

## Considerations

This document is to be used when seeking approval for home care package expenditure that is not specified as an inclusion in the legislation.

Care managers and home care package recipients are required to consider the appropriateness of the expenditure, noting the cost of the care or service, and the expected benefits, that the bulk of the home care budget is funded by taxpayers.

Ongoing care and services must be prioritised to ensure continuing care needs and goals are met.

Care and services included in the care plan that will be purchased using the package budget should be drawn, for the most part, from the legislated inclusions, and must not include any legislated exclusions on Page 3 of this document.

## Process

The care planning and budgeting process will usually “pre-approve” well described items of expenditure not specified as a legislated inclusion.

1. Check if the item is on the Inclusions List, if so, this form is not required. Speak to your Care Manager about the availability of funds within your budget.
2. Check if the item is listed on the Exclusions List, if so, it is not allowable expenditure.
3. If the expenditure is not on either list, contact your Care Manager to discuss the appropriate next steps.
4. Work through questions (a) to (i) on page 1 of this document. The answer to all questions must be YES.
5. Depending on the type of equipment some additional documentation is required.
  - a. Aids and equipment that assist performing daily living tasks (off the shelf items that do not present risks) are allowable without an appropriate health professional report (ie Occupational Therapist). They must be suitable, safe and a recommended item.
  - b. Specialised and complex equipment that is generally adjusted to suit the care recipient's individual support needs requires a recommendation from a health professional and to be linked to the care plan. It is important to make sure the equipment is supplied and setup correctly to avoid any risk of injury.
6. A description of the item and the link to your goals needs to be provided to your Care Manager to include in your Care Plan.
7. Items over \$300, where there is no surplus funds, require an updated budget, and ensure that necessary care is not disrupted.
8. If the expenditure is declined, you will be notified in writing (via email), explaining the reason why.

# ALLOWABLE HOME CARE PACKAGED EXPENDITURES

Key responsibilities of care management, and keeping home care packages compliant



<i>Name:</i>	<i>Date:</i>
<i>Notes:</i>	
<i>Completed by:</i>	

If the expenditure is not specifically listed as allowable (see page 2), and is

- under \$300, the invoice description must include a note linking the expenditure to care goals, see (a)
- over \$300, complete this check list and email to your care manager. The invoice description must link the expenditure to care goals and must be included in the care plan and budget. This may need to be updated.

The check list below is documented and filed. You must answer YES for all (a) to (i). Where a NO exists, there might be opportunities to discuss what is possible with Local Guardians and the Aged Care Quality Commission.

Expenditure must be within the package budget and:

- |   |  |
|---|--|
| <p>a) Be directly linked to the identified care needs and goals to optimise health and wellbeing?</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>              | <p>e) Is not an exclusion as listed on page 3?</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>  |
| <p>b) Is necessary to remain living safely and independently at home?</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>  | <p>f) Only directly benefits the care recipient (has no significant benefits to others)</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>                         |
| <p>c) Represents value for money and considered an acceptable use of Government funds?</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>                         | <p>g) Is not available informally through the community</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>   |
| <p>d) Is evidence based to address the assessed care need in the ACAT or a healthcare professional assessment?</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p> | <p>h) Does not exclude more important care / support services identified in the care plan and can be delivered?</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p> |
|   | <p>i) It does not pose a risk to the health and safety of the care recipient or community.</p> <p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/></p>                      |

# ALLOWABLE HOME CARE PACKAGED EXPENDITURES



## Specified Home Care Package Inclusions. Sec 3, Quality of Care Principles 2014

All the items listed below, that directly optimise the health and wellbeing of a home care package recipient in accordance with their needs, goals and preferences to live safely and independently at home, CAN BE paid by a home care package.

### Personal services & activities of daily living & lifestyle

Personal assistance, including individual attention, individual supervision and physical assistance, with:

- + bathing, showering including providing shower chairs if necessary, personal hygiene and grooming, dressing and undressing, and using dressing aids;
- + toileting;
- + dressing and undressing; and
- + Mobility, transfer (including in and out of bed).
- + communication including assistance to address difficulties arising from impaired hearing, sight or speech, or lack of common language, assistance with the fitting of sensory communication aids, checking hearing aid batteries, cleaning spectacles and assistance in using the telephone
- + assistance with preparing meals including assistance with special diet for health, religious, cultural or other reasons;
- + assistance with using eating utensils and eating aids and assistance with actual feeding, if necessary; and
- + providing enteral feeding formula and equipment.
- + encouragement to take part in social and community activities that promote and protect the care recipient's lifestyle, interests and wellbeing.

### Continence management

- + assessment for and, if required, providing disposable pads and absorbent aids, commode chairs, bedpans and urinals, catheter and urinary drainage appliances and enemas; and
- + assistance in using continence aids and appliances and managing continence.

### Mobility and dexterity

- + providing crutches, quadruped walkers, walking frames, walking sticks and wheelchairs ( items must be suitable, safe and a recommended item)
- + providing mechanical devices for lifting, bed rails, slide sheets, sheepskins, tri-pillows, and pressure relieving mattresses;
- + assistance in using the above aids.

### Support Services

- + cleaning, personal laundry services, including laundering of care recipient's clothing and bedding that can be machine-washed, ironing or arranging for dry-cleaning of care recipient's clothing and bedding that cannot be machine washed;
- + gardening;
- + medication management;
- + rehabilitative support, access help; to meet a professionally determined therapeutic need
- + emotional support including ongoing support in adjusting to a lifestyle involving increased dependency and assistance for the care recipient and carer, if appropriate;
- + support for care recipients with cognitive impairment, including individual therapy, activities and access to specific programs designed to prevent or manage a particular condition or behavior, enhance quality of life and provide ongoing support;
- + providing 24-hour on-call access to emergency assistance including access to an emergency call system if the care recipient is assessed as requiring it;
- + transport and personal assistance to help the care recipient shop, visit health practitioners or attend social activities;
- + respite care;
- + home maintenance, reasonably required to maintain the home and garden in a condition of functional safety and provide an adequate level of security;
- + modifications to the home, such as easy access taps, shower hose or bath rails. Major modifications are not funded through the Package;
- + assisting the care recipient, and the homeowner if the homeowner is not the care recipient, to access technical advice on major home modifications;
- + advising the care recipient on areas of concern in their home that pose safety risks and ways to mitigate the risks
- + arranging social activities and providing or coordinating transport to social functions, entertainment activities and other out-of-home services;
- + assistance to access support services to maintain personal affairs.

### Clinical care

- + nursing, allied health (after EPC/CDM visits have been exhausted) and therapy services such as speech therapy, podiatry, occupational or physiotherapy services; and
- + other clinical services such as hearing and vision services.
- + access, referral to other health and related services, or health practitioners
- + providing bandages, dressings, and skin emollients

The following items must not be included in the package of care and services under the HCP Program:

### **Specified Home Care Package Exclusions Sec 3, Quality of Care Principles 2014:**

- A. Use of package funds as a source of general income for expenses not directly related to aging, (household bills, petrol, car servicing, car registration, toiletries, cleaning products, insurance or funeral cover, heating, cooling, whitegoods, phone, internet, television, Foxtel, Netflix etc.).
- B. Home renovations, modifications or capital items that are not related to the care recipient's care needs such as purchasing or replacement of fixtures, equipment or fittings that are considered basic accommodation responsibilities of the homeowner, tenant or landlord.
- C. Purchase of food or drinks, except as part of enteral feeding requirements.
- D. Services that can be covered under the public health system, including medical benefits schedule (MBS), pharmaceutical benefits scheme (PBS), dentistry, eye tests and out of pocket contributions.
- E. Payment for permanent accommodation, including assistance with home purchase, mortgage payments or rent, residential care (govt funded or privately funded), rates, home and contents insurance.
- F. Basic daily fee, income-tested care fee and additional fees
- G. Travel and accommodation for holidays.
- H. Cost of entertainment activities, such as club memberships and tickets to sporting events.
- I. Gambling activities.

### **Legislative intent**

The Home Care Package Program provides coordinated care and services that help senior Australians meet their assessed care needs to continue to live independently in their home for as long as it is safe.

Expenditure must within the limits of both the budget and the scope of the Program.

A Home Care Package must be considered as an acceptable use of government funds:

- is not extra income that can be used for everyday items and costs or at your discretion.
- cannot be used to pay for usual cost of living expenses or for the purchase or replacement of household items or home renovations
- can only benefit the care recipient, funds cannot be spent on or seen to be benefiting the carers or family members (shared living arrangement, any services such as cleaning are payable from the fund on a pro-rata basis).

## Frequently Asked Questions.

- + Meals - only meal preparation and delivery are allowed (the ingredients are not allowable) at a rate of 70% of the full cost. Must be a ready-made meal ordered through a meal delivery company, not purchased from a Supermarket.
- + Aids and equipment that assist performing daily living tasks (off the shelf items that do not present risks) are allowable without an OT report. They must be suitable, safe and a recommended item.
- + Specialised and complex equipment that is generally adjusted to suit the care recipient's individual support needs requires a recommendation from a health professional and to be linked to the care plan. It is important to make sure the equipment is supplied and setup correctly to avoid any risk of injury.
- + Allied health services such as Physio, Podiatry, Osteo are allowable AFTER all Medicare funded visits have been exhausted. Any GP can refer you to the Chronic Disease Management program. Gap payments on private health insurance are NOT claimable through the package.
- + Psychology visits are payable AFTER Medicare funded visits through a Mental Health Care Plan have been exhausted. Any GP can refer you to the Mental Health Care Plan program.
- + Tablets, Apple (falls) watches, smart phones and computers must be linked to goals in care plan (telehealth, video communication and appointments, online home care statements), limit of \$750. If the primary reason is entertainment, then this is not allowable, see "H on p3".
- + Vitamins & supplements - generally not allowed, unless evidence based with practitioner recommendation (including name and dosage)
- + Hobbies: any item that is essentially a personal hobby such as camera, gaming device, internet, club subscription etc. is a cost of living and not directly related to care services.
- + Community access and group activities - must be linked to aging i.e., attending Men's Shed, Senior Citizen membership, day programs, This also includes the cost of the group activities, attendance and may include 'incidental purchases of items'.
- + Petrol - is a general expenditure item is not allowable. As an alternative, Local Guardians will pay \$1 per km for reimbursement claims with logbook type record, i.e., date, km, trip reason.
- + Dentistry – not allowed as funded by another government program, free dentistry is offered at the Royal Dentist Hospital, home visits (only once a month), payable under Medicare.
- + Glasses – Only lenses and basic prescription frames are allowable, to a limit of \$400 per year. (no eye tests or surgery as funded by Medicare)
- + Building improvements and building structures (capital), including security doors, cameras etc. – outside general maintenance is not allowable unless linked to care and supported by an OT assessment to only benefit the home care package recipient.
- + Phone/ Internet expenses - is a general expenditure item, that most Australians pay is not allowable.
- + Whitegoods - is a general expenditure item of personal nature within all accommodations is not allowable.