

# Tech Talk

Digital Transformation for the Aged Care sector –  
Webinar Series



Digital Services within Corporate Operations Group  
Department of Health and Aged Care



Australian Government  
Department of Health and Aged Care

[www.health.gov.au](http://www.health.gov.au)

Meeting #23

7 May 2025

# Welcome

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Session is recorded



Australian Government  
Department of Health and Aged Care

# Q&A

Ask anytime - use the Q&A tab on Teams



Vote up the questions you like







# Agenda

Digital Transformation for the Aged Care sector

**Welcome**

Janine Bennett

**Digital  
Transformation  
Update**

Fay Flevaras

**Residential  
means testing  
and  
Accommodation  
reforms**

Susan Trainor

**Digital  
Transformation  
Impact  
Assessment and  
Digital Maturity  
Research**

Janine Bennett

**Places to  
People reform**

Paul Linden

**Q&A and  
close**

Panellists



# Digital transformation update

## Fay Flevaras

Chief Digital Information Officer  
Digital Services within Corporate Operations Group  
Department of Health and Aged Care | Australian Government



Australian Government  
Department of Health and 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.

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- My Aged Care (MAC)
- Government Provider Management System (GPMS)
- Business to Government (B2G)
- Foundational Work – NOT Live in Production

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|              |  | Supported Decision Making framework  | Updates to Quality Indicators API – Updated terminology                | Updates to Registered Nurses 24/7 API to support New Aged Care Act                                     | Support at Home service List   | Refinements to letters and notices                            |
|              |  | Decommission legacy apps   |  | Updates to Provider Management to support New Aged Care Act  | Support at Home information sharing with partner systems                 | NACA SIRS form and payload                                    |
|              |  | Serious Incident Response Scheme (SIRS) Integration  |  | Updates to Authentication API to support New Aged Care Act   | Improvements to eligibility pathways                                     | Home Care package client transition                           |
|              |  | New staffing Quality Indicators  |  |  | End of life assessments  | Amendments to service catalogue                               |
|              |  | Changes to care minutes and staffing rating  |  |  | CHSP Service List updates aligned with Care Services Model               |   |
|              |  | Star Ratings enhancements  |  |  |  |   |
|              |  | Worker Screening technical release   |  |  |  |   |
|              |  | Updates to Quality Indicators API to support new staffing indicator for Allied Health  |  |  |  |   |
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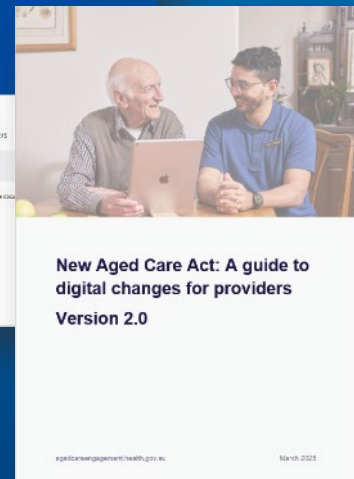
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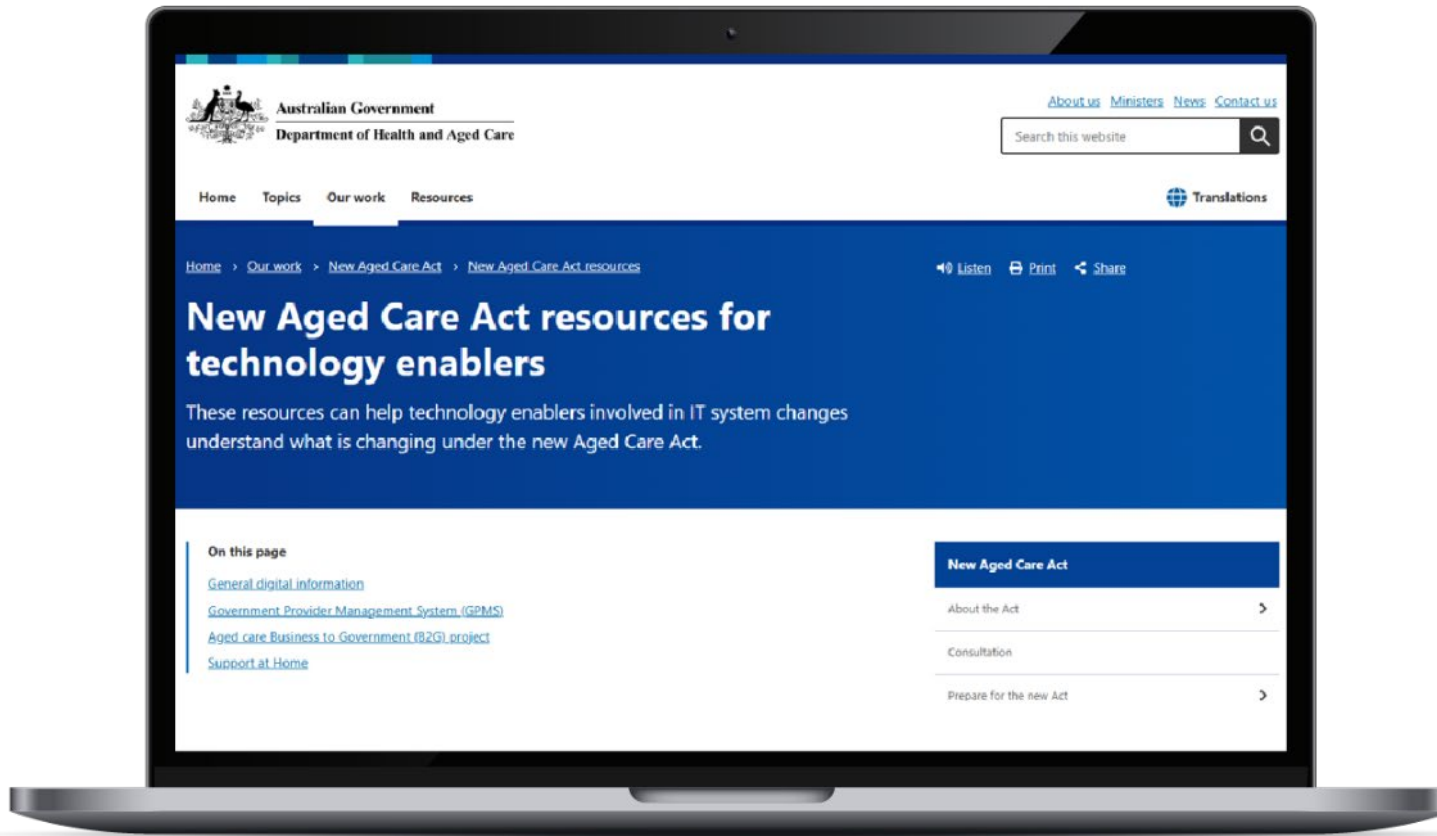


# Updated | New Aged Care Act - A guide to digital changes for providers v2.0

- Updated with new information on Support at Home, GPMS Conceptual Data Model, and Services Australia Technical Specifications.
- Defines key digital changes that providers will experience in the lead up to the implementation of the new Act on 1 July 2025.
- Outlines information to assist providers to anticipate and prepare for digital changes.
- Provides information on the support and resources available to help providers transition smoothly to operate under the new Act.



# New Aged Care Act resources for technology enablers

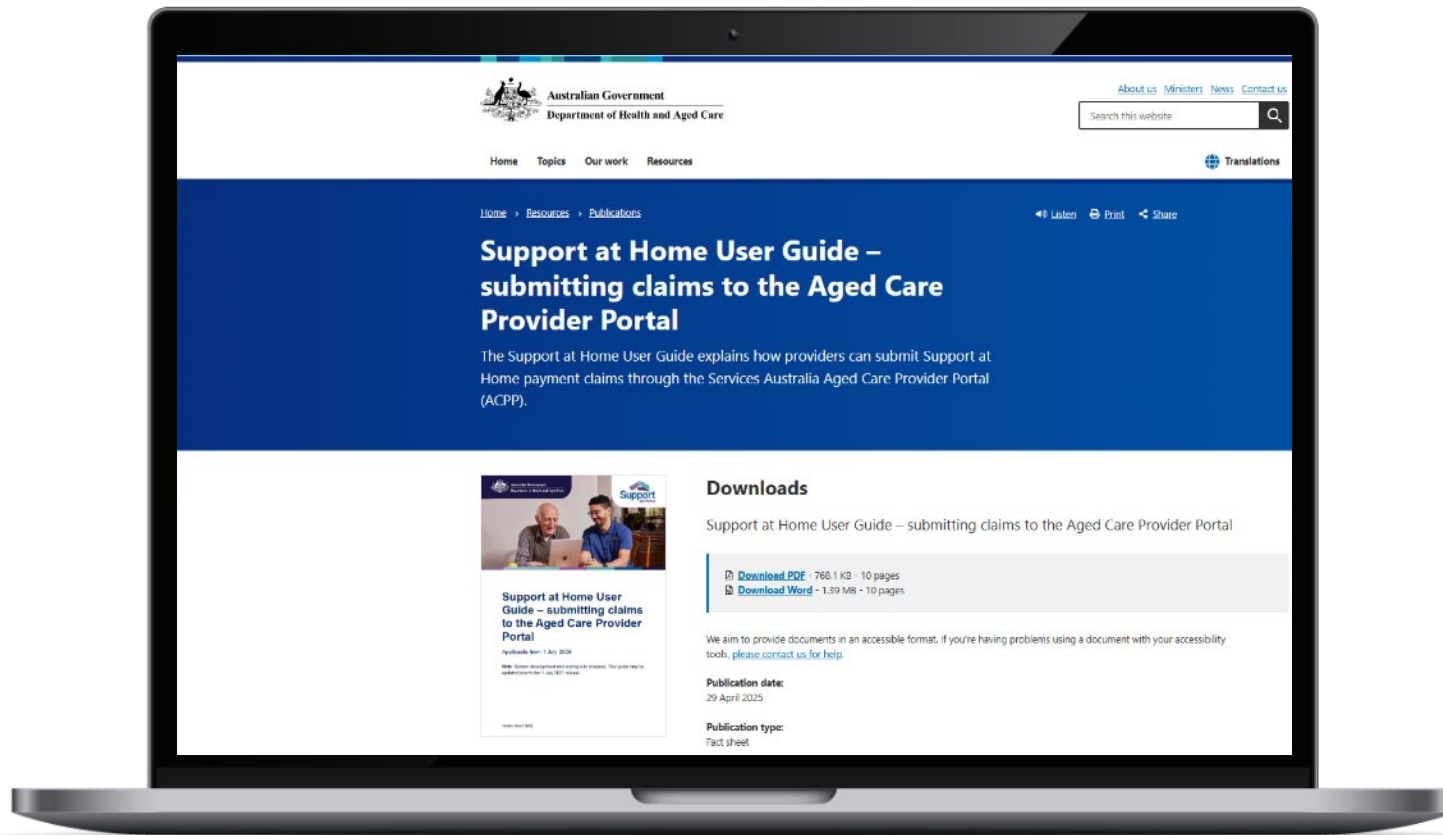


# Support at Home

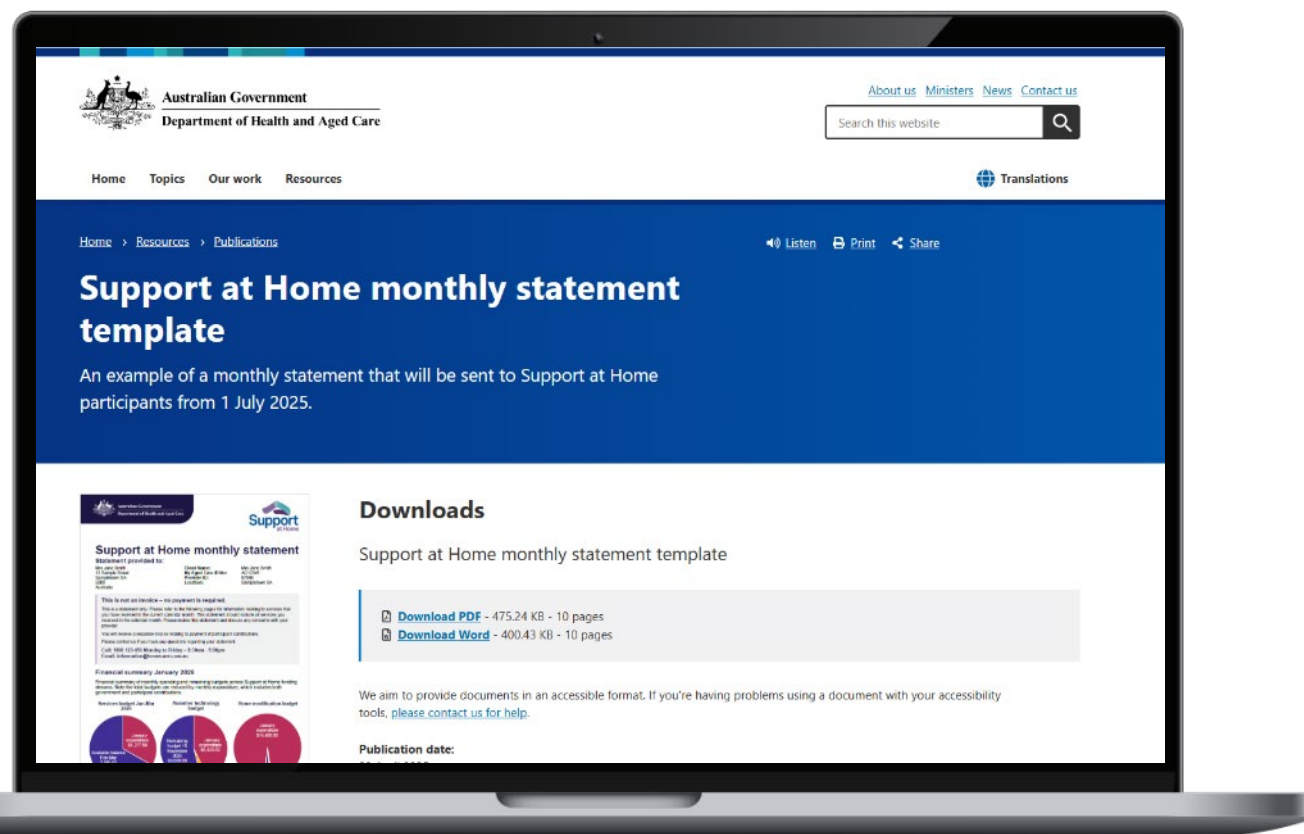




# New user guide for submitting Support at Home claims



# Support at Home monthly statement template



# Star Ratings provider preview period extended

The provider preview opened on 28 April and is available for 2 weeks.



For more information  
and support, see the  
GPMS User Guide: Star  
Ratings.







# Residential means testing and Accommodation reforms

**Susan Trainor**

Assistant Secretary  
Contributions and Accommodation Reform Branch  
Department of Health and Aged Care | Australian Government



Australian Government  
Department of Health and Aged Care

# What will stay the same



The government will continue to fund the majority of aged care.



All residents will continue to pay a Basic Daily Fee.



The way different types of income and assets are assessed in the residential aged care means assessment will not change.



Current financial hardship assistance arrangements will continue.



# Means testing reforms

The reforms consist of:

- means testing the hotelling supplement which is currently paid in full by government
- abolishing the current means tested care fee and associated annual and lifetime caps
- introducing a new means tested contribution to non-clinical care, including a new daily cap on payments and a new lifetime cap
- mandatory reporting to keep residents' means assessments current.





# Hotelling Supplement contribution

- Starting 1 July 2025, the Hotelling Supplement will be means tested for new residents.
- Residents who can afford to will contribute to daily living costs such as food, cleaning, laundry and utilities.



# Non-Clinical Care Contribution

- The Government will fully fund all **clinical** care costs.
- For new residents from 1 July 2025, the new means-tested **Non-Clinical Care Contribution (NCCC)** will replace the Means Tested Care Fee.
- This contribution will be for non-clinical care costs such as bathing, mobility assistance and lifestyle activities.
- It is paid until the resident has contributed \$130,000 or been in residential aged care for 4 years, whichever occurs first.



# The *no worse off* principle

- A no worse off principle will apply to everyone in permanent residential aged care on 30 June 2025.
- Existing residents retain their contribution arrangements for the entirety of their stay in residential care.



# Mandatory reporting

- Providers will regularly report individual refundable deposit balances.
- Residents will be required to report changes to their personal and financial circumstances.
- Residents can elect to be classified 'means not disclosed'. They:
  - won't be asked to report financial circumstances
  - won't be eligible for government support with accommodation costs or Non-Clinical Care Contribution
  - can later elect to complete a means assessment but this cannot be back dated to their entry to care.





# Implementing Taskforce accommodation reforms

1 January 2025

- Increase to maximum accommodation price began.
- Indexed on 1 July each year.

1 July 2025

- Refundable accommodation deposit (RAD) and refundable accommodation contribution (RAC) retention begins.

1 July 2025

- Daily accommodation payment (DAP) indexation begins.
- Indexed on 20 March and 20 September each year.



# RAD and RAC retention

- 2% per annum applied as a daily rate to the daily balance
- capped at 5 years
- applies to new RADs and RACs
- does not apply to residents who entered care before 1 July 2025.





# DAP indexation

- DAPs indexed twice a year (20 March and 20 September) to CPI
- aligns with government-funded accommodation supplement increases
- applies only to new residents
- does not apply to DACs.



# When will RAD/RAC retention and DAP indexing apply

- RAD/RAC retention and DAP indexing will apply for people:
  - who first enter residential care on or after 1 July 2025
  - in care immediately before 1 July 2025
    - if they move to a new service after they have opted in to the 2025 consumer contribution arrangements while in a service
    - if they opt into the 2025 consumer contribution arrangements when they move to a new service
    - if they leave permanent residential care for more than 28 days other than on approved leave (only applies to post 2014 accommodation class).





# Digital Transformation Impact Assessment and Aged Care Digital Maturity Research

**Janine Bennett**

Assistant Secretary

Digital Business and Sector Engagement Branch

Department of Health and Aged Care | Australian Government



Australian Government  
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# Digital transformation impact assessments

## Project scope

Working with the Aged Care Transition Taskforce, the department will join with sector volunteers to better understand:

- The impacts of the new act on provider operations
- How providers can better prepare for and adapt to coming changes.

## Representatives

We are bringing together a multi-disciplinary team - including:

- Government
- Providers
- Assessment organisations
- ICT vendors
- Suitable experts.

## Targeted outcomes

The intent is to:

- Produce an Impact Assessment Playbook that will help providers better understand the operational impacts of legislative changes
- Identify resources and support materials to help address common adoption challenges.

## Expression of Interest



- EOI for volunteers – open from 21 Feb to 14 Mar
- Was extended for one week
- Received strong response

## Workshops



- 2 workshops – 11 & 14 Apr
- 11 providers & ICT vendors – 25 participants total
- 4 areas prioritised for discussion

## Deep Dives & Follow Ups

- 4 deep dive sessions
- follow up conversations
- Additional workshop – 6 May



# What does 'ready' mean for providers?

## As a provider of aged care services under the Act...

...there are things that are critical for me to continue operations from July 2025.

...focusing on these actions will ensure continuity of service, operations, payments and compliance.

## I CAN...

- ✓ **Understand principles** of the Act, and what I (and my workforce) need to be compliant, including reporting obligations
- ✓ Review and update my **services and registration categories according to the new service list**, and receive my certificate as a registered provider for these service categories
- ✓ Review and update my **organisation information, outlets, services and pricing in the Government Provider Management System (GPMS portal)** and set up and train my workforce to use the portal, so new participants can find me
- ✓ Update **funding and payment processes and information** so that I can make claims and get paid promptly
- ✓ Update my **business processes, training and IT systems** to reflect changes to services, standards, reporting and compliance
- ✓ **Communicate with my existing participants** and ensure they're ready for the change, having signed new service agreements
- ✓ Work with my **partner eco-system** to ensure joint readiness for the new operating arrangements.



# Conducting an impact assessment

## Change Item

## Impact Scoring

## What is involved?

## What do I need to do in response?

## What's the consequence if I'm not ready?

## What's blocking progress?

### Change Item

### Score the impact

### What is involved?

### What do I need to do in response?

### What's the consequence if I'm not ready?

### What's blocking progress?

FOR 1 JULY

**Claim Support at Home payments from Services Australia**

Invoice Services Australia based on services delivered against different funding sources.

Funding model to Pay Support at Home providers will be based on services delivered. Providers will invoice Services Australia against different funding sources: participants quarterly budget, participants ATNMI funding tier, participants budget for End-of-life and/or Restorative Care Pathway, unspent funds half by HCP recipients who have transition to Support at Home, the providers care management fund for care management services delivered.

See [Support at Home program handbook](#)

PROTOTYPE P156

FOR 1 JULY

**Claiming processes with Service Australia**

Providers to review interface with Service Australia

Ensuring providers, understand and action anything that is required to continue to claim from Service Australia

See [Using the Agent Care Provider Portal \(ACPP\)](#)  
[My Agent Care - Service and Support Portal](#)  
[Resources](#)

PROTOTYPE P155



### Change Item

### Score the impact

### What is involved?

### What do I need to do in response?

### What's the consequence if I'm not ready?

### What's blocking progress?

FOR 1 JULY

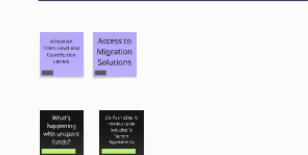
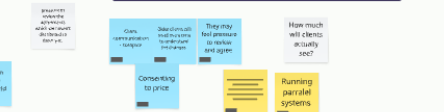
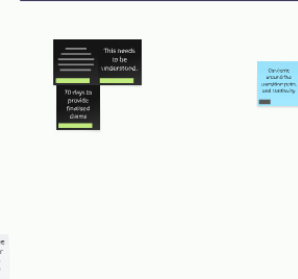
**Transition existing Home Care Package participants to Support at Home**

Assist participants to transition

Transitioning existing participants to Support at Home will involve engaging with existing participants, communicate the change, informing about changes to their services under new service list, implementing processes to ensure contributions are clearly understood.

See [Support at Home provider transition guide](#)

PROTOTYPE P24



### Change Item

### Score the impact

### What is involved?

### What do I need to do in response?

### What's the consequence if I'm not ready?

### What's blocking progress?

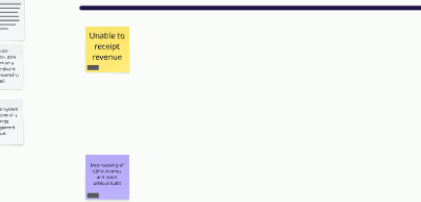
**Pooled Care Management Fees**

10% of ongoing Support at Home funding will be used to deliver care management

Using a pooled approach Support at Home classification funding will allocated 10% for care management. Participants with ongoing services will have 10% of their quarterly budget pooled with the provider to deliver care management.

See

PROTOTYPE P156





# Key early insights

Providers reviewed change items across all seven 'I CAN' statements, and prioritised discussion around four. Specific change items that were prioritised for discussion appear on the next page.

## 'I Can' 1

**Understand principles of the Act, and what I (and my workforce) need to be compliant, including reporting obligations.**

- Manual workarounds are increasing administrative burden and risk.
- Workforce capability in compliance varies across the sector.
- Reliance on third-party systems presents operational risks.
- Small and regional providers face elevated compliance risks.

## 'I Can' 4

**Update funding and payment processes and information so that I can make claims and get paid promptly.**

- Complex funding models risk eroding client trust.
- Administrative burden is straining frontline teams.
- Payment changes are driving operational redesign across service delivery.
- Small and medium providers are more vulnerable to financial and compliance risks.

## 'I Can' 5

**Update my business processes, training and IT systems to reflect changes to services, standards, reporting and compliance**

- Digital maturity influences reform delivery, with uneven progress
- Funding changes impact client understanding and engagement.
- Late-stage system updates increase risk exposure
- Regional classification impacts equitable access.

## 'I Can' 6

**Communicate with my existing participants and ensure they're ready for the change, have signed new service agreements**

- Fragmented communication is reducing client confidence.
- The Client transition experience will shape long-term perceptions.
- Administrative uplift is affecting workforce wellbeing.
- Lack of central guidance is creating divergent interpretations.



# Key early insights

Of the full list of change items, seven were called out as high priority across most participating providers. A further 13 items received attention from one or more providers.

## High priority (majority of providers)

Financial Reporting

Transition Existing HCP Participants to SaH

Pooled Care Management Fees

Update Communication Artefacts

Claim Support at Home Payments from Participant

Claim Support at Home Payments from Services Australia

Business to Government API's

## Medium Priority (selected by some providers)

Incident Management Systems

Referral Management

Supported Decision Making

Deliver New AT-HM Scheme

New Aged Care Quality Indicators

Star Ratings

24/7 RN responsibility

Protections for Whistleblowers

Financial and Prudential Standards

Claiming Processes with Services Australia

Changes Related to DAP and RAD

Means Testing

# Aged Care Digital Maturity Research

## Project scope

The current digital maturity of aged care providers varies significantly across services, geographies and provider types.

We understand that providers face a range of challenges in selecting, adopting and implementing new systems to deliver aged care services and manage their corporate functions.

EY has been engaged by the department to assess the current level of digital maturity of the aged care sector.

This work will see the development of a digital maturity framework that is fit-for-purpose, and will be tested through market engagement, research and analysis.

## Key questions

**The project seeks to answer four key questions:**

1. What are the key barriers and challenges inhibiting aged care providers from improving their digital maturity?
2. What are the types of support and enablers providers need to help improve their digital maturity?
3. What are the core elements of digital maturity for aged care providers that lead to success?
4. What is the current level of digital maturity for aged care providers?

## Provider self-assessment



- Self-assessment survey closed 13 April
- Benchmark report - releasing late May
- Market Research Report due early June

## Vendor survey



- EOI for Vendor survey open
- Survey live from 24 April to 18 May
- Results will be incorporated into the Market Research Report



# Vendor Survey



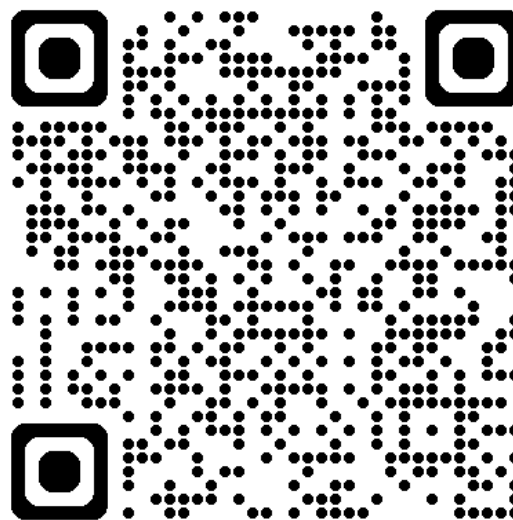
The survey closes on Sunday 18 May



Vendors who support the aged care sector are encouraged to participate – via the QR code



[AgedCareDigitalMaturityProject@health.gov.au](mailto:AgedCareDigitalMaturityProject@health.gov.au)





# Aged Care Digital Maturity Research: Provider Self-Assessment - benchmark report format

## Aged Care Digital Maturity Research Project

Pro

Pro  
Data



Australian Government  
Department of Health and Aged Care



### OVERALL DIGITAL MATURITY SCORE

Overall, your organisation's digital maturity score (out of 100) is:



### DIGITAL MATURITY SCORE - BY AREA (DOMAIN)

Your organisation's individual digital maturity score (out of 100) for each of the five areas (domains) is:



### HOW TO READ THIS REPORT

The purpose of this benchmark report is to present an organisation's digital maturity score, developed from completion of the Self-Assessment tool. These scores are measured on a maturity gradient from 'Initial' to 'Optimising', ranging from Initial to Optimising.

The benchmark report presents:

1. An organisation's overall digital maturity score
2. An organisation's digital maturity score by domain of the ACDMF
3. An organisation's digital maturity score by sub-domain of the ACDMF
4. The benchmark digital maturity of other aged care providers who completed the Self-Assessment Tool

Providers of the current benchmark report aim to support aged care providers to better understand their level of digital maturity and enable providers to benchmark their maturity against the benchmark sector.

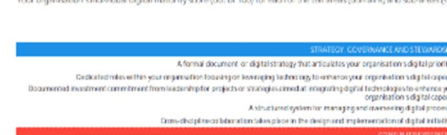
Your organisation's score is **53/100** (Developing). Out of 100, able to show your organisation at the **Developing** stage. The benchmark score is **66/100** (Established). The comparison with industry score of **66/100** (Established) out of 100, which places the digital maturity of the aged care sector at the **Established** stage.



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### DIGITAL MATURITY SCORE - BY SUB-AREAS (SUB-DOMAINS) (1)

Your organisation's individual digital maturity score (out of 100) for each of the five areas (domains) and sub-areas (sub-domains) is:



### DIGITAL MATURITY SCORE - BY SUB-AREAS (SUB-DOMAINS) (2)

Your organisation's individual digital maturity score (out of 100) for each of the five areas (domains) and sub-areas (sub-domains) is:



Australian Government

## ABOUT THE PROJECT

The Department of Health and Aged Care (the department) understands that the current digital maturity of aged care providers (providers) varies across services, geographies, and provider types.

Providers are understood to face a range of challenges in selecting, adopting and implementing new software and IT systems to deliver aged care services and manage their corporate functions.

Ernst & Young (EY) has been engaged by the department to assess the current level of digital maturity within the aged care sector (the 'Project'). The results from the research will help to inform the department's potential responses to assist the sector to improve its digital maturity.

### Improving digital maturity can assist to:

- Improve older persons' engagement, choice and control over when, what and how services are delivered
- Improve the effectiveness and efficiency of providers in delivering care by reducing administrative and reporting burden, improving workforce engagement and retention, improve the quality of data to inform decision making, and reduce costs
- Improve quality and timeliness of data provided to government to help inform decision making and improve transparency and accountability.

### The Project seeks to answer five key questions:

1. What is the current level of digital maturity for providers?
2. What are the key barriers and challenges inhibiting providers from improving their digital maturity?
3. What are the types of support and enablers providers need to help improve their digital maturity?
4. What are the opportunities for government to assist software vendors and IT shops to improve the digital maturity of the sector?
5. What are the core elements of digital maturity for providers that lead to success?



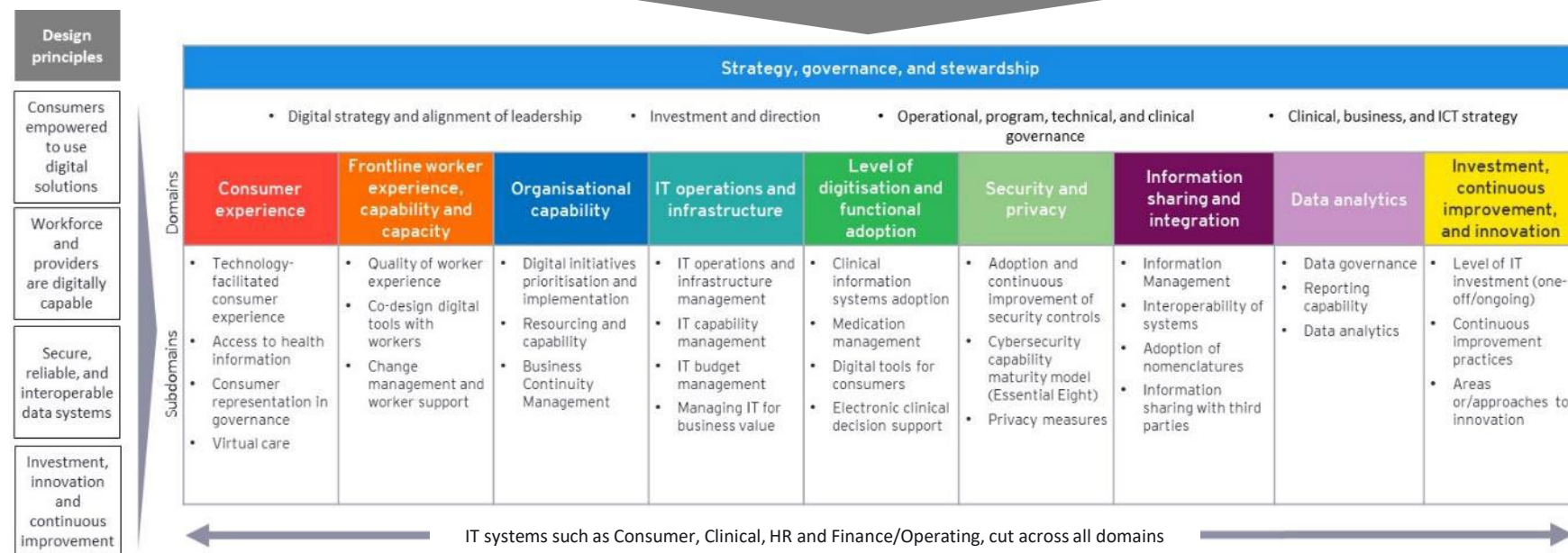
## Example for illustrative purposes only

## OVERVIEW OF THE AGED CARE DIGITAL MATURITY FRAME

## DRAFT - For illustrative purposes only

In undertaking this Project, EY developed a comprehensive and rigorous Aged Care Digital Maturity Framework (ACDMF), outlined below. This was based on a previous Australian hospitals and healthcare sector digital maturity framework which was peer reviewed by Deakin University, ensuring its academic rigour and practical relevance. The ACDMF is structured around ten domains that represent key aspects of digital maturity, such as consumer and workforce experience, IT operations, security and privacy, data analytics, and innovation. The ACDMF adopts an evidence-based methodology, which was tested with the department and based on the principles of human-centred design.

**Digital maturity** encapsulates an organisation's ability to create value through their people, processes and technology. EY has developed the ACDMF to help assess the current state of the digital maturity across the diversity of aged care providers, building off existing research and similar frameworks used in the health sector.



## BASIS OF THE SELF-ASSESSMENT TOOL

To address the Project's key questions, the Project team conducted a series of stakeholder consultations including workshops, deep dive interviews with aged care providers and software vendors, and an online Aged Care Digital Maturity Provider Self-Assessment Tool with aged care organisations.

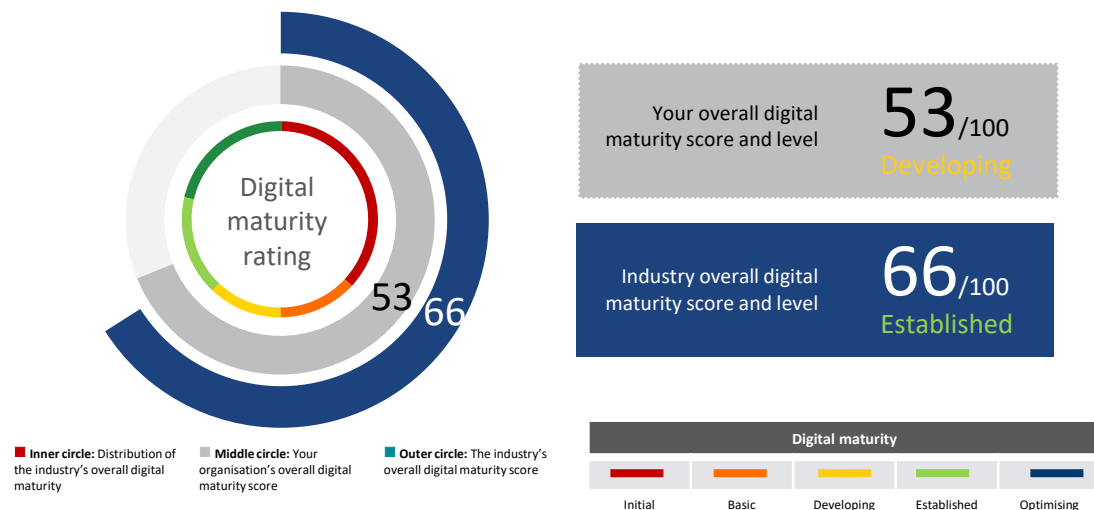
A total of **[INSERT FINAL TOTAL COMPLETED SURVEYS]** completed the online Self-Assessment Tool. All aged care providers were invited to complete the self-assessment, with one completed self-assessment allowed per organisation.

The aim of the Self-Assessment is to gather feedback from a wide and representative view of audiences — or, in statistical terms, a 'sample' of the aged care provider population. Sampling bias may still occur, particularly if we have only heard from a portion of the population. Steps were taken to minimise potential sampling and response bias, including designing the Self-Assessment Tool with the department to ensure the questions asked minimised potential response bias, using a range of recruitment sources and methods to encourage participation, and extending the fieldwork period to maximise responses. These measures provide a degree of confidence that results obtained are reflective of the population.

**The department will aim to publish a summary report of the key findings from the Self-Assessment Tool [to confirm with the department].**

## OVERALL DIGITAL MATURITY SCORE

Overall, your organisation's digital maturity score (out of 100) is:



## HOW TO READ THIS REPORT

The purpose of this Benchmark Report is to present an organisation's digital maturity score, developed from completion of the online Self-Assessment tool. These scores are measured on a maturity gradation level, for each domain and sub-domain, ranging from Initial to Optimising.

The Benchmark Report presents:

1. An organisation's overall digital maturity score
2. An organisation's digital maturity score by domain of the ACDMF
3. An organisation's digital maturity score by sub-domain of the ACDMF
4. The benchmark digital maturity of other aged care providers who completed the Self-Assessment Tool.

Provision of the current Benchmark Report aims to support aged care providers to better understand their level of digital maturity and enable providers to benchmark their maturity against the broader sector.

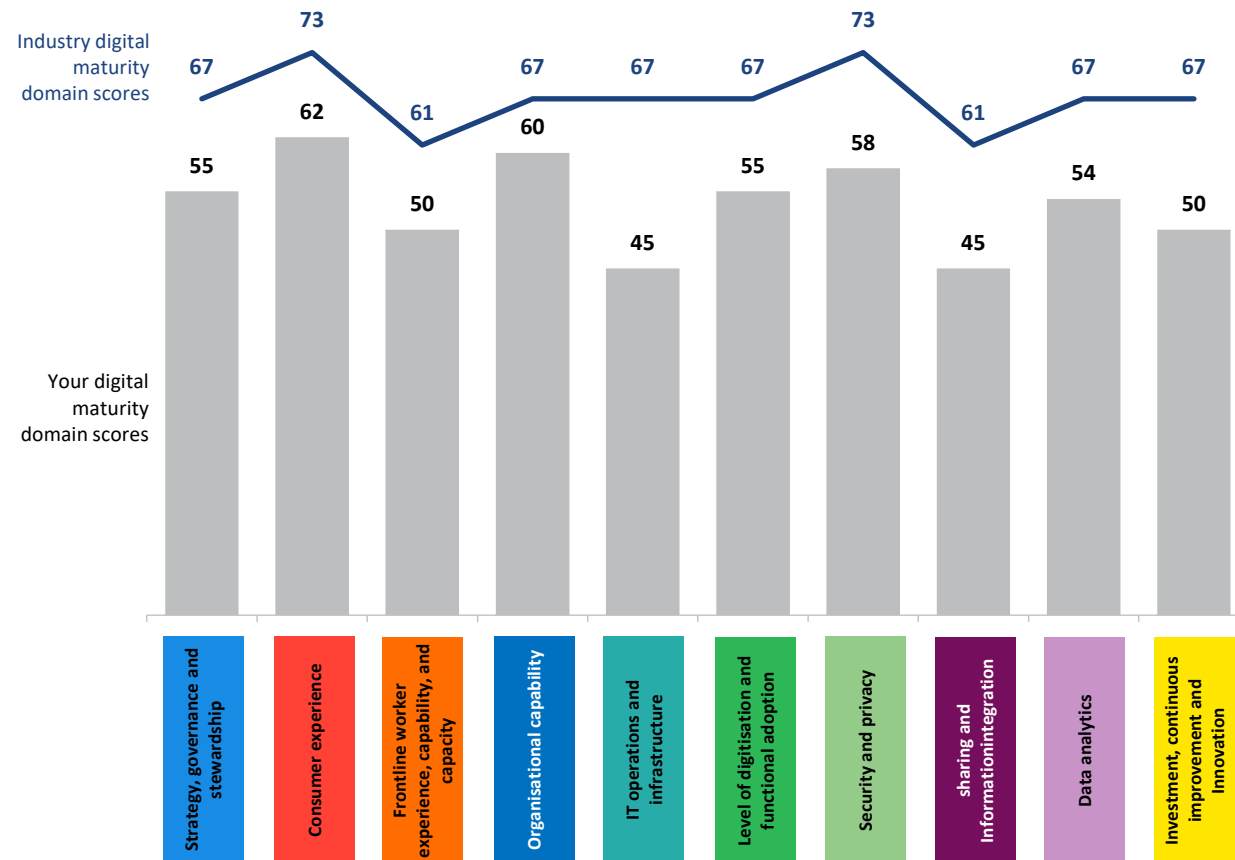
Your organisation's score is [INSERT ORGANISATION SCORE] out of 100, which places your organisation at the [INSERT ORGANISATION LEVEL] level. This compares with an industry score of [INSERT INDUSTRY SCORE] out of 100, which places the digital maturity of the aged care sector at the [INSERT INDUSTRY LEVEL] level.



## DIGITAL MATURITY SCORE – BY DOMAIN

**DRAFT - For illustrative purposes only**

Your organisation's individual digital maturity score (out of 100) for each domain:



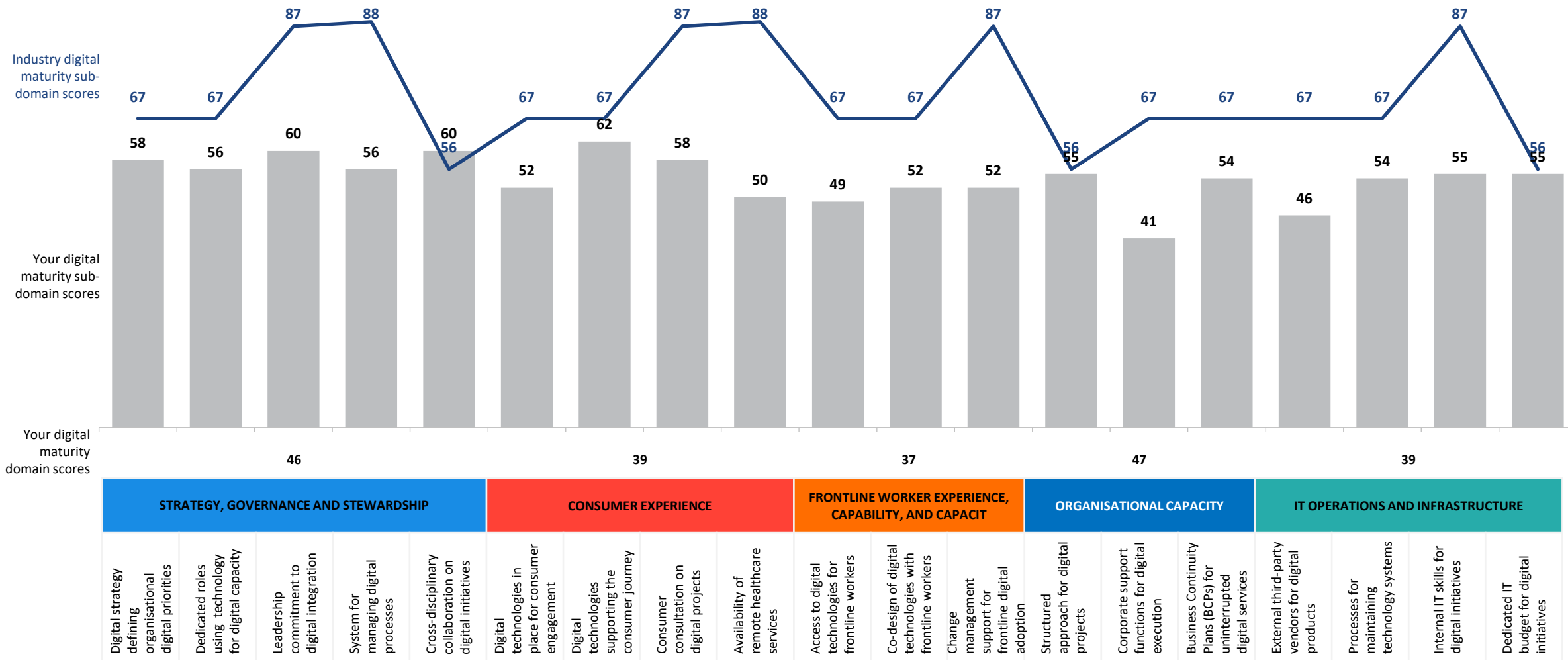
Example for illustrative purposes only

## DIGITAL MATURITY SCORE – BY SUB-AREAS (SUB-DOMAINS) (1)

**DRAFT - For illustrative purposes only**

Your organisation's individual digital maturity score (out of 100) for each of the ten areas (domains) and sub-areas (sub-domains) is:

Your overall digital maturity score and level  
**53/100**  
Developing



Australian Government

Department of Health and Aged Care



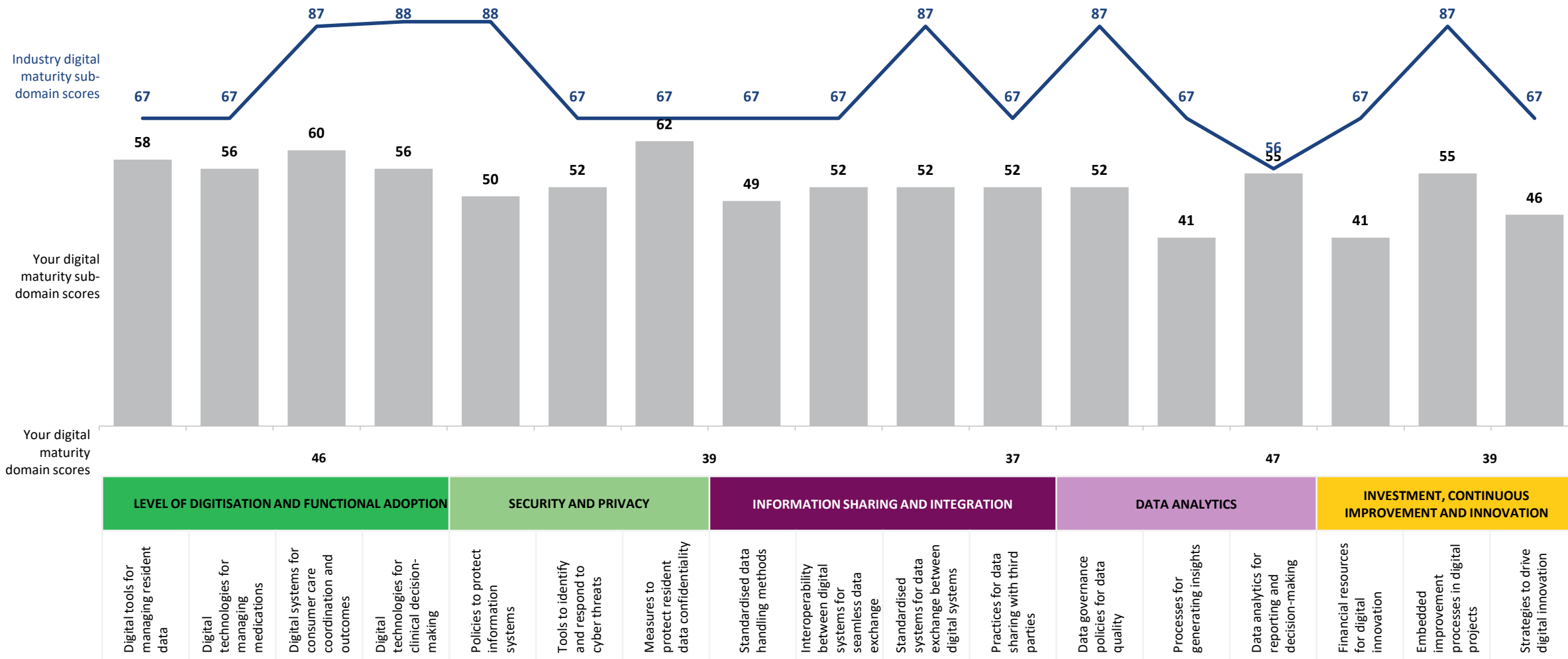
Example for illustrative purposes only

## DIGITAL MATURITY SCORE – BY SUB-AREAS (SUB-DOMAINS) (1)

**DRAFT - For illustrative purposes only**

Your organisation's individual digital maturity score (out of 100) for each of the ten areas (domains) and sub-areas (sub-domains) is:

Your overall digital maturity score and level  
**53/100**  
Developing





# Places to People reform

**Paul Linden**

Director  
Residential Care Division  
Department of Health and Aged Care | Australian Government



Australian Government  
Department of Health and Aged Care

# Presentation overview

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What is Places to People?

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Impacts

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Registration Model

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System changes

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Provider readiness



# What is the Places to People reform?

## **Current system** (provider centred)

Places allocated to providers

**Government** has control and chooses when and where places are allocated



**People** have limited control

**Providers** are also limited in their ability to make business decisions

## **New system** (person centred)

Places allocated to people

**People** are at the centre and have better control



**People** can take their place to their chosen provider

**Providers** can make decisions about service expansions to better meet people's needs and when it suits their organisation





# Impacts for older Australians

## What does the allocation of a place mean?

- No wait list.
- No time limits for place acceptance.
- Older Australians may still have to wait, if the home they choose is full and does not have any available rooms.
- The government will continue to pay subsidies to the person's chosen single provider of residential aged care – no fund holding.



# Impacts for providers

- Residential care places, in their current form, will cease to exist upon commencement of the new Aged Care Act on 1 July 2025.
- The department will no longer issue places to providers from the current bed-ready process.
- Providers will have more flexibility and autonomy to decide how they approach the market, and in some instances, may need to make changes to attract new residents in more competitive markets.
- Providers may need to undertake more detailed market analysis before considering new residential developments.

# New aged care regulatory model

**From 1 July 2025 the Aged Care Quality and Safety Commission will manage a new provider registration model**

- Single provider registration for all the programs run by a provider.
- Six registration categories that group service types based on the complexity and risk of care.
- Standard three-year registration period and renewal process.
- Approval of residential aged care homes – including the total number of beds.
- Existing records are being used as the basis for the deeming process that is currently underway.

# Change in registration approach

## Places management process before 1 July (Department)

Transfer places and services from one provider to another

Open a new service to commence care delivery

Commence care for new places in an existing aged care home

Combine co-located services

## Registration activity after 1 July (Commission)

Application to vary the registration of both providers

Application for a new aged care home and a variation to the provider's registration

Application to vary the approval of an aged care home

Applications to vary the approvals of both aged care homes and an application to vary the provider's register





# System changes to support the reform

## **My Aged Care:**

- Will continue to store information about a client's assessment and approval for residential aged care.
- The department will allocate a place to a person through the system, much like how home care packages are assigned to an older person.
- Multiple providers will now be able to view client information using a Referral Code – this will help clients when they are considering multiple aged care homes simultaneously.
- Information will be sent to Services Australia about a client's approval and place allocation for the purposes of paying subsidy.

# System changes to support the reform (2)

## The Government Provider Management System (GPMS)

- Will hold data about the bed capacity at an aged care home, including:
  - **Total number of beds** - Each residential aged care home will have the total number of beds linked to its provider registration.
  - **Offline beds** - Residential aged care homes may have beds that are not available (i.e. offline beds).
- From July, providers will be able to view the above data through the GPMS portal.
- To take beds offline, providers will need to email the local network office as they currently do.

# Provider readiness before 1 July 2025

**Providers are encouraged to review residential place records and take any necessary action. Contact your local State or Territory office to:**

- relinquish any offline and/or provisional places that will not be made operational prior to 1 July
- submit a completed form or notice to operationalise a provisional or offline place before 1 July
- ensure that any operational places that are not being used due to staffing constraints or development are up to date and offline.

# Where to get more information

- Visit [our website](#) for information and/or to contact your local network team – search using 'Places to People'
- Visit the [Aged Care Quality and Safety Commission's website](#) for information on their registration policy





# Q&A

- 1 Ask your questions on Teams, using the **Q&A Tab**
- 2 If you see a questions you like, vote it up!

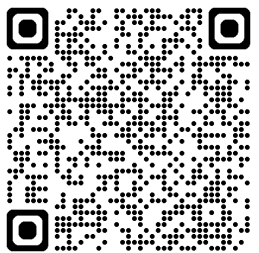




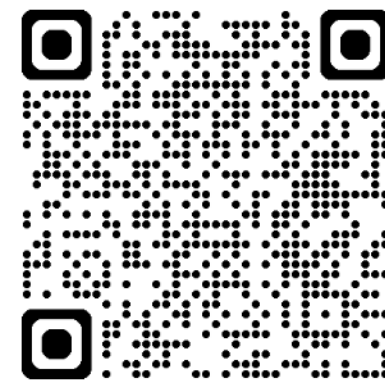
# Thank you!



Tech Talk post-event survey



Register for Tech Talk 24



Australian Government  
Department of Health and Aged Care



DTDDEngagementOffice@health.gov.au