

Residential aged care funding reform update

AN-ACC, hotelling, care minutes, 24/7 registered nurses and care time reporting

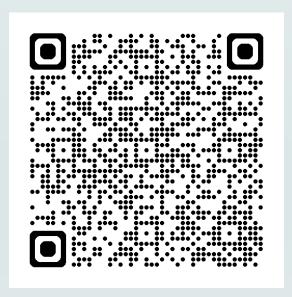
Mark Richardson

Assistant Secretary

Residential Care Funding Reform Branch

Department of Health and Aged Care

Wednesday 18 September 2024



Funding changes – new funding

\$5.8 billion additional funding over 4 years from 2024-25

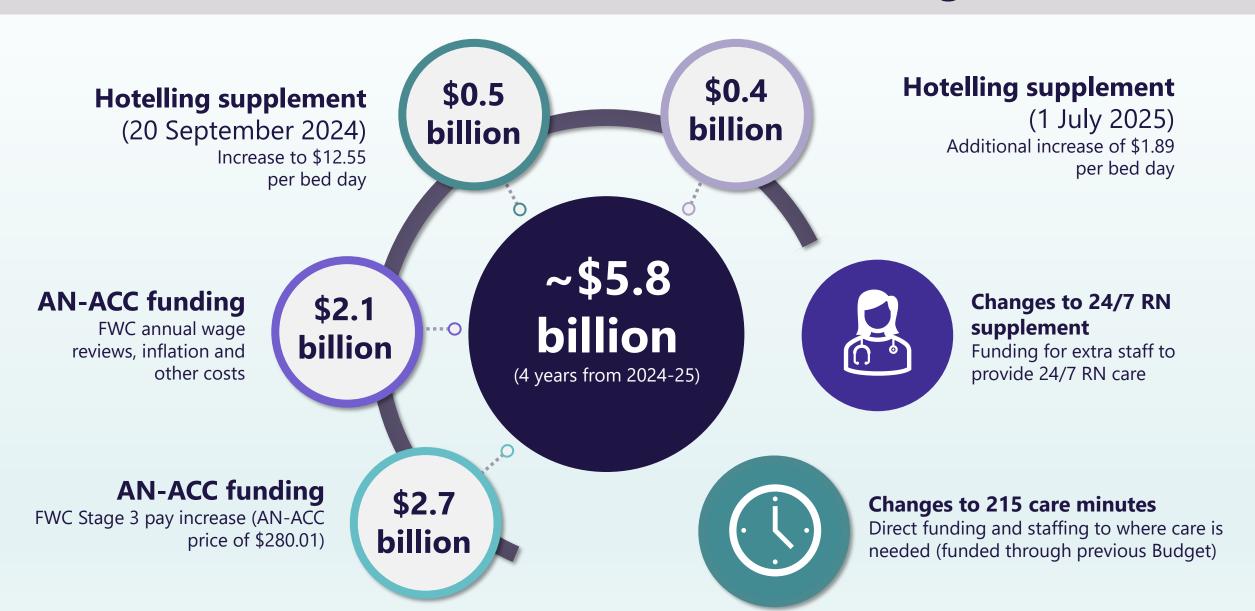
\$3.3 billion

Fair Work Commission Aged Care Work Value Case Stage 3 decision award wage increase in residential aged care

\$2.5 billion

other cost increases

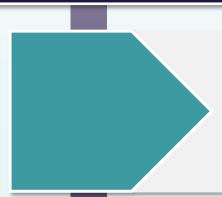
2024-25 MYEFO overview – residential aged care



Fair Work Commission stage 3



\$3.3 billion to fund the award wage increase in residential aged care



Increase for direct care workers

- Personal care workers, assistants in nursing, recreational activities officers
- First tranche 1 January 2025
- Second tranche 1 October 2025



Ancillary aged care workers

- Administration staff, laundry hands, cleaners, food services assistants etc
- Full award wages increase from 1 January 2025

AN-ACC changes summary

2024-25 pricing advice from the Independent **Health and Aged Care Pricing Authority** (IHACPA)

AN-ACC Price = \$280.01

Revised BCT structure for MM 1-5 and associated National Weighted Activity Units

Revised National Weighted Activity Units for AN-ACC classes

Remote and specialised base care tariffs

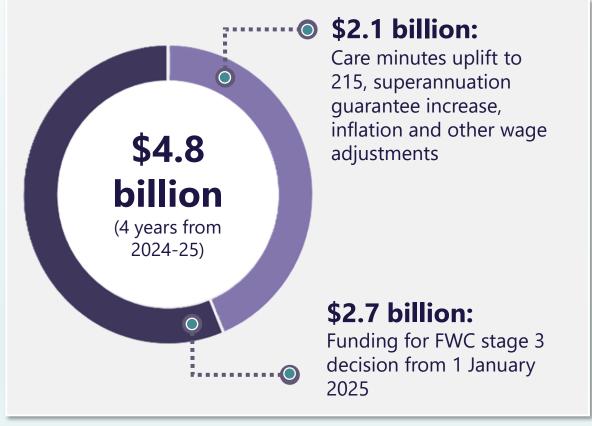
AN-ACC price: 1 October 2024

New AN-ACC price = \$280.01

(as recommended by IHACPA)

\$30.67 increase* (12.3%)

AN-ACC price calculation	
Reference cost (2021-22 ACFR)	\$204.05
Uplift in care minutes to 215	+\$10.16
FWC stage 2 decision	+\$24.21
FWC stage 3 decision	+\$3.91
Superannuation Guarantee increase	+\$3.25
Inflation and AWR	+\$33.25
Backpay adjustment (1 Jul-30 Sep 2024)	+\$1.18
New AN-ACC price (from 1 October 2024)	\$280.01



*compared with IHACPA's recommended 2023-24 price of \$249.34

Base Care Tariffs – new structure for MM 1-5

More granular MM 1-5 BCT structure recommended by IHACPA. This reflects evidence and sector feedback that regional and rural services have different cost profiles to metropolitan services

Description	Current BCT structure	New BCT structure	NWAU change
Metropolitan areas (MM1)		MM 1	MM 1 will increase from 0.49 to 0.50
Regional centres (MM2) Large rural towns (MM3)	MM1-4	MM 2-3	MM 2 and MM 3 will increase from 0.49 to 0.55
Medium rural towns (MM4) Small rural towns (MM5)	MM 5	MM 4-5	MM 4 will increase from 0.49 to 0.57 MM 5 will increase from 0.55 to 0.57

Base Care Tariffs – remote and specialised

Review of National Weighted Activity Units for non-specialised MM6 and MM7 services, specialised homeless and specialised Aboriginal and Torres Strait Islander services



AN-ACC funding: fixed component (Base Care Tariff)

Fixed (BCT) funding for services where funding is calculated based on <u>occupied</u> places

BCT Category	Services Australia Payment Statement code	NWAU	Funding per bed day (current rates)	
Standard MM 1	Fixed subsidy – class 6	0.50	Occupied places	\$124.37
Standard MM 2-3	Fixed subsidy – class 4	0.55	Occupied places	\$124.37
Standard MM 4-5	Fixed subsidy – class 7	0.57	Occupied places	\$124.37/\$139.60
Specialised homeless	Fixed subsidy – class 5	0.92	Occupied places	\$199.46

Funding per bed day (from 1 October 2024)	Annual funding* (from 1 October 2024)
\$140.01	\$51,103.65
\$154.01	\$56,213.65
\$159.61	\$58,257.65
\$257.61	\$94,027.65

Fixed (BCT) funding for services where funding is calculated based on <u>operational</u> places

BCT Category	Services Australia Payment Statement code	NWAU Funding Basis		Funding per bed day (current rates)
Standard MM 6 – 7 (for first 29 places)	Fixed subsidy – class 3H	0.68	Operational places	\$172.598
Standard MM 6 – 7 (for places 30 and above)	Fixed subsidy – class 3L	0.52	Operational places	\$131.986
Specialised Aboriginal and Torres Strait Islander MM 6	Fixed subsidy – class 2	0.78	Operational places	\$197.980
Specialised Aboriginal and Torres Strait Islander MM 7	Fixed subsidy – class 1	1.80	Operational places	\$456.876

Funding per bed day (1 October 2024)	Annual funding* (from 1 October 2024)
\$190.41	\$69,498.56
\$145.61	\$53,145.83
\$218.41	\$79,718.92
\$504.02	\$183,966.57

^{*} Based on 365 days

AN-ACC funding: **AN-ACC** and respite classes

Variable funding based on AN-ACC class (permanent residents)

AN-ACC class	Resident description	NWAU	Funding per bed day (current rates)
Class 1	Admit for palliative care	1.00	\$253.82
Class 2	Independent without compounding factors	0.19	\$48.23
Class 3	Independent with compounding factors	0.31	\$78.68
Class 4	Assisted mobility, high cognition, without compounding factors	0.21	\$53.30
Class 5	Assisted mobility, high cognition, with compounding factors	0.37	\$93.91
Class 6	Assisted mobility, medium cognition, without compounding factors	0.35	\$88.84
Class 7	Assisted mobility, medium cognition, with compounding factors	0.49	\$124.37
Class 8	Assisted mobility, low cognition	0.54	\$137.06
Class 9	Not mobile, higher function, without compounding factors	0.54	\$137.06
Class 10	Not mobile, higher function, with compounding factors	0.87	\$220.82
Class 11	Not mobile, lower function, lower pressure sore risk	0.83	\$210.67
Class 12	Not mobile, lower function, higher pressure sore risk, without compounding factors	0.81	\$205.59
Class 13	Not mobile, lower function, higher pressure sore risk, with compounding factors	1.00	\$253.82

New NWAU (1 Oct 2024)	Funding per bed day	Annual Funding*
0.80	\$224.01	\$81,763.65
0.19	\$53.20	\$19,418.00
0.37	\$103.60	\$37,814.00
0.25	\$70.00	\$25,550.00
0.44	\$123.20	\$44,968.00
0.40	\$112.00	\$40,880.00
0.55	\$154.01	\$56,213.65
0.64	\$179.21	\$65,411.65
0.52	\$145.61	\$53,147.65
0.70	\$196.01	\$71,543.65
0.66	\$184.81	\$67,455.65
0.66	\$184.81	\$67,455.65
0.80	\$224.01	\$81,763.65

Variable funding based on <u>respite</u> class

Respite Class	Services Australia Payment Statement code	Resident description	NWAU	Funding per bed day (current rates)
Respite Class 1	Variable subsidy – class 101	Independent mobility	0.304	\$77.16
Respite Class 2	Variable subsidy – class 102	Assisted mobility	0.404	\$102.54
Respite Class 3	Variable subsidy – class 103	Not mobile	0.864	\$219.30

New NWAU (1 Oct 2024)	Funding per bed day	Annual Funding*
0.365	\$102.20	\$37,303.00
0.479	\$134.12	\$48,953.80
0.691	\$193.49	\$70,623.85

^{*} Based on 365 days

Hotelling supplement – 20 Sept changes

New rate of \$12.55 per bed day for the hotelling supplement from 20 September 2024 to fund hotelling costs, including the Fair Work Commission Stage 3 pay increase



Helps providers meet the cost of hotelling including critical nutrition and hygiene services

FWC Stage 3 increase is \$537 million in additional Commonwealth funding

Further \$1.89 increase on 1 July 2025, representing a further \$391 million in Commonwealth funding

In total the sector is expected to receive \$1.1 billion in extra funding, once consumer contributions are included

Regular indexation on 20 March 2025 will still occur

*amount reflects a partial year impact for 2024-25 due to the 1 January 2025 start. The increase in funding incorporates an increase to the full year impact as part of the 2025-26 pricing changes.

Changes to care minutes allocations (from 1 Oct)

AN-ACC class care minutes allocations

Care minute	AN-ACC Class	1	2	3	4	5	6	7	8	9	10	11	12	13
Total	Current	317	110	143	115	157	152	186	200	202	282	274	269	317
minutes	New (from 1/10/24)	281	122	169	138	185	177	215	239	209	254	244	243	281
RN	Current	57	30	32	28	39	34	36	38	46	56	41	42	57
minutes	New (from 1/10/24)	53	25	35	29	41	37	45	50	42	50	47	46	53

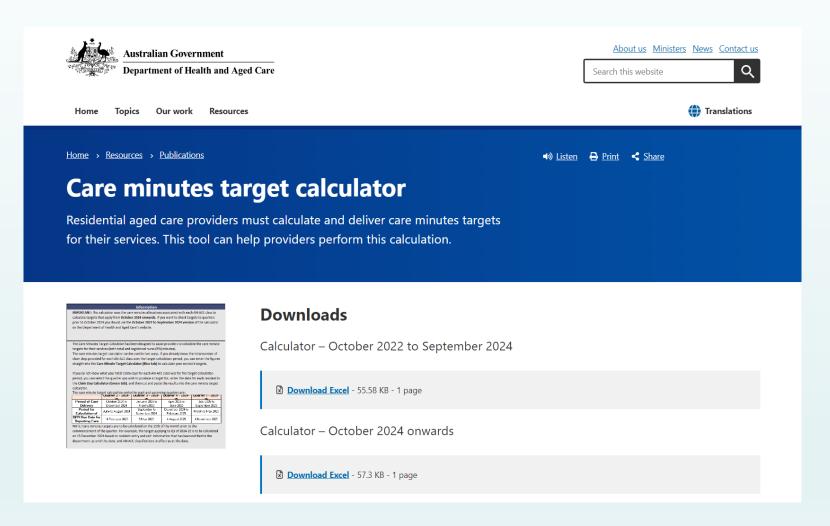
Respite class care minutes allocations

Care minute	Respite Class	101	102	103
Total	Current	120	165	273
minutes	New (from 1/10/24)	163	196	252
RN	Current	31	36	48
minutes	New (from 1/10/24)	33	42	49

New care minutes allocations associated with each AN-ACC class:

- Aligns with the latest costing study evidence and AN-ACC class funding weighting changes
- Are adjusted to achieve a sector average of 215 minutes per resident per day, including 44 RN minutes from 1 October 2024

Care minutes calculator



QR code



Contact us



RCFRBDataAndAnalysis@health.gov.au

Use of ENs for some RN-specific care minutes



- Enrolled nurses (ENs) may be counted towards 10% of RN-specific care minutes (i.e. for 44 RN minutes, 4.4 EN minutes may be counted)
- Help services deliver higher care minutes
- Will not impact 24/7 RN only RNs may be counted towards this responsibility
- Does not impact the responsibilities or scope of practice of nurses – the care outcomes, which an EN contributes to, will continue under the delegation and supervision of an RN
- Providers must continue to report ENs as ENs and RNs as RNs in the Quarterly Financial Report (QFR)

24/7 RN supplement rate

Full rate 24/7 RN supplement from 1 October 2024

Residents	MM 1	MM 2-3	MM 4-5	MM 6-7
>0-5	\$27,055	\$29,715	\$70,883	\$84,057
6-10	\$27,055	\$29,715	\$60,143	\$71,321
11-15	\$27,055	\$29,715	\$49,403	\$58,585
16-20	\$27,055	\$29,715	\$38,663	\$45,849
21-25	\$24,124	\$26,496	\$27,162	\$32,210
26-30	\$13,167	\$14,461	\$14,825	\$17,580
31-35	\$10,687	\$11,738	\$12,032	\$14,269
36-40	\$8,207	\$9,014	\$9,240	\$10,958
41-45	\$5,727	\$6,290	\$6,448	\$7,646
46-50	\$3,247	\$3,566	\$3,655	\$4,335

Reduced rate 24/7 RN supplement from 1 October 2024

Residents	MM 1	MM 2-3	MM 4-5	MM 6-7
>0-5	\$13,528	\$14,858	\$35,442	\$42,029
6-10	\$13,528	\$14,858	\$30,072	\$35,661
11-15	\$13,528	\$14,858	\$24,702	\$29,293
16-20	\$13,528	\$14,858	\$19,332	\$22,925
21-25	\$12,062	\$13,248	\$13,581	\$16,105
26-30	\$6,584	\$7,231	\$7,413	\$8,790

From 1 October 2024:

- The full rate 24/7 RN supplement will only be available to facilities with up to an average of 50 residents to reflect additional AN-ACC funding providers will receive to support the increase to 215 care minutes (including 44 RN minutes).
- The **MM categories** will also change (for both the full rate and reduced rate supplements) to align with the **BCT** structure for AN-ACC.

Care time reporting assessments

Overview



Care time reporting assessments check accuracy of information about care minutes and the 24/7 RN responsibility reported by residential aged care providers.

We aim to help providers improve their reporting, and the quality of aged care data overall.

Reporting assessments began on 1 September 2023 and we aim to complete an assessment for every service by mid 2025.

Care time reporting assessments

Why they are important:

- improve reporting and information management
- ensure providers are meeting mandatory reporting and care minute requirements
- provide accurate data to inform Star Ratings
- ensure the Aged Care Quality and Safety Commission has accurate information
- inform IHACPA's costing studies
- inform Government policy decisions.



Provider responsibilities

Providers must respond to requests for information and documents as part of their requirements under the Accountability Principles 2014

Information and documents we may request:

- Australian Health Practitioner Regulation Agency IDs
- position descriptions
- staff rosters
- pay records (with tax file numbers redacted)
- documents supporting day-to-day procedures
- documents supporting care and lifestyle activities
- calculations and working papers used to prepare reporting submissions
- records of your processes and controls to ensure accurate reporting.

Reporting guidance

01

Reported data is correct and for the relevant period

Only report time and costs spent on residents funded under the *Aged Care Act* for the relevant reporting quarter.

02

Be familiar with the reporting definitions

Report costs and hours in accordance with the reporting definitions.

03

Labour hours should not include non-worked hours

Only include actual worked hours, *including* overtime hours. Non-worked hours are not eligible direct care hours.

04

Invoices aligned with reporting requirements

Ensure total expenditure and hours delivered are appropriately allocated and reported.

Update your email address and keep a record

You may need to refer to your submission if you are contacted to validate your submitted data, or as part of the <u>Care time</u> reporting assessments process

Resources and support











Residential aged care provider reporting helpdesk QFRACFRHelp@health.gov.au



Care time reporting assessments team ANACCreportingassessments@health.gov.au

Common reporting issues

Staff categorisation

Reporting hours in incorrect QFR reporting categories.

Staff apportionment

Misreporting the apportionment of direct and non-direct care activities for hybrid staff.

Shift measurements

Reporting incorrect periods, or including leave or training as direct care hours.

Unreported absences

Not reporting gaps in 24/7 RN coverage.

On-site staff

Reporting direct care hours for off-site staff

Agency staff

Direct care hours not being appropriately recorded and reported.

Questions and answers

Submit your questions in the Slido chat window

Useful links

AN-ACC guide



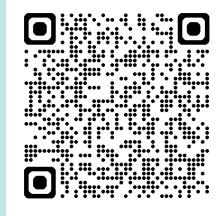
Care minutes and 24/7 registered nurse responsibility guide



Care minutes target calculator



My Aged Care Service and Support Portal



Enquiries

My Aged Care provider helpline - 1800 836 799, or anaccoperations@health.gov.au