



Overview of proposed changes to home care from February 2017

	Current Arrangements	Proposed arrangements from February 2017
Planning and allocation of home care places (section 3.2.1)	<ul style="list-style-type: none"> Providers apply for home care places through the ACAR Planning and allocation is at the regional level Home care places are allocated to a provider Capped number of home care places, determined by the aged care planning ratio 	<ul style="list-style-type: none"> No ACAR for home care (after the 2015 ACAR) A home care package is assigned to an eligible consumer from a national 'pool' of packages managed by My Aged Care The total number of packages will continue to be capped
Assessment of eligibility (section 3.2.3)	<ul style="list-style-type: none"> ACATs undertake a comprehensive assessment to determine a person's eligibility ACAT approval is 'broadbanded' in two categories: level 1/2 or level 3/4 	<ul style="list-style-type: none"> ACATs will continue to determine eligibility using a comprehensive assessment Approval will be given at specific package level (i.e. level 1, 2, 3 or 4) – no broadbanding
Prioritisation of consumers (section 3.2.5)	<ul style="list-style-type: none"> No consistent approach across Australia to prioritise consumers for access to a home care package Providers maintain their own waiting lists 	<ul style="list-style-type: none"> There will be a consistent national system for assigning packages to eligible consumers (prioritisation) My Aged Care will manage a waiting list and the prioritisation process My Aged Care will support consumers who have been assigned a package – with referrals to approved providers, either directly or with a referral code
Consumer directed care (section 3.6.2)	<ul style="list-style-type: none"> All home care packages are to be delivered on a CDC basis 	<ul style="list-style-type: none"> All home care packages are to be delivered on a CDC basis, but with an increased emphasis on the consumer being able to exercise choice within the package. This may involve more sub-contracting or brokerage of services where the approved provider is unable to provide specific services or care arrangements requested by the consumer



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Portability of a home care package (<i>section 3.2.6</i>)	<ul style="list-style-type: none"> Package is not portable for the consumer (as the home care place is allocated to a provider in respect of a specific location or aged care planning region) 	<ul style="list-style-type: none"> Package is portable, enabling the consumer to take their package with them to another provider in any location across Australia
Unspent funds – consumer moves to a new home care provider (<i>section 3.3.2.1</i>)	<ul style="list-style-type: none"> Unspent funds can be retained by the existing provider, although some providers choose to transfer unspent funds to the new provider 	<ul style="list-style-type: none"> Unspent funds move with the consumer to the new home care provider May involve some new responsibilities for providers to give effect to the transfer of unspent funds
Unspent funds - consumer leaves subsidised home care (<i>section 3.3.2.2</i>)	<ul style="list-style-type: none"> Unspent funds can be retained by the existing provider 	<ul style="list-style-type: none"> Different options are outlined in the discussion paper
Fee arrangements (<i>section 2.1.1</i>)	<ul style="list-style-type: none"> Fee arrangements for home care are set out in the legislation 	<ul style="list-style-type: none"> No changes to current fee arrangements in home care
Payment of subsidy (<i>section 3.4</i>)	<ul style="list-style-type: none"> Home care subsidy (including any relevant supplements) is paid to an approved provider for an approved consumer in respect of an allocated home care place Claiming process is managed by the Department of Human services (DHS) 	<ul style="list-style-type: none"> Home care subsidy (including any relevant supplements) is paid to an approved provider chosen by the consumer – i.e. a person who has been assessed and approved by an ACAT <u>and</u> assigned a package (prioritised) by My Aged Care. No changes to the DHS claiming process
Approved provider requirements (<i>section 3.5</i>)	<ul style="list-style-type: none"> Criteria to assess suitability to become an approved provider are set out in the legislation Separate application process for becoming an approved provider in residential care, home care and flexible care Approved provider status 	<ul style="list-style-type: none"> Legislative criteria for assessing suitability to become an approved provider will be made more contemporary (less focus on key personnel) Existing providers of residential care and flexible care will be able to ‘opt in’ to become home care providers



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<p>lapses after two years if the provider does not hold an allocation of places</p>	<p>(through a simplified process rather than a full application)</p> <ul style="list-style-type: none">• Approved provider status will no longer lapse after two years if the provider does not hold an allocation of places (this will apply in home care, residential care and flexible care)
<p>Quality framework (section 3.6)</p> <ul style="list-style-type: none">• Providers must comply with the Home Care Standards• Quality reviews by the Australian Aged Care Quality Agency	<ul style="list-style-type: none">• Providers must comply with the Home Care Standards, but the Department will be working with stakeholders to develop a single streamlined national quality framework for all aged care services• Quality reviews will continue for home care providers who are providing services to consumers• Development of quality indicators for home care