



Schedule of fees and charges for residential and home care from 1 July 2025

This Schedule only applies to care recipients who first enter care from 1 July 2014

Basic daily fee – Home care and residential care

Maximum Basic daily fee	Rate
Home care - level 1 package	\$11.77
Home care - level 2 package	\$12.45
Home care - level 3 package	\$12.80
Home care - level 4 package	\$13.14
Residential care ^[i]	\$63.82

Income free area – Home care and residential care

Income free area for:	Rate
Single person	\$34,005.40
Couple, Illness separated (single rate)	\$33,277.40
Couple, Living together (single rate) - relevant to home care only	\$26,301.60

Annual income up to these amounts is excluded from the income test component of the residential means test and the income test in home care. To calculate the equivalent fortnightly income, divide by 26.

Income threshold – Home care income test

Income threshold for:	Rate
Single person	\$65,416.00
Couple, Illness separated (single rate)	\$64,688.00
Couple, Living together (single rate)	\$49,977.20

Consumers with incomes above these amounts are subject to the second cap when calculating the daily income tested care fee in home care and are also subject to the higher annual cap that applies in home care. To calculate the equivalent fortnightly income divide by 26.

Asset thresholds and home exemption cap – Residential care means test

Asset threshold	Rate
Asset free threshold	\$61,500
First asset threshold	\$206,663.20
Second asset threshold	\$496,989.60
Home exemption cap (applies separately to both members of a couple). The net value of the home above this amount is excluded from the value of the resident's assets.	\$206,663.20

Caps on income tested care fees – Home care

Income tested care fee caps	Rate
Lifetime cap	\$82,347.13
Where the consumer's income does not exceed the income threshold	
First cap (daily cap)	\$18.85
First annual cap	\$6,862.18
Where the consumer's income exceeds the income threshold	
Second cap (daily cap)	\$37.70
Second annual cap	\$13,724.45

Caps on means tested care fees – Residential care

Means tested care fee caps	Rate
Lifetime cap	\$82,347.13
Annual cap	\$34,311.23

Maximum accommodation supplement amount – \$69.79 (per day) ^[iii]

Deeming thresholds and rates – Home care and residential care

Threshold/Rate	Rate
Deeming thresholds – from 1 July 2025	
Threshold (single)	\$64,200.00
Threshold (couple – combined)	\$106,200.00
Deeming rates from – from 1 June 2020	
Lower rate	0.25%
Higher rate	2.25%

Interest rates for refundable deposits and daily payments

Interest rate	Rate
Maximum Permissible Interest Rate	
– for all new residents ^[iv]	
– maximum rate of interest that may be charged on outstanding amount of daily payment	
from 1 July 2025 – 30 September 2025	7.78%
Base Interest Rate from 1 June 2020	2.25%

Thresholds for refundable deposits and daily payments

Threshold	Rate
Minimum permissible asset level	
– the minimum assets a resident must be left with if they pay at least part of their accommodation costs by refundable deposit	
	\$61,500
Maximum refundable accommodation deposit	
– the amount that can be charged without prior approval from the Independent Health and Aged Care Pricing Authority	
	\$758,627.00

Transition care programme

Maximum daily fee	Rate
TCP delivered in a home or community setting	\$13.14
TCP delivered in a residential care setting	\$63.82

Short-Term Restorative Care

Maximum daily fee	Rate
STRC delivered in a home or community setting	\$13.14
STRC delivered in a residential care or hospital setting	\$63.82

^[i] Residents in designated remote areas may be asked to pay an additional \$1.06 per day.

^[ii] This rate applies for calculating accommodation costs for residents who enter residential care within this time period but not for those who were already in care prior to this time period. To calculate daily payments for a resident paying the agreed room price, use the Maximum Permissible Interest Rate current on the day the room price was agreed. To calculate accommodation contributions for a low means resident, use the MPIR current at their date of entry to the service.

^[iii] A resident's means tested care fee (care subsidy reduction) is worked out under section 44-21 of the *Aged Care Act 1997* as the lower of either:

- the amount by which their means tested amount (worked out under section 44-22 of the Act) exceeds the maximum accommodation supplement
- their adjusted basic subsidy plus primary supplements.