



Care minutes supplement – frequently asked questions

This resource provides answers to some frequently asked questions about the care minutes supplement.

General

Do I need to apply for the care minutes supplement for our residential care home?

No. Services Australia will automatically pay the care minutes supplement if your home meets the care minutes performance threshold – see Table 1 in the [Changes coming to care minutes funding factsheet](#) for payment rates.

If my residential care home receives the specialised homeless Base Care Tariff (BCT), will it get the care minutes supplement?

No. The linking funding to care minutes policy does not apply to approved residential care homes with specialised homeless status. This means these specialised homes will continue to receive their BCT funding in full and will not be eligible for the care minutes supplement.

What about residential care homes outside of MM1? Will these homes get the care minutes supplement?

No. Like MM1 homes with specialised homeless status, residential care homes outside metropolitan areas are not affected by the care minutes funding changes. These homes will continue to receive their full Australian National Aged Care Classification (AN-ACC) BCT funding.

What are the changes to our BCT funding?

The BCT for MM1 homes has been reduced by 0.113 of the National Weighted Activity Unit (NWAU), equivalent to \$33.41¹ per resident per day and re-directed to the care minutes supplement. Your new BCT funding is 0.387 NWAU, equivalent to \$114.41¹ per resident per day.

¹ Amount based on the current AN-ACC price of \$295.64 per resident per day. The AN-ACC price is indexed annually on 1 October.

How is my residential care home’s performance assessed and over which period?

Your residential care home’s performance is expressed as a percentage of the total care minutes and registered nurse (RN) targets delivered over a previous performance quarter.

These percentages determine eligibility and rate of care minutes supplement.

The payment periods will be linked to the previous performance quarters as follows:

Payment period	April – June	July - September	October - December	January - March
Performance quarter	October - December	January - March	April - June	July - September

What types of direct care activities can I report and count towards care minutes performance?

Accurate reporting is essential because your residential care home’s care minutes performance determines its care minutes supplement payment. Incorrect reporting may lead to future payment adjustments, so providers should have strong processes to ensure care minutes data is correct.

For care minutes reporting, direct care activities are defined in the [Aged Care Rules 2025](#) as the following items:

- 2, 3, 4, 5, 6 and 7 in section 8 -150 (residential non-clinical care service list)
- 3, 4, 5 and 6 in section 8 -155 (residential clinical care service list).

These are consistent with direct care activities outlined in Tables 1 and 2 in section 4.1 in the [care minutes guide](#). For example, attending to personal hygiene and assisting with clinical care.

Tasks that are **not** direct care must not be included in your Quarterly Financial Report (QFR). This includes activities listed in section 8-145 (residential everyday living services). For example, preparing and serving meals, laundry and cleaning.

See Appendix 3 of the [care minutes guide](#) for more information on common care minutes reporting errors.

Payment rates

How is the care minutes supplement payment rate calculated?

The care minutes supplement works on a sliding scale based on the percentage of total care minutes and RN minutes that were delivered during the linked performance quarter.

Residential care homes that meet at least 85% of their care minutes targets will receive some care minutes supplement, up to a maximum of \$33.41¹ per resident per day if they meet 100% of both their total care minutes and RN targets.

For more information, see [Changes coming to care minutes funding factsheet](#), which includes the rates table against care minutes performance.

Where can I find my residential care home’s care minutes targets and performance data used to determine its supplement rate on the department’s website?

The care minutes targets tile is no longer available in the Government Provider Management System (GPMS) Approved Provider portal.

You can access your residential care home’s current and historical care minutes targets and performance data on the department’s website:

- [2025-26 care minutes targets](#)
- [Care minutes performance](#)

How is my residential care home’s compliance percentage for total and RN care minutes calculated. How many decimal places are used?

Your residential care home’s compliance percentage for both targets is calculated by dividing its actual care minutes delivered by its targets and multiplying the number by 100. The resulting percentages are then shortened to the first 2 decimal places (rather than rounded to the nearest 2 decimal places).

For example, if your residential care home’s total care minutes target was 218.58 and its actual care minutes delivered was 215.45, then the formula to work out your home’s total care minutes performance percentage is:

<i>Step 1:</i>	215.45 (care minutes actuals)	X 100 = 98.56803001
	218.58 (care minutes targets)	
<i>Step 2:</i>	Shorten to 2 decimal places = 98.56% total care minutes performance	
<i>Step 3:</i>	Repeat steps 1 and 2 to work out your RN care minutes performance.	

You can use the [online care minutes supplement estimator](#) to check the funding you may receive.

Can I see my residential care home’s care minutes supplement eligibility on the Services Australia’s Aged Care Provider Portal?

Yes. You will be able to view your residential care home’s current and historical care minutes supplement eligibility, including its care minutes performance percentages, in a separate tab under ‘Supplement eligibility’ within the ‘Service management’ section of the [Services Australia Aged Care Provider Portal](#) (ACPP).

Note, the ACPP will show the calculated care minutes performance, which could exceed 100% (e.g., 105%). Performance above 100% for total and registered nurse care minutes will be paid at the maximum rate.

When is the care minutes supplement paid?

The care minutes supplement will be calculated and paid as part of your residential care home's monthly claims.

The first supplement will be paid in May 2026 once the April claim has been finalised.

Where can I find the care minutes supplement in my residential care home's monthly payment summary?

The care minutes supplement will be displayed as a separate line item under the 'supplements' category in your home's payment summary. The itemised payment section will include the number of days paid for each eligible resident.

Why are my residential care home's care minutes performance percentages in the Services Australia ACPD different from those published on the department's website?

Your care minutes percentages displayed on the ACPD may initially differ from those published on the [department's website](#) due to the calculation of enrolled nurses care minutes used to top up your home's performance against its registered nurse targets.

The misalignment is temporary only and your home's care minutes performance percentages in the ACPD will match the department's published performance data before the start of the payment quarter. This will ensure correct supplement payments are made for the applicable months.

What can I do if I think the care minutes supplement received is incorrect or we haven't received the payment?

If you have concerns about the accuracy of your home's care minutes supplement, you can contact the department by emailing ANACCOperations@health.gov.au.

If your home is eligible and haven't received any supplement, you can contact Services Australia directly for assistance by phoning 1800 195 206 (Monday to Friday, 8:30 am to 5:00 pm Australian Eastern Standard Time).

Data and assurance

What happens if my residential care home's care minutes were reported incorrectly? What assurance requirements apply?

Starting from the 2025-26 Aged Care Financial Report (ACFR), all residential aged care providers are required to prepare and submit a new [Care Minutes Performance Statement](#) and obtain an external audit over this statement. These new audit requirements protect the integrity of the new care minutes supplement and transparency measures, including [Star Ratings](#).

The department expects providers to correct any errors in its care minutes data when they become aware of any data inaccuracies. The department may also require providers to correct their data following 24/7 RN and [Care Minutes Reporting Assurance Activities](#), or through the Care Minutes Performance Statement. The corrected data will be used to recalculate the home's supplement entitlement for the relevant time period. This may lead to a reconciliation in its supplement payment.

For information on how to update your care minutes data, see section 8 of the [GPMS User Guide – Quarterly Financial Report](#). You can also contact [Forms Administration](#) by:

- emailing Health@formsadministration.com.au
- calling (02) 4403 0640.

What happens if my residential care home did not submit its care minutes data in the Quarterly Financial Report on time or take longer to pass the quality assurance checks?

The system relies on care minutes performance data (calculated using labour cost and hours reported for in the QFR) to determine a home's eligibility for the care minutes supplement and rate of payment.

If care minutes performance data is not available before the start of the payment quarter, the system will not have the necessary information to calculate a home's eligibility and payment rate. This means funding for the home will reduce by the maximum supplement amount of \$33.41 per resident per day for the claim month until data becomes available. The supplement will be paid as an adjustment in the subsequent claim month.

What happens if my residential care home need to re-submit its care minutes data (labour costs and hours) in the QFR after the payment quarter has commenced?

The system will re-calculate your home's eligibility for the supplement and the payment rate payable based on its revised care minutes performance percentages. Any changes to your home's supplement entitlement will be reflected in subsequent claims with an adjustment to the prior payment period.

Exceptional circumstances

Are there any provisions to receive the maximum rate of the care minutes supplement under exceptional circumstances?

Yes. The maximum rate of the care minutes supplement will be paid to providers under the following circumstances where they occur on or after 1 November 2025:

- A new residential care home becomes operational for the first time.
- An existing residential care home is transferred to another provider.
- A residential care home goes offline (i.e., no operational beds) and is not operational for a certain period, before becoming operational again. This occurs when a residential care home closes temporarily (exiting all residents from care). For example, for renovation.
- A residential care home that had a change to their BCT category. Specifically, a residential care home that loses their specialised homeless status and becomes a standard MM1 home.

Do homes need to notify the department or Services Australia if it meets one of the exceptional circumstances to ensure they receive the maximum rate of the care minutes supplement?

No. The system is designed to recognise the changes that would pay providers the maximum care minutes supplement rate (ie, when a new home becomes operational for the first time, if a home is transferred to another provider, goes offline or had a change in their BCT category).

How can I confirm our home is flagged on the system for the maximum supplement rate and the eligibility period?

Your home's care minutes performance percentages will display as 100% for both total care minutes and registered nurse care minutes, along with the eligibility start and end dates as shown in the below extract from the [ACPP](#).

Current supplement eligibility

Eligible	Start date	End date	Combined staff direct care %	Registered nurse direct care %
Yes	01/04/2026	31/12/2026	100.00	100.00

What if my home had no care minutes targets for the relevant performance quarter because there were no residents in care during the reference period?

Homes that have no care minutes targets in this scenario will receive the maximum rate of the care minutes supplement for the payment quarter.

For example, if a home did not have targets during the April – June quarter, they will be taken to have met their targets for that performance quarter and received 100% of the care minutes supplement during the October – December payment quarter.

The home's care minutes performance will display as 100% for both the total care minutes and registered nurses care minutes targets in the [ACPP](#).

Key links and resources

- [Care minutes supplement for residential aged care](#)
- [Changes coming to care minutes funding factsheet](#)
- [Care minutes funding estimator](#)
- [Care minutes guide](#)
- [Care minutes in residential aged care dashboard](#)
- [Care minutes targets in individual residential care homes \(financial year 2025-26\)](#)
- [Care Minutes Performance Statement](#)
- [24/7 Registered Nurse and Care Minutes Reporting Assurance Activities](#)
- [Quarterly Financial Report resources](#).