



# Support at Home program assurance plan 2025-27

## Context and purpose

By 2035 Support at Home is expected to help around 1.4 million people stay in their homes as they age. The Department of Health, Disability and Ageing (the department), as the System Governor, is responsible for the operations and oversight of the aged care system, including the Support at Home program (the program).

The department must manage public funds in accordance with the:

- [Public Governance, Performance and Accountability \(PGPA\) Act 2013](#)
- [Commonwealth Fraud and Corruption Control Framework 2024](#).

Sections 508-513 of the *Aged Care Act 2024* (the Act) empower the System Governor (the Secretary of the department or his delegates) to conduct assurance activities. While the System Governor role is separate to that of the Aged Care Quality and Safety Commission (the Commission), we work together to provide oversight of aged care and share intelligence while avoiding unnecessary duplication or burden on providers.

Program assurance is important to support informed choice and value for money for older people using Support at Home goods and services. Assurance activities also protect the public's significant investment in the program. Providers who do not engage with program assurance activities may be subject to compliance action by the department as the System Governor.

This plan's key purpose is to raise public and sector awareness of the focus areas for program assurance activities **over the next 18-24 months**. This plan *guides* the conduct of 'second line' program assurance activities by the department and will be updated as needed.

It is informed by the [Support at Home program assurance framework](#) and [System Governor aged care compliance framework](#).

## Risks

Our assurance activities will contribute towards managing these risks. Further details are in the framework that underpins this plan.

## Key assurance risks

- Support at Home program does not achieve value for money for participants and/or public.
- Participants cannot appropriately exercise their right to choice.
- Program funds are deliberately misused (fraud).
- Program funds are inadvertently misused (eg in error).

## Key program assurance themes

- Evidence of delivery
- Agreed price
- Monthly statements
- Excluded items
- Pricing
- Emerging topics

## Planned program assurance activities

### Payment integrity rolling review

An ongoing (rolling) review cycle that will progressively cover all providers will **commence in February 2026** to verify provider compliance with their responsibilities related to program payment integrity. The review will initially focus on assuring that providers have evidence for selected transactions including that: goods and services were actually delivered to participants; prices were agreed; and reasons are documented where the price differs from the published price (on the department's or provider's website). Assurance officers will also review that monthly statements are complete and accurate and that no excluded items have been purchased. This approach will:

- provide a consistent evidence-base to identify systemic issues
- identify and share good practices in the sector and support sector learning
- inform program improvements and future policy considerations, and
- ultimately strengthen program integrity and enhance public trust in the program.

We will share individual findings with reviewed providers and summary findings and learnings with the sector including through the program community of practice.

### Pricing review

Ensuring Support at Home prices are transparent and not unreasonable is a key focus for the department and the Commission. As part of a program of activities, a program assurance activity will commence in early 2026 focussing on providers identified through actual pricing data as having outlier prices (compared to similar cohorts). The department will require providers to submit a written justification with supporting evidence to demonstrate that the prices are not unreasonable and reflect the costs of providing goods and services (refer to program [pricing guidance](#)). Providers who cannot provide satisfactory evidence will be referred to the Commission for further assessment and potential compliance and/or enforcement action under the Act. Key findings and lessons will be shared with the sector.

## **Emerging topics**

This plan is a guide and will be updated as needed to reflect emerging risks, priorities and topics. Future topics may include services provided by associate providers, short-term services and care management services.