



Australian Government

Department of Health

# HOME CARE PACKAGES PROGRAM

Data Report

27 February – 30 June 2017

September 2017





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## Key Messages

1. A revised approval process was introduced for home care that requires consumers to be approved for a specific level of home care, and to be assigned a priority to receive home care services.
2. There were 38,018 approvals for home care under the new arrangements between 27 February and 30 June 2017. Of these, 25.8 per cent were for high priority and 74.2 per cent were for medium priority.
3. A national prioritisation queue has been established to ensure all consumers are treated equitably. This is a change from previous arrangements that required consumers to wait on individual provider queues.
4. In the future the national queue will provide a better understanding of the demand for home care. At 30 June 2017 there were 53,750 consumers seeking home care who had not yet been assigned a home care package. This number has decreased by 11.5 per cent since 27 February 2017.
5. A further 35,154 consumers on the national queue have been assigned an interim level package that allows them to receive home care at a lower level.
6. Home care packages are now assigned directly to consumers according to their date of approval and priority for service. Between 27 February and 30 June 2017 a total of 47,729 home care packages were assigned to consumers.
7. There has been a transition period as consumers respond to the changes that allow them more choice and control. Data showing the impact that packages released under the new system have had on the number of consumers in care will not be available until later in 2017. However, between 30 June 2016 and 31 March 2017 there was a 10.2 per cent increase in the number of consumers in home care.
8. Changes were introduced to the approved provider process to support providers to enter the market and to allow more choice for consumers. This has resulted in a 47.3 per cent increase in the number of approved providers of home care between June 2016 and June 2017.
9. At least two or more approved providers offer home care services within each Aged Care Planning Region as at 30 June 2017.
10. Previously providers were able to keep any unspent funds that remained in a consumer's package when they ceased care. The new arrangements now require providers to transfer these funds so that they follow the consumer.
11. Providers are able to deduct an exit amount from a consumer's unspent funds to support this transfer. This amount must be published on My Aged Care and agreed with the consumer.
12. At 30 June 2017, 35.9 per cent of providers indicated that they will not deduct an exit amount. The average maximum exit amount was \$280.

# INTRODUCTION

## HOME CARE PACKAGES PROGRAM

The Australian Government recognises that people want to remain living independently in their own homes for as long as possible. To support this, the Government subsidises packages through the Home Care Packages Program to provide home-based care that can improve older Australians' quality of life and help them to remain active and connected to their communities.

The Home Care Packages Program forms part of the Government's continuum of care for older Australians. Other forms of aged care service supported by the Commonwealth include the Commonwealth Home Support Programme (CHSP) which provides basic support services, and residential aged care which provides care and support for people with greater care needs who choose to have their care provided within a residential aged care setting.

This report is limited to the Home Care Packages Program.

## INCREASING CHOICE IN HOME CARE

On 27 February 2017, the Australian Government introduced the *Increasing Choice in Home Care* reforms. These were designed to improve the way home care services are delivered to older Australians and support the move to a consumer-driven, market-based and less regulated system. They included three key areas of change for home care:

1. Funding for a home care package now follows the consumer providing more choice and flexibility for consumers to change providers, if they wish.
2. There is a consistent national approach to prioritising access to home care packages through the national prioritisation system. This allows for a more equitable and flexible distribution of home care packages based on the individual needs and circumstances of consumers, and the time they have been waiting for care, regardless of where they live.
3. There is now a simplified process for organisations seeking to become approved providers under the Aged Care Act 1997. This encourages new providers to enter the home care market, supporting greater choice for consumers. All providers are still required to demonstrate their suitability to become an approved provider and meet quality standards.

## OVERVIEW

This first data report focuses on the transition to the new home care system and the national prioritisation process in its first four months of operation from 27 February to 30 June 2017.

This report consists of four broad chapters covering the consumer's journey through home care as follows:

- [Chapter 1](#) covers the eligibility and assessment of home care consumers.
- [Chapter 2](#) covers the prioritisation of home care consumers in the national queue.
- [Chapter 3](#) covers the delivery of home care services.
- [Chapter 4](#) covers maximum exit amounts.

A [Glossary](#) is also provided at the end of the report explaining specific terminology and abbreviations used throughout the report.

## SCOPE OF THE REPORT


This report has been prepared to provide timely access to information on the operation of the new national system for home care.

The *Increasing Choice in Home Care* reforms were implemented through a co-design approach with the sector, including representation and input from consumers and carers, providers, health professionals, unions, peak bodies, state and territory governments and other interested parties.

In moving to a nationally consistent approach, a key theme through consultation was the need for regular monitoring, reporting and evaluation of the new system to support:

- equity of consumer access to home care packages;
- transparency of the national prioritisation system through the stages of the consumer journey including eligibility and assessment, the national queue, assignment of home care packages and service delivery;
- accountability of system performance; and
- transition to a more competitive market-driven environment, where providers have timely access to information to manage their businesses.

This report covers the first four months of the new home care system from 27 February 2017 to 30 June 2017. At this stage, data on the number of consumers in home care is only available up to 31 March 2017. The impact of assigning packages directly to consumers will become clearer in the next report, when data will be available on consumers entering into home care under the new arrangements up to 30 June 2017.



The department expects that future reporting on the home care system will evolve, in response to stakeholder feedback and more information becoming available about consumer behaviour (including activating home care packages and changing home care providers). As the new system stabilises, future reporting will also examine equity of access to home care packages, including Aboriginal and Torres Strait Islander people, people with special needs and those living in rural and regional areas.

This report does not include information on the expected wait-times for individual consumers waiting on the national queue for a home care package. Expected wait times were not available by 30 June 2017 and have not been included in this report which covers the period 27 February to 30 June 2017. It is expected that wait times for individuals who have been approved for home care will be made available through the My Aged Care client portal and through the My Aged Care contact centre.

Existing annual reporting on home care will continue through a range of publications, including:

- the [Report on the Operation of the Aged Care Act \(ROACA\)](#);
- the [Department of Health Portfolio Budget Statements \(PBS\)](#) and [Annual Report](#);
- the annual [Stocktake of Australian Government Subsidised Aged Care Places](#);
- the Productivity Commission's annual [Report on Government Services \(ROGS\)](#); and
- the Aged Care Financing Authority's (ACFA) [Report on the Funding and Financing of the Aged Care Sector](#).

## DATA SOURCES

Data in this report was collected from departmental information systems and records.

# 1 Eligibility and assessment

## Key points:

1. A revised approval process was introduced for home care that requires consumers to be approved for a specific level of home care, and to be assigned a priority to receive home care services.
2. There were 38,018 approvals for home care under the new arrangements between 27 February and 30 June 2017. Of these, 25.8 per cent were for high priority and 74.2 per cent were for medium priority.

## 1.1 NUMBER OF HOME CARE APPROVALS

This section discusses eligibility and assessment of home care consumers. It presents data on the number of home care approvals made as an outcome of assessments conducted by Aged Care Assessment Teams (ACAT).

The *Increasing Choice in Home Care* reforms impacted ACAT assessments for home care in the following two ways:

- Approvals are made at a specific package level (1, 2, 3 and 4) instead of being made in broad bands (1-2 or 3-4).

The assessor must determine a consumer's priority for service (medium or high). This priority indicates a consumer's risk of rapid physical, mental or cognitive decline in the absence of timely services. High priority approvals are intended for consumers who have an urgent need for care and require a home care package as soon as possible. High priority approvals should only apply to a small number of consumers.

Table 1 shows the total number of home care approvals between 27 February 2017 and 30 June 2017 by state and territory, and package level. Nationally, there were a total number of 38,018 approvals. Approvals for a level 4 package accounted for 14,235 (or 37.4 per cent) of all approvals, followed by 12,315 (or 32.4 per cent) for level 3 packages, and 11,174 (or 29.4 per cent) for level 2 packages. There were only 294 (or 0.8 per cent) approvals for level 1 packages.

Table 1: Number of home care approvals between 27 February and 30 June 2017 by state and territory and level

State/territory	Level 1	Level 2	Level 3	Level 4	Total
NSW	119	3,938	4,797	4,556	13,410
VIC	70	3,236	2,300	2,641	8,247
QLD	54	1,901	2,355	3,022	7,332
WA	16	762	1,057	1,710	3,545
SA	18	791	1,287	1,646	3,742
TAS	8	358	303	370	1,039
ACT	8	135	170	218	531
NT	1	53	46	72	172
<b>National</b>	<b>294</b>	<b>11,174</b>	<b>12,315</b>	<b>14,235</b>	<b>38,018</b>

Notes: 1. A consumer can be presented more than once in the figures above, if they have been approved on multiple occasions within the reporting period. For instance, if a consumer's needs change, they may undertake a re-assessment resulting in a revised approval.

Table 2 shows a further breakdown of approvals by priority. A total of 28,219 (or 74.2 per cent) approvals were assessed as medium priority compared with a total of 9,799 (or 25.8 per cent) approvals assessed as high priority.

Table 2: Number of home care approvals between 27 February and 30 June 2017 by state and territory, level and priority

State/territory	Level 1		Level 2		Level 3		Level 4		Total	
	Med	High	Med	High	Med	High	Med	High	Med	High
NSW	118	1	3,651	287	3,866	931	2,270	2,286	9,905	3,505
VIC	70	0	3,130	106	2,027	273	1,524	1,117	6,751	1,496
QLD	51	3	1,616	285	1,686	669	1,129	1,893	4,482	2,850
WA	16	0	723	39	885	172	906	804	2,530	1,015
SA	18	0	751	40	1,159	128	1,206	440	3,134	608
TAS	8	0	342	16	286	17	244	126	880	159
ACT	8	0	130	5	150	20	136	82	424	107
NT	1	0	52	1	37	9	23	49	113	59
<b>National</b>	<b>290</b>	<b>4</b>	<b>10,395</b>	<b>779</b>	<b>10,096</b>	<b>2,219</b>	<b>7,438</b>	<b>6,797</b>	<b>28,219</b>	<b>9,799</b>
	<b>294</b>		<b>11,174</b>		<b>12,315</b>		<b>14,235</b>		<b>38,018</b>	

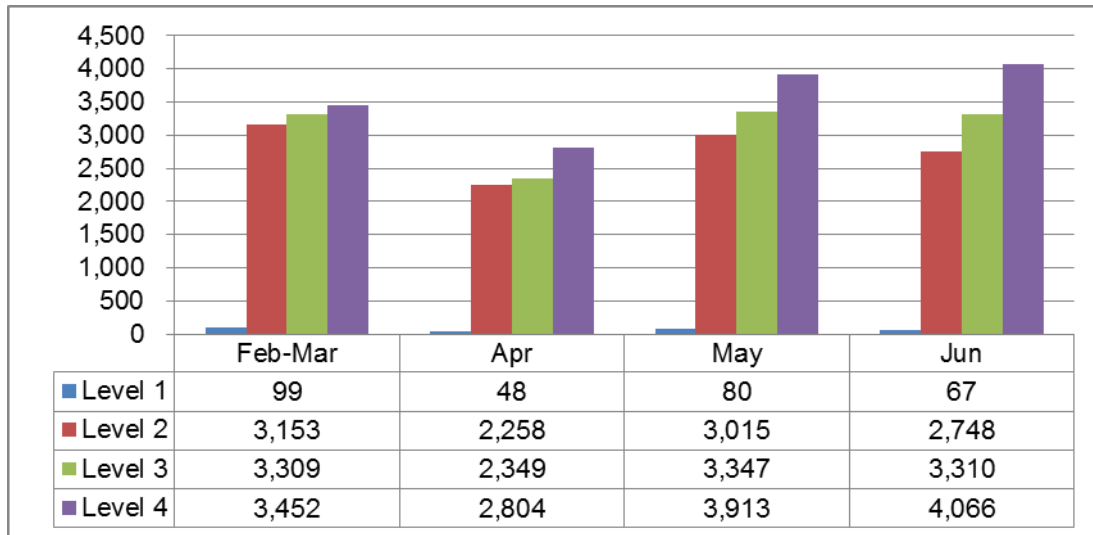
Notes: A consumer can be presented more than once in the figures above, if they have been approved on multiple occasions within the reporting period. For instance, if a consumer's needs change, they may undertake a re-assessment resulting in a revised approval.

Noting some of the inconsistencies between states and territories, additional support and training has been provided to ACATs to ensure greater national consistency of approach to approvals and prioritisation.



Figure 1 shows the total number of home care approvals by month and home care package level. On a monthly basis, approvals have remained relatively stable since March; with the exception of April. This is related to the school holiday period and a higher number of public holidays.

Figure 1: Number of home care approvals per level by month



Notes: A consumer can be presented more than once in the figures above, if they have been approved on multiple occasions within the reporting period. For instance, if a consumer's needs change, they may undertake a re-assessment resulting in a revised approval. 2. Data from February and March has been combined as the February reporting period only included 27 and 28 February 2017.

## 2 Prioritisation queue

### Key points

1. A national prioritisation queue has been established to ensure all consumers are treated equitably. This is a change from previous arrangements where consumers waited on individual provider queues and often sat on multiple queues.
2. In the future the national queue will provide a better understanding of the demand for home care. At 30 June 2017 there were 53,750 consumers seeking home care who had not yet been assigned a home care package. This number has decreased by 11.5 per cent since 27 February 2017.
3. A further 35,154 consumers on the national queue have been assigned an interim level package that allows them to receive home care at a lower level.

### 2.1 NUMBER OF CONSUMERS ON THE NATIONAL PRIORITISATION QUEUE

This section presents data on the number of consumers who are seeking a home care package at their approved level on the national prioritisation queue (the queue). Consumers are placed on the queue according to the date they were approved for home care, and their priority for home care services. They are assigned a package when they are the next eligible consumer on the queue at a particular level and priority.

The queue consists of consumers who are not yet receiving any home care (though they may be receiving other aged care services, for example through the Commonwealth Home Support Programme), and those that are receiving home care at a lower level package than they are approved for. If a consumer on the queue takes up the offer of a lower level package and commences services, they will also continue to remain on the queue until a package becomes available at their approved level.

The queue has enabled a better understanding of the number of potential home care consumers. Previously, the department had limited visibility as consumers waited on provider waitlists for access to a home care package. There was no means to understand how many consumers who had been approved for home care were actively waiting for a package. Under the new arrangements, consumers are placed on the national queue if they indicate they are seeking services. They can opt-in and out of the queue at any time. The queue reflects potential home care consumers only, as consumers may still choose to decline a package when it is assigned to them. For example, a consumer may decide other aged care services better suit their needs at that point in time.

Figure 2 shows that nationally there were 53,750 consumers on the queue at 30 June 2017 who had not yet been assigned a home care package. A further 35,154 consumers on the queue had been assigned an interim level package, allowing them to receive home care at a lower level while waiting for their approved level. The number of consumers on the queue from each jurisdiction reflects a number of factors, including current and historic trends in

approvals and availability of home care services within each state and territory prior to 27 February 2017.

As a result of the new national prioritisation system, an increasing number of consumers have been offered access to home care through an interim package. For example, the number of consumers waiting on the queue without a home care package at any level has decreased by 11.5 per cent (6,970) since the start of the measure. By 30 June 2017, approximately 39.5 per cent (35,154) of all consumers on the queue were receiving an interim level package, compared to 25.0 per cent (20,276) of consumers when the measure started.

Although more consumers are being offered access to care, the overall number of consumers on the queue increased by 9.8 per cent (7,908) between 27 February and 30 June 2017. This is being driven by a range of factors, including an increasing number of consumers who wish to remain in their homes for longer.

Figure 2: Consumers on the national prioritisation queue, by month

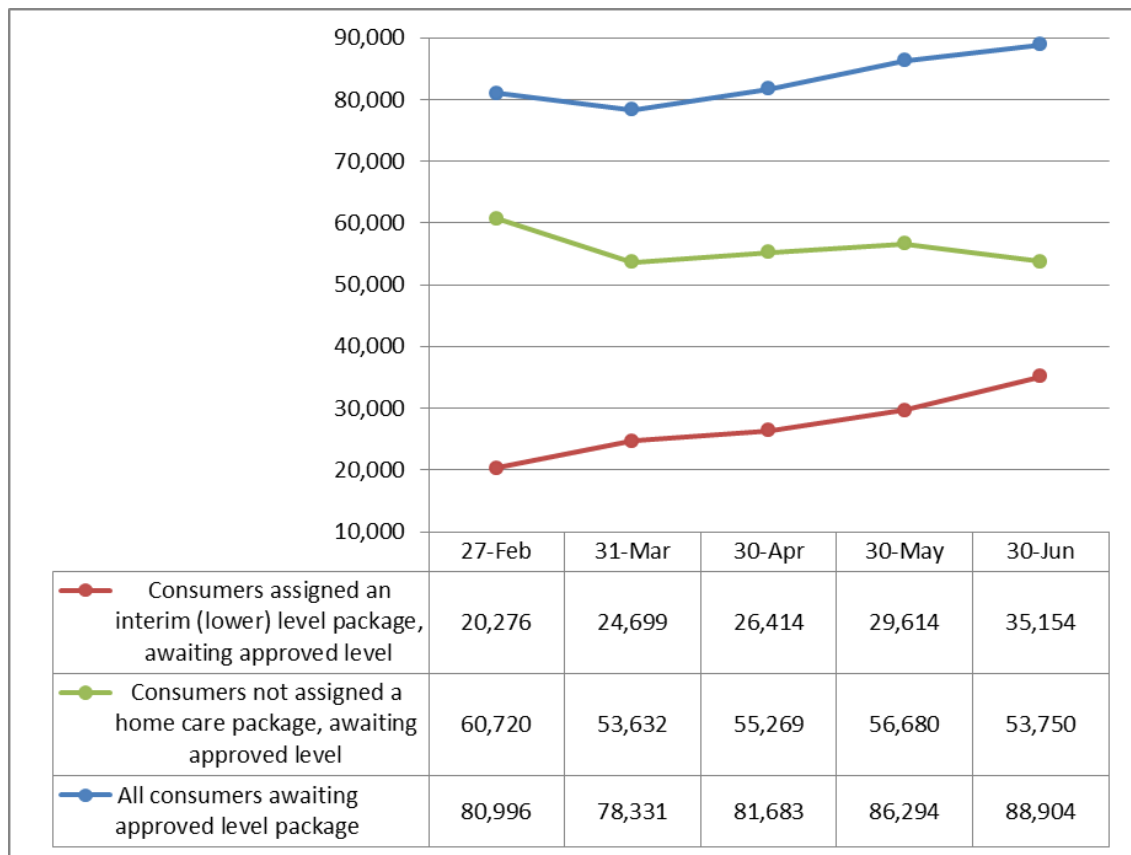


Table 3 displays the number of consumers on the queue from each state and territory. The weighting towards level 2 and 4 approvals is partially due to the introduction of four different approval levels on 27 February 2017. All pre-existing consumers with a broad-banded level 1-2 or 3-4 approval were automatically deemed to be approved at the highest level of their broadband, i.e. either at level 2 or level 4. As the queue increasingly consists of consumers with more recent approvals, it will more closely reflect the proportion of approvals being made per level.

Higher representation at level 4 is also a result of the lower number of level 4 packages in circulation, which is determined by the Aged Care Provision Ratio for home care. Many consumers approved for level 4 are receiving care at an interim level whilst waiting for a package at their approved level.

Table 3: Total number of consumers on the national prioritisation queue, by level of approval and state and territory of residence as at 30 June 2017

State/territory	Level 1	Level 2	Level 3	Level 4	Totals
NSW	90	7,492	3,980	19,123	30,685
VIC	59	6,633	2,062	9,732	18,486
QLD	37	3,798	1,914	11,078	16,827
WA	15	1,336	844	6,778	8,973
SA	14	1,508	1,091	7,169	9,782
TAS	5	511	248	1,179	1,943
ACT	4	351	139	1,007	1,501
NT	0	93	41	227	361
<b>National</b>	<b>224</b>	<b>21,791</b>	<b>10,359</b>	<b>56,530</b>	<b>88,904</b>

Notes: 1. National total includes incomplete records requiring further address information.

Over this initial reporting period the queue continues to move into steady state following transition. Consumers were transitioned into the new arrangements differently depending on their approval date for home care:

- Consumers approved before 1 July 2016 and not already receiving services were asked to contact My Aged Care to opt-in to the queue.
- Consumers approved between 1 July 2016 and 26 February 2017 were automatically queued unless they opted-out.
- Consumers already receiving services through a lower level package were automatically placed on the queue for their approved level.

Figure 3 shows the composition of the queue over time by consumer approval date. It demonstrates that while the queue still largely consists of consumers approved for care prior to 27 February 2017, the number of consumers on the queue with the oldest approvals (made prior to 1 July 2016) is decreasing. This is largely because they were closer to the top of the queue at the start of the measure and were more likely to be assigned their approved level package. The number of consumers on the queue who were

approved between 1 July 2016 and 26 February 2017 is expected to decrease over the coming quarter as they will receive a larger share of package assignments. As more time passes, the queue will be increasingly made up of consumers approved from 27 February 2017 onwards, and will be a reflection of more recent approvals for home care.

Figure 3: Proportion of consumers on the national prioritisation queue, by date of approval

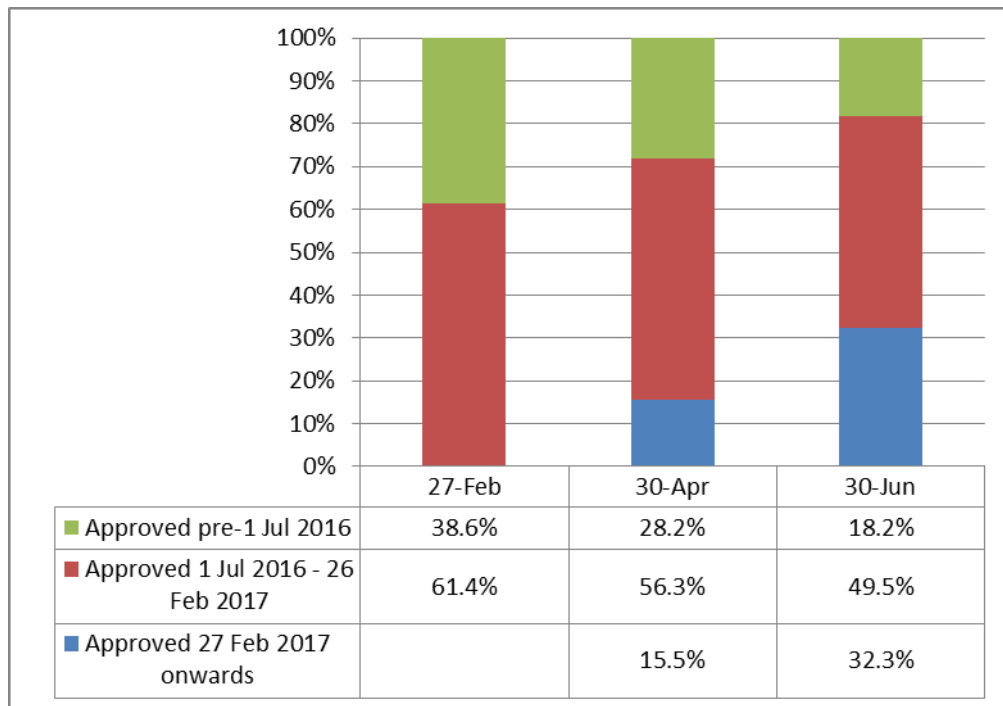


Table 4 analyses the composition of the queue as at 27 February 2017 by jurisdiction and consumer approval date. It shows differences between states and territories in the proportion of consumers on the queue with older approvals (prior to 1 July 2016), and newer approvals (1 July 2016 to 26 February 2017). Understanding the composition of the queue by jurisdiction at the start of the measure helps explain the numbers of packages assigned across states and territories as detailed in the following [Section 2.2](#) at Table 7.

Table 4: State or territory of residence of consumers on the national prioritisation queue as at 27 February 2017

State/territory	Approved prior to 1 July 2016 As a percentage of total consumers on the queue	Approved 1 July 2016 – 26 February 2017 As a percentage of total consumers on the queue
NSW	35.6%	34.4%
VIC	16.1%	19.8%
QLD	22.2%	18.7%
WA	9.7%	10.2%
SA	8.7%	10.7%
TAS	2.3%	2.1%
ACT	1.9%	1.8%
NT	0.4%	0.4%
Not stated	3.0%	1.8%
National	100.0%	100.0%

Note: 'Not stated' includes incomplete records requiring further address information.

## 2.2 NUMBER OF HOME CARE PACKAGES RELEASED

This section presents data on the number of home care packages that have been released through the national prioritisation system (the system), by level, priority and state or territory. Packages are assigned directly to consumers through the system, allowing consumers more choice in selecting a provider that best meets their goals and needs.

Once a consumer has been assigned a home care package, they are sent a letter confirming the details of their home care package. Consumers have 56 days (with an option for a 28 day extension) from being assigned a home care package to enter into a home care agreement with their preferred provider. Consumers are sent a reminder letter at 35 days, and if the consumer does not enter a home care agreement within the 56 day timeframe, their home care package is withdrawn.

Packages are not released on a one-for-one basis. The department models the number of packages to release at each level and priority in accordance with a number of parameters including:

- The number of new packages that must be released in a financial year to ensure that the Government meets the Aged Care Provision Ratio target of 45 home care places per 1,000 people aged over 70 by 2021-22.
- The number of pre-existing packages in the system at each level.
- The turn-over of packages as consumers exit care. Consumers tend to exit lower level packages more quickly. The department uses modelling to anticipate exits from care, and re-releases these packages back into the system accordingly.

- How many consumers will utilise a home care package and how quickly they will enter into care. Not all consumers will take up their assigned home care package. The department accounts for this when determining the number of packages to release.
- In this reporting period the total number of packages released also accounted for packages that were unoccupied at the commencement of the measure on 27 February 2017.

The system then assigns these packages to the next eligible consumer on the queue according to how long they have been waiting for care and their priority for home care service, regardless of where they live.

The number released at each priority endeavours to ensure consumers with a high priority receive timely access to care, while simultaneously maintaining the flow of packages to consumers with a medium priority.

Table 5 shows the total number of home care packages released at each level and priority between 27 February and 30 June 2017. Over this period, 47,729 packages were released through the system, with releases commencing on 13 March 2017. The higher number of level 2 packages assigned in this reporting period is due to the high number of pre-existing level 2 packages in the system at the commencement of the measure, and because consumers tend to exit these packages more quickly, leading to greater turnover.

Table 5: Total number of home care packages released to consumers to 30 June 2017, by level and priority

Month	Level 1		Level 2		Level 3		Level 4		Total
	Med	High	Med	High	Med	High	Med	High	
March	836	51	9,122	325	1,026	271	1,758	623	<b>14,012</b>
April	699	77	1,583	818	479	286	489	317	<b>4,748</b>
May	2,037	20	5,500	1,076	908	465	830	461	<b>11,297</b>
June	2,282	2	11,027	1,220	1,228	343	1,132	438	<b>17,672</b>
Subtotal	5,854	150	27,232	3,439	3,641	1,365	4,209	1,839	<b>47,729</b>
<b>Total</b>	<b>6,004</b>		<b>30,671</b>		<b>5,006</b>		<b>6,048</b>		

As outlined above, the number of packages that are released is determined by a range of factors, including how many consumers are expected to use a package and how quickly they are expected to enter into care. The department analysed consumer behaviour over the first two months of the measure and found that it was slightly different than expected. As a result the department adjusted the number of packages being released from mid-May onwards. This resulted in an increase in the number of packages being released in May and June. The department is continuing to better understand consumer behaviour in the new system, and will make further adjustments to the package release as needed. Further quantitative information on consumer behaviour will be provided in the next report.

As described in [Section 2.1](#), the new system allows consumers to receive a lower level interim home care package while they wait on the queue. Consumers will be assigned a package at their approved level when one is available, meaning that over time some consumers receive more than one package. In other words, the number of packages released is not a count of individual consumers who have been assigned a package. Over the period 29 per cent of packages (13,955) were assigned as upgrades to consumers who had previously been assigned a lower level home care package. Table 6 shows the number of home care packages that have been assigned as package upgrades, each month.

Table 6: Number of home care packages assigned to consumers not previously accessing home care, and number assigned as upgrades, by month

Month	Assigned to consumers not previously accessing home care	Assigned as package upgrades	Total
March	10,698	3,314	14,012
April	2,880	1,868	4,748
May	7,571	3,726	11,297
June	12,625	5,047	17,672
<b>Total</b>	<b>33,774</b>	<b>13,955</b>	<b>47,729</b>

Table 7 shows the number of packages assigned to consumers residing in each state and territory by month. The department no longer determines the number of packages that will be delivered in each jurisdiction. The assignment of packages across states and territories is a direct reflection of the queue. For example, over this reporting period, a large number of packages were assigned to consumers approved for home care prior to 1 July 2016. The state or territory those consumers resided in (refer to Table 4) would have influenced the number of packages assigned across jurisdictions. The percentage of approvals that are high priority in each state and territory will also have an impact on where packages are assigned. Over time it is expected that the distribution of packages will more closely reflect current approval behaviour (refer to Table 1).

Table 7: Number of packages assigned to consumers residing in each state and territory by month

State/territory	Mar 17	Apr 17	May 17	Jun 17	Total
NSW	5,263	1,770	4,143	5,903	17,079
VIC	2,081	629	1,698	3,136	7,544
QLD	3,459	1,287	2,823	4,020	11,589
WA	1,455	422	1,032	1,723	4,632
SA	910	357	983	1,975	4,225
TAS	302	111	258	328	999
ACT	292	84	198	367	941
NT	106	22	47	66	241
<b>National</b>	<b>14,012</b>	<b>4,748</b>	<b>11,297</b>	<b>17,672</b>	<b>47,729</b>

Note: 'National' includes incomplete records requiring further address information.



## 3 Service delivery

### Key points

1. Home care packages are now assigned directly to consumers according to their date of approval and priority for service. Between 27 February and 30 June 2017 a total of 47,729 home care packages were assigned to consumers.
2. There has been a transition period as consumers respond to the changes that allow them more choice and control. Data showing the impact of packages released under the new system on the number of consumers in care will not be available until later in 2017. However, between 30 June 2016 and 31 March 2017 there was a 10.2 per cent increase in the number of consumers in home care.
3. Changes were introduced to the approved provider process to support providers to enter the market and to allow more choice for consumers. This has resulted in a 47.3 per cent increase in the number of approved providers of home care between June 2016 and June 2017.
4. At least two or more approved providers offer home care services within each Aged Care Planning Region.

### **3.1 NUMBER OF CONSUMERS IN HOME CARE**

This section presents data on the number of consumers in home care from 30 July 2016 to 31 March 2017, which represents the transition period leading up to the home care reforms and then one month into the operation of the new arrangements.

Consumers are 'in a home care package' when an approved provider has accepted a consumer's referral for a home care package in the My Aged Care provider portal, entered into a home care agreement with the consumer and submitted entry information to the Department of Human Services (DHS). Providers are required to notify DHS of consumer entries within 28 days of a consumer entering care and consumer exits within 31 days of a consumer exiting care.

Data on the number of consumers in home care for the period April to June 2017 will be available in the next report. There is a three month lag in the availability of accurate information on consumers in care. The key issue is the time taken by providers to submit information on consumer entries and exits to DHS.

Figure 4 and Table 8 detail the total number of consumers in care at 30 June 2016, 30 September 2016, 31 December 2016, 27 February 2017 and 31 March 2017.

Figure 4: Number of consumers in home care from 30 June 2016 to 31 March 2017

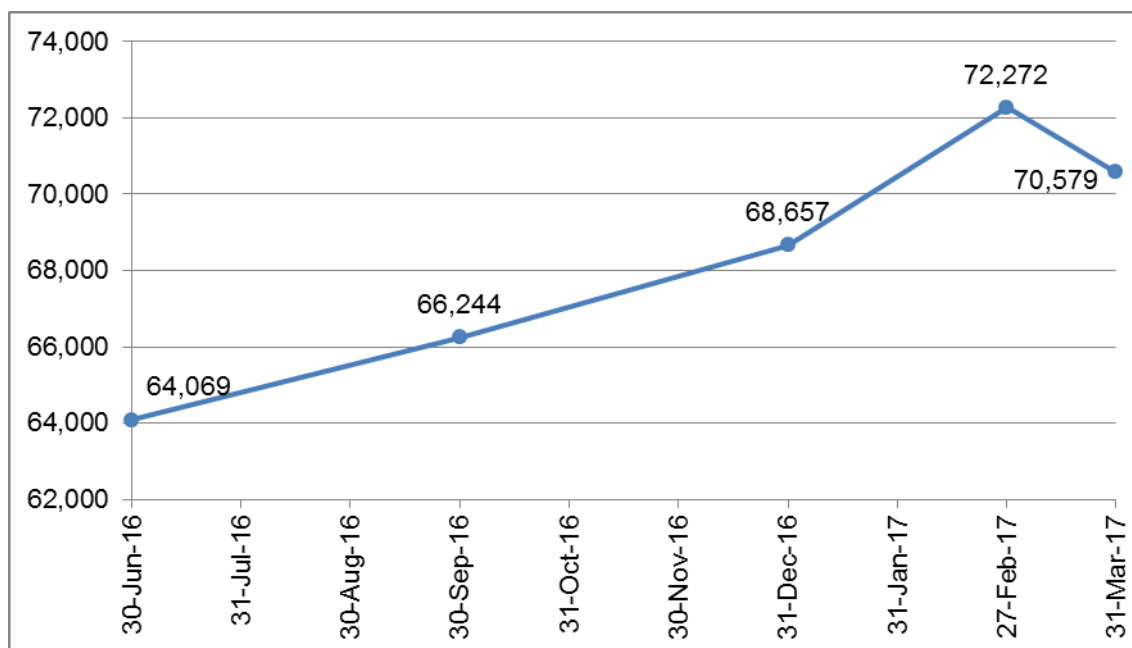


Table 8: Number of consumers in home care by level, 30 June 2016 to 31 March 2017

Level	Number of consumers in care					Change over period 30 June 2016 to 31 March 2017	
	Jun 16	Sep 16	Dec 16	Feb 17	Mar 17	Number	Per cent
Level 1	1,165	1,174	1,194	1,327	1,275	110	9.4%
Level 2	42,513	43,084	44,371	47,168	46,008	3,495	8.2%
Level 3	4,848	5,802	6,440	7,028	6,806	1,958	40.4%
Level 4	15,543	16,184	16,652	16,749	16,490	947	6.1%
<b>Total</b>	<b>64,069</b>	<b>66,244</b>	<b>68,657</b>	<b>72,272</b>	<b>70,579</b>	<b>6,510</b>	<b>10.2%</b>

Notes: Data for June 2016 is from the [2015-16 Report on the Operation of the Aged Care Act 1997](#).

Between 30 June 2016 and 31 March 2017, the total number of consumers in home care grew from 64,069 consumers to 70,579 consumers, which represents an increase of 6,510 consumers or 10.2 per cent. The number of consumers in all levels of home care increased over the nine month period, most notably in level 3 packages where there has been a 40.4 per cent increase of consumers in care. The large growth of consumers in level 3 packages was driven by the 2015 Aged Care Approvals Round (ACAR), which allocated a proportionately large number of level 3 places in recognition of consumer demand for higher level home care and sector feedback.

The number of consumers in home care reached a peak of 72,272 consumers on 27 February 2017 as providers rapidly filled their home care places before the reforms commenced. This means that providers filled 91.5 per cent of their 78,956<sup>1</sup> operational home care packages. The period of highest growth was between 31 December 2016 and 27 February 2017, where there was an increase of 3,615 home care consumers (or 5.3 per cent).

In the first month of the new home care arrangements from 27 February 2017 to 31 March 2017 the number of consumers in home care decreased by 1,693 consumers (or 2.4 per cent). Preliminary data<sup>2</sup> indicates that this reduction is a result of approximately 1,700 consumer entries into home care services and 3,400 consumer exits from home care services during March 2017.

The decrease in home care consumers to 31 March 2017 is expected to be temporary, as consumers assigned a home care package in March 2017 had 56 days (with the option of a 28 day extension) to enter into home care. Based on these timeframes, many of the 10,698<sup>3</sup> new consumers assigned a home care package from 13 March 2017 onwards would be expected to enter into care throughout April, May and June 2017.

As a result, the number of consumers in home care at 31 March 2017 is not reflective of package assignments up to 31 March 2017 (as outlined in section 2.2). For example, the 1,700 consumer entries in March 2017 represents only 15.9 per cent of the 10,698 new consumers assigned a home care package in March 2017. The number of consumers in home care is expected to increase from April onwards as more of the consumers who were assigned packages in the initial release activate their packages and enter into care. The system will also reach a steady state that will allow for a constant flow of packages to new consumers wishing to enter into home care.

Table 9 shows the distribution of consumers in home care at each level. The location of consumers in home care at 31 March 2017 is primarily influenced by the historical distribution of home care packages by region (managed through the annual ACAR) and how providers filled their available home care places prior to the reforms.

In the future the distribution of consumers in home care will increasingly be influenced by the new national system which prioritises access to home care based on individual needs and circumstances, regardless of where consumers live.

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<sup>1</sup>There were 78,956 operational home care packages at 30 June 2016 as reported in Table 7 of the [2015-16 Report on the Operation of the Aged Care Act 1997](#)

<sup>2</sup> Data extracted from the Ageing and Aged Care Data Warehouse.

<sup>3</sup> This figure is from Table 7 of this Report and represents the number of packages assigned to consumers not previously accessing home care.

Table 9: Number of home care consumers, by level and state/territory at 31 March 2017

State/territory	Level 1	Level 2	Level 3	Level 4	Totals	% of Total
NSW	476	15,399	2,244	4,829	<b>22,948</b>	32.5%
VIC	410	12,603	1,775	3,695	<b>18,483</b>	26.2%
QLD	186	8,311	1,204	3,018	<b>12,719</b>	18.0%
WA	30	3,211	686	2,760	<b>6,687</b>	9.5%
SA	97	3,913	577	1,138	<b>5,725</b>	8.1%
TAS	49	1,240	187	380	<b>1,856</b>	2.6%
ACT	21	732	103	502	<b>1,358</b>	1.9%
NT	6	564	24	159	<b>753</b>	1.1%
Not stated	0	35	6	9	<b>50</b>	0.1%
<b>Total</b>	<b>1,275</b>	<b>46,008</b>	<b>6,806</b>	<b>16,490</b>	<b>70,579</b>	
<b>% of Total</b>	<b>1.8%</b>	<b>65.2%</b>	<b>9.6%</b>	<b>23.4%</b>	<b>100.0%</b>	

Notes: 1. Location of home care consumers is based on the address of the consumer. 2. 'Not stated' includes incomplete records requiring further address information.

Table 10: shows the distribution of 70,529 consumers in home care as at 31 March 2017 by level and by Aged Care Planning Region (ACPR).

Table 10: Number of consumers in home care as at 31 March 2017 by level and ACPR

State/territory	Level 1	Level 2	Level 3	Level 4
<b>NSW</b>				
Central Coast	26	945	156	311
Central West	17	451	57	131
Far North Coast	33	865	118	253
Hunter	58	1,488	207	436
Illawarra	31	1,019	143	320
Inner West	57	1,009	138	300
Mid North Coast	33	1,067	139	315
Nepean	11	548	77	177
New England	≤10	437	99	145
Northern Sydney	32	1,765	232	515
Orana Far West	≤10	357	52	116
Riverina/Murray	19	617	94	193
South East Sydney	61	1,600	226	492
South West Sydney	39	1,317	196	472
Southern Highlands	27	557	75	164
Western Sydney	22	1,246	228	445
<b>Total</b>	<b>476</b>	<b>15,399</b>	<b>2,244</b>	<b>4,829</b>

State/territory	Level 1	Level 2	Level 3	Level 4
<b>VIC</b>				
Barwon-South Western	28	1,014	133	274
Eastern Metro	73	2,427	389	764
Gippsland	32	765	115	228
Grampians	21	564	81	176
Hume	25	733	111	206
Loddon-Mallee	20	868	104	269
Northern Metro	51	1,691	242	490
Southern Metro	103	2,980	380	837
Western Metro	53	1,444	209	404
<b>Total</b>	<b>410</b>	<b>12,603</b>	<b>1,775</b>	<b>3,695</b>
<b>QLD</b>				
Brisbane North	14	715	110	270
Brisbane South	14	1,149	169	351
Cabool	≤10	722	121	223
Central West	≤10	13	≤10	≤10
Darling Downs	32	570	85	193
Far North	≤10	459	67	165
Fitzroy	21	351	47	117
Logan River Valley	≤10	482	75	205
Mackay	≤10	178	27	81
North West	≤10	61	≤10	14
Northern	≤10	398	50	162
South Coast	12	1,001	144	372
South West	≤10	82	≤10	18
Sunshine Coast	36	1,011	149	424
West Moreton	≤10	341	28	167
Wide Bay	31	688	112	219
<b>Total</b>	<b>186</b>	<b>8,311</b>	<b>1,204</b>	<b>3,018</b>
<b>WA</b>				
Goldfields	≤10	32	11	29
Great Southern	≤10	109	18	99
Kimberley	≤10	79	≤10	27
Metropolitan East	≤10	509	113	387
Metropolitan North	15	799	187	712
Metropolitan South East	≤10	552	104	389
Metropolitan South West	≤10	646	162	632

State/territory	Level 1	Level 2	Level 3	Level 4
Mid West	≤10	114	18	88
Pilbara	≤10	38	≤10	19
South West	≤10	194	23	225
Wheatbelt	≤10	100	31	101
<b>Total</b>	<b>30</b>	<b>3,211</b>	<b>686</b>	<b>2,760</b>
<b>SA</b>				
Eyre Peninsula	≤10	139	33	49
Flinders & Far North	≤10	72	11	≤10
Hills, Mallee & Southern	22	450	65	125
Metropolitan East	≤10	518	79	151
Metropolitan North	≤10	557	103	230
Metropolitan South	19	850	107	232
Metropolitan West	26	626	80	136
Mid North	≤10	72	14	24
Riverland	≤10	123	15	42
South East	≤10	170	24	42
Yorke, Lower North & Barossa	≤10	313	41	90
<b>Total</b>	<b>97</b>	<b>3,913</b>	<b>577</b>	<b>1,138</b>
<b>TAS</b>				
North Western	≤10	275	42	85
Northern	11	352	57	100
Southern	29	602	88	187
<b>Total</b>	<b>49</b>	<b>1,240</b>	<b>187</b>	<b>380</b>
<b>ACT</b>				
ACT	21	732	103	502
<b>Total</b>	<b>21</b>	<b>732</b>	<b>103</b>	<b>502</b>
<b>NT</b>				
Alice Springs	≤10	130	≤10	14
Barkly	≤10	31	≤10	≤10
Darwin	≤10	182	12	101
East Arnhem	≤10	62	≤10	≤10
Katherine	≤10	50	≤10	≤10
<b>Total</b>	<b>≤10</b>	<b>564</b>	<b>24</b>	<b>159</b>
<b>NATIONAL</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Level 4</b>
<b>Total</b>	<b>1,275</b>	<b>46,008</b>	<b>6,806</b>	<b>16,490</b>

Notes: 1. For privacy reasons, where a consumer count is less than or equal to ten, it is represented as ≤10.  
2. Location of home care consumers is based on the address of the consumer. 3. Totals do not add as they include incomplete records requiring further address information.

## 3.2 NUMBER OF APPROVED PROVIDERS

This section presents data on the number of approved providers of home care in 2016-17.

Under the home care reforms, the process for becoming an approved provider under the *Aged Care Act 1997* has been streamlined.

Providers continue to be approved by the Department of Health under the new arrangements. However, they no longer have to compete for home care places through the ACAR. Instead, eligible consumers are assigned home care packages which they can use to choose their approved provider. Consumers can also change providers if they wish.

The home care reforms have impacted reporting on the number of approved providers of home care. In the past, the [Stocktake of Australian Government Subsidised Aged Care Places](#) has reported the number of approved providers with 'operational home care places'.

Reporting on approved providers of home care has changed under the new system because operational home care places no longer exist. Reporting is presented on the number of approved providers of home care 'with a home care service'. In other words, a provider is counted if it has notified<sup>4</sup> the Department of Health of the home care service through which it will provide care and is eligible for home care subsidy under section 46-1 of the *Aged Care Act 1997*. Setting up a home care service means the provider is ready<sup>5</sup> to deliver subsidised home care services.

The number of approved providers of home care is no longer reported by jurisdiction because providers are not restricted to home care places in a specific ACPR.

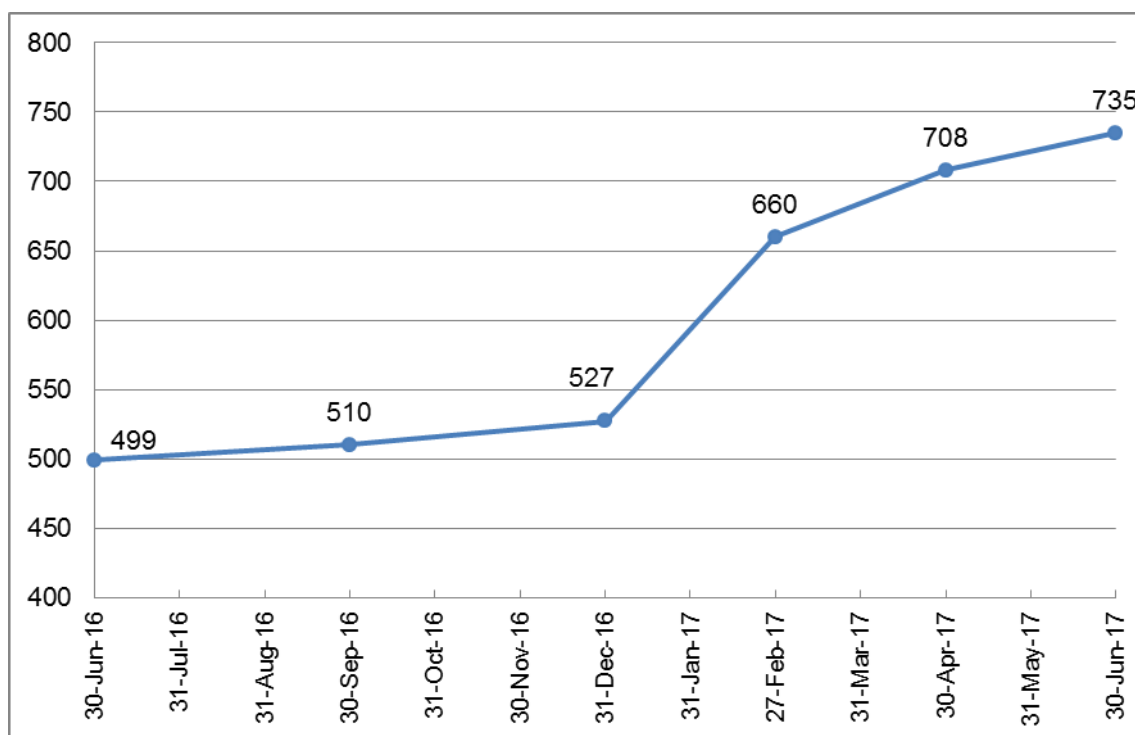
Figure 5 shows the number of approved providers for home care with home care services over time.

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<sup>4</sup> The Home Care Notification form is available on the [Approved Provider Information webpage](#)

<sup>5</sup> Provider Fact Sheet: [Information for New Approved Providers of Home Care Package Services](#)

Figure 5: Number of approved providers of home care with home care services in 2016-17



Note: Approved provider count is based on the approval effective date.

Figure 5 shows there has been an increase of 236 (or 47.3 per cent) approved providers of home care with a home care service. This increase is largely due to organisations becoming approved providers of home care in 2016-17. These organisations are from a range of backgrounds, including existing approved providers of residential and flexible care and service providers from the CHSP, the National Disability Insurance Scheme (NDIS) and other local health and community services.

In addition to new approved providers of home care, there is also a group of providers who were previously approved for home care<sup>6</sup> prior to 2016-17 that did not have operational home care places. A number of these providers have set up home care services in order to offer services under the new arrangements.

The overall growth in the number of approved providers of home care reflects a more market-based environment where there is increased choice for the consumer. Both existing and new approved providers have greater opportunity to expand their businesses to meet local demand in a market that is growing each year.

<sup>6</sup> Prior to the home care reforms, an organisation's approved provider status lapsed after two years if it did not have an allocation of places. If an organisation's home care approval status was current at 27 February 2017, it will not lapse.



### 3.3 PROVIDERS AND POTENTIAL CONSUMERS BY AGED CARE PLANNING REGION

This section examines the number of approved providers (AP) and potential consumers within each ACPR as at 30 June 2017.

Table 11 presents the count of approved providers that had indicated in My Aged Care that they had capacity to offer a package at a particular level in a postcode(s) within the applicable ACPR. This does not necessarily mean that the provider was providing care to one or more consumers, just that they had capacity to do so.

At least two or more approved providers offer home care services within each ACPR. An approved provider can be represented in the counts of more than one ACPR, as they are not limited to where they offer services nationally.

The counts of approved providers cover all providers who have indicated that they offer services in at least one postcode in the ACPR, irrespective of whether a provider offers services in one postcode or all post codes in the ACPR.

Table 11 indicates that counts of approved providers in an ACPR tend to be similar across each level. This suggests that where a provider has indicated they can offer services within the ACPR, they can do so across all four levels.

ACPRs located in regional and remote locations predominantly have smaller counts for both approved providers and consumers. This reflects smaller population sizes in these locations.

Table 11 also presents counts of potential consumers (C) within the applicable ACPR who had an active approval at a particular level for home care but have not yet been assigned a home care package at 30 June 2017 (i.e. queued consumers without a package). It should be noted that this Table differs from the information on consumers in care as presented in Table 10, which is based on consumers in care at 31 March 2017.

Table 11: Count of providers and potential consumers by ACPR as at 30 June 2017

State/territory	Level 1		Level 2		Level 3		Level 4	
	AP	C	AP	C	AP	C	AP	C
<b>NSW</b>								
Central Coast	16	≤10	16	364	16	164	16	356
Central West	16	≤10	17	187	16	50	16	175
Far North Coast	27	≤10	27	457	27	131	27	346
Hunter	44	≤10	44	443	43	187	43	848
Illawarra	30	≤10	30	320	30	153	30	312
Inner West	29	≤10	29	341	29	122	28	339

State/territory	Level 1		Level 2		Level 3		Level 4	
	AP	C	AP	C	AP	C	AP	C
Mid North Coast	37	≤10	37	408	37	162	37	463
Nepean	8	≤10	8	221	8	57	8	119
New England	17	≤10	17	201	17	53	17	186
Northern Sydney	30	≤10	31	707	31	341	31	1,057
Orana Far West	18	19	19	194	18	72	18	165
Riverina/Murray	28	12	29	539	28	194	28	451
South East Sydney	39	≤10	39	590	38	264	38	517
South West Sydney	33	≤10	34	535	33	196	32	505
Southern Highlands	22	≤10	22	291	22	62	22	307
Western Sydney	37	≤10	37	221	36	126	36	466
<b>Total</b>		90		7,207		2,721		8,141
<b>VIC</b>								
Barwon-South Western	24	≤10	24	288	24	110	24	209
Eastern Metro	39	≤10	39	1,211	39	306	39	749
Gippsland	16	19	16	397	16	119	16	322
Grampians	15	≤10	15	326	15	68	15	99
Hume	24	≤10	24	256	24	97	24	229
Loddon-Mallee	10	≤10	10	176	10	63	10	122
Northern Metro	30	11	30	831	30	279	30	590
Southern Metro	51	≤10	51	1,339	51	217	51	776
Western Metro	34	≤10	34	426	34	113	34	402
<b>Total</b>		59		6,390		1,663		4,467
<b>QLD</b>								
Brisbane North	33	≤10	32	384	32	139	32	440
Brisbane South	37	≤10	37	377	37	120	37	455
Cabool	19	≤10	20	364	20	72	20	331
Central West	8	≤10	9	≤10	8	≤10	8	≤10
Darling Downs	20	11	20	254	21	115	21	442
Far North	18	≤10	20	139	19	32	19	106
Fitzroy	18	≤10	18	129	18	71	18	171
Logan River Valley	22	≤10	22	139	22	95	22	259

State/territory	Level 1		Level 2		Level 3		Level 4	
	AP	C	AP	C	AP	C	AP	C
Mackay	10	≤10	10	95	9	19	9	52
North West	7	≤10	7	18	8	≤10	8	≤10
Northern	16	≤10	16	110	16	51	16	219
South Coast	23	≤10	22	430	22	233	22	525
South West	3	≤10	4	21	3	≤10	3	17
Sunshine Coast	35	≤10	35	425	35	91	35	406
West Moreton	17	≤10	17	72	17	26	17	113
Wide Bay	17	≤10	17	127	17	48	17	198
<b>Total</b>		37		3,659		1,292		4,682
<b>WA</b>								
Goldfields	7	≤10	7	≤10	7	≤10	7	≤10
Great Southern	3	≤10	3	≤10	3	≤10	3	23
Kimberley	7	≤10	7	≤10	7	≤10	7	≤10
Metropolitan East	25	≤10	26	38	26	14	26	61
Metropolitan North	23	≤10	23	56	23	36	23	154
Metropolitan South East	16	≤10	16	82	16	46	16	149
Metropolitan South West	12	≤10	12	47	12	52	12	138
Mid West	4	≤10	4	≤10	4	≤10	4	≤10
Pilbara	7	≤10	7	≤10	7	≤10	7	≤10
South West	10	≤10	10	≤10	10	≤10	10	59
Wheatbelt	6	≤10	6	≤10	6	≤10	6	23
<b>Total</b>		15		1,283		609		3,150
<b>SA</b>								
Eyre Peninsula	3	≤10	3	57	3	13	3	60
Flinders & Far North	8	≤10	8	≤10	8	≤10	8	≤10
Hills, Mallee & Southern	10	≤10	10	207	10	68	10	214
Metropolitan East	25	≤10	25	136	25	79	25	487
Metropolitan North	13	≤10	13	169	13	158	13	616
Metropolitan South	13	≤10	13	247	13	201	13	578
Metropolitan West	16	≤10	16	104	16	88	16	447
Mid North	3	≤10	3	25	3	28	3	68

State/territory	Level 1		Level 2		Level 3		Level 4	
	AP	C	AP	C	AP	C	AP	C
Riverland	2	≤10	2	70	2	47	2	72
South East	3	≤10	3	132	3	40	3	62
Yorke, Lower North & Barossa	8	≤10	8	≤10	8	≤10	8	≤10
<b>Total</b>		14		1,479		899		3,414
<b>TAS</b>								
North Western	11	≤10	12	98	12	36	12	76
Northern	11	≤10	11	169	11	72	11	182
Southern	25	≤10	25	150	25	84	25	189
<b>Total</b>		≤10		491		208		538
<b>ACT</b>								
ACT	21	≤10	21	311	21	101	21	403
<b>Total</b>		≤10		337		107		425
<b>NT</b>								
Alice Springs	13	≤10	13	13	13	≤10	13	≤10
Barkly	11	≤10	11	≤10	11	≤10	11	≤10
Darwin	13	≤10	13	27	13	≤10	13	37
East Arnhem	6	≤10	6	≤10	6	≤10	6	≤10
Katherine	10	≤10	10	≤10	10	≤10	10	≤10
<b>Total</b>		≤10		92		20		69
<b>NATIONAL</b>								
<b>Total</b>		<b>224</b>		<b>21,002</b>		<b>7,541</b>		<b>24,972</b>

Notes: 1. For privacy reasons, where a count of potential consumers is less than or equal to ten, it is represented as ≤10. 2. A potential consumer can only be counted once in the tables at their highest active approved level at 30 June 2017. 3. Totals do not add as they include incomplete records requiring further address information.

## 4 Maximum exit amounts

### Key points:

1. Previously providers were able to keep any unspent funds that remained in a consumer's package when they ceased care. The new arrangements now require providers to transfer these funds so that they follow the consumer.
2. Providers are able to deduct an exit amount from a consumer's unspent funds to support this transfer. This amount must be published on My Aged Care and agreed with the consumer.
3. At 30 June 2017, 35.9 per cent of providers indicated that they will not deduct an exit amount. The average maximum exit amount was \$280.

### 4.1 MAXIMUM EXIT AMOUNTS

This section reports on maximum exit amounts.

An exit amount is an amount that can be deducted by a home care provider from a consumer's unspent home care package amount if the consumer leaves their care (either because the client decides to change to another home care provider or the consumer leaves home care). It is intended to allow providers to recover administrative costs associated with the reconciliation and transfer of consumers' financial accounts.

There are legislative safeguards in place to protect consumers. Any agreed exit amounts must be included in the consumer's home care agreement, and the exit amount deducted cannot exceed the unspent funds a consumer has remaining when exiting care.

In addition, providers who wish to deduct an exit amount are required by legislation to provide their maximum exit amount for publication on My Aged Care. The maximum exit amount represents the highest dollar value the provider can include in a consumer's home care agreement.

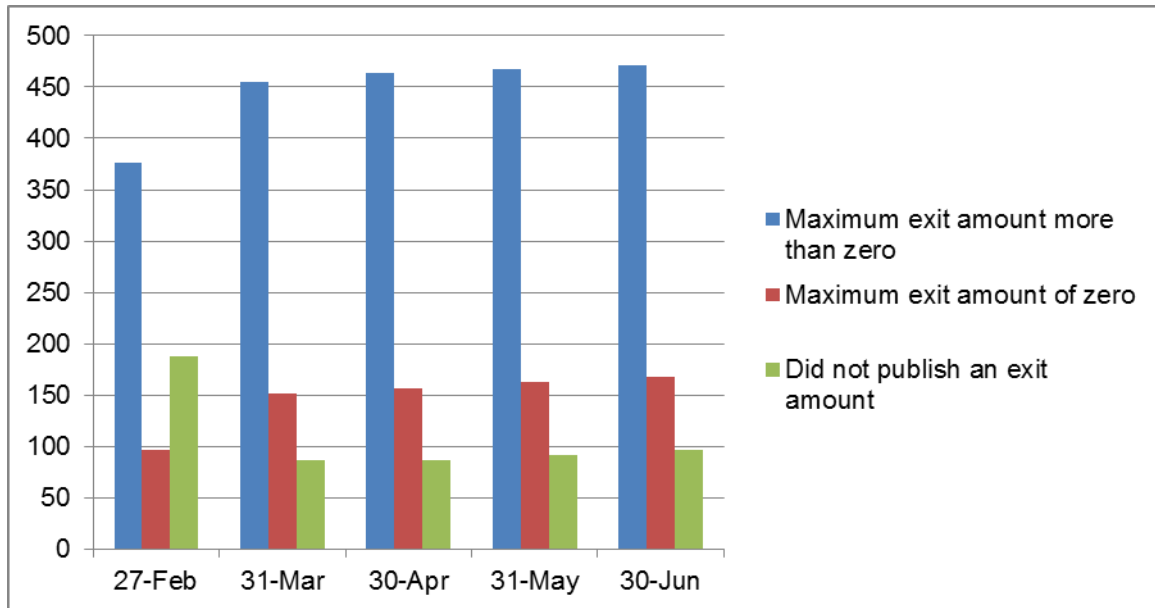
Providers may choose to publish a maximum exit amount of zero. Providers that do not publish a value on My Aged Care are prevented by legislation from including an exit amount in a home care agreement, and therefore effectively have a maximum exit amount of zero. This means that they cannot deduct an amount.

The following data describes the maximum exit amounts providers have published. However, providers may choose to deduct less than the amount published for a range of reasons, including if they have indicated a lesser amount in the home care agreement, or if there are not sufficient funds remaining in the home care package.

Table 12: Number of approved providers with a maximum exit amount published on My Aged Care

	27-Feb	31-Mar	30-Apr	31-May	30-Jun
Maximum exit amount more than zero	376	455	464	468	471
Maximum exit amount of zero	96	152	157	163	168
Did not publish an exit amount	188	86	87	92	96

Figure 6: Number of approved providers with a maximum exit amount published on My Aged Care over time



As shown in Table 12 and Figure 6, information on approved providers and maximum exit amounts is aggregated into three categories:

- Approved providers with a maximum exit amount more than zero;
- Approved providers with a maximum exit amount equal to zero; and
- Approved providers that did not publish an exit amount.

Approved providers that did not publish an exit amount may include newly approved home care providers coming online who have not yet updated their maximum exit amount information.

Since commencement, the number of approved providers with a maximum exit amount more than zero has increased, aligning with a general increase in the total number of approved providers. As at 30 June 2017, 168 providers published a maximum exit amount equal to zero. The number of providers that did not publish an exit amount has decreased between 27 February and 31 March 2017, indicating that more providers started to provide maximum exit amount information for publication.

Figure 7 shows the average maximum exit amount over time has decreased from \$290 to \$280. As at 27 February 2017, the average maximum exit amount was reported as \$417.

At this time, the average maximum exit amount calculation only accounted for approved providers who had notified the department prior to the commencement of the reforms of their maximum exit amount. When the new arrangements started the calculation was adjusted to include all approved providers including those that did not publish an amount.

Figure 7: Average maximum exit amounts published on My Aged Care over time

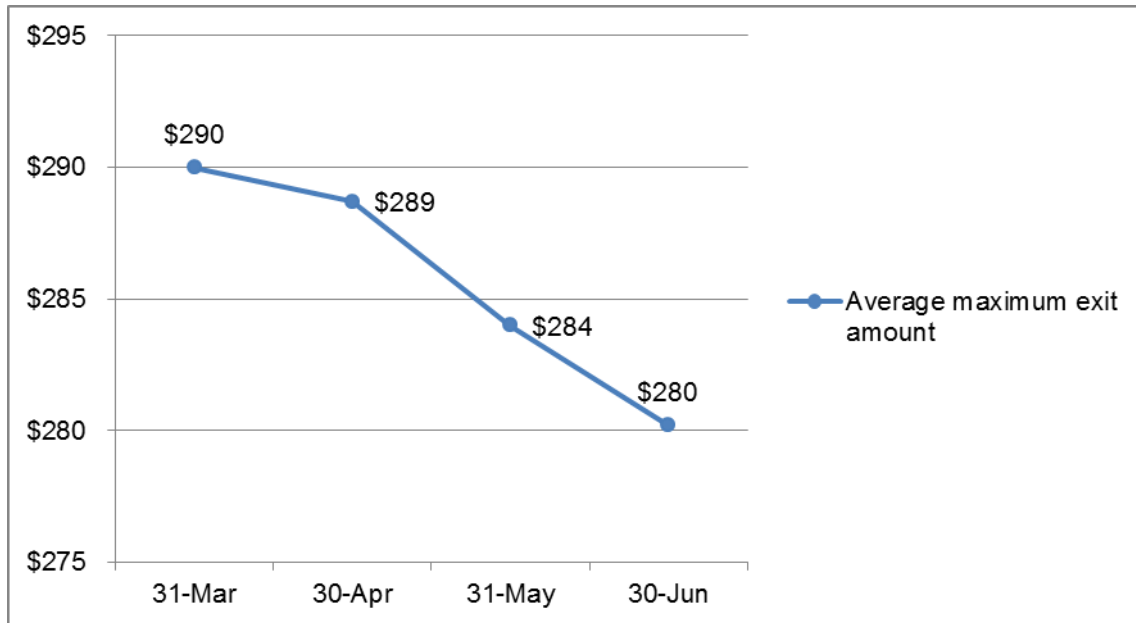


Table 13 shows the number of approved providers with a maximum exit amount of \$1,000 or more. The number of approved providers with a maximum exit amount of \$1,000 or more has decreased since commencement. On 27 February 2017, 18 providers (or 2.7 per cent of all providers) had a maximum exit amount of \$1,000 or more. This has decreased to 15 providers (or 2.0 per cent of all providers). The highest published maximum exit amount has remained at \$5,000 since 27 February 2017.

Table 13: Number of approved providers with a maximum exit amount of \$1,000 or more

	27-Feb-17	30-Jun-17
Maximum exit amount more than \$1,000	9	6
Maximum exit amount of \$1,000	9	9
<b>TOTAL</b>	<b>18</b>	<b>15</b>

## Glossary

Term	Definition
<b>Aged Care Act 1997</b>	The primary legislation governing the provision of Aged Care services.
<b>Aged Care Approvals Round (ACAR)</b>	A competitive application process that enables prospective and existing approved providers of aged care to apply for a range of new Australian Government funded aged care places and financial assistance in the form of a capital grant.
<b>Aged Care Assessment Teams (ACAT)</b>	ACATs are teams of medical and allied health professionals who assess the physical, psychological, medical, restorative, cultural and social needs of frail older people and help them and their carers to access appropriate levels of support.
<b>Aged Care Financing Authority (ACFA)</b>	ACFA provides independent advice to the government on funding and financing issues, informed by consultation with consumers, and the aged care and finance sectors.
<b>Aged Care Planning Region (ACPR)</b>	The areas marked out in the ACPR maps which can be found on the <a href="#">department's website</a> .
<b>Aged Care provision ratio</b>	A specified national provision level of 125 residential, home, and restorative care places for every 1,000 people aged 70 years or over, to be achieved by 2021-22. The current target provision ratios were introduced as part of the <i>Living Longer Living Better</i> measure in 2012-13.
<b>Annual Report</b>	A report that provides Members of Parliament, Senators and the public with a detailed description of the department's activities during each financial year. It reports against planning outcomes and performance targets identified in the department's Portfolio Budget Statements and Portfolio Additional Estimates Statements.
<b>Approved provider</b>	An organisation that has been approved to provide home care under the <i>Aged Care Act 1997</i> .
<b>Commonwealth Home Support Program (CHSP)</b>	A program which provides entry-level support services designed to help frail older people stay in their homes.
<b>Consumer</b>	Refers to both existing and prospective recipients of home care services, and their informal carers and nominated representatives.
<b>The department</b>	Means the Department of Health. The department has responsibility for administering the <i>Aged Care Act 1997</i> and has responsibility for administering the home care program. The department's responsibilities in relation to the home care program include policy responsibility for implementing the <i>Increasing Choice in Home Care</i> reforms. It also has responsibility for approval of Approved Providers of home care under the <i>Aged Care Act 1997</i> .



Term	Definition
<b>Exit amount</b>	An amount that can be deducted by a home care provider from a consumer's unspent home care package amount if the consumer leaves their care.
<b>Home care agreement</b>	A contract made between the home care consumer and approved provider. It has the same meaning given in the <i>Aged Care Act 1997</i> .
<b>Home Care Packages Program</b>	A program that supports older Australians with complex needs to remain living at home through a coordinated package of care and services to meet the individual needs of consumers.
<b>Increasing Choice in Home Care</b>	A package of home care reforms announced in the 2015-16 Budget that commenced on 27 February 2017 to improve the way that home care services are delivered to older Australians.
<b>Interim package</b>	A package at a lower level than a consumer's approved level, through which they are able to access some home care services while waiting on the queue for a higher level package to become available.
<b>My Aged Care</b>	The main entry point to the aged care system in Australia. My Aged Care aims to make it easier for older people, their families, and carers to access information on ageing and aged care, have their needs assessed and be supported to find and access services.
<b>National Disability Insurance Scheme (NDIS)</b>	A government-funded program to support a better life for Australians with a significant and permanent disability, and their family and carers.
<b>National prioritisation queue (the queue)</b>	The order in which consumers have been placed for a home care package assignment, according to the time and date of a consumer's approval for home care and their priority (either medium or high).
<b>National prioritisation system (the system)</b>	The nationally consistent process for allocating home care packages based on consumers' needs and circumstances, regardless of where they live.
<b>Notified home care service</b>	An approved provider that has notified the Department of Health of the home care service through which it will provide care and is eligible for home care subsidy under section 46-1 of the <i>Aged Care Act 1997</i>
<b>Portfolio Budget Statement</b>	A statement that informs Senators and Members of Parliament of the proposed allocation of resources to Government outcomes by entities within the Health portfolio.
<b>Report on Government Services</b>	A report that provides information on the equity, effectiveness and efficiency of government services in Australia.

Term	Definition
<b>Report on the Funding and Financing of the Aged Care Sector</b>	A report that examines the structure and operation of the Australian aged care sector and its key characteristics; early observations on the impacts of recent reforms; funding and financial performance of the sector based on a data within a financial year; and the emerging opportunities and challenges for the sector as significant reforms continue.
<b>Report on the Operation of the Aged Care Act 1997 (ROACA)</b>	A report that describes the operation of the Act during a financial year and includes additional information to aid an understanding of the aged care programs and policies.
<b>Unspent home care amount</b>	The unspent amount remaining in a person's home care package when they cease care with a provider, as defined in the <i>Aged Care Act 1997</i> .

