**Department of Human Services Communities of Interest**

**Public Key Infrastructure - Individual Certificate**

**Terms and Conditions of Use**

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| ***Security and Access***1. I agree:
2. I am bound by and must comply with:
3. these Terms and Conditions for use of my Human Services Community of Interest Public Key Infrastructure Individual Certificate1 (the Certificate or my Certificate);
4. the relevant Human Services Certificate Policy;
5. the relevant Human Services Certification Practice Statement; and
6. all other relevant Human Services policies,

commencing from when my Certificate is used for the first time in a transaction with either Human Services or a Relying Party recognised within the Certificate Policy under which my Certificate was issued;1. that the Certificate identifies me and links me as being known to Human Services as a healthcare individual (however described);
2. that use of my Certificate will be for purposes authorised or approved by Human Services. Any other use of my Certificate will be at my own risk;
3. I will take all reasonable measures to keep my Certificate, any USB token on which the Certificate may be issued, and any associated password secure at all times and take all necessary precautions to prevent loss, disclosure, modification, or unauthorised use;
4. I will not give my Certificate and associated password to any other person;
5. I will promptly notify Human Services if my Certificate or associated password are lost, destroyed, stolen, or otherwise compromised or suspected to be compromised; and
6. that any use of my Certificate by any other person will be a breach of these Terms and Conditions by me and will be deemed to be a use of the Certificate by me.

***Personal information***1. I warrant that all information I provide and representations I make to Human Services are complete and accurate.
2. I will promptly notify Human Services in the event that I consider any information provided, or representations made by me, is or may be incorrect.
 | ***Revoking or terminating the Certificate***1. I may request revocation of my Certificate at any time by written notice to Human Services.
2. I understand that the use of my Certificate may be revoked by Human Services in its absolute discretion, including in the following situations:
3. receipt of a revocation request by Human Services;
4. loss, destruction or theft of the Certificate;
5. my de-registration (however described); or
6. cancellation of my healthcare individual number(s) (if any) by Human Services.
7. I understand that revocation of my Certificate does not automatically terminate these Terms and Conditions.
8. I understand that I can terminate these Terms and Conditions at any time by giving a written notice to Human Services. I will not conduct transactions using my Certificate after I give such notice.
9. If these Terms and Conditions are terminated by me or if my Certificate is revoked by Human Services, my obligations will continue in respect of any electronic communications I made using my Certificate before the date of termination.

***Variation***1. Human Services may change or add to these Terms and Conditions at any time by publishing amendments on the Human Services’ website or through other means of electronic communication.
2. The use of the Certificate after notification of a change or addition to these Terms and Conditions is deemed to be agreement to the change or addition.
3. These Terms and Conditions may not be otherwise changed orally or by conduct by any person.

***Applicable law***1. These Terms and Conditions are issued under and are to be construed in accordance with the laws in force in the Australian Capital Territory and the parties agree to submit to the courts having jurisdiction in the Australian Capital Territory.

1 Also known as a Medicare Australia Healthcare Individual Certificate. Medicare Australia is now integrated into Human Services by virtue of the *Human Services Legislation Amendment Act* 2011. |