

# Multi-Purposes Service Program (MPSP)

## Webinar 6:

### Aged care reforms: Impacts on the MPSP & providers

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28 February 2025  
Thin Markets Branch

# What do we intend to cover today?

Agenda Item	Speaker
Introduction, acknowledgement of country	Cathy Milfull A/g Assistant Secretary Thin Markets Branch
Quick MPSP updates including: <ul style="list-style-type: none"><li>○ Reform schedule</li><li>○ Allocation round</li><li>○ New MPSP agreements for 1 July 2025</li><li>○ 24/7 and direct care target trials</li><li>○ Rules consultations</li><li>○ Revised obligations around meal delivery from 1 July 2025</li></ul>	
MPSP subsidies and client fees <ul style="list-style-type: none"><li>○ Rules out for consultation regarding arrangements from 1 July 2025</li><li>○ Reminder re accommodation payments and contributions</li></ul>	
Transitional arrangements – preparing for client data collection	
Q&A	Panel discussion chaired by Cathy Milfull

# Future webinar topics

Month	Items under consideration
March	Update on transitionals Regulation of providers delivering services under the MPSP under the new Act (Commission guests TBC ) Draft Rules related to obligations and other topics out for consultation New statutory duties under the new Act
April	Update on transitionals Place allocations under the new Act Remaining draft Rules out for consultation Finalising new funding agreements
May	Update on transitionals Update on MPS funding model Aged care services in the home or community under the new Act
June	Update on transitionals Final preparations for the new Act

**Other ideas? Your suggestions are welcome!**



# Quick MPS program updates

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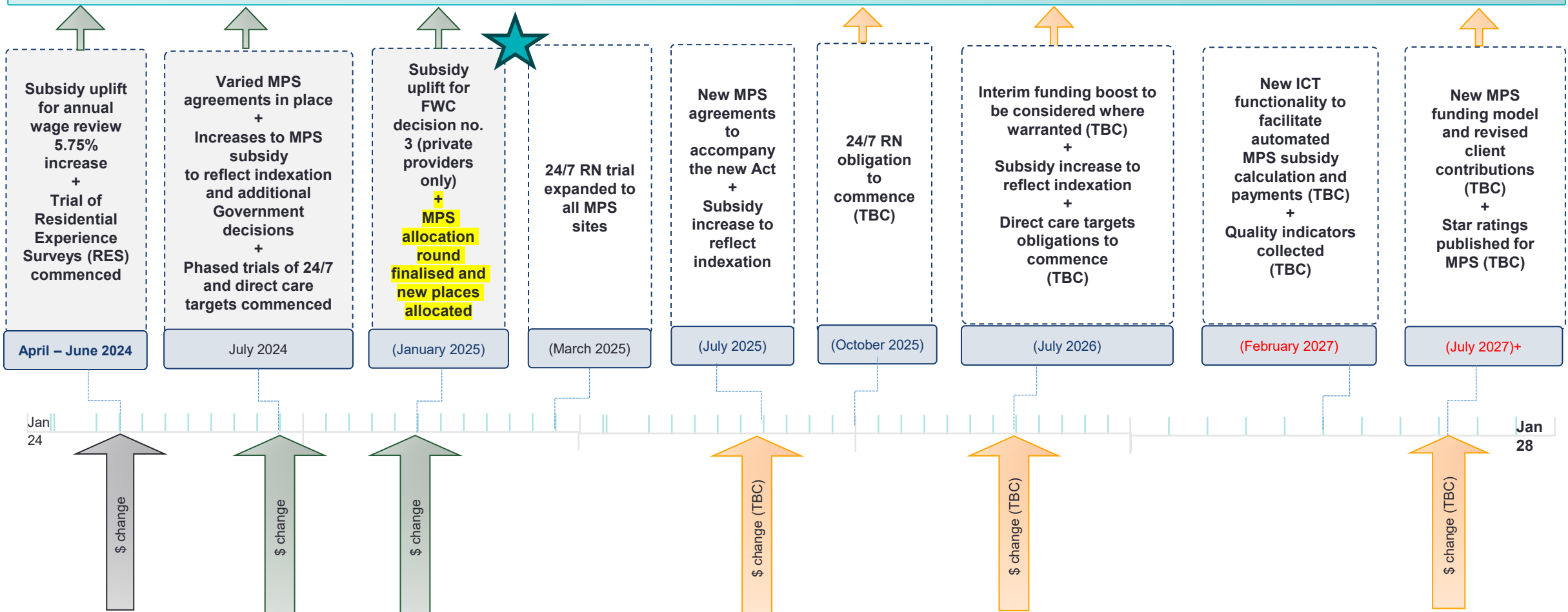
Cathy Milfull, Thin Markets Branch

# Updated schedule of MPS reforms (as at February 2025)

- Aged Care Act 2024 commences on 1 July 2025 including:
- new eligibility and assessment requirements, and requirements for delivery of home care under the MPSP
  - new regulatory model and new quality standards (with MPS module)
  - new subsidy framework based on current funding model
  - transitional arrangements in place for existing providers, individuals and places

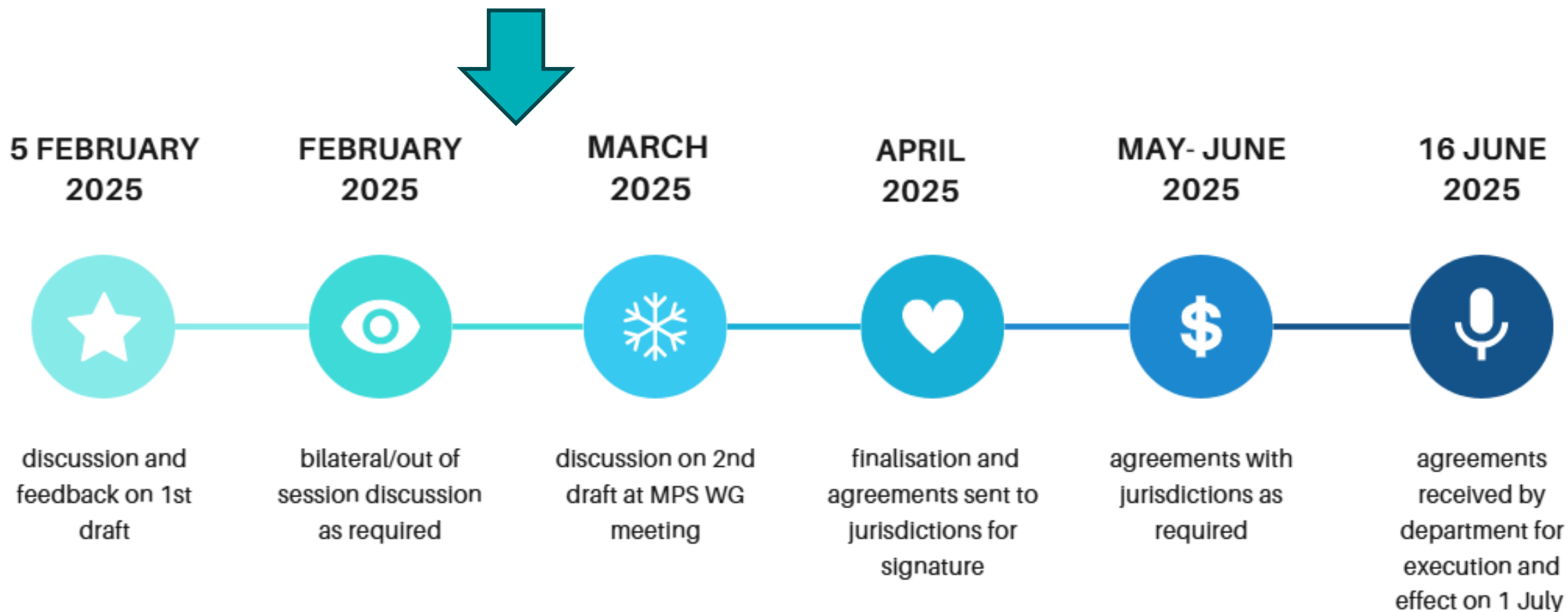
Further amendments made to the new Act (TBC)

MPS related amendments made to subordinate legislation where required (TBC)



# NEW MPSP AGREEMENTS 2025

Proposed timeline



# 24/7 RN MPS TRIAL IMPLEMENTATION TIMELINE

April – July 2024



## PLANNING

- Develop high level implementation plan and circulate to MPS WG Members for feedback/discussion
- Subject to SOG's in principle agreement to timeframes in April, seek out-of-session SOG approval of 24/7 implementation approach and trial timeframes
- Members to nominate Phase 1 trial sites
- Develop Phase 1 trial parameters, guides and a communications plan
- Establish and test reporting channels
- State and territory contacts identified
- Establish 24/7 sub working group
- Progress required legislative amendments



Aug 2024 - Jan 2025



## PHASE 1 TRIAL

- Trial sites to provide 24/7 RN data for August and October 2024
- Real time assessment of enablers and barriers for implementation
- MPS RI subgroup meeting to discuss outcomes of initial data submission and survey results
- Identify structures required to support implementation, and champions to support implementation
- Design evaluation and feedback systems
- Determine staff training needs, capacity building and support requirements
- MPS WG Meeting to discuss outcomes of Phase 1 and agree to any changes for Phase 2
- Review 24/7 RN supplement and its applicability to MPS
- Progress required legislative amendments
- Progress online reporting solution
- All provider MPS 24/7 RN education webinar January 2025



Feb – Sept 2025



## PHASE 2 TRIAL

- Trial to be extended to all MPS with reporting to be submitted for March and May
- Ongoing assessment of enablers and barriers, and monitoring and evaluation
- Hold regular subgroup meetings
- Monitor implementation, service and client outcomes
- Use data and feedback to inform ongoing improvements
- Planning for sustainability
- MPS WG Meeting to discuss outcomes of Phase 2 trial and agree to any recommended changes for full implementation
- Confirm required legislative amendments subject to agreement to progress to full implementation
- Consideration of providers who may require an exemption

Oct 2025 →



## FULL IMPLEMENTATION

- Amendments made to legislative framework to apply 24/7 nursing obligations to MPS providers
- All MPS providers required to comply with new obligations and complete required reporting (adjusted as necessary following trial period)
- Exemptions in place for small providers where required
- Reporting to be completed via GPMS system (where functionality available)
- Relevant media/comms announcements

# MPS CARE MINUTES IMPLEMENTATION TIMELINE

Apr 2024 - Mar 2024



## PLANNING, ENGAGEMENT & INITIAL DESIGN

- Develop and agree to high-level implementation timeline, which will be re-assessed each phase
- MPS Reform Implementation Subgroup established
- Develop and test options for pilot care minute targets; and consider alternative reporting arrangements and/or existing reporting that can be re-purposed
- Members to nominate sites to participate in the pilot and co-design phase
- State and territory contacts identified
- Care minutes funding supplement to commence from 1 July 2024 (subject to Ministerial approval)
- All providers to commence consideration of existing direct care levels and likely shortfalls/challenges
- MPS WG Meeting to discuss Phase 1 outcomes
- Develop Phase 2 Pilot parameters, guides and a communications plan with co-design site

Apr 2025-Dec 2025



## PHASE 2: PILOT & FURTHER CO-DESIGN

- Nominated MPS commence pilot of care minutes to trial agreed direct care approaches
- Other providers continue to explore direct care levels and likely challenges
- Real time assessment of enablers and barriers for implementation
- Identify methods for determining compliance with care minutes targets
- Consider options for more nuanced care minute targets for trial, and revised reporting requirements
- Identify structures required to support trial implementation, and champions to support implementation
- Develop Phase 3 trial documentation and parameters, with adjustments to targets and reporting as per learnings from Phase 1 & 2
- Design evaluation and feedback systems
- Determine staff training needs, capacity building and support requirements
- MPS WG Meeting to discuss outcomes of Phase 2 Pilot and agreed way forward

Jan 2026 – Jun 2026



## PHASE 3: TRIAL COMMENCES

- Full trial of care minutes for all MPS to commence for all MPS in February 2025, with adjustments to targets and reporting as per learnings from Phase 1 and 2
- Ongoing assessment of enablers and barriers, and monitoring and evaluation
- Hold regular subgroup meetings
- Monitor implementation, service and client outcomes
- Use data and feedback to inform ongoing improvements
- Planning for sustainability
- MPS WG Meeting to discuss outcomes of Phase 3 trial and consider and agree to:
  - any extension required to Phase 3 period
  - proposed final dates for progress to full implementation of care minutes and targets, and
  - any changes to arrangements required for full implementation

July 2026 →



## PHASE 4: FULL IMPLEMENTATION

- All MPS providers required to comply with obligations and complete required reporting (adjusted as necessary following trial period)
- Reporting to be completed via GPMS system (where functionality available) if/where required
- Relevant media/comms announcements
- Evaluation of agreed care minute compliances outcomes prior to transition to increased care minute targets
- MPS WG Meeting to discuss evaluation outcomes and discuss timeframes for transition to increased care minutes targets, and increase to funding supplement



# What's in Tranche 3 of the Rules for the *Aged Care Act 2024*?

- Release 3 of the Rules has just been published here:  
[new-aged-care-act-rules-consultation-release-3-provider-obligations](#)
- This release covers obligations and conditions on registration for different kinds of registered providers. The following tables will help you to navigate the Draft Rules, including:
  - whether the Rules outline existing, revised or new obligations
  - whether they apply to all or some MPSP providers (e.g. non-government only), or do not apply at all to providers delivering services under the MPSP
- The consultation period is open for 4 weeks until **13 March 2025**.
- We encourage you to have a look at the Rules and provide your feedback to the department.
- A supporting document is available [here](#), which provides additional context on the topics covered in this release of the Rules.
- You can submit feedback via this [online form](#). The form includes survey questions, in addition to free text boxes and the ability to upload files for lengthier responses.
- Following this consultation period, the department will consolidate feedback and amend the draft Rules as appropriate.

# Conditions on providers – tranche 3 - summary for MPSP

Area	Act reference(s)	Rules reference and page reference	Existing/new/ varied obligation	Summary of requirements providers must meet	Which <u>MPSP</u> providers does it apply to
Code of Conduct	ss14 & 145	Chapter 1, Part 5, p. 24	Existing	Must comply with the Code of Conduct (which is included here in the Rules) and ensure their aged care workers do.	All providers (as well as their workers and responsible persons)
Quality Standards	ss15 & 146	Chapter 1, Part 6, p. 26 & Chapter 4, Part 4, p. 45	Varied	Must comply with the strengthened quality standards (which are included here in the Rules)	All providers
Incident management	ss16 & 164	Chapter 1, Part 7, p. 36 & Chapter 4, Part 10, p. 92	Existing	Must have incident management system in place, and manage incidents as required.	All providers
Restrictive Practices	ss17 & 162	Chapter 1, Part 7, p. 40 & Chapter 4, Part 9, p. 80	Existing	Must comply with restrictive practice and behaviour support plan requirements.	All providers
Rights & Principles	s144	Chapter 4, Part 3, p. 44	New	Must demonstrate the provider understands the Statement of Rights and have in place practices to ensure they act compatibly with the Statement. Must demonstrate they understand the safety, health, wellbeing and quality of life of individuals is the primary consideration in the delivery of funded aged care services.	All providers
Continuous improvement	s147	Chapter 4, Part 4, p. 46	Varied	Must demonstrate the capability for, and commitment to, continuous improvement towards the delivery of high-quality care and have a continuous improvement plan.	All providers
Workforce	s152	Chapter 4, Part 6, p. 50	Existing for now; changes to be phased in following transitional period	Must comply with worker screening requirements (existing police certificate requirements for aged care workers will remain in place until new worker screening arrangements commence). Must ensure aged care workers have the appropriate qualification, skills or experience to provide funded aged care services.	All providers
Vaccination	s153	Chapter 4, Part 6, p. 62	New	Must provide access to vaccinations to clients and workers in accordance with the Australian Immunisation Handbook, including an influenza vaccination, a COVID-19 vaccination, a pneumococcal vaccination and a shingles vaccination.	All providers

# Conditions on providers – tranche 3 - summary for MPSP

Area	Act reference(s)	Rules reference and page reference	Existing/new/ varied obligation	Summary	Which MPSP providers does it apply to
Record keeping	s154	Chapter 4, Part 7, p. 63	Existing	Must meet record keeping obligations relating to vaccinations	All providers
			Varied	Must meet record keeping obligations relating to complaints and feedback	All providers
			Existing	Must keep records required to complete financial and prudential reports (see below)	<i>As per reporting obligations below</i>
				Must keep records regarding governing body membership and quality care advisory body	Non-government providers only
				Must meet record keeping obligations relating to worker screening	All providers
Access to supporters	s156	Chapter 4, Part 7, p. 74	Varied	Must allow and facilitate access by supporters, legal advisors, aged care advocates and volunteer visitors	All providers
Membership of governing bodies	s157	Chapter 4, Part 8, p. 76	Existing	Must generally ensure majority of governing body are independent non-executive members, and at least one member has experience in clinical care.	Non-government providers only
Advisory body requirements	s158	Chapter 4, Part 8, p. 78	Existing	Must establish/continue a quality care advisory body and meet related requirements	Non-government providers only
Complaints and whistleblowers	s196	Chapter 4, Part 10, p. 98	Varied	Must have complaints and feedback management system, and managed complaints and feedback as required. Must have a whistleblower policy in place and manage disclosures as required.	All providers

# Obligations on providers – tranche 3 - summary for MPSP

Area	Act reference(s)	Rules reference and page reference	Existing/new/ varied obligation	Summary	Which MPSP providers does it apply to
Reporting on vaccination	s166	Chapter 5, Part 2, p. 110	Varied	Must report on influenza and COVID-19 vaccinations for service staff and individuals	All providers
Reporting on complaints	s166	Chapter 5, Part 2, p. 110	New	Must provide a complaint and feedback management report to the System Governor or the Commissioner on request	All providers
Reporting on financial and prudential matters	s166	Chapter 5, Part 2, p. 114	N/A	Must complete aged care financial report	N/A
			Existing	Must complete quarterly financial report (BDF only)	All providers
				Must complete prudential compliance statement	All providers that accept RADS
				Must complete general purpose financial report	N/A
SIRS reporting	s166	Chapter 5, Part 2, p. 129	Existing	Must notify the Commissioner of reportable incidents as required	All providers
Reporting on provider governance and operations	s166	Chapter 5, Part 2, p. 138	New	Must provide a report regarding compliance with the Act and report on certain matters	All providers according to consultation draft, but remains under discussion
Suitability	s172	Chapter 5, Part 5, p. 143	Existing	Must keep records of suitability matters	All providers
Direct Care	s176	Chapter 5, Part 6, p. 145	N/A	Direct care minutes requirements for mainstream residential care providers	N/A

# Meal Obligations

- New obligations coming for 1 July 2025 related to meals in older person's homes and community respite
- Applies to MPS in registration categories 1 and 4 delivering meals
- Ensures meals are nutritious, appealing and meets needs of older people
- Public consultation on related Rules is planned for March/April 2025.
- Guidance being developed to assist in sector readiness





# MPSP subsidies and fees under the new Act

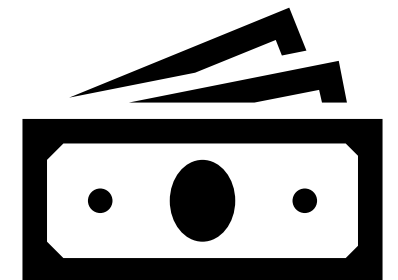
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Cathy Milfull, Thin Markets Branch



# MPSP subsidies and fees: the new Aged Care Act

- No such thing as a flexible care subsidy from 1 July 2025
- Subsidy provisions for specialist aged care programs including MPS, are set on in Chapter 4, Part 2, Division 5 of the *Aged Care Act 2024*
- The Rules will also outline how MPS subsidies will be calculated
  - These will replace the current *Subsidy Principles 2014* and the *Aged Care (Subsidy, Fees and Payments) Determination 2014*.
  - These have been out for consultation and feedback due by today – see Chapter 7, Part 9, Division 1 of the Draft Rules.
  - Rules regarding accommodation payments are coming soon!
- The wording/presentation may be different due to the structure/wording of the Bill. But overall, the expectation is that MPS payment arrangements will stay the same.



# Where do I look in the new Act?

Provisions	Reason
s247	This explains minimum requirements to enter into an MPSP agreement, with further requirements to be prescribed in the Rules
s248	This outlines who is eligible to be paid an MPSP subsidy – that, is: <ul style="list-style-type: none"><li>• must have an agreement in place</li><li>• must be a registered provider</li><li>• must have one or more places allocated</li><li>• place(s) must be in effect and any conditions that apply be met</li></ul>
s249	This provides for the Rules to prescribe the amount of subsidy that will be paid
s260	This provides for the Rules to prescribe requirements around payment of subsidy (e.g. timing of payments) and specifies conditions on why subsidy is paid (i.e. place in effect, places met, registered in right category, access approval in effect)
s286	This provides for the Rules to prescribe requirements in terms of fees and contributions payable for the delivery of funded aged care services under MPSP



# What about the Rules?

Provisions	Reason
s247-5	This outlines additional minimum requirements to enter into an MPSP agreement (e.g. can't be in a major city; will deliver residential care and a health services).
s249-5 to s249-65	This outlines the MPSP subsidy formula and what MPSP providers are entitled to on a quarterly basis from 1 July 2025.
s249	<p>This provides for the Rules to prescribe the amount of subsidy that will be paid. This will <u>not</u> change the amount of funding made available.</p> <p><b>Note:</b> The BDFSA has been included in the formula now (rather than being separated out) – that is, the basic daily fee supplement amount.</p>
s260-10	This provides for the requirement for timing of payments – that is, within 14 days of the commencement of the quarter ( <b>note:</b> slight drafting issue here that will be fixed).
s286-10	This provides for individuals to be charged a specialist aged care program fee for services delivered under MPSP – that is, the amount agreed between the provider and the individual in a written agreement. This fee cannot be more than 85% of the basic aged care pension amount (residential care) or 17.5% of the basic aged care pension amount (home care).

# What definitions relate specifically to MPSP?

- Don't forget that some of the definitions included 'up front' in the draft Rules will also be relevant to helping you understand the relevant provisions

Definition	Explanation
<i>Diverse individual</i>	Revised term needed for subsidy formula as no concept of 'special needs' in the new Act; no practical change
<i>Modified Monash Model</i> <i>2017 MM category</i> <i>ARIA value</i>	No change here – but clearer and more streamlined definitions provided – relevant to MPSP subsidy formula
<i>major city</i>	Defined as currently and relevant to replicate current exclusion of MM1 providers from the MPSP
<i>Category A residential care home</i> <i>Category B residential care home</i> <i>Category C residential care home</i>	These only apply to existing providers so definition reflects this (i.e. will not be any new category A, B or C providers). Used in the MPSP subsidy formula.
<i>Category D residential care home</i>	Some existing and all new MPSP providers will fall into this category. Used in the MPSP subsidy formula.
<i>home or community place,</i> <i>residential care place</i>	The 2 types of places allocated for MPSP – sorry for the complex definition! We will try and improve. Used in the MPSP subsidy formula in future

# Reminder regarding accommodation payments

- A permanent resident in an MPS **may** need to pay an accommodation payment – that is, where the MPS has published an accommodation price **and** the resident's means assessment indicates they must pay this.
- The resident's means are determined via a pre-entry means assessment from Services Australia. If a resident is:
  - determined **not** to be eligible for Commonwealth Government assistance for their accommodation costs, or insufficient information is provided for a means assessment to be determined, the person must pay the room price agreed with their MPS provider as an *accommodation payment*
  - eligible for Commonwealth Government assistance with their accommodation costs, an MPS provider **cannot charge the resident for accommodation**, including any *accommodation contribution* as would be the case under mainstream residential care.



Don't  
Forget!

- The “residential aged care fees notice” (notice) issued to a resident from Services Australia following a means assessment is intended to provide advice for individuals who intend to access mainstream residential care services.
  - As a result, the advice provided is not all relevant to services delivered by an MPS provider.
- If you charge or hold accommodation bonds or refundable accommodation deposits (RAD), you have the same prudential responsibilities as mainstream residential aged care approved providers.
  - The [Accommodation Bond Guarantee Scheme](#) covers the accommodation bonds and RADs you collect.



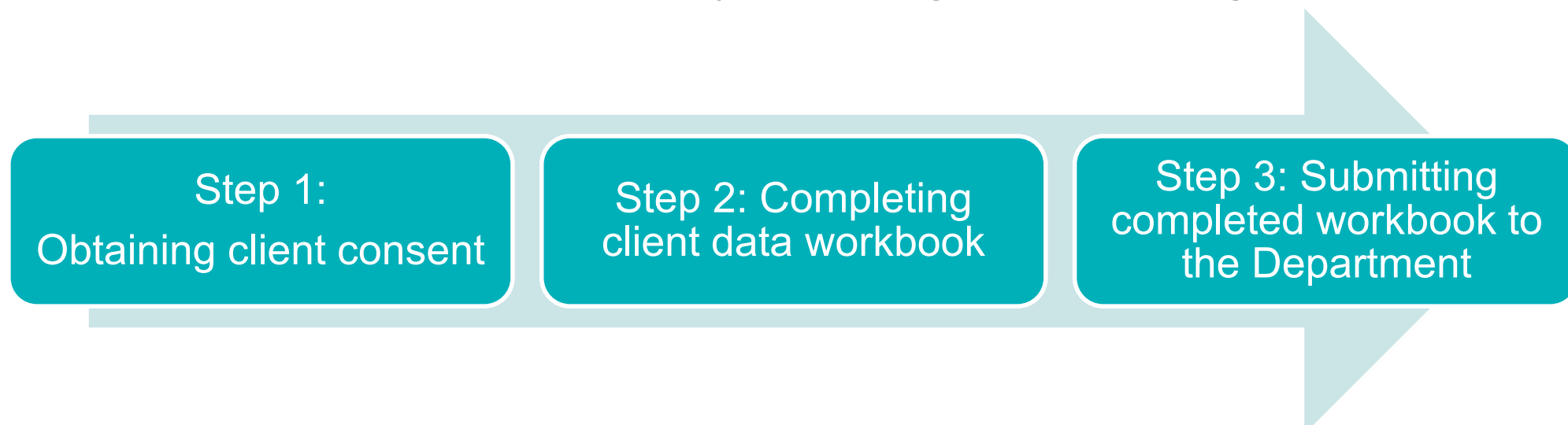
# Transitional arrangements – preparing for client data collection

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Cathy Milfull, Thin Markets Branch

# Transitioning MPSP clients: key tasks for providers

- We need your help in order to transition MPSP clients over to the new Act.
- We will be providing you with detailed instructions on how to undertake the required steps – but will also walk you through this at a high level now.



**Note:** At the next webinar(s), we will update you on the Department's processes that will follow the providers submission of the workbook. This includes how clients will be notified of the outcomes and their 'status' under the new Act.

We will also confirm the approach to be taken for individuals who do not provide their consent/engage in this process.

# Step 1: Obtaining client consent

- We will need providers to obtain consent from clients to:
  - pass their information to the department for the purpose of ensuring they are able to continue accessing aged care services through their MPSP provider from when the New Aged Care Act commences, and
  - update/create their client record on My Aged Care.
- It is anticipated this obtaining consent activity will occur at MPS site level, with MPSP clients or their carers to be provided with information on a one-to-one basis.
- To prepare you should consider, how this will work at your MPS
  - *Who will manage this process on behalf of the provider?*
  - *How will the MPS communicate with and obtain consent from clients who are at home?*

☒ YES  
☐ NO

# What are we doing to help you obtain required consent?

- To assist obtaining consent from clients, the department will make available to MPSP providers, **hard copies** of an **Information Collection Notice** and **Fact Sheet**.
- The Notice sets out to answer key questions a client may have, including the following:
  - *Who is collecting the client's personal information?*
  - *Why does the department collect personal information?*
  - *What could happen if the department did not collect the client's personal information?*
  - *Who the department discloses personal information to?*
  - *The client's access to and correction of their personal information?*
  - *How a client can complain, should they wish, about a breach of the Australian Privacy Principles?*
  - *Contact details for the department if there are questions about a privacy-related matter?*
  - *The type of information the department is collecting?*
- The Fact Sheet will assist the MPSP client's understanding of what the new aged care Act will mean for them and the care services they currently access.

*Note: The department will need to know where to forward hard copies of the Notice and Fact Sheet if needed.*



# What do I need to be careful of?

- You will also be given a *Providing Information and Seeking Consent* guidance document for use by MPSP provider/site staff. This explains things you need to do when seeking client consent.
- This includes that before consent is given the MPSP provider:
  - does not place any pressure on the client to consent to the collection and provision of their information
  - makes the Fact Sheet, Collection Notice, and other information materials available
  - must conclude the client is capable of understanding the nature of a consent decision
  - ensures where a client does not have capacity to consent, they obtain consent from a client's representative validly appointed under the relevant state or territory regime.

**Note:** MPSP providers (senior official) will need to certify that consent requirements have been met as part of Step 2.



## Step 2: completing the client data workbook

- Next you will need to complete the workbook provided to each MPS site.
- The workbook is an MS Excel file containing 7 worksheets (tabs)
  - Tab 1: is where you record the provider and the applicable site name
  - Tab 2: is where you certify consent has been obtained and other matters
  - Tabs 3 to 6: is where you enter each client's information based on which cohort they fall into
  - Tab 7: includes additional information to assist you (e.g. fields, definitions and context)
- You will be provided with additional written guidance for completing the workbook.
- Wherever possible, all relevant fields in the workbook should be completed for each MPSP client.
- This information will support the legal basis for enabling MPSP clients to be approved to access services from 1 July 2025 **and** to update or create a basic client profile for them within MAC.



# How are we going to try and help you?

- The department has now received annual reports from all MPSP providers, including the 2023-24 deidentified client data files.
- It is proposed that the department leverage some of this information to assist providers complete a record for each of their MPSP clients within the workbook.
- Using the Health Data Portal (HDP), the department proposes to send to each MPSP provider, one pre-populated workbook for each of the MPSP provider's MPS sites.
- The five pre-populated fields will be:
  - i. provider
  - ii. Service IDs (NAPS/GPMS)
  - iii. date of birth
  - iv. gender
  - v. MPS client ID.
- You will then just need to collate the remaining information, and also add any additional clients/strike out any clients who no longer require MPSP services.



# Step 3: submitting completed workbook to the Department

- Providers will then also need to return the workbook(s) to the department through the HDP.
- Providers will submit a workbook for each MPS site on three occasions - **30 April, 30 May and 30 June 2025.**
- It is envisaged that the submission of the workbook on 30 May and 30 June largely includes the same data submitted on 30 April. However, some changes are likely to have occurred, and these should be reflected by the provider, for example:

Client related change (examples)	Change to the updated workbook
A new client commences access to care	The client's record is added to the relevant cohort of the workbook in <b>red</b>
A client has left the MPS since the previous submission	A line should be put through the <del>record</del> for that client in the workbook
A change has occurred in the client's situation e.g. change in care type or residential address	Adjust fields in the record to reflect the change. Add comments in Section D if necessary. Select Yes in Section E to signal a change has occurred.

- Providers should endeavour to provide the most up to date client record as possible within the 30 June submission.

# What is the Health Data Portal (HDP)?

- The department uses a secure online portal (HDP) for sending and receiving sensitive client information or data from external entities.
- HDP is a secure channel that can be accessed by external persons who have an existing verified identity profile.
- The MPS provider officer(s) sending the completed workbook to the department as part of this project, will need to establish that profile (once) before access to HDP can be established.
- The MPS officers can undertake that identity verification process through the Australian Government's Digital app – **myID** (where they do not have an existing profile).

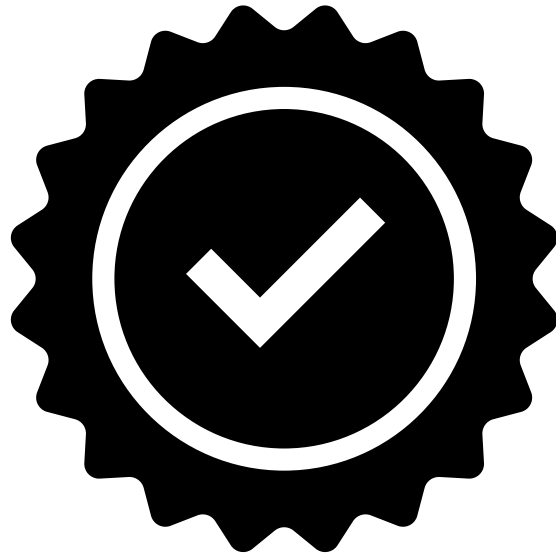


# Steps to accessing HDP

- HDP uses a workflow process. This means that all provider's should nominate at least two persons to be involved in sending completed client data collection worksheets to the department. An 'uploader' of the worksheets and an 'approver'.
- Both persons will need to have an identity profile - **myID** can be used.
- To commence creating the necessary access permissions to HDP, the MPS team is seeking the names and email address for the uploader and approver (the nominees) for each MPS provider.
- An Excel file was sent to providers this month to enable these details to be provided back to us at [mpsagedcare@health.gov.au](mailto:mpsagedcare@health.gov.au).
- **It is requested the uploaders and approvers file be returned by 7 March 2025.**
- The MPS team will contact the provider's nominees from **10 March 2025** to provide further guidance material and information on next steps for accessing and using HDP.

# What do we need from providers?

- *Confirmation of who on behalf of the MPSP provider will be:*
  - *The provider's nominees for accessing and using the HDP (sending the workbook back to the department (step 3))?*
  - *Other key contacts for the department for this process?*
- *Whether you want hard copies of the Notice and Fact Sheet? And whether these should be sent to the provider or to individual sites for use?*



# Questions

