

**Supporting Living Organ Donors Program**

**Guidelines**

| **Organ and Tissue Policy and Programs Section – Public Hospital Strategy Branch -**  **Public Hospitals and Health Reform Division** |
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1. **Supporting Living Organ Donors Program overview**
   1. **The purpose of the Program**

Living organ donation is major surgery and carries risk for the donor. Prospective donors undergo extensive work-up testing to ensure they are physically and mentally able to donate, and these medical appointments may require donors to take time off work. If donation surgery proceeds, donors may require a significant amount of time off work to recover. The extensive work-up testing and donation surgery may require donors to travel long distances for medical appointments.

The Supporting Living Organ Donors Program (Program) aims to ensure that taking time off work and travel and accommodation expenses are not a barrier for individuals considering donation.

The Program is not an incentive to donate. It is designed to help support those individuals who wish to donate but cannot afford to due to loss of income and the financial stress it would cause for them and their family.

* 1. **About the Program**

The Program supports living organ donors (donors) by reimbursing some of their:

* paid leave for donation, for full-time, part-time and casual employment (See part 2); or
* income lost for donation, for self-employed donors (see part 3); and/or
* out-of-pocket travel and accommodation expenses for donors. A lump-sum payment of $500 for eligible Australian donors (see part 4) and additional out-of-pocket expenses up to $4000 (see part 5).
  1. **Eligibility**

To be eligible for **leave** reimbursement, you must have donated a kidney or partial liver, or done work-up testing and be:

1. donating in Australia\*; and
2. an Australian resident (as defined by the *Health Insurance Act 1973*); and
3. have a valid Medicare card; and
4. 18 years of age or older; and
5. employed by:
   1. a registered Australian business with an active ABN; and
   2. an employer willing to participate in the Program (or be self-employed with an active ABN).

To be eligible for **out-of-pocket expenses** reimbursement, you must have donated a kidney or partial liver, or done work-up testing and be:

1. donating in Australia\*; and
2. an Australian resident (as defined by the *Health Insurance Act 1973*), with a valid Medicare card OR donating to an Australian resident (as defined by the *Health Insurance Act 1973*), with a valid Medicare card; and
3. 18 years of age or older

\*If the donor is an Australian citizen donating in another country, they may be eligible for a similar scheme in that country. For example in New Zealand there is the Live Organ Donor Assistance scheme. The donor can only receive assistance from one scheme.

* 1. **Contact information**

**Visit** [Department of Health and Aged Care website](https://www.health.gov.au/our-work/supporting-living-organ-donors-program)

**Email** [livingorgandonation@health.gov.au](mailto:livingorgandonation@health.gov.au)

**Phone** (02) 6289 5055

* 1. **Required documentation and supporting evidence**

1. People who are eligible for the Program are required to submit several documents. The mandatory documentation for **ALL** applications includes:

* Completed application form (see part 1.5.1)

1. If applying for the $500 lump-sum payment, documentation also includes:

* Medical certificate for donation surgery

1. If applying for reimbursement of paid leave, the mandatory documentation also includes:

* Payslips that confirm donor was paid for leave
* Medical certificate that shows dates for hospital admission, discharge and recovery period
* Evidence of work-up testing appointments (if claiming for those leave dates)
* Appointment tracker *(not mandatory but streamlines the assessment process) (see part 1.5.2)*

1. If self-employed and applying for reimbursement of lost income:

* Evidence of business income that includes at least 3 months of business activity prior to surgery. This may include 1 or more of the following:
  + Most recent Tax Return
  + Business Activity Statement
  + Profit and Loss Statement
  + Bank Statements
  + Payslips

1. If more than the standard 9 weeks (or 342 hours) of leave is required, the donor may be eligible for up to the maximum of 18 weeks (or 684 hours). The mandatory documentation also includes:

* The completed extended medical leave form signed by the donor’s surgeon or transplant coordinator.

1. If applying for reimbursement of more than $500 for travel and accommodation out-of-pocket expenses, the mandatory documentation required for reimbursement up to $4000 (including the first $500) also includes:

* Medical certificate/s that shows dates for hospital admission, discharge and recovery period
* Evidence of work-up testing appointments (if claiming for those appointments)
* Receipts or bank statements showing out-of-pocket expenses on and around the dates of testing, appointments and surgery (or a statutory declaration if no receipt)
* Out-of-pocket expense tracker *(not mandatory but streamlines the assessment process, see part 1.5.3)*

**1.5.1 Application form**

The application form is required to assess a donor’s eligibility to participate in the Program and to verify the donor’s claim. Along with the supporting evidence, the application form is used to calculate reimbursement payments to be made to the employer and/or donor.

The form should be submitted within 120 days following surgery. Consideration will be given to applications submitted after this timeframe; however, the donor will need to email [livingorgandonation@health.gov.au](mailto:livingorgandonation@health.gov.au).

The application form comprises two parts:

* Part A – Donor information - to be completed and signed by the donor and self-employed donors.
* Part B – Employer information - to be completed and signed by the donor’s employer (if the donor is employed and claiming for reimbursement of leave taken).

**1.5.2 Extended medical leave form**

* The extended medical leave form will need to be completed and signed by the donor’s surgeon or transplant coordinator if the donor is seeking to claim leave reimbursement of more than 9 weeks (342 hours), and up to 18 weeks (or 684 hours).

**1.5.3 Appointment tracker (optional)**

The appointment tracker is an optional document, to assist donors to track medical appointments.

The appointment tracker when signed by a transplant coordinator will be assessed as evidence of appointment dates if claiming for reimbursement of leave and/or out-of-pocket expenses under the Program.

**Note**: This tracker is for the purpose of claiming under the Program only. It should not be used for other purposes where a medical certificate is required e.g. evidence required by the donor’s employer.

**1.5.3 Out-of-pocket expenses tracker (optional)**

The out-of-pocket expenses tracker is an optional document, to assist donors to track expenses incurred whilst travelling for medical appointments and for donation surgery.

The out-of-pocket expenses tracker can be provided as evidence for assessors to confirm costs incurred when calculating reimbursement.

Costs included in the claim without appropriate evidence, will not be included in the reimbursement.

1. **Leave reimbursement for full-time, part-time and casual employees** 
   1. **Process overview**

The key steps for potential donors and donors who are full-time, part-time, or casually employed to claim leave reimbursement are:

1. Prior to surgery - conversation between the donor and their employer. Employer agrees to participate in the Program.
2. Potential donor takes leave for work-up appointments and is paid during this time by the employer.
   1. If a potential donor is claiming for medical appointments for work-up testing only, the application form can be submitted following the last appointment.
3. Donor takes leave for donation surgery and recovery, and is paid during this time by the employer.
4. Donor returns to work following surgery and recovery.
5. **Donor submits the application form** with supporting evidence to the Department of Health, Disability and Ageing (department).
6. The application is processed by the department.

Step 1 - Program coordinator (the ‘assessor’) assesses the information in the application form and the evidence provided.

Step 2 - The application is then sent to a Program coordinator or manager (the ‘reviewer’), to verify the coordinator’s initial assessment.

Step 3 - The application is then sent to the Program delegate (the ‘approver’), who endorses the final assessment and reimbursement amount.

1. The approved application is processed for payment. Payment is made to the employers nominated account within 14 days after the Accounts area receive notification.
2. Letters to provide notification of payment are sent to the employer and donor *via* email.
3. Employer uses the payment to re-credit the donor’s leave, or as a reimbursement where an ex-gratia payment was made to the donor.

For claiming out-of-pocket expenses - see part 4 for details.

* 1. **Process Steps**

**2.2.1 A conversation between the donor and their employer**

Prior to surgery and submitting the application form, the donor should have a conversation with their employer to ensure they both understand the Program.

If the donor intends to claim for reimbursement of leave or ex-gratia payments, the employer **must** agree to participate and pay the donor for their time off.

If the donor is a casual employee, or if the donor doesn’t have sufficient leave credits, the donor and their employer should agree on how the donor will be paid during their leave. For casual employees, it is suggested that employers pay the donor based on the donor’s average weekly hours.

Should an employer pay the donor at their normal wage, the employer may be out-of-pocket if the donor’s normal wage is above the National Minimum Wage. There may also be out-of-pocket administrative costs, such as tax and superannuation to be considered by the employer.

Although employers are encouraged to re-credit their employee’s leave entitlements in full, there is no legal obligation to do so.

An employer may wish to only re-credit a proportion of the leave entitlements used by the employee, noting that the reimbursement payment is calculated at the National Minimum Wage.

Alternatively, an employer may choose to pay the donor at the National Minimum Wage for time off, for which they would be reimbursed in full under the Program up to 342 hours of leave (or 684 hours of leave for donors that experience medical complications and provide additional evidence).

**2.2.2 Complete the application form**

To participate in the Program, the donor must complete and submit an application form within 120 calendar days following their return to work after donation surgery. If the donor is claiming for reimbursement of leave, the employer **must** complete and sign Part B of this form to indicate that they agree to participate in the Program.

* Part A – Donor information - to be completed and signed by the donor or self-employed donors.

Part B – Employer information - to be completed and signed by the donor’s employer.

Incomplete applications cannot be assessed. If the application is incomplete and/or more information is required, the donor will be contacted by the department and processing of the application will be delayed. Refer to part 1.5 for evidence requirements.

If the application is ineligible, the donor and employer will be contacted by the department and receive an email notification advising of this outcome. Refer to part 7 regarding a review of decision.

**2.2.3 Claiming for leave reimbursement**

In addition to completing the application form, the donor must provide evidence to support the claim (see Part 1.5 for details). Examples of evidence are: a medical certificate, appointment tracker, or other evidence that verifies the dates of leave taken, including leave taken to attend medical appointments for work-up testing, and evidence, such as payslips, that align with the dates of the medical certificate to verify that the donor was paid for the leave taken.

**Hours of leave claimed without a medical certificate and evidence of payment for those hours, will not be used in calculating the reimbursement payment**.

A claim for leave taken for medical appointments to undergo work-up testing, donation surgery and recovery cannot exceed 342 hours (or 684 hours for donors that experience medical complications).

An application can only be submitted after all leave is completed and the employer has paid the donor for their time off work. Applications will not be progressed until all supporting documentation has been received.

Program payment calculations **do not** include:

* unpaid leave
* leave taken for purposes other than donation (i.e. carer’s leave)
* casual loading for casual employees and
* public holidays not usually worked.

\***If also claiming for out-of-pocket expenses, please refer to part 4.**

**CASE STUDY 1**

Claire is donating a kidney to her sister Julie. She is required to take 7 weeks off work following surgery. She has used 1 week of paid annual leave to travel to her nearest transplant hospital for work-up testing. Claire will use her paid sick leave to undergo surgery and recovery. Claire earns more than the National Minimum Wage (NMW). What can Claire claim through the Program?

*Claire will need to have a conversation with his employer to determine if they are willing to participate in the Program. The employer will need to understand that Claire will take her paid leave as normal (7.5 hours per day), and the Program will reimburse Claire’s paid leave hours at the NMW.*

*Claire can claim for both the annual leave she used for her work-up testing, and the sick leave she will use for her surgery and recovery. A total of 300 hours of paid leave.*

*The employer will then need to decide if they are willing to replenish all of Claire’s leave or a portion of her leave, in line with the reimbursement amount which is calculated at the NMW.*

*The reimbursement payment will be made to the employer’s nominated business bank account.*

**CASE STUDY 2**

Trevor is an aged care worker who would like to donate his kidney altruistically. His transplant co-ordinator has indicated he may need 9 weeks off work for surgery and recovery. Unfortunately, Trevor only has 4 weeks of sick leave and 2 weeks of recreational leave. Trevor earns more than the National Minimum Wage (NMW). What are Trevor’s options for claiming reimbursement of leave through the Program?

*Trevor will need to have a conversation with his employer to determine if they are willing to participate in the Program. The employer will need to understand that the Program can only reimburse* ***paid*** *leave at the NMW.*

*The employer will then need to decide following Trevor’s 6 weeks of paid leave, they could provide an ex-gratia payment to Trevor for his additional time off work (3 weeks). His employer will be reimbursed for 6 weeks of leave plus the ex-gratia calculated at the NMW.*

*If the employer is not willing to provide an ex-gratia payment, Trevor can take his 6 weeks of paid leave and the remainder as leave without pay. His employer will be reimbursed for 6 weeks of leave at the NMW. The employer can choose to re-credit all 6 weeks of Trevor’s leave, or they can choose to re-credit a proportion of Trevor’s leave credits, in line with the reimbursement amount which is calculated at the NMW.*

*If Trevor’s employer is willing to provide Trevor with an ex-gratia payment for the entire 9 week leave period, or for the 3 weeks not covered by Trevor’s sick and annual leave, the employer can choose to pay Trevor at his usual rate and the employer will be out-of-pocket for the difference between his usual wage and the NMW. Or they can provide the payment at the NMW rate and receive full reimbursement.*

*The reimbursement payment will be made to the employer’s nominated business bank account.*

1. **Leave reimbursement for self-employed donors**

This section provides an overview of the key steps followed the receipt of an application, to finalising a payment under the Program for donors who are self-employed.

**3.1 Process overview**

The key steps for potential donors and donors who are self-employed donors to claim leave reimbursement are:

1. Prior to surgery – donor considers participating in the Program.
2. Potential donor takes leave for work-up appointments.
   1. If claiming for medical appointments for work-up testing only, the application form can be submitted following the last appointment.
3. Donor takes leave for donation surgery and recovery.
4. Donor returns to work following surgery and recovery and submits a completed application form with supporting evidence to the department.
5. Donor submits the application form with supporting evidence to the department
6. The application is processed by the department.

Step 1 – Program coordinator (the ‘assessor’) assesses the information in the application form and the evidence provided.

Step 2 – The application is then sent to a Program coordinator or manager (the ‘reviewer’), to verify the assessor’s evaluation.

Step 3 - The application is then sent to the Program delegate (the ‘application approver), who endorses the final assessment and reimbursement amount.

1. The approved application is processed for payment. Payment is transferred to the donor’s nominated account within 14 days after the Accounts area receive notification.
2. A letter for notification of payment is sent to the donor *via* email.
3. Donor uses the payment as reimbursement for income lost due to donation.

See part 4 for details on claiming out-of-pocket expenses.

**3.2 Process steps**

**3.2.1 Complete the application form**

To participate in the Program, the donor **must** complete and submit Part A of the application form following their return to work and within 120 calendar days of the donation surgery*.*

Incomplete applications cannot be assessed. If the application is incomplete and/or more information is required, the donor will be contacted by the department and processing of the application will be delayed. Refer to part 1.5 for evidence requirements.

If the application is ineligible, the donor will be contacted by the department, receive an email notification advising of this outcome. Refer to part 7 regarding a review of decision.

**3.2.2 Claiming for leave reimbursement**

Self-employed donors **must** provide suitable evidence of income. This can include their most recent tax return, Business Activity Statement, profit and loss statement, relevant payslips or bank statements. This evidence is used to determine if the donor earns more than the National Minimum Wage (NMW).

Self-employed donors will be paid at the NMW or their hourly rate, whichever is the lesser.

In addition, the donor must provide evidence to support the claim for leave. Examples of evidence are: medical certificates, appointment tracker or other evidence that verifies the amount and dates of leave taken, including for leave taken to attend medical appointments for work-up testing.

**Hours of leave claimed without a medical certificate and evidence for those hours, will not be used in calculating the reimbursement payment.**

A claim for leave taken for medical appointments to undergo work-up testing, donation surgery and recovery cannot exceed 342 hours (or 684 hours for donors that experience medical complications).

An application can only be submitted after the donor has completed all leave related to the donation and returned to work.

**\*If also claiming for out-of-pocket expenses, please refer to part 4.**

**CASE STUDY 3**

Brooke donates her kidney to her husband Paul. Although both Brooke and Paul earn their income from their gardening business, only Brooke as the donor, is eligible to claim under the Program. How is Brooke’s self-employed leave reimbursement payment calculated?

*Brooke will complete and submit Part A of the application form and provide supporting evidence. Brooke’s evidence includes a tax return from the previous year. As the business is run as a partnership, Program staff will calculate Brooke’s annual self-employed income by dividing the gross business income (as shown on the tax return) by 2. Based on information provided in the application form and evidence, this figure is used to calculate Brooke’s average hourly rate. The program staff calculate this to be above the National Minimum Wage (NMW).*

*As Brooke’s hourly rate is above the National Minimum Wage (NMW), Brooke can be reimbursed for her leave at the NMW for the financial year in which her leave was taken. Brooke’s leave hours will be calculated using the evidence she has provided. Her total number of leave hours will be multiplied by the NMW to calculate Brooke’s total leave reimbursement payment.*

*The reimbursement payment will be made directly to Brooke’s nominated business bank account.*

1. **Out-of-pocket expenses re-imbursement up to $500 - Australian donors**

This section provides an overview of the key steps for Australian donors, employed and not employed, to claim for out-of-pocket travel and accommodation expenses less than $500 through the Program.

The donor provides Part A of the application form with evidence that verifies the date of surgery.

The process for claiming OOP expenses more than $500, or for potential donors who do not have surgery, is outlined in part 5.

If the donor is also claiming for leave reimbursement, the application form should not be submitted until the donor has completed their recovery and returned to work, or until after the donor has completed their last appointment following surgery.

Applications will not be progressed until the application form and all supporting documentation has been received.

**4.1 Process overview**

The key steps in the process of claiming the $500 lump sum payment are:

1. Potential donor attends medical appointments.
2. Donor undergoes surgery.
3. **Donor submits an application form** and includes a copy of their medical certificate as evidence of their surgery date.
4. The application is processed by the department.

Step 1 – Program coordinator (the ‘assessor’) assesses the information in the application form.

Step 2 – The application is then sent to a Program coordinator or manager (the ‘reviewer’), to verify the assessor’s evaluation.

* 1. Step 3 - The application is then sent to the Program delegate (the ‘application approver), who endorses the final assessment and reimbursement amount.

1. The approved application is processed for payment. Payment of $500 is made to the donor’s nominated bank account within 14 days after the Accounts area receive notification.
2. Letter for notification of payment is sent to the donor *via* email.
   1. **Process steps**

**4.2.1 Complete the application form**

If the donor is employed, the application form will need to be completed as described in part 2.2.2 or part 3.2.1.

If the donor is not employed, only Part A of the application form will need to be completed. The form should be submitted after the donor has undergone surgery.

Incomplete applications cannot be assessed. If the application is incomplete, and/or more information is required, the donor will be contacted by the department and processing of the application will be delayed.

If the application is ineligible, the donor will receive an email notification advising of this outcome. Refer to part 7 regarding a review of decision.

**CASE STUDY 4**

Ryan donated his kidney to his son. Ryan lived 40 minutes away from the hospital and chose to drive his own car to appointments. Ryan took time off work and paid for petrol, tolls and parking to attend multiple appointments over 18 months.

How can Ryan be reimbursed for his out-of-pocket expenses?

As Ryan is employed and intending to claim for reimbursement of his paid leave, he will need to wait until his return to work before submitting his application.

*To apply for the SLOD Program, Ryan will need to fill out Part A and have his employer fill out Part B of the application form. He will also need to provide a medical certificate which shows his surgery date.*

*Ryan will be paid a $500 lump-sum payment to cover his out-of-pocket travel expenses, based on the evidence he has provided. Ryan’s employer will be reimbursed the National Minimum Wage for the hours of paid leave Ryan took during his work-up, surgery and recovery, allowing them to replenish Ryan’s leave.*

*The $500 lump-sum payment will be made directly to Ryan’s nominated bank account.*

*The reimbursement leave payment will be made to the employer’s nominated business bank account.*

1. **Out-of-pocket expenses reimbursement over $500 - Australian donors**

This section provides an overview of the key steps for all donors, employed and not employed, to claim for out-of-pocket expenses under the Program that exceed $500. The total reimbursement for out-of-pocket expenses cannot exceed $4000 for each donor. Evidence will need to be submitted for the entire amount of out-of-pocket expenditure (including the first $500).

**5.1 Process overview**

The key steps in the process of claiming out-of-pocket expense reimbursement are:

1. Potential donor attends work-up appointments. Donor keeps receipts and a record of travel and accommodation expenses incurred due to work-up.
2. Donor undergoes surgery and attends post-surgery appointments. Donor keeps receipts and a record of expenses incurred due to donation and post-surgery appointments.
   1. Donor support person travel and accommodation expenses incurred during donor’s hospital admission for donation surgery can also be claimed under the Program.
3. **Donor submits the application form** and includes copies of:
   1. medical certificates, appointment tracker or other evidence confirming dates of medical appointments for work-up testing appointments and surgery/recovery
   2. out-of-pocket expense tracker (optional)
   3. itemised receipts for all expenses included in the claim.
4. The application is processed by the department.

Step 1 – Program coordinator (the ‘assessor’) assesses the information in the application form.

Step 2 – The application is then sent to a Program coordinator or manager (the ‘reviewer’), to verify the assessor’s evaluation.

Step 3 - The application is then sent to the Program delegate (the ‘application approver), who endorses the final assessment and calculated reimbursement amount.

1. The approved application is processed for payment. Payment is calculated and made to the donor’s nominated bank account.
2. Letters for notification of payment is sent to the donor via email.
   * 1. **What can be claimed**

This part of the Program only applies to expenses incurred on or after 1 July 2017.

Under the Program, donors can make a claim for the following out-of-pocket expenses:

* accommodation (based on reasonable amounts as per Taxation Determination - TD 2020/5 – See part 5.1.7 of these Guidelines)
* economy airfares
* public transport including bus, train and taxi fares
* car hire
* parking for the day of appointment
* petrol – reimbursed at the applicable Australian Taxation Office’s car expenses rate using the cents per kilometre method
* road tolls

Travel and accommodation expenses incurred by the donor’s support person during the donor’s hospital admission can also be claimed under the Program.

Other expenses such as meals, childcare and medical expenses cannot be claimed under the Program.

Note: Expenses incurred by others who are not the donor, outside of the donor’s hospital admission for donation surgery, cannot be claimed under the Program.

If receipts are not available, a statutory declaration describing the cost and date it was incurred will need to be provided to support the claim.

* 1. **Process steps**

**5.2.1 Complete the application form**

If the donor is employed, the application form will need to be completed as described in part 2.2.2 or part 3.2.1 of these Guidelines.

If the donor is not employed, only Part A of the application form will need to be completed. The form should be submitted after the donor has completed their last appointment following surgery.

Incomplete applications cannot be assessed. If the application is incomplete, and/or more information is required, the donor will be contacted by the department and processing of the application will be delayed.

If the application is ineligible, the donor will receive an email notification advising of this outcome. Refer to part 7 regarding a review of decision.

**5.2.2 Claiming for out-of-pocket expenses**

The donor can claim for out-of-pocket expenses (as described in part 4.1.1) above the $500 lump sum payment, incurred due to work-up tests, donation and follow-up appointments.

To claim for out-of-pocket expenses, the donor **must** provide evidence that verifies the dates of appointments and surgery and itemised receipts that demonstrate out-of-pocket expenses incurred on and around these dates.

An application should not be submitted until the donor has completed their recovery and returned to work (if claiming for both leave and out-of-pocket expenses), or until after the donor has completed their last appointment following surgery.

Claims will not be progressed until the application form and all supporting documentation has been received. To assist with recording expenses to be claimed under the Program, the out-of-pocket expenses tracker can be completed.

The total reimbursement for out-of-pocket expenses cannot exceed $4000 for each donor. The $4000 includes the $500 lump sum payment. Any travel and accommodation expenses claimed for a support person during the donor’s hospital admission are also included in the $4000 maximum reimbursement amount.

**CASE STUDY 5**

Deepa donated her kidney to her brother Kalan. She had to travel from regional NSW to Brisbane for work-up appointments and surgery. Deepa drove her own car to her local work-up appointments and to the airport. She flew between regional NSW and Brisbane for appointments and surgery, stayed in a hotel close to the hospital and used a taxi to travel from the airport to her hotel. Deepa is not currently employed so did not have to take leave. Deepa’s husband accompanied her for her donation surgery and stayed in the accommodation while Deepa was in hospital. Deepa spent approximately $3000 on travel and accommodation. How can Deepa be reimbursed for her OOP expenses?

*To apply for the SLOD Program, Deepa will need to fill out Part A of the application form. As Deepa is claiming for more than $500, she will not receive the $500 lump-sum payment and will need to provide evidence for the entire $3000 she wishes to claim. Evidence includes receipts for the out-of-pocket travel and accommodation expenses for the entire $3000 she wishes to claim for and verified appointment and surgery dates.*

*Deepa’s out-of-pocket reimbursement payment will be calculated using the evidence she has provided, including medical certificates, signed appointment tracker and receipts. If her evidence shows that she spent $3000 on travel and accommodation, she will receive a reimbursement for $3000.*

*The reimbursement payment will be made directly to Deepa’s nominated bank account.*

1. **Out-of-pocket expenses reimbursement - International donors**

This section provides an overview of the key steps for international donors, donating to an Australian recipient with a valid Medicare card, to claim for out-of-pocket expenses up to $4000.

Evidence will need to be submitted for the entire amount of out-of-pocket expenditure the donor wishes to claim.

**6.1 Process overview**

The key steps in the process of claiming out-of-pocket expense reimbursement for international donors are:

1. Potential donor attends work-up appointments.
2. Donor undergoes surgery and attends post-surgery appointments. Donor keeps receipts and a record of travel and accommodation expenses incurred due to work-up testing and donation.
3. Donor submits the application form and includes copies of:
   1. medical certificates, appointment tracker or other evidence confirming dates of medical appointments for work-up testing appointments and surgery/recovery
   2. out-of-pocket expense tracker (optional)
   3. itemised receipts for all expenses included in the claim
4. The application is processed by the department.
   * 1. Step 1 – Program coordinator (the ‘assessor’) assesses the information in the application form.
     2. Step 2 – The application is then sent to a Program coordinator or manager (the ‘reviewer’), to verify the assessor’s evaluation.
     3. Step 3 - The application is then sent to the Program delegate (the ‘application approver), who endorses the final assessment and calculated reimbursement amount.
5. The approved application is processed for payment. Payment is calculated and made to the donor’s nominated bank account.
6. Letter for notification of payment is sent to the donor via email.
   * 1. **What can be claimed**

This part of the Program only applies to donors who underwent surgery on or after 1 July 2025.

Under the Program, donors can make a claim for the following OOP expenses:

* accommodation (based on reasonable amounts as per Taxation Determination - TD 2020/5 – See Part 5.1.7 of these Guidelines)
* economy airfares
* public transport including bus, train and taxi fares
* car hire
* parking for the day of appointment
* petrol – 88c per km
* road tolls

Travel and accommodation expenses incurred by the donor’s support person during the donor’s hospital admission can also be claimed under the Program.

Other expenses such as meals, childcare and medical expenses cannot be claimed under the Program.

Note: Expenses incurred by others who are not the donor, outside of the donor’s hospital admission for donation surgery, cannot be claimed under the Program.

* 1. **Process steps**

**6.2.1 Complete the application form**

Only Part A of the application form will need to be completed. The form should be submitted after the donor has completed their last appointment following surgery.

Incomplete applications cannot be assessed. If the application is incomplete, and/or more information is required, the donor will be contacted by the department and processing of the application will be delayed.

If the application is ineligible, the donor will receive an email notification advising of this outcome. Refer to part 7 regarding a review of decision.

* + 1. **Claiming for out-of-pocket expenses**

The donor can claim for out-of-pocket expenses (as described in part 4.1.1) incurred due to work-up tests, donation and follow up appointments.

To claim for out-of-pocket expenses, the donor **must** provide evidence that verifies the dates of appointments and surgery and itemised receipts that demonstrate out-of-pocket expenses incurred on and around these dates.

Claims will not be progressed until the application form and all supporting documentation has been received.

To assist with recording expenses to be claimed under the Program, the Out-of-Pocket Expenses Tracker can be completed.

The total reimbursement for out-of-pocket expenses cannot exceed $4000 for each donor. Any travel and accommodation expenses claimed for a support person during the donor’s hospital admission are also included in the $4000 maximum reimbursement amount.

1. **Requesting a review of application assessment**

If the donor does not agree with the department’s assessment of their claim, they can email [livingorgandonation@health.gov.au](mailto:livingorgandonation@health.gov.au) within 28 days of the decision to request a review.

A team member who was not involved in the original assessment will review the case. The donor will be informed of the outcome within 21 days. If a longer review period is required, the department will contact the donor.

If the donor is still not satisfied with the review outcome, they can contact the [Commonwealth Ombudsman](http://www.ombudsman.gov.au/).

1. **Supporting Living Organ Donors Program definitions**

This section provides definitions of terms used in the Supporting Living Organ Donors Program.

* 1. **Definitions**

**8.1.1 Living organ donor**

For the purpose of this Program, a living organ donor is a person who donates a kidney or partial liver to someone with end stage kidney disease or liver failure.

This Program does not cover living donors of other tissues, such as blood, bone marrow, or reproductive tissues.

* + 1. **Potential donor**

Someone who has made a fully informed decision to undergo medical evaluation to be a living organ donor.

* + 1. **Work-up**

Tests of physical and mental health that are taken to ensure the donor is medically suitable to proceed to donation.

* + 1. **Regular (hours)**

Casual employees can calculate their ‘regular’ hours by averaging their weekly hours worked over 8 weeks, or 56 days.

* + 1. **Ex-gratia payment**

For the purposes of this Program, an ex-gratia payment is a sum of money provided by an employer to an employee and at the discretion of the employer (i.e. without there being any legal obligation or legal liability to do so) where the employee has no entitlement to paid leave.

* + 1. **Out-of-pocket expenses**

Out-of-pocket expenses are costs e.g. accommodation and transport incurred by a donor as a result of attending medical appointments.

* + 1. **Reasonable amounts for accommodation**

The Program allows for reimbursement of for accommodation expenses in line with the Australian Taxation Office’s Reasonable Travel expense rates.