

Home Care Packages Program Assurance Plan 2023–25

Enhancing accountability and transparency, and protecting the integrity of Home Care Packages Program funding, through evidence-based assurance activities

Overview

This Home Care Packages (HCP) Program Assurance Plan (Plan) guides the conduct of the HCP Program Assurance (PA) Activities for 2023-24 to 2024-25 (until commencement of the Support at Home Program). This Plan has been informed by an environmental scan and risk assessment that considered input from internal and external stakeholders, findings from previous assurance activities, information analysis, recent and planned HCP Program changes and government priorities.

The Department may:

- send a notice (or letter) requiring information and documentation to be provided and/or questions answered by HCP approved providers (providers)
- conduct an entry meeting (voluntary unless required by the department) to discuss the scope of the Assurance Review
- liaise with providers throughout fieldwork, as required
- issue individual reports to providers which may recommend areas for improvement, and offer (voluntary unless required by the department) an exit interview
- publish a summary (of key themes) review report which can (where appropriate) identify individual providers
- conduct targeted education sessions and/or engage with providers through the HCP Program Assurance Community of Practice
 offer providers an assurance approach underpinned by principles of 'no surprises' and 'natural justice' and review activity aligned
- to relevant standards (where appropriate).

Areas of Focus

Upcoming assurance reviews/activities

Excluded items – PA risks 1,2,3 and 4*

A previous assurance review and stakeholder feedback identified a lack of understanding about what can be included in a HCP. This impacts care recipients from making informed choices about their care, affects value for money for the HCP Program and could mean funds are misused. This review will answer 2 critical questions: are HCP Program funds being used for care and services that are specified exclusions and how widespread is this practice; and why such practices are occurring. **This Review commenced in September 2023*.

Pricing transparency on My Aged Care – PA risks 1,2,3 and 4

Previous assurance reviews have identified pricing transparency requirements are still not being followed by all providers, which affects the ability of care recipients to exercise genuine choice and control. The department will undertake this activity annually, given the criticality of pricing information on My Aged Care for care recipients to exercise genuine choice and control.

HCP Program risks for Program Assurance

Risk 1 – Care recipients cannot exercise adequate choice due to provider processes or a lack of transparency or accuracy in pricing information/arrangements.

Risk 2 – The HCP Program does not achieve value for money for care recipients or Australian taxpayers.

Review to validate package expenditure- PA risks 1,2,3 and 4

This review will use care recipient monthly statements for a chosen sample of providers to validate package expenditure. The review team will seek from selected providers evidence (such as invoices/provider records) to support verification of charges to care recipients for selected line items on monthly statements.

Please note that the department may amend the order, purpose, scope or topic of listed reviews/activities on this plan. This may be due to newly available intelligence, changing risk profiles, efficiency reasons or program need/priorities, including supporting the transition to Support at Home

Additional assurance reviews/activities

Third-party service delivery – PA risks 1,2,3 and 4

HCP providers do not always directly deliver all HCP services to the care recipient, but are still accountable for appropriate use of program funds and value for money for care recipients. This review/activity would assure that providers are managing their funding responsibilities effectively. This would also seek to assess the level of program integrity risks from such arrangements.

Provider business processes (monthly statements) – PA risks 1,3 and 4

Monthly statements are a key pricing transparency tool for care recipients. This review/activity would assure that HCP providers' business processes for preparing monthly financial information statements are effective in delivering to the HCP Program requirements.

Review of account balances on exit from HCP – PA risks 1,2,3 and 4

Review 2 into unspent funds (Commonwealth portion) found that of the

44 providers reviewed, initially only 7 had no variances between what they reported to the review compared to what was recorded with Services Australia. Based on the review's findings, and other information before the department, there is a need to undertake assurance of unspent funds of exited care recipients.

Providers' processes for supporting self-managed care recipients – PA risks 2,3 and 4

Previous assurance activities and/or stakeholder feedback have highlighted the need to assure whether relevant providers are managing payment integrity effectively and providing value for money for self-managed care recipients. This review may also help support future policy and program considerations.

Conflict of interest - PA risks 1,2,3 and 4

Conflict of interest risk requires assurance, especially where employees of a provider are appointed as representatives for care recipients or those awaiting a HCP, particularly those from CALD backgrounds.

Commercial navigators – PA risks 1,2,3 and 4

Private organisations may help consumers connect with aged care services at a cost. The department may undertake an assurance activity to assure that providers are using HCP funds appropriately in this regard and choice is not being limited for care recipients.

Risk 3 – HCP Program funds are inappropriately or inadvertently misused by a provider or a care recipient. **Risk 4 –** HCP Program funds are fraudulently used by a provider or a care recipient.