates Pty Limited
- Ramsay Health Care Australia Pty Ltd
- Ranchbelt Pty Limited
- Randwick Endoscopy Centre Pty Ltd
- Regional Imaging Limited
- Riverina Cancer Care Centre Pty Ltd
- Shewhing Pty Limited
- Sight for Life Foundation

- Skin & Cancer Foundation Australia
- SMDCC Pty Limited
- South Medical Pty Ltd
- South Western Day Surgical Centre Pty Ltd
- Southern Suburbs Day Procedure Centre Pty Limited
- Southside Cancer Care Centre Pty Ltd
- Sydney Day Surgery Prince Alfred Pty Limited
- Sydney Vision Services Pty Ltd
- Takirosavi Pty Ltd
- The Eye Institute Pty Ltd
- The Surgical Chamber Pty Ltd
- The Trustees of the Roman Catholic Church for the Diocese of Lismore (St Vincent's Hospital)
- Trustee of the Baydoor Trust
- Tweed Surgicentre Pty Ltd
- VEI Services Pty limited
- Votraint No 604 Pty Ltd
- Wollongong Day Surgery Pty Ltd
- The Australian Private Hospitals Association and Day Hospitals Australia (Representative Bodies).
- New South Wales Public Health Organisations as defined in the *Health Services Act* 1997 (NSW) (**Public Health Organisations**). This covers public health facilities, including the following:
 - Albury Wodonga Health Albury Campus
 - Armidale Rural Referral Hospital
 - Auburn Hospital & Community Health Services
 - Ballina District Hospital
 - Balmain Hospital
 - Balranald Multi Purpose Service
 - Bankstown-Lidcombe Hospital
 - Baradine Multi Purpose Service
 - Barham Koondrook Soldiers Memorial Hospital
 - Barraba Multi Purpose Service
 - Batemans Bay Hospital
 - Bathurst Base Hospital
 - Batlow/Adelong Multi Purpose Service
 - Bellinger River District Hospital
 - Belmont Hospital
 - Berrigan War Memorial Hospital/Multi Purpose Service
 - Bingara Multipurpose Service
 - Blacktown Hospital
 - Blayney Multipurpose Service

- Blue Mountains District Anzac Memorial Hospital
- Boggabri Multi Purpose Service
- Bombala Multi Purpose Service
- Bonalbo Hospital
- Boorowa Multi Purpose Service Hospital
- Bourke Multi Purpose Service
- Bourke Street Health Service Goulburn
- Bowral Hospital
- Braeside Hospital
- Braidwood Multi Purpose Service
- Brewarrina Multi Purpose Service
- Broken Hill Base Hospital
- Bulahdelah Community Hospital
- Bulli Hospital
- Byron Central Hospital
- Calvary Health Care Sydney Ltd
- Calvary Mater Newcastle
- Camden Hospital
- Campbelltown Hospital
- Canowindra Soldiers Memorial Hospital
- Canterbury Hospital
- Casino And District Memorial Hospital
- Cessnock District Hospital
- Cobar District Hospital
- Coffs Harbour Base Hospital
- Coledale Hospital
- Collarenebri Multi Purpose Service
- Concord Repatriation Hospital
- Condobolin District Hospital
- Condobolin Retirement Village
- Coolah Multi Purpose Service
- Coolamon-Ganmain Multi Purpose Service Hospital
- Cooma Hospital & Health Service
- Coonabarabran District Hospital
- Coonamble Health Service
- Cootamundra District Hospital
- Corowa Health Service
- Cowra District Hospital
- Crookwell District Hospital
- Culcairn Multi Purpose Service Hospital
- Cumberland Hospital

- David Berry Hospital
- Delegate Multi Purpose Service
- Deniliquin Hospital
- Denman Multi Purpose Service
- Dorrigo Multi Purpose Service
- Dubbo Base Hospital
- Dunedoo Multi Purpose Service
- Dungog Community Hospital
- Emmaville Vegetable Creek Residential Aged Care
- Eugowra Memorial Multi Purpose Service
- Fairfield Hospital
- Finley Hospital & Community Health Care
- Forbes District Hospital
- Gilgandra Multi Purpose Service
- Glen Innes District Hospital
- Gloucester Soldiers Memorial Hospital
- Goodooga Hospital
- Gosford Hospital
- Goulburn Base Hospital
- Gower Wilson Multi Purpose Service
- Grafton Base Hospital
- Greenwich Hospital
- Grenfell Multi Purpose Service
- Griffith Base Hospital
- Gulargambone Multi Purpose Service
- Gulgong Health Service
- Gundagai District Hospital
- Gunnedah District Hospital
- Guyra Multi Purpose Service
- Hay District Hospital
- Henty Multi Purpose Service
- Hillston District Hospital
- Holbrook District Hospital
- Hornsby Ku-Ring-Gai Hospital
- Hunter New England Mental Health Service
- Inverell District Hospital
- Ivanhoe Health Service
- Jerilderie Multi Purpose Service
- John Hunter Hospital Royal Newcastle Centre
- Junee Multi Purpose Service
- Karitane

- Kempsey District Hospital
- Kurri Kurri District Hospital
- Kyogle Memorial Multi Purpose Service
- Lake Cargelligo Multi Purpose Service
- Leeton District Hospital
- Lightning Ridge Multipurpose Health Service
- Lismore Base Hospital
- Lismore Base Hospital Riverlands Drug & Alcohol Service
- Lithgow Hospital
- Liverpool Hospital
- Lockhart & District Hospital
- Long Jetty Health Care Facility
- Lourdes Hospital & Community Services
- Macksville District Hospital
- Maclean District Hospital
- Macquarie Hospital
- Manilla Health Service
- Manning Rural Referral Hospital (Taree)
- Mercy Care Hospital Young
- Mercy Health Service
- Merriwa Multi Purpose Service
- Milton Ulladulla Hospital
- Molong Health Service
- Mona Vale Hospital
- Moree District Hospital
- Moruya District Hospital
- Mount Druitt Hospital
- Mudgee Health Service
- Murrumbah-Harden Hospital
- Murwillumbah District Hospital
- Muswellbrook Hospital
- Narrabri District Hospital
- Narrandera Hospital
- Narromine Hospital & Community Health
- Nepean Hospital
- Neringah Hospital
- Nimbin Multi Purpose Service
- Nyngan Multi Purpose Service
- Oberon Multi Purpose Service
- Orange Health Service
- Pambula District Hospital

- Parkes District Hospital
- Peak Hill Health Service
- Port Kembla Hospital
- Port Macquarie Base Hospital
- Portland Tabulam Health Centre
- Prince Albert Tenterfield
- Prince Of Wales Hospital
- Queanbeyan District Hospital
- Quirindi Community Hospital
- Royal Hospital For Women
- Royal North Shore Hospital
- Royal Prince Alfred Hospital
- Royal Rehabilitation Hospital Coorabel/Moorong
- Ryde Hospital
- Rylstone District Hospital
- Sacred Heart Health Service
- Scott Memorial Hospital, Scone
- Shellharbour Hospital
- Shoalhaven District Memorial Hospital
- Singleton District Hospital
- South East Regional Hospital
- Springwood Hospital
- St George Hospital
- St Joseph's Hospital
- St Vincent's Hospital (Darlinghurst)
- St Vincent's Hospital (Lismore)
- Sydney Children's Hospital
- Sydney Hospital And Sydney Eye Hospital
- Tamworth Rural Referral Hospital
- Temora Hospital
- The Children's Hospital At Westmead
- The Forensic Hospital
- The Maitland Hospital
- The Sutherland Hospital
- The Tweed Hospital
- Tibooburra Health Service
- Tingha Multipurpose Service
- Tocumwal Hospital
- Tomaree Community Hospital
- Tottenham Hospital
- Trangie Multi Purpose Health Service

- Tresillian Family Care Centre Belmore
- Tresillian Family Care Centre Willoughby
- Tresillian Family Care Centre Wollstonecraft
- Trundle Multi Purpose Service
- Tullamore Multi Purpose Health Service
- Tumbarumba Multi Purpose Service
- Tumut District Hospital
- Urana Health Service
- Urbenville Health Service
- Wagga Wagga Rural Referral Hospital
- Walcha Multipurpose Service
- Walgett Health Service
- War Memorial Hospital
- Warialda Multipurpose Service
- Warren Multi Purpose Health Service
- Wauchope District Memorial Hospital
- Wee Waa Community Hospital
- Wellington Health Service
- Wentworth District Hospital
- Werris Creek Community Hospital
- Westmead Hospital
- Wilcannia Health Service
- Wilson Memorial Community Hospital
- Wingham Community Hospital
- Wollongong Hospital
- Woy Woy Public Hospital
- Wyalong Hospital
- Wyong Public Hospital
- Yass District Hospital
- Young District Hospital
- Any other person notified to the ACCC from time to time as intending to engage in the Proposed Conduct.

Declaration by applicant

The undersigned declare that, to the best of their knowledge and belief, the information given in response to questions in this form is true, correct and complete, that complete copies of documents required by this form have been supplied, that all estimates are identified as such and are their best estimates of the underlying facts, and that all the opinions expressed are sincere.

The undersigned undertake(s) to advise the ACCC immediately of any material change in circumstances relating to the application.

The undersigned are aware that giving false or misleading information is a serious offence and are aware of the provisions of sections 137.1 and 149.1 of the *Criminal Code* (Cth).



Daniel Hunter

Deputy Secretary, Finance and Asset Management & Chief Financial Officer, Ministry of Health This 30th day of April 2020