

Accessing the Multi-Purpose Service Program

This fact sheet provides guidance for aged care providers on access to aged care services under the Multi-Purpose Service Program (MPSP).

How do older people access aged care under the MPSP?

Older people wanting to access services under the MPSP must apply for government-funded aged care services and undergo a needs assessment if they are eligible.

The first step is for the older person to contact <u>My Aged Care</u> to make an application. If eligible, they will be referred to an assessment organisation. An approved assessor will then organise a time to assess the older person's needs.

Transitional arrangements are in place to allow older people to continue accessing services from 1 November without a new assessment, if they:

- are already accessing services through a Multi-Purpose Service (MPS) when the Act starts, or
- have an agreement to do so within 3 months of the new Act starting.

Who is eligible for an assessment?

People must be aged 65 years or older, or 50 years or older if they are an Aboriginal or Torres Strait Islander person or experiencing homelessness or at risk of homelessness. They must also have provided information about their care needs and, if under 65, be aware of other services that may be available to them.

The assessment process

An assessment is used to work out whether an older person needs access to funded aged care services. It is also used to work out the types of services they need.

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Assessors use the Integrated Assessment Tool in-person at the older person's home or in hospital where possible.

They must include:

- a discussion about which services may help the older person maintain their independence
- their preferences and goals
- information on the next steps in their application for services.

After an assessment, the assessor will provide a report with recommendations for the service(s) the older person should be able to access.

Being approved for services

After considering an assessor's report, a delegate, who works for an assessment organisation, will decide if the older person needs access to funded aged care services, and if so, which services they need.

The person will receive a written decision notice of the outcome of their assessment and their application for services. This can be sent in the mail or by email, and will be placed in the older persons My Aged Care Online Account. This usually takes 2 to 6 weeks after the assessment.

If approved to access services, the decision notice will include a formal 'access approval' and a support plan, which outlines:

- the service groups the person has been approved to access (for example, residential care service group). It will also include individual service types and/or services that the person is approved for within a service group where this is required under legislation (for example, where the person is approved for home support services)
- a classification type for each service group. This generally outlines the approved duration of the services. For example, a classification type of 'ongoing' means the person can access permanent residential care. A classification type of 'short-term' means the person can access residential respite.

The delegate will also make other decisions, such as the level of services or funding the person can access (their classification level), and how urgent it is that they access services (their priority category). This information will also be included in their access approval, but:

- the priority category will not impact when a person can access services under the MPSP, and
- the classification level will **not** impact how much funding is available under the MPSP or the level of services that you can deliver to that person in an MPS.

You can only deliver funded aged care services to an older person under the MPSP consistent with their access approval, except where alternative entry arrangements apply. If their needs change, a re-assessment may be required (see below).

The referrals process

The access approval and support plan that are given to an older person may have referral codes. These include referral codes for the older person to access groups of services from a mainstream provider (for example under the Support at Home program).

If the needs assessor and older person have discussed services at the older person's local MPS, the decision and plan should also include a specific referral code an MPS can use. **This code will appear towards the end of the access approval, under the heading Multi-Purpose Service Program.**

You can use this code to access the older person's record in My Aged Care, accept the referral, and start delivering services.

If you need help, you can contact the My Aged Care service provider helpline on 1800 836 799 from 8am to 8pm Monday to Friday, and 10am to 2pm on Saturday.

The helpline gives technical support to government-funded aged care service providers, assessors and hospital staff who are using our reporting systems and portals.

What if an older person loses their letter and/or code?

If the older person has misplaced their letter and their referral code, it can be found on their My Aged Care Online Account. The Online Services Guide provides more information.

Alternatively, if a referral code for the older person's preferred MPS was not included in the access approval, the older person will need to contact My Aged Care and request a **support plan review**.

This will prompt the assessor to review the referral codes and include the MPSP option. My Aged Care cannot manually add a code for the MPS even if other referral codes are present.

When can alternative entry arrangements be used?

You can start delivering aged care services under the MPSP to older people who have not yet completed the above application and assessment processes, if:

- they urgently need access to funded aged care services and there is a significant risk of harm if those services are not delivered
- there is a significant delay in the availability of an approved needs assessor to undertake an aged care needs assessment
- they are an Aboriginal or Torres Strait Islander person and there is a lack of availability of an approved needs assessor to undertake a culturally safe assessment.

The older person must be supported to make an application for funded aged care services within 30 days of starting services through your MPS.

What if an older person's needs change?

Older people can only access the funded aged care services that they are approved for.

If an older person's needs change, they will need to seek a re-assessment. This applies, for example, if they are accessing MPS services in the home or community but now need residential care.

If the changes are significant, a new IAT assessment will be required. A needs assessor will then consider what services are now needed and make recommendations to inform a new delegate's decision.

What if an older person wants to change providers?

All registered providers must make sure they meet their obligations to support continuity of service for older people, including if they want to move to a new provider.

If an older person in your care is thinking about changing service providers, they may need help to:

- discuss the reasons for wanting to move
- access the My Aged Care Find a Provider tool
- contact My Aged Care for help
- undergo additional assessment steps if they want to access services outside of the MPSP.

It's important to know that if an older person wants to transfer to a Support at Home provider, you should encourage them to contact My Aged Care as soon as possible, as they may need a reassessment and/or may need to wait to be allocated a place allowing them to access services.

More information

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Start a conversation about aged care

Transforming aged care laws to put the rights of older people first.



Visit MyAgedCare.gov.au



Phone 1800 200 422 (My Aged Care's free-call phone line)

For translating and interpreting services, call 131 450 and ask for 1800 318 209. To use the National Relay Service, visit nrschat.nrscall.gov.au/nrs to choose your preferred access point on their website, or call the NRS Helpdesk on 1800 555 660.