

ASISA STANDARD: GOVERNMENT PAYROLL DEDUCTIONS

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1. INTRODUCTION

- 1.1. Long- and short-term insurers currently collect policy premiums via the Government's payroll deduction system. The deduction of insurance premiums from Government employees is a "*discretionary deduction*" as contemplated in Chapter 23 of the Treasury Regulations issued under the Public Finance Management Act ("**Payroll Regulations**"). As such, it is governed by the Payroll Regulations.
- 1.2. A need for more detailed industry rules than those contained in the Payroll Regulations were identified by National Treasury and the Life Offices Association of South Africa (the predecessor of ASISA). This Standard on Government Payroll Deductions ("**Standard**") has accordingly been established to provide for such additional rules and aims to:
 - 1.2.1. ensure responsible use of the Government's payroll deduction facility by long- and short-term insurers; and
 - 1.2.2. establish consistent protocols and minimum standards for the deduction of insurance premiums via the Government's payroll deduction facility; and
 - 1.2.3. most importantly, protect the interests of Government employees.
- 1.3. The Service Provider (as defined below) is a payments service provider for enterprises that collect large volumes of payments every month. They serve a wide spectrum of industries, including financial services. With the approval of Government, ASISA and SAIA have concluded an agreement with the Service Provider to facilitate Government's payroll deductions for insurance premiums. The Service Provider furthermore concludes separate Service Provider Agreements (as defined below) with DCHs (as defined below).
- 1.4. This Standard must be read in conjunction with the technical standards as provided by the Service Provider from time to time, as well as the individual business agreements entered into between the OAG (as defined below) and DCHS.

2. DEFINITIONS

For the purposes of the Standard, these terms and phrases bear the meanings assigned to them below:

- 2.1. "**Affordability Enquiry**" means the accessing of the applicable payroll information via a Service Provider during or immediately after application stage, to determine whether a specific deduction from an employee's salary breaks any of the Affordability Rules (including net take home pay). An affordability enquiry does not reserve an amount for the intended deduction;
- 2.2. "**Affordability Facility**" means the facility provided by the Service Provider in order to conduct an Affordability Enquiry in terms of the Affordability Rules;
- 2.3. "**Affordability Rules**" means the affordability rules set out in Chapter 23 of the Treasury Regulations issued under the Public Finance Management Act;
- 2.4. "**ASISA**" means the Association for Savings and Investments South Africa;
- 2.5. "**Average Reservations**" means the average number of Reservations that were done over the preceding 6 (six) month period for a DCH;
- 2.6. "**Benefit Payments Facility**" means the facility provided by the Service Provider to make certain benefit payments in terms of insurance policies to Government employees;
- 2.7. "**Cancellation**" means cancellation of the Reservation within the Reservation period before a Lapse could occur;
- 2.8. "**DCH**" means the holder of a Deduction Code which is any long-term or short-term insurer who has been approved by Government to effect payroll deductions via the Government Payroll Facility in terms of an agreement with the OAG;
- 2.9. "**Deduction Code**" means a code issued by the OAG to enable a person to deduct money from an individual paid via the Government Payroll Facility;
- 2.10. "**Effective Date**" means June 2012;

- 2.11. "**Government Payroll Facility**" means the payroll deduction facility for Government employees via the PERSAL and PERSOL systems;
- 2.12.
- 2.13. "**Lapse**" means the expiration of the initial Reservation period;
- 2.14. "**Lapsed**" means the number of Reservations for which no confirmation transactions (QADD/QUPD) with a reservation number was received by the Service Provider within the Reservation period;
- 2.15. "**MU**" means medical underwriting;
- 2.16. "**OAG**" means Office of the Accountant General;
- 2.17. "**PH**" means a premium holiday;
- 2.18. "**PH Facility**" means the PH facility made available by the Service Provider;
- 2.19. "**QADD**" means the transaction that is used to start a deduction on the salary of an employee;
- 2.20. "**QANA**" means the transaction that is used to enquire affordability of a deduction amount for a new discretionary deduction;
- 2.21. "**QANU**" means the transaction that is used to enquire affordability of a deduction amount for an upward change in value to an existing discretionary deduction;
- 2.22. "**QUPD**" means the transaction that is used to amend the deduction value from the salary of an employee;
- 2.23. "**QPHA**" means the transaction that is used to lodge a PH. Both the start and end date are compulsory to manage the duration;
- 2.24. "**Register**" means a computerized solution enabling an interface to Government payrolls, comprising of a database through which discretionary deductions are permitted and are validated against agreed rules;

- 2.25. "**Reservation**" means the accessing of the appropriate payroll information via the Service Provider, after the receiving of a valid mandate, to reserve a specific deduction amount on the available salary of an employee for the specified period. The deduction is not made until the payroll receives a valid instruction in the prescribed format;
- 2.26. "**Reservation Facility**" means the facility provided by the Service Provider in order to make Reservations;
- 2.27. "**Reservation Month**" means the calendar month that is used to measure the reported statistics;
- 2.28. "**Reservation Terminations**" means Reservations for which no confirmation transactions (QADD or QUPD) with a reservation number were received during the reservation period. There are 3 types of Reservation Terminations:
- 2.28.1. Lapses;
 - 2.28.2. Cancellations; and
 - 2.28.3. lapses of Re-reservations.
- 2.29. "**Re-reservation**" means that the Reservation was either Cancelled or Lapsed, but that the DCH has reserved an amount again;
- 2.30. "**SAIA**" means the South African Insurance Association, the representative body of the non-life insurance industry;
- 2.31. "**Service Provider**" means the service provider appointed by ASISA and SAIA respectively to provide the Services;
- 2.32. "**Service Provider Agreement**" means the agreement entered into between a DCH and the Service Provider to provide the Services;
- 2.33. "**Services**" means the services provided by the Service Provider to the DCHs in connection with the use of the Government Payroll Facility, including the development and maintenance of the Register, administration and monitoring of the Government Payroll Facility, the Affordability Facility, the Reservation Facility, the PH Facility, the Benefits Payment Facility and such other

facilities as the Service Provider may make available for purposes of insurers making use of the Government Payroll Facility;

2.34. “**VR**” means voice recorded;

2.35. “**VR Facility**” means the voice recording facility made available by the Service Provider after approval has been obtained from the OAG.

3. COMMENCEMENT DATE

3.1. This Standard is effective from the Effective Date.

4. SCOPE

4.1. This Standard applies to and is mandatory for ASISA members and SAIA members and all other insurers who make use of the Government Payroll Facility and are DCHs.

4.2. Each DCH must also adhere to the technical standards prescribed by the Service Provider from time to time and its individual business agreement with the OAG.

5. RESPONSIBILITIES OF THE DEDUCTION CODE HOLDER

5.1. An authorised DCH must take full responsibility for the use of the Government Payroll Facility by itself, or persons authorised to use these Government Payroll Facility on behalf of such authorised DCH.

5.2. The Reservation Facility may not be utilised without the permission (written, signed and dated mandate, voice recorded or electronic mandate) of the employee for which the Government Payroll Facility is being utilised.

5.2.1. For the Reservation of a new deduction, a recent (not older than 3 (three) months at the time the Reservation was made) mandate is required.

5.2.2. For the Reservation of an update to an existing deduction, a recent (not older than 3

(three) months at the time the Reservation was made) mandate is required when the amendment is towards a change in product or benefits. For previously mandated inflationary or scheduled cost increases the original mandate will suffice.

- 5.3. The Affordability Facility may not be utilised without the permission (does not have to be in writing) of the employee in respect of whom the Government Payroll Facility is being utilised.

6. RESERVATION AND AFFORDABILITY

6.1. Affordability

6.1.1. An Affordability Enquiry is not compulsory but is recommended.

6.1.2. Two types of Affordability Enquiries exist:

6.1.2.1. QANA; and

6.1.2.2. QANU

6.1.3. Limits have been imposed on Affordability Enquiries to ensure fair use of the system.

6.1.4. Using the system to try and determine affordability by performing repeated Affordability Enquiries for the same employee on different amounts without being in consultation with the employee at the time of the Affordability Enquiry, is prohibited.

6.1.5. Any attempts to circumvent measures to prevent data mining as described under 4.1.4 above will lead to the suspension of the Affordability Facility and the Reservation Facility of the DCH.

6.2. Reservation

6.2.1. Before any Reservation is done, an Affordability Enquiry is automatically executed. The Affordability Enquiry returns an appropriate message that the deduction amount is:

6.2.1.1. not affordable, which results in no action being taken; or

6.2.1.2. affordable, which results in the return of a Reservation number.

6.2.2. DCHs will be categorized into 2 groups for the Reservation Facility:

6.2.2.1. MU accredited insurance companies who do medical underwriting; and

6.2.2.2. all other approved DCHs.

The DCH's compliance officer must certify to the Service Provider that products of the DCH are subject to medical underwriting.

6.2.3. All Reservations are done at the Register level and not directly on the payroll.

6.2.4. Each Reservation exists until the earliest of it:

6.2.4.1. being confirmed with a QADD or QUPD transaction; or

6.2.4.2. being Cancelled within the Reservation period of 45 (forty-five) days; or

6.2.4.3. lapsing after 45 (forty-five) days of Reservation without any transaction being submitted.

6.2.5. In the case of a PH, the standards for Reservations set out in this paragraph 6.2 do not apply. The reservation can be cancelled, or it can be extended within the 6 (six) months period.

6.2.6. After a Reservation has Lapsed, it may be re-reserved for another Reservation period.

6.2.7. An employee can have more than 1 (one) amount reserved at the same time. Affordability is recalculated with each Reservation taking into account any other previous reservations in the system on a sequential basis.

6.3. Reporting

Reports on the status of Reservations are available on request (it excludes the PH Reservations):

REPORT NAME	PURPOSE OF THE REPORT
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Reservation Status: Outstanding	Provides detail of Reservation transactions not yet confirmed. A QUADD / QUPD transaction quoting the Reservation number must be submitted in a subsequent update process.
Reservation Status: Confirmed	Provides detail of confirmed Reservation transactions.
Reservation Status: Cancelled	Provides detail of cancelled Reservation transactions.
Reservation Status: Lapsed	Provides detail of Reservations that Lapsed (assumed MU cases) where there was no transaction within 45 (forty-five) days after the Lapse.
Lapsed Re-reservations	Provides detail of Re-reservations that Lapsed again after expiry of the Re-reservation period.
Premium Holidays	Provides detail on all Reservations that have been done for PH transactions and where the PH is still in effect.

6.4. Limits

6.4.1. LIMITS FOR RESERVATION TERMINATIONS

The following limits for Reservation Terminations will apply:

TYPE OF COMPANY	LAPSED RESERVATIONS MEASURED AFTER 90 (NINETY) DAYS FROM RESERVATION DATE	CANCELLATIONS MEASURES AFTER 45 (FORTY-FIVE) DAYS	LAPSED RE-RESERVATIONS
MU accredited	5% (five percent) of the Reservations made in the Reservation Month	5% (five percent) of the Reservations made in the Reservation Month subject to a minimum of 50 (fifty)	Less than 5 (five) transactions per calendar month
Other approved DCHs	None allowed	5% (five percent) of the Average Reservations made in the Reservation Month subject to a minimum of 50 (fifty)	Less than 5 (five) transactions per calendar month

6.4.2. LIMITS FOR AFFORDABILITY ENQUIRIES

The following limits for Affordability Enquiries will apply:

6.4.2.1. Employee limits:

- Will be applied irrespective of the process utilised for the action, i.e. via web, batch or Extensible Markup Language ('XML');
- The same transaction for the same amount and for the same employee will not be considered for the purposes of calculating the limits;
- A maximum of 2 (two) Affordability Enquiries per payroll employee per day;
- A maximum of 4 (four) Affordability Enquiries and 4 (four) Reservations per payroll employee within a 14 (fourteen) calendar day period.

6.4.2.2. User limits

- **Online users:** 1 (one) Affordability Enquiry per payroll employee within a 15 (fifteen) second period with a maximum of 500 (five hundred) affordability transactions per day;
- **Batch limits:** Only 1 (one) affordability transaction per payroll employee per file;
- **XML limits:** 1 (one) Affordability Enquiry per payroll employee within a 15 (fifteen) second period.

6.4.2.3. DCH limits:

- A daily limit of 1% (one percent) of the existing deductions on the specific payroll of the DCH but, where 1% (one percent) of the existing deductions is less than 100 (one hundred), a limit of 100 (one hundred) will apply;

- A monthly limit of 5% (five percent) of the existing deductions on the specific payroll of the DCH but, where 5% (five percent) of the existing deductions is less than 500 (five hundred), a limit of 500 (five hundred) will apply.

6.4.3. The limits in paragraph will be reviewed on a quarterly basis.

6.4.4. Annual inflationary increases which could result in an exceeding of the limits must be communicated to the Service Provider in writing at least 7 (seven) days before being applied.

6.5. Breaches of limits

Breaches of the above limits will result in the following actions:

6.5.1. When acceptable limits (as detailed in paragraph 6.4) are exceeded, the mandates utilised in order to do the Reservations will be requested by the Service Provider.

6.5.2. If all mandates as requested in paragraph 6.5.1 are in order, DCHs will be given a grace period of 2 (two) to 3 (three) months in order to get their systems to comply with the acceptable Lapse rates as defined in this Standard. This will be communicated in writing.

6.5.3. If the acceptable limits are still exceeded after the 2 (two) to 3 (three) months grace period, the non-compliance will lead to the suspension of the Affordability Facility and the Reservation Facility for a period of 1 (one) month. A repeat offence within 12 (twelve) months, will lead to a suspension of the facilities for a period of 3 (three) months.

6.5.4. Failure to provide the mandates within 14 (fourteen) calendar days, or providing incomplete mandates, will lead to a suspension of the Affordability Facility and the Reservation Facility for a period of 1 (one) month. A repeat offence – failure to provide mandates or incomplete mandates - within 12 (twelve) months, will lead to a suspension of the longer of 3 (three) months or until a satisfactory response is received.

6.5.5. If a DCH again exceeds the acceptable limits in the 12 (twelve) months following the lifting of their 3 (three) month suspension, it will lead to a suspension of the Affordability

Facility and the Reservation Facility for a period of 3 (three) months. No 1 (one) month suspension will apply in this instance.

6.5.6. Once a 3 (three) month suspension has been imposed, it will only be lifted after 3 (three) months and on receipt of a duly signed letter by the compliance officer of the DCH, certifying that the necessary processes have been implemented to avoid any further transgressions.

6.5.7. Any subsequent offence outside of a 12 (twelve) month period from the date, on which the 3 (three) month suspension was lifted, will be treated as a first offence but ASISA reserves the right to take previous transgressions into account.

7. RE-INSTATEMENT OF PAYROLL DEDUCTIONS

7.1. If Government employees are re-employed within 3 (three) months after termination of their employment contract, DCHs may consider the reinstatement of deductions, without obtaining a new mandate, within 5 (five) months after the last successful deduction was made via the payroll.

7.2. DCHs will decide whether a policy qualifies for reinstatement based on individual merit.

7.3. Reinstatement of policies that qualify will be done through a QADD transaction and the Affordability Rules will apply.

7.4. Reinstatements and the next premium collection must be completed within 5 (five) months from the last payment month.

7.5. Transactions must have the same policy number, deduction type and amount, confirming that the policy is still active.

7.6. Arrear premium payments on the policy cannot be collected via a payroll deduction.

8. VOICE RECORDED MANDATES

- 8.1. VR authorisations are allowed for new deductions subject to the approval by the OAG and process being utilised by the DCH.
- 8.2. Use of the VR Facility will be considered after application to the OAG for DCHs already approved for discretionary deductions. Separate approval for Cancellations, product up-sales, amount updates as well as change in the collections method needs to be obtained before use of the VR Facility for these purposes.
- 8.3. Only call centres of duly licensed financial services providers must be contracted by the DCH to obtain mandates. Additions of new call centres should follow the same approval and testing process. Call centres will be assessed by the OAG and the Service Provider.
- 8.4. All information as contained in the stop order form as approved by the OAG will be addressed / verified during the VR interview. Script layouts will be made available to National Treasury for approval upon request.
- 8.5. The VR authorisation from the client should not be older than 3 (three) months of the first deduction.
- 8.6. All VR mandates obtained by DCHs will be subject to the standard 31 (thirty-one) day cooling-off period as stipulated under Rule 4.2 of the Policyholder Protection Rules under the Long-Term Insurance Act 52 of 1998, as amended.
- 8.7. DCHs must distinguish between Stop Order and VR business and supply proof of authorisation upon request.
- 8.8. VR instructions will be stored centrally, for as long as the policy is in force and are to be easily retrieved upon request.
- 8.9. DCHs must, in terms of the BUS-PAY-0015 VRSO TECHNICAL STANDARD GOVERNMENT PAYROLLS, listen to the agreed percentage of the recorded instructions for quality control purposes of which quality measures must be in place.

9. ELECTRONIC POLICY APPLICATIONS

The following are requirements the use of electronic client authorisation and consent for policy applications and stop order mandates for collections from Government payroll:

- 9.1. The stop order mandate must be an electronic version of the approved mandate or conditions must be similar – alternatively the DCH must submit a version of the electronic mandate to the OAG for approval.
- 9.2. The Compliance Officer of the DCH must provide a certificate on an annual basis to National Treasury stating that the electronic application process meets the following conditions:
 - 9.2.1. Each DCH determines a two-step process, whereby the first step is the registration and positive verification of the client, separate to the actual sales process.
 - 9.2.2. A needs analysis and/or record of advice, or product/cover selection is done with a quotation, in accordance with any regulatory requirements pertaining to the provision of financial services and the offering of the insurance product, on an online quotation package:
 - 9.2.2.1. on an electronic device in the case of a face-to-face process; or
 - 9.2.2.2. on an official web-portal in the case of non-face-to-face where proper user access credentials need to be supplied and verified.
 - 9.2.3. The application form is completed with a facility for the client to indicate that he/she has read and understand all the relevant disclosures and accept the conditions as captured on the electronic device or web portal and authorises the transaction.
 - 9.2.4. An audit trail is implemented whereby a timestamp is affixed to any authorisation and amounts entered into the electronic device or web portal that makes it possible to determine any alterations after the authorization.
 - 9.2.5. The application is submitted for validation and acceptance.
 - 9.2.6. On acceptance, a policy contract with all the required information is sent to the client.

- 9.2.7. Electronic versions of authorised documents are kept on file for record and auditing purposes and, where appropriate, copies of the electronic communication with the client.
- 9.2.8. No information is stored on the device itself. The necessary diligence is done to ensure the security and client protection are in place and that the new business application can be retrieved if required.
- 9.2.9. The mandate must be available for audit purposes and in a general format such as PDF, tiff, jpeg, or other appropriate format used for electronic communication with the client.

10. BIOMETRIC AUTHENTICATION

In implementing digital mandates for obtaining consent for stop order mandates to collect from Government payrolls using biometric identification and authentication, adherence to the following requirements is paramount:

- 10.1. **Real-time biometric data access:** Utilising real-time biometric data access ensures precise identification and significantly mitigates the risk of fraud. A comprehensive solution involves comparing the customer's ID number, photograph, and / or fingerprint in real-time against the information stored in HANIS (Home Affairs National Identification System). This comparison is facilitated through a direct link to the Department of Home Affairs (DHA). Remote authorisation is permissible if biometric artefacts can be acquired through secure means, such as sending a link for self-verification to the employee.
- 10.2. **USSD and OTP Considerations:** While USSD (Unstructured Supplementary Service Data) and OTPs (One-time-passwords) are default tools for fraud prevention, relying solely on a unique PIN sent to a mobile device carries inherent risks. Common threats such as theft, SIM (Subscriber Identification Module) swaps, and telecommunications fraud underscore the need for more robust security measures. It is imperative to recognise that additional layers of security are necessary to safeguard against these risks effectively. USSD and OTP can therefore only be utilised in conjunction with Biometric Identification and Authentication.

11. PAYMENTS OF BENEFITS

- 11.1. The Benefit Payments Facility will only be available to a DCH upon a request to the OAG.
- 11.2. The following predefined types of credits/payments will be allowed through this mechanism:
 - 11.2.1. once-off bulk payments – like listing and demutualization;
 - 11.2.2. cash back payments;
 - 11.2.3. maturity payments;
 - 11.2.4. refunds of overpaid premiums;
 - 11.2.5. the payment of unclaimed benefits.
- 11.3. A bank account must be opened with the assistance of the Service Provider in the name of the DCH.
- 11.4. Bank account information will never be visible to or traceable by the DCH - instructions are sent directly to the bank and are paid out of the trust account.
- 11.5. The reconciliation of payments will use the DCH unique reference and not bank details. Proof of payment only includes the last 4 (four) digits of a bank account number.
- 11.6. Bank transfer instructions are encrypted using PKI security.
- 11.7. Unsuccessful payments are refunded to the DCH immediately.
- 11.8. Policyholders will be alerted of the transaction by the DCH ahead of the scheduled payment.

12. PREMIUM HOLIDAYS

PHs is a mechanism through which DCHs can grant Government employees a cash flow relief by not deducting the premium for a short period. The intention is to provide a period of relief during which the deduction is temporarily suspended. Such PH can be an ad hoc event, agreed between the DCH and

the employee, or can be an agreed term of the contract as a feature of the product. The following should guide the use of PHs:

- 12.1. the maximum period for a PH will be 6 (six) months;
- 12.2. the PH Facility requires the DCH to submit an instruction to de-activate the deduction instruction from the employees' salary. The Register will, upon receipt of the QPHA transaction, reserve the current deduction amount and cancel the deduction on the payroll. At the end of the PH, the Register will lodge an automated action to activate the same deduction after the PH is concluded;
- 12.3. the PH Facility will activate a Reservation for the premium amount during the PH and end it when the deduction is activated again;
- 12.4. the PH process only applies to existing deductions that have been successfully collected at least once;
- 12.5. no amendments or updates to a deduction will be allowed while a PH is in force;
- 12.6. the re-activation of a deduction will be subjected to the same affordability requirements as any other new or increased deduction;
- 12.7. the Register will issue a notification prior to the end of the PH to inform the DCH the Reservation will be cancelled and the deduction will be re-activated by means of a standard report (subject to payroll cut off dates);
- 12.8. the DCH may submit a new instruction to either reduce or extend the PH or to cancel the deduction or the PH.

13. FRAUD PREVENTION

- 13.1. An authorised DCH must assume full responsibility for the utilisation of the fraud prevention facilities provided by the Service Provider, whether by itself or individuals duly authorised to act on behalf of the authorised DCH.

- 13.2. Drawing upon years of experience in investigations and dispute management related to fraud, it has become evident that effective management of intermediaries and sales agents is crucial in mitigating fraudulent deductions.
- 13.3. The key to enabling and managing intermediaries' and sales agents' behaviour lies in the identification of each individual.
- 13.4. To achieve this, the identification number of sales agents (RSA ID number or passport number) must be included in the Standard Electronic Payroll Deductions Interface (SEPD) transactions when submitting a collection instruction to the Service Provider, whether file based, through XML (Extensible Markup Language) or API (Application Programming Interface).
- 13.5. The registration and management of each sales agent on the Q LINK Active Directory is a prerequisite.
- 13.6. In instances where potential fraud is detected and an intermediary or sales agent is flagged, a comprehensive report will be disseminated to all DCHs to inform them of the potential fraud. This report will include all policies associated with the intermediary or sales agent.
- 13.7. The Service Provider, functioning as the gatekeeper, will promptly flag and block intermediaries or sales agents based on confirmed fraud, ensuring their inactive status on the Active Directory where all registered intermediaries and sales agents are stored.
- 13.8. A final step in the fraud prevention project will be to ensure all mandates, whether face-to-face, through VR Mandates or Remote Authorisation is accompanied by a Biometric Verification against the Department of Home Affairs. Currently this remains optional.

14. COMPLIANCE WITH THE STANDARD

- 14.1. Each DCH is responsible for ensuring compliance with this Standard and the Payroll Regulations.
- 14.2. DCHs must make sure that the mandates in use by its various brokers/stakeholders are approved by the OAG before being utilised.
- 14.3. The Service Provider will conduct regular and random audits on transactions and related

mandates to deductions on Government payrolls to protect employees and to ensure the sustainability of the industry's deduction capability on the Government Payroll Facility.

- 14.4. The Service Provider will keep and maintain a Register of all transgressions and penalties imposed.
- 14.5. The Service Provider will inform the DCH of an alleged breach of this Standard. A copy of the correspondence will be forwarded to ASISA. Any response to the alleged breach must be submitted to the Service Provider within 14 (fourteen) calendar days, failure of which will lead to the immediate temporary suspension of the facilities provided by the Service Provider for a period of 1 (one) month. A repeat of this non-compliance - to submit a response within 14 (fourteen) calendar days - within 12 (twelve) months will lead to a suspension of the longer of 3 (three) months or until an acceptable response has been received.
- 14.6. Non-adherence to the requirements of this Standard can result in the Service Provider and OAG taking the following actions:
 - 14.6.1. withdrawing or suspending the use of the Government Payroll Facility;
 - 14.6.2. refusing access to the PERSAL and PERSOL systems for a specific period;
 - 14.6.3. publishing the identity of the DCH and the details of the contravention;
 - 14.6.4. laying criminal charges;
 - 14.6.5. once a penalty has been imposed, it will only be lifted on receipt of a duly signed letter by the Business Unit Head responsible for payroll deductions of the DCH, being duly authorised by the DCH, certifying that the necessary processes have been implemented to avoid any further transgressions; and
 - 14.6.6. before the Government Payroll Facility is re-instated, a full test of the process will be conducted as if it were a new application.
- 14.7. Repetitive breaches could result in the permanent suspension of the Government Payroll Facility and/or any facilities provided by the Service Provider.

DOCUMENT HISTORY

Date	Publication / Amendment
15 July 2020	Approved by the ASISA Technical and Operations Board Committee
18 July 2024	Competition law review. Add Fraud and Biometrics.

RESPONSIBLE COMMITTEES AND SENIOR POLICY ADVISOR

Responsible Board Committee	ASISA Technical and Operations Board Committee
Responsible Standing Committee	Payment Processes Standing Committee
Responsible SPA	ASISA point person to the ASISA Technical and Operations Board Committee