Digital Transformation Tech Talk

Webinar series for the aged care sector

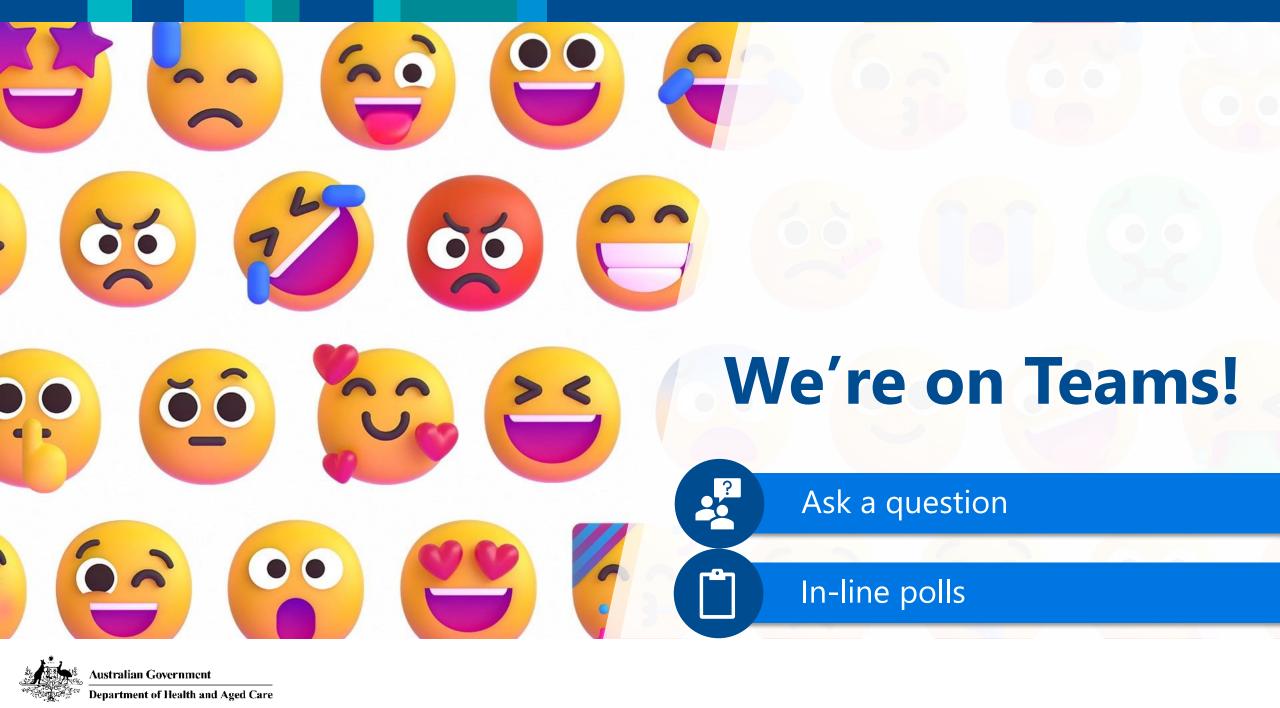
Digital Transformation and Delivery Division

Corporate Operations Group | Department of Health and Aged Care











Digital Transformation update

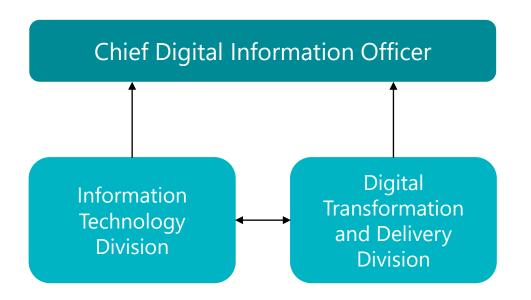


Fay Flevaras

Chief Digital Information Officer Corporate Operations Group Department of Health and Aged Care



Digitally-enabled enterprise



Better leveraging departmental ICT capability and digital policy expertise



Integrating best practice across the Health portfolio, not just aged care



Digital Transformation Roadmap

Disclaimer

This is a CURRENT STATE view, shared to provide early visibility of the expected work ahead (a 'working timeline').

The timeline is NOT a Government commitment.

Formal decisions – regarding the scope, sequence, and timeframes of the department's portfolio delivery will be determined by the Government – and therefore this timeline is subject to change as policy decisions and planning evolves.

My Aged Care (MAC)

Government Provider Management System (GPMS)

Business to Government (B2G)

Aged Care Data Warehouse (ACDW)

2024 YEAR

JAN-MAR **MONTH**

TECH

UPDATES

APR-JUN

JUL—SEP

OCT—DEC

Care Minutes Enhancements

B2G Developer Portal API Release

Integrated Assessment Tool

Provider Refundable Accommodation Deposits and **Contributions Reporting**

Quality Indicators API Release

Enhancements 24/7 Nursing API

Enhancements for:

- Provider Operations Form
- Quarterly Financial Reporting
- 24/7 Registered Nurses
- GPMS Reporting
- Star Ratings

Manage Your Organisation Tile

Enhancements for Single Assessment Screening

Single Assessment Workforce

My Aged Care Hospital Portal -**Extension of Bulk Hospital** Creation

My Aged Care and My Health **Record Integration**

Enhancements for Provider Refundable Accommodation **Deposits and Contributions** Reporting

Critical Reporting Capabilities of **Star Ratings**

Maintain Accuracy of Published **Star Ratings**

Enhancements for ANACC Referral Management and Assessments

Enhancements for:

- GPMS Platform **Enhancements**
- 24/7 Registered Nurses

Enhancements to ANACC Referral Management

Residential Care Report **Enhancements**

Palliative Entry Default Rules

Assigning Permanent Residential Aged Care Places to People

Technical Upgrades

Stewardship Stakeholder & **Emergency Management**

GPMS Enhancements

Star Ratings Enhancements

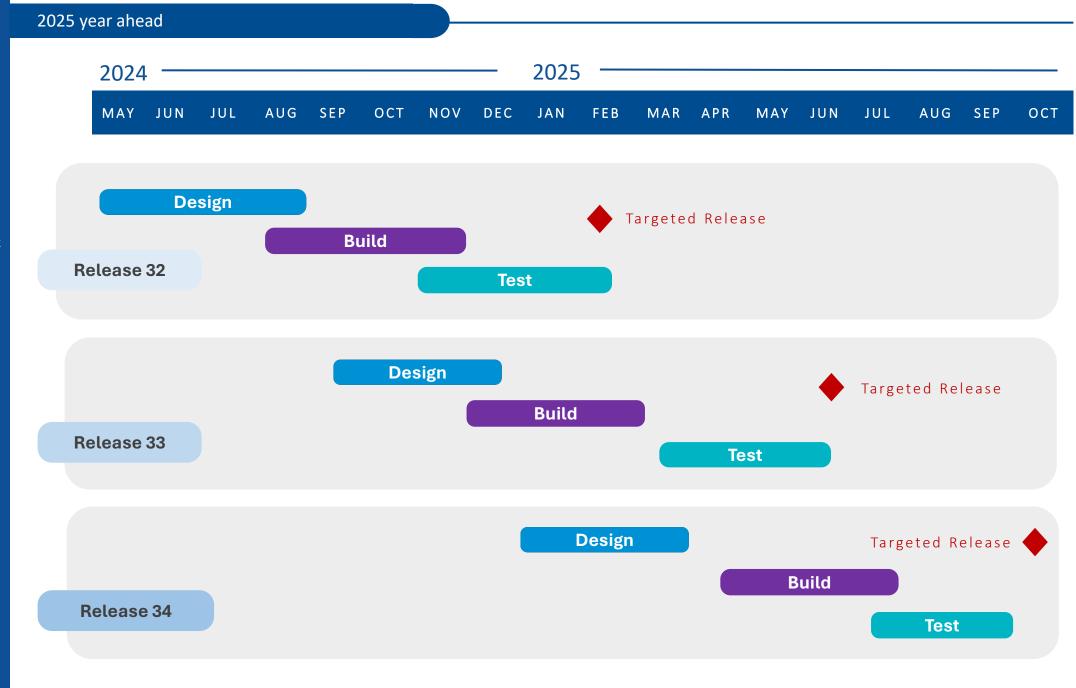
Digital Transformation Roadmap

Disclaimer

This is a CURRENT STATE view, shared to provide early visibility of the expected work ahead (a 'working timeline').

The timeline is NOT a Government commitment.

Formal decisions – regarding the scope, sequence, and timeframes of the department's portfolio delivery will be determined by the Government – and therefore this timeline is subject to change as policy decisions and planning evolves.

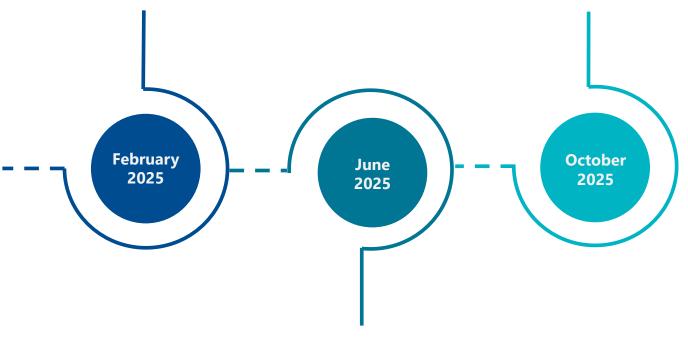


Targeted release

- My Aged Care
- Government Provider Management System

Targeted release

- My Aged Care
- Government Provider Management System



Targeted release

- My Aged Care
- Government Provider Management System



Aged care reform update



Greg Pugh

First Assistant Secretary
Reform Implementation Division
Department of Health and Aged Care

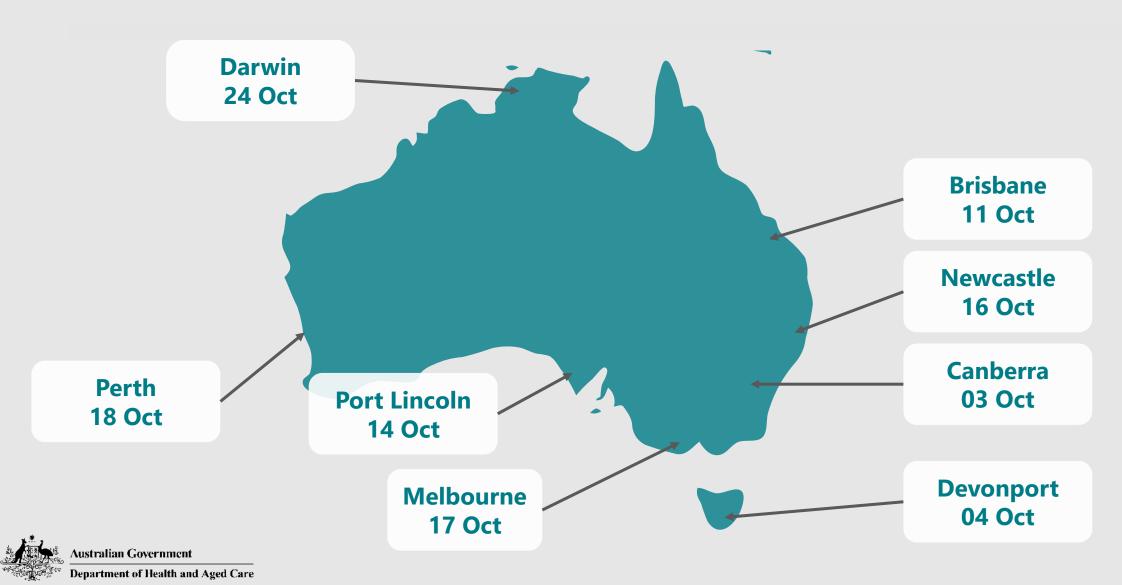


Reforms progress

New Aged Care Bill introduced, Support at Home announced, Taskforce response announced.	Aged care residents are receiving 3.9 million minutes more direct care time every day.	19% more aged care homes are receiving overall Star Ratings of 4 and 5.
\$15.1 billion in funding to deliver wage increases for aged care workers.	Almost all aged care homes now have a registered nurse on duty at least 24 hours a day.	Almost 60% of aged care homes are now rated 'good' or 'excellent'.
58% increase in the care component of residential aged care funding since October 2022.	Around 85% of aged care residents said they would recommend their home to someone they know.	8,788 volunteers visited 10,195 Aged Care Volunteer Visitors Scheme recipients in 2023.



Upcoming public hearings



Next steps (implementation)

Reform Roadmap

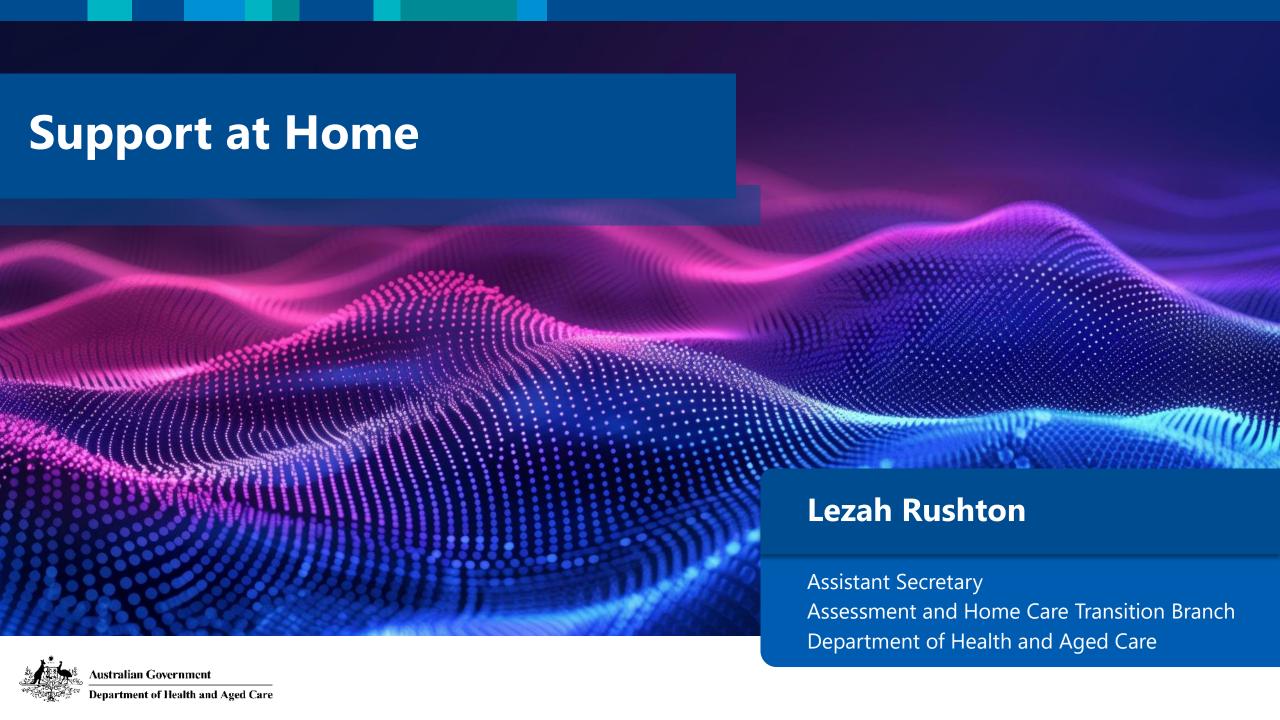
being updated and will be released in the next couple of weeks.

ICT/digital roadmap

to reflect final policy settings to be released.

Engagement

sector
engagement,
support and
transition activities.



Support at Home

Changes for providers and their systems

Lezah Rushton

Assistant Secretary, Assessment and Home Care Transition Branch



What will be covered today?

- Support at Home program overview
- Key changes for assessments and Integrated Assessment Tool refinements
- Service referrals
- Support at Home funding model
- Claims and payment arrangements
- Changing service providers
- Next steps and future engagements

Support at Home will help people to stay at home for longer



Faster access to services

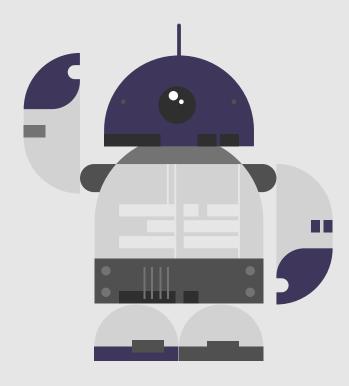


Early intervention to stay independent and prevent decline



Higher levels of care when needs become more complex

Single Service Provider



A single Support at Home service provider will manage and deliver a participant's services to meet their assessed needs within their budget.

The single service provider will also be responsible for arranging and sourcing any required short-term supports such as approved Assistive Technology and/or Home Modifications, Restorative Care Pathway or End-of-Life Pathway

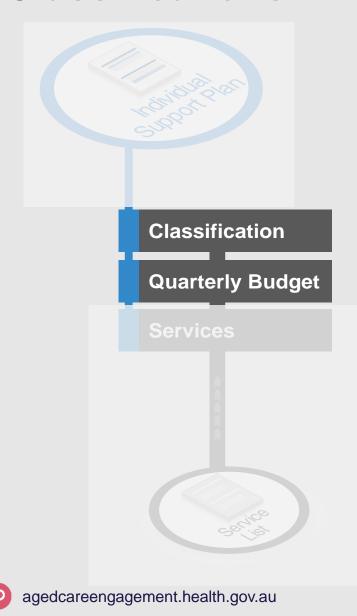
Single Assessment



Refinements to Integrated Assessment Tool (IAT)

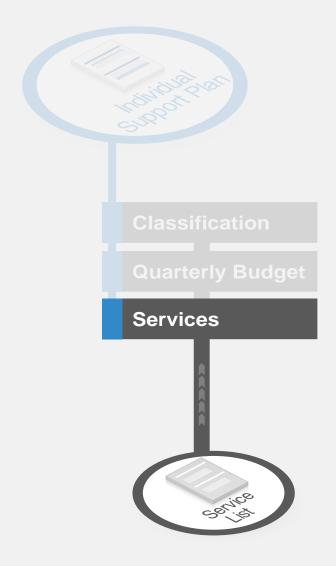
- The IAT will provide a Support at Home classification algorithm recommendation
- Changes to eligibility determination with the introduction of a triage delegate role
- Changes to legislative references, terminology and consent capture
- Delegate approval CHSP recommendations by a non-clinical delegate

Classifications



- A new classification framework will specify the level of funding available for each classification.
- Support at Home participants accessing ongoing services will be assigned funding that aligns with their assessed aged care needs.
- Support at Home participants will be assigned a quarterly budget based on their classification level for ongoing services.
- Eligible participants will have access to:
 - Assistive Technology and Home Modification (AT-HM) Scheme.
 - Restorative Care Pathway to help maintain and improve independence and reduce reliance on ongoing services.
 - End-of-Life Pathway, providing them the option to pass away in their own homes.

Service list



Support at Home Service Types			
Clinical Services	Allied Health and other Therapeutic Services		
	Nursing Care		
	Nutrition		
	Care Management		
	Restorative Care Management		
Independence Services	Personal Care		
	Social Support and Community Engagement		
	Therapeutic Services for Independent Living		
	Respite		
	Transport		
	Assistive technology and home modifications		
Francisco I 2 2	Meals		
Everyday Living Services	Domestic Assistance		
	Home Maintenance and Repairs		

Individual support plan



- Summary of needs and goals
- List of approved services
- Ongoing classification and quarterly budget

and/or

Approval & budget for short-term supports:

- Assistive Technology and/or Home Modifications
- Restorative Care Pathway
- End-of-Life Pathway

Support at Home Budget Planner



At the time of needs assessment, assessors can work with the participant on their Support at Home service mix and indicative service pricing against the participant's quarterly budget before finalising recommendations.

Assessors can search, add and remove services in the calculator and see cost breakdown for each service.

Support at Home Care Approval Information to Services Australia



Service Group

Program

Classification Type

Classification (including any short-term allocation/s)

Classification assigned status

Classification assigned date

Minimum Service Offer assigned date (if applicable)

Full Service Offer assigned date

Participant withdrawal date (if applicable)

Service Type

Service

Participant characteristics (First Nations, homeless, care leavers, etc.)

Service Referral

Managing referrals for services under Support at Home



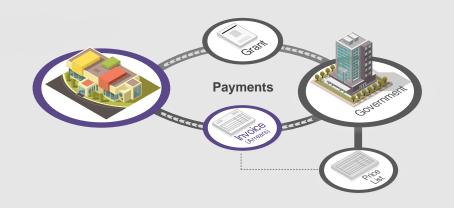
Assessors can refer participants to a service provider for Support at Home services. Following the delegate assessment approval and finalisation of the support plan, assessors and contact centre can support a participant to be referred to a provider for Support at Home services recommended in the participant's support plan through using service referral codes aligned with HCP.

Refinements to issuing service referrals for Support at Home Key Changes:



- 1. Service Providers are required to submit details of the new participant entering into a service Agreement to Services Australia within 28 days of accepting service provision.
- 2. Service Providers are required to submit details of the exiting participant to Services Australia within 28 days of the participant opting to exit the service provider.

Funding model



Source of funds	Payment arrangements		
 1. Participant budgets Ongoing or short-term services AT-HM 	Service provider invoices government for hours or units of each service for each client (or costs for items such as AT-HM) Deign and the service to the service service and the service services are the service services.		
2. Care management fundSits with providers	 Prices must be at or below caps set by government, based on IHACPA advice 		
 10% of ongoing participant budgets plus supplements 	 Government pays at prices less relevant participant contribution 		
3. HCP Commonwealth Unspent funds			
4. Participant contributions	Service provider invoices participant		
	Rates set by government as % of service prices		

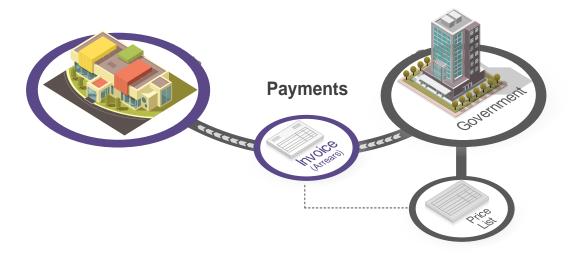
Support at Home Classification Budget



Service Group	Classification	Amount*	Allocation Period		
	0	Ineligible for Support at Home/CHSP			
	CHSP Classification 1		As per CHSP program		
Llaws Commant	CHSP Classification 2	CLICD a regarded from diagra			
Home Support	CHSP Classification 3	CHSP program funding			
	CHSP Classification 4				
	SaH Classification 1	\$11,000			
	SaH Classification 2	\$16,000			
	SaH Classification 3	\$22,000			
	SaH Classification 4	\$30,000	Figure in I Valor		
Home Support	SaH Classification 5	\$40,000	Financial Year		
	SaH Classification 6	\$48,000			
	SaH Classification 7	\$58,000			
	SaH Classification 8	\$78,000			
	SaH Restorative Care Pathway	\$6,000	12-16 weeks		
	SaH End-of-Life Pathway	\$25,000	12-16 weeks		

^{*}The dollar figures in the table are current estimates. Final classification dollar values will be subject to annual indexation and confirmed before Support at Home commences.

Provider invoicing



- Invoices or claims for payment submitted to Services Australia using existing channels
- Invoices may be submitted up to daily or batched
- Final invoice for a quarter must be submitted within 60 days of end of the quarter
- Services Australia process claims within 7 calendar days of receipt of claim

Expected claim data to Services Australia

	Data Item	Description
Identifiers	Participant name	The name of the participant
	MACID	Participant's aged care identifier
	Pooled funding client indicator	The Pooled funding client indicator
	Services Australia Client ID	Participant's Service Australia identifier
	Service Location	Location where the service was delivered
	Service Provider ID	Provider's ID number
	Service Provider Name	Provider's name
	Service Delivery Date	Service delivered date
	Claim Date	Date of claim
Service details	Service Type (derived from Service ID)	The service type
	Service (derived from Service ID)	The service name
	Service Unit Type (derived from Service ID)	The service unit type
	Service Unit Price (derived from Service ID)	The service unit price
	Service delivered by a third-party organisation indicator	An indicator for services delivered by a third-party organisation
Funding	No. of Units	No. of units provided
details	Funding Source	 The source of funding for the service provided: Client Budget (the participant's ongoing quarterly budget) Care Management Account (care management services) Restorative Care Pathway Payments (restorative care services) AT Budget (assistive technology services) HM Budget (home modification services) End-of-Life Pathway (participant's End-of-Life Pathway budget) HCP Commonwealth unspent funds
	Government Subsidy Claim Amount (defaulted to price cap for the service)	The claim amount

What does this mean for invoicing?

INVOICE – Aug 2025 (Illustrative only)								
Client ID	Service ID - Service Type	Client Budget Units	AT Units	Care Management Units	Service	Service Unit Type	Service Unit Price	Maximum subsidy per unit (illustrative only)
AC000001	AG101 - Domestic Assistance	4	-	-	Laundry	Hour	\$61	\$244
	AG102 - Personal Care	8	-	-	Hygiene	Hour	\$68	\$544
	AG111 - Meals	1	-	-	Delivery	Meal	\$13	\$13
	AT108 – Mobility Products	-	2	-	Walking aids	Item	\$110	\$220
	CG101 - Care Management	-	-	1	Service	Hour	\$129	\$129
Total		13	2	1				\$1,150
AC000077	AG101 - Domestic Assistance	4	-	-	Shopping	Hour	\$61	\$244
	AG102 - Personal Care	16	-	-	Eating	Hour	\$68	\$1,088
	AT123 – Computer Access	-	4	-	Computer software	Item	\$100	\$400
	AT124 - Mobility Products	-	2	-	Standing aids	Item	\$125	\$250
	CG101 - Care management	-	-	2	Service	Hour	\$129	\$258
Total		20	6	2				\$2,240

Changing providers



- Entry and exit rules will be managed mostly via off system program guidance.
- The losing service provider:
 - has 28 days from the cessation date or new service provider entry notification (whichever comes earlier) to notify Services Australia their participant is leaving.
 - must complete information sharing obligations with the gaining service provider such as account balances and services delivered with the gaining service provider.
- Once the losing service provider finalises their claims for the individual, a final monthly statement must be issued to the individual and gaining service provider.
- The gaining service provider will know, at the latest, 61 days after the cessation date the final budget balance from SA Services Australia.

Funding model

- Providers paid in arrears
- Dedicated care management funding

Design features

Reasonable prices

- Defined Service List
- Efficient prices and participant contributions set by Government

All participants have budgets

- New classification system with increased funding
- Ability to accrue unspent funds

Focus on independence

- Upfront access to Assistive Technology and Home Modifications (AT-HM)
- Restorative care pathway

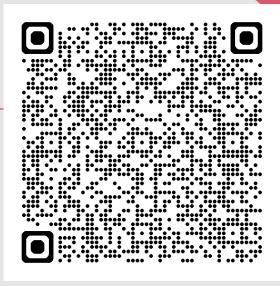
Next step

Possible future sessions:

- Participant and Service Provider Transition to Support at Home
- Assistive Technology and Home Modification Scheme
- Prioritisation System
- Participant Contributions
- Further update on the Single Assessment System

For more information:

Website: https://www.health.gov.au/our-work/support-at-home



Support at Home



Support at Home Handbook



Business to Government (B2G)

B2G are building technology connections between aged care providers and Government agencies to improve information and data sharing.

This technology enables streamlined direct reporting from provider to government systems using Application Program Interfaces (APIs).

The B2G project will deliver five APIs over the next two years.

B2G conducted an API survey in July seeking feedback from aged care providers and software vendors to inform the development of five additional APIs

B2G engaging an independent group to conduct consultation workshops that were:

- provider and data driven
- unbiased and evidence-based
- qualitative and quantitative



What's next for B2G and how we will get there



Research

- Gather feedback from stakeholders on aged care reporting or information areas that need to be streamlined
- Evaluate various API possibilities to address these needs
- Narrow down the list of APIs based on relevance and impact

Assessment & Consultation

- Assess whether each API can be implemented and aligns with sector goals
- Hold discussions and workshops to refine the API options based on stakeholder input

WE ARE HERE



- Prioritise APIs based on their potential benefits and alignment with strategic goals
- Prepare a report recommending which APIs to be implemented first
- Present the recommendations to the Minister for final approval



Implementation

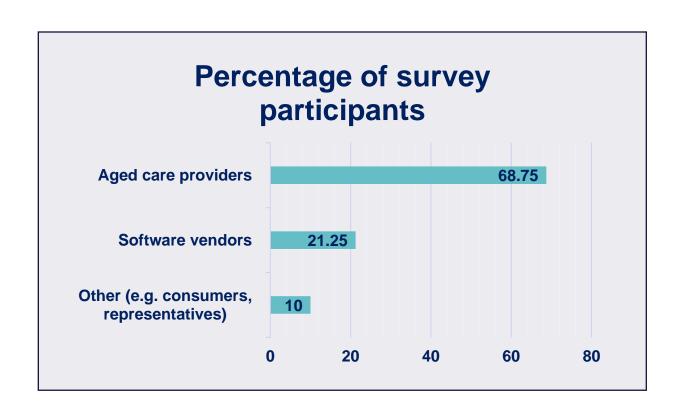
- Co-design and detailed documentation of APIs
- Stakeholder engagement and adoption







Common themes – B2G Survey (July 2024)



Common Themes

- provider reporting
- support and care plans
- client assessment and referral

Human Centred Design User Research – Initial insights

What do providers and vendors care about?

- Consistency of data standards and frameworks
- Two-way data exchange to benefit all parties (incl. accessing their own data, notifications of data changes (e.g. change in client circumstances) or acknowledging receipt of information)
- Streamlined access to government systems and latest information (e.g. single source of truth, single portal)
- Confidence in the Department to protect their data
- B2G APIs should be integrated as part of the Department's holistic digital reform and integration plans

What are the key enablers for adopting B2G APIs?

- Technical information (incl. specification, use cases and testing data) and data standards
- Resources, funding and capability to build and maintain APIs
- Having early access to information (e.g. visibility of technology roadmap) and policy & legislative changes that will impact the technology & data landscape
- Provider internal system & data integration (e.g. there is no single system that has all the data required for a single compliance report)

Human Centred Design User Research – Initial insights

Areas of importance

- Client management
- High frequency transactions and reports
- Regulatory reporting

Stakeholder interest areas

- My Aged Care Provider Portal
- Quarterly Financial Reporting
- Client referral and management
- Care Minutes
- Serious Incident Reporting
- Support at Home enabling APIs

What's next?

We will be reviewing and synthesising sector feedback, as well as assessing technical feasibility for preferred candidates.

More Information



Website

health.gov.au/our-work/b2g



Development portal

developer.health.gov.au/s/

Q&A



Ask your questions on Teams using the **Q&A** tab.



If you see a question you like, vote it up!



Happy to ask your question directly to the panel?

Include your name when posting your question on Teams to join us on our 'virtual' stage.

