



Aged Care Funding Reforms

30 August 2022

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Agenda

- 1 Update on AN-ACC changes**
- 2 Transition Fund**
- 3 Care Minutes definitions and examples**
- 4 What can I do on the My Aged Service and Support Portal?**
- 5 What can I do on the Services Australia Provider Portal?**
- 6 Wrap up**

**Readiness
Self-assessment
QR code**



Progress



1. Quarterly Financial Statements – Due 4 November 2022



2. Aged Care and Other Legislation Amendment (Royal Commission Response) Act 2022



3. New Aged Care Payment System commenced 20 August 2022



4. Over 94% of active residents have been assigned an AN-ACC class



1 - Update on AN-ACC

AN-ACC Default Classes and Rates

Default Classes and Rates

from 1 October 2022

Class 98

\$216.80

Default class for residents entering permanent care to receive **palliative care**

Class 99

\$117.07

Default class for residents entering **permanent care** (other than entry for palliative care)

Class 100

\$87.59

Default class for residents entering for **respite care**



Any new resident who enters residential care for the first time and is not able to be assessed prior to 1 October 2022 will receive a default classification and rate for the variable component of their funding

Expanded Reclassification Criteria

Category	Criteria – change since the existing classification took effect:
Change in resident care needs	<ul style="list-style-type: none"> • There has been a change in the care recipient’s cognitive ability, compounding factors, function, mobility or pressure sore risk.
Hospitalisation event(s)	<ul style="list-style-type: none"> • The resident has been an in-patient of a hospital for at least 5 days. • The resident has been an in-patient of a hospital for at least 2 days and was administered general anaesthetic while an in-patient.
Time	<ul style="list-style-type: none"> • Class 9, Class 10, Class 11, Class 12 – at least 6 months have passed. • Class 2, Class 3, Class 4, Class 5, Class 6, Class 7 or Class 8 – at least 12 months have passed.



- New criteria available **now** – providers can select any of the existing ‘mobility’ criteria’ in the My Aged Care Service and Support Portal.
- AN-ACC payment will start from 1 October 2022 or date of reclassification request, which ever is later.

Palliative Care Entry Arrangements



AN-ACC Class 1 (admit for palliative care)

- individuals entering residential care with *palliative care status*:
 - estimated life expectancy of 3 months or less
 - Australia-Modified Karnofsky Performance (AKPS) score of 40 or less (which provides evidence of significant frailty)
- indicate palliative care status in Aged Care Entry Record (ACER) in the Services Australia system

Palliative Care Status Form must be:



- prepared by a medical professional prior to entering aged care
- submitted within 14 days of the ACER via My Aged Care Service and Support Portal
- do not need an AN-ACC assessment, if AN-ACC class 1 is confirmed.

Base Care Tariff Eligibility

Eligible providers will be advised of specialised BCT approval from late August 2022

BCT Category	Funding Basis	NWAU	BCT Funding (NWAU x Price)	Provider Eligibility Requirements
Standard MMM 1 – 4	Occupied beds	0.49	\$106.232	Default BCT available to any residential aged care facility located in a MMM 1 – MMM 4, where no other BCT category applies.
Standard MMM 5	Occupied beds	0.55	\$119.240	Residential aged care facility is located in a MMM 5 area.
Standard MMM 6 or MMM 7	Approved beds	0.68 (first 29 beds)	\$147.424	Residential aged care facility is located in a MMM 6 or MMM 7 area
		0.52 (beds 30+)	\$112.736	
Specialised Homeless	Occupied beds	0.92	\$199.456	Facility must provide evidence of delivering specialised homeless care, and 50% or more of residents have been assessed as being homeless, and have a relevant behavioural diagnosis.
Specialised Indigenous, located in MMM 6	Approved beds	0.78	\$169.104	Facility must provide evidence of delivering specialised Indigenous care, and 50% or more of residents in care identify as Indigenous and the facility is located in a MMM 6 area.
Specialised Indigenous, located in MMM 7	Approved beds	1.80	\$390.240	Facility must provide evidence of delivering specialised Indigenous care, and 50% or more of residents in care identify as Indigenous and the facility is located in a MMM 7 area

MMM – Modified Monash Model measure of remoteness

NWAU – National Weighted Activity Unit

Email SubsidiesandSupplements@health.gov.au

Base Care Tariffs Verification Process

BCT ELIGIBILITY CHECK

JUL – AUG 22

Outbound Calls to identify specialised BCT facilities, targeting facilities in MMM 6 & 7 areas, as well as facilities currently receiving the Homeless Supplement

Standard MMM BCTs will apply unless eligible and approved for a specialised BCT

BCT ELIGIBILITY DETERMINED

AUG 22

Most facilities currently receiving the Homeless Supplement **will be transitioned to the specialised homeless BCT**

Facilities in MMM 6 & 7 locations with >50% Indigenous residents **will be transitioned to the specialised Indigenous BCT**

PROVIDERS INFORMED OF FACILITY BCTs

LATE AUG - SEPT 22

Email to providers advising of BCTs that will apply for each of their facilities on commencement of AN-ACC

AN-ACC COMMENCES

1 OCT 22

AN-ACC funding commences

Variable/resident casemix funding + Fixed/BCT funding + one-off adjustment

Shadow assessments determine variable (AN-ACC classification) funding

MMM – Modified Monash Model measure of remoteness



2 – Transition Fund



AN-ACC Transition Fund

Transition Fund Grant Opportunity Guidelines (GOGs) and application form available on GrantConnect (www.grant.gov.au)

10 AUG 22

Transition Fund applications opened

AUG – SEP 22

Application Assessment

SEP – OCT 22

Application Outcome & Grant Agreement

1 OCT 22

Transition Fund commence

NOV 22

Submit AN-ACC claim to enable determination for transition fund payment



**Eligible providers will be invited to apply throughout the Transition Fund period
1 October 2022 – 30 September 2024**

Paid monthly in arrears based on difference between ACFI base and AN-ACC payment



AN-ACC Transition Fund – Contact Details

AN-ACC funding helpdesk	Email: ANACCFundinghelpdesk@health.gov.au Phone: (02) 4406 6002
Transition Fund team	Email: AN-ACCTFGrant@Health.gov.au
GrantConnect	Website: www.grants.gov.au Email: Grant.ATM@health.gov.au



3 – Care minutes



Care Minutes under AN-ACC

AN-ACC Funding Distribution

Wages – Clinical

Registered nurses,
enrolled nurses,
personal care
workers

Wages – Other Clinical

Allied health
services

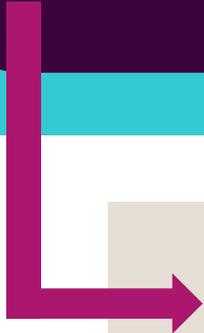
Wages – Other

Lifestyle services

Medical consumables

Other

Care management,
payroll, workers
compensation



**Funding to deliver additional care minutes
from 1 October 2022**

Care Minutes Definitions

Government will provide \$5.4 billion over 4 years from 1 October 2022 to fund extra direct care time to be delivered by registered nurses, enrolled nurses and personal care workers

Registered nurse (RN)

- 3 year bachelor degree
- assessing patients
- developing a nursing care plan
- administering medicine
- providing specialised nursing care
- working in multidisciplinary teams
- supervising ENs and junior RNs
- undertaking regular professional development
- performing leadership roles such as nursing unit manager or team leader

Enrolled nurse (EN)

- diploma
- work under the direct/indirect supervision and direction of the registered nurse at all times to provide nursing care
- this includes medications, physical examination, personal hygiene, and physical and emotional support

Personal care worker

- provide day-to-day support.
- for example, helping with daily activities such as feeding and bathing

Care Minutes Targets and Timeline

1 OCT 22

Funding commences to meet average care minutes targets

1 OCT 23

Average care minutes targets become mandatory standards

1 OCT 24

Mandatory average care minutes standards increases

Care Minutes Targets
Total average 200 minutes per resident per day

Registered nurses
=
40 minutes
minimum

Registered nurses, enrolled nurses and personal care workers
=
160 minutes

Care Minutes Standards
Total average **200 minutes** per resident per day

Registered nurses
=
40 minutes
minimum

Registered nurses, enrolled nurses and personal care workers
=
160 minutes

Care Minutes Standards
Total average **215 minutes** per resident per day

Registered nurses
=
44 minutes
minimum

Registered nurses, enrolled nurses and personal care workers
=
171 minutes

Care Minutes Example – Registered Nurse

Beth is a qualified **Registered Nurse** and is employed as a **Care Manager** at Magnolia Estate Aged Care Services.

Her duties include:

- management of the facility and staff, including contributing to the effective functioning of the team through mentoring staff and sharing clinical knowledge and skills (does not count towards care minutes)
- admitting residents and working closely with families, ensuring they are fully informed about clinical issues relating to their relative (can be counted towards care minutes).

Whilst Beth's main role is the over-arching management of Magnolia Estate Aged Care Services, the time she spends providing high-level clinical care to residents, assessing residents' clinical needs, and developing individual care strategies and care plans is considered direct care and **can be counted** towards care minutes.

Time spent undertaking administrative duties such as staff training/supervision, rostering, recruitment, facility level planning and reporting is not considered direct/personal care and **cannot be counted** towards care minutes.



Care Minutes Example – Personal Care Worker



Ingrid is employed as a **Grade 1 Personal Care Worker, Level 2 Award** at Leafy Gums Aged Care and spends most of her time (80%) attending to the basic daily needs of residents including bathing and washing residents, dressing residents, sitting with residents and helping them eat, assisting them with toileting and accompanying them on daily outings to assist with these basic daily needs.

This is considered direct/personal care and is counted towards care minutes.

Ingrid also helps out in the kitchen (20% of her time) as a **Kitchen Assistant** with food prepping for residents.

For example, Ingrid might help the Chef to plate up food and serve food to residents in the dining room.

This time is not considered direct/personal care and cannot be counted towards care minutes.

Care Minutes Calculations, Delivery and Reporting

Calculations



Average 'total care minutes' for quarter =
sum (total care minutes for each resident per day x number of days in care) /
total number of days of care delivered by the facility

Average 'registered nurse care minutes' for quarter =
sum (registered nurse care minutes for each resident per day x number of days in
care) / total number of days of care delivered by the facility

Delivery



October – December:
Calculation period for care minutes
targets based on resident casemix



January – March:
Facility **delivers care minutes**
against targets
** changes in resident casemix during the
quarter will not impact on targets*

Reporting



Care minutes performance will be measured by **direct care labour and costs**
data submitted in the Quarterly Financial Report

** Direct care = care delivered by registered nurses, enrolled nurses and personal care workers
first Quarterly Financial Report due 4 November 2022 for the July – September quarter*

Q&A

Use our online AN-ACC Funding Estimator to help estimate your funding levels before 1 October 2022



4 – My Aged Care Service and Support Portal

AN-ACC: Provider Journey – Residential Permanent

Purpose

This panel provides a high level overview of the steps taken to deliver subsidy payments to residential aged care Providers (residential permanent) via an AN-ACC funding assessment.

It highlights the importance of timeliness from:

- Providers, to submit client entry information as soon as possible, to receive accurate payments from Services Australia; and
- Assessor Organisations, to schedule in and action assessments to enable the assessed classification to be used by Services Australia to calculate payments.

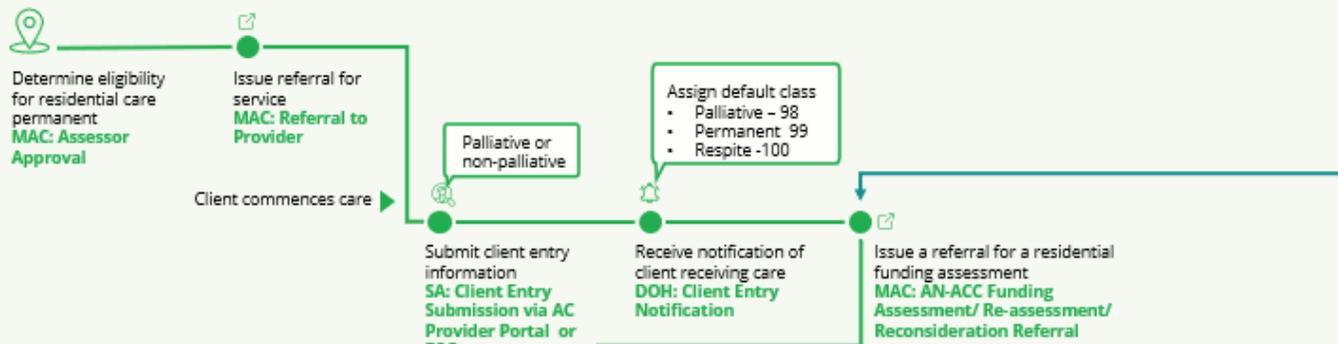
Acronyms

- AC = Aged Care
- AMO = Assessment Management Organisation
- AN- = Australian National
- ACC = Aged Care Classification
- CR = Care Recipient (Client)
- DOH = Department of Health
- MAC = My Aged Care
- QA = Quality Assurance
- SA = Services Australia

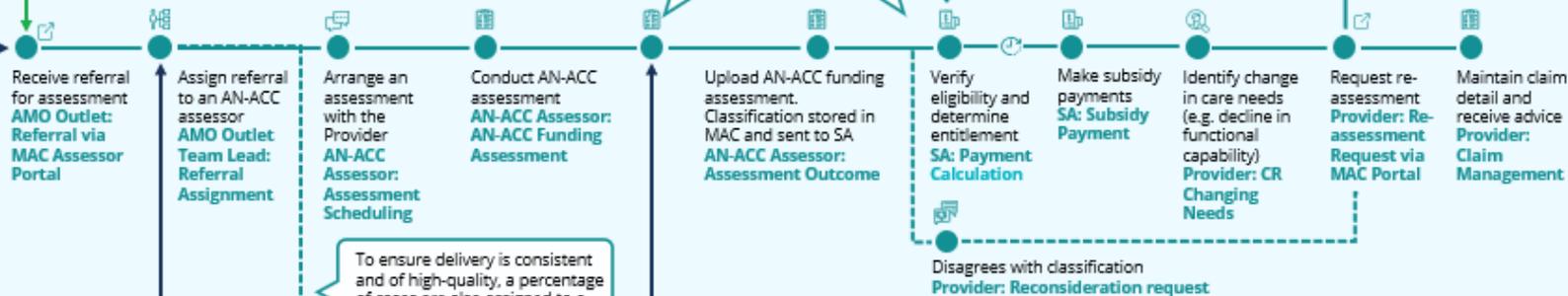
Legend

- Start / Trigger
- Action / experience
- Actor: Process step
- Standard pathway
- As required

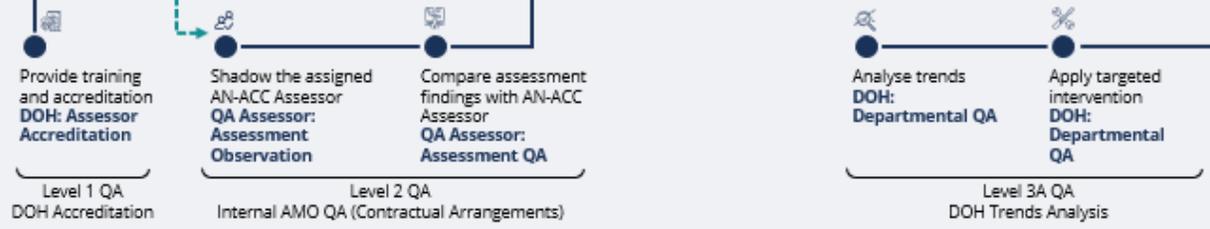
Access (registration and screening)



Referral, assessment and service delivery



Quality assurance



Level 3B QA
Data-driven
Payment Integrity

View and Filter AN-ACC Classification Information

- View classifications for residents in your care*
- You can do this in the *Care Recipients* list view or via a client's record



* Currently the *Care Recipient* tab displays active residential permanent classifications. Respite classifications will be visible from 1 October 2022.

Actions

1. On the *Home* page, click '*Residential Care*' to view the *Care Recipients* tab
2. Sort or filter the care recipients list as required e.g. by classification (advanced search)
3. View the list of care recipients and their classifications

A screenshot of the 'Search care recipients' page. The 'Filter by' dropdown menu is open, showing options like 'Choose an item', 'Aged Care user ID', 'Care type', 'Classification', etc. A red box highlights the dropdown menu and the 'Filter by' label. A red arrow points from the 'Filter by' label to the dropdown menu. A circled '2' is next to the filter section. Below the filter section, a table of care recipients is shown with columns for Last Name, First Name, Aged Care User ID, Care Type, Classification, Effective Date, Status, Request type, and Service. A circled '3' is next to the table. The table contains three rows of data.

Last Name	First Name	Aged Care User ID	Care Type	Classification	Effective Date	Status	Request type	Service
BOUY	Winfield	AC88334438	Residential Permanent	Class 1	30 December 2021	Active Classification	Palliative Care	Zeera Aged Care
CRAYFORD	Arthur	AC90810102	Residential Permanent	Class 5	3 March 2022	Active Classification		Zeera Aged Care
EIGHTMAYYYY	UATTwenty	AC30307730	Residential Permanent	Class 99	16 January 2022	Active Classification		Zeera Aged Care

View and Filter AN-ACC Classification Information Q&A

Can I download the results from the Care Recipients tab?

The My Aged Care Service and Support Portal does not currently have functionality for users to download their shadow assessment data into a report. This is due to privacy and security risks to ensure that client data is protected. Future improvements are being considered as part of the Department's digital transformation agenda that will assist in making the linkages between Government and providers much easier.

What are the statuses that can be displayed in the Care Recipients tab?

- Active classification – assessment completed
- Pending classification - awaiting outcome of assessment
- Default classification – awaiting assessment
- No classification – only applicable during shadow assessment period. Will not exist from 1 Oct

Why can't I see a resident in the Care Recipient view?

The display of information in the Service and Support Portal is dependent on entry information having been submitted to Services Australia. Check that your entry information has been correctly submitted and if this does not resolve the issue **Email:** ANACCFundinghelpdesk@health.gov.au

Request Reclassifications - Permanent and Respite Care

- Providers can only request a reclassification for a client that has an active classification
- Respite will follow the same process as residential permanent residents and will be available from 1 October

Actions

- From within the *Residential Care* tile, navigate to *Care recipients* tab and choose the resident
- Select *Request Reassessment*
- Select the criteria for request, and select *Request Reassessment*

1800 836 799 Mon-Fri 8am - 8pm Sat 10am - 2pm

Service and Support Portal

Review requests Service referrals Retrieve a referral code Residential care Find a client

Home | Residential care

Care recipients Requests Palliative Care

Filter by

Last Name	First Name	Aged Care User ID
BOUY	Winfield	AC88334438
CRAYFORD	Arthur	AC90810102
DAMION	Hugh	AC25214818
EIGHTMAYYYY	UATTwenty	AC30307730
ELMER	Jarrod	AC30632368
IANNI	Franklin	AC11970019
KEARNY	Ira	AC07019979
LUDLUM	Milton	AC94320520
MONFORE	Peter	AC89706543
MORNING	Kaira	AC75486001
PINELLO	Albert	AC26314609

Reverend Dr Milton Hugh LUDLUM (Milton)
Female, 87 years old, 26 May 1935, AC94320520
Unit 47, Lot Number 122 6 THE CRESCENT STREET FAIRFIELD, NSW, 2165

Residential Care

Client summary Client details Support Network Referrals for my organisation

Current Classification (Active)

Residential Permanent 10 February 2022 - Present
AN-ACC Classification : Class 7

REQUEST REASSESSMENT ?

REQUEST RECONSIDERATION ?

The screenshot shows a web interface for residential care. At the top, there is a contact number and hours. Below that is a navigation bar with 'Residential care' selected. A breadcrumb trail shows 'Home | Residential care'. There are three tabs: 'Care recipients', 'Requests', and 'Palliative Care', with 'Care recipients' active. A 'Filter by' section is present. A table lists care recipients with columns for Last Name, First Name, and Aged Care User ID. The row for 'LUDLUM, Milton' is highlighted with a red box and a circled '1'. To the right, a client profile for 'Reverend Dr Milton Hugh LUDLUM (Milton)' is shown, including personal details and address. Below this is a 'Residential Care' section with tabs for 'Client summary', 'Client details', 'Support Network', and 'Referrals for my organisation'. The 'Client details' tab is active, showing 'Current Classification (Active)' as 'Residential Permanent 10 February 2022 - Present' with 'AN-ACC Classification : Class 7'. Two buttons are visible: 'REQUEST REASSESSMENT' (highlighted with a red box and a circled '2') and 'REQUEST RECONSIDERATION'. Both buttons have a question mark icon.

Request Reconsiderations - Permanent and Respite Care

- From October 2022, providers can request a Reconsideration for an initial assessment or reclassification within 28 days from when the classification is displayed in the Service and Support portal.

Actions

1. Navigate to the Client record by choosing the resident from the *Care Recipients* list
2. Select *Request Reconsideration*
3. Select the reason for the request, and select *Request Reconsideration*

1800 836 799 Mon-Fri 8am - 8pm Sat 10am - 2pm

Service and Support Portal

Review requests Service referrals Retrieve a referral code Residential care Find a client

Home | Residential care

Care recipients Requests Palliative Care

Filter by

Last Name	First Name	Aged Care User ID	Car
BOUY	Winfield	AC88334438	Res
CRAYFORD	Arthur	AC90810102	Res
DAMION	Hugh	AC25214818	Res
EIGHTMAYYYY	UATTwenty	AC30307730	Res
ELMER	Jarrod	AC30632368	Res
IANNI	Franklin	AC11970019	Res
KEARNY	Ira	AC07019979	Res
LUDLUM	Milton	AC94320520	Res
MONFORE	Peter	AC89706543	Res
MORNING	Kaira	AC75486001	Res
PINELLO	Albert	AC26314609	Res

Service and Support Portal

Home | Residential care | Milton LUDLUM (Milton)

Reverend Dr Milton Hugh LUDLUM (Milton)
Female, 87 years old, 26 May 1935, AC94320520
Unit 47, Lot Number 122 6 THE CRESCENT STREET FAIRFIELD, NSW, 2165

Residential Care

Client summary Client details Support Network Referrals for my organisation

Current Classification (Active)

Residential Permanent 10 February 2022 - Present
AN-ACC Classification : Class 7

REQUEST REASSESSMENT ?

REQUEST RECONSIDERATION ?

Request a Reclassification or Reconsideration - Q&A

Why can't I request a reclassification or reconsideration?

The ability to request a reclassification (available now) or a reconsideration (from October) is based on access permissions. Only registered staff of the provider organisation who have the 'Team Lead' role will be able to request a reclassification or reconsideration. Organisation and/or Outlet administrators are responsible for providing portal access and user roles to staff within their organisation.

I have Team Lead access but I still can't request a reclassification, why not?

A request can only be generated where a resident has an 'active' classification and there is no request in progress. You should navigate to the *Requests* tab from within the *Residential Care* tile and from there you will be able to see if the client already has a request in progress – either for a reclassification, or they are waiting for an initial assessment and therefore only have a 'default' classification.

Can I recall request that I have made?

Yes. You need to navigate to the *Requests* tab and select the resident. From there you can select 'Recall reassessment request'.



If the resident becomes available e.g. following a return from hospital, you need to navigate to the Request tab and select the 'Notify client is now available for assessment' button.

Palliative On Entry Residents

- Providers must submit the required Palliative Care Status form within the due date displayed (14 calendar days from submitting entry information to Services Australia)
- Users with Team Lead or Staff access can action this in the portal
- The trigger for this process is via Services Australia entry information (portal, webservice, entry form)

Actions

1. Navigate to the *Residential care* list view and select the *Palliative Care* tab. Open the client record
2. Click *Upload Palliative Documentation* and select file(s)
3. Click *Submit Documents*

The screenshot shows the 'Residential care' portal interface. At the top, there are tabs for 'Care recipients', 'Requests', and 'Palliative Care'. Below this is a 'Filter by' section. A table lists care recipients with columns for Last Name, First Name, Aged Care User ID, Requested Date, Due Date, and Status. The second row, for Melba MACEJKOVIC, is highlighted with a red box. Below the table, the client record for Melba MACEJKOVIC is shown, including classification details like 'Residential Permanent' and 'Class 98'. A red box highlights the 'UPLOAD PALLIATIVE DOCUMENTS' button, with a circled '1' next to it.

Last Name	First Name	Aged Care User ID	Requested Date	Due Date	Status
BOUY	Winfield	AC88334438	30 December 2021		Approved
MACEJKOVIC	Melba	AC23479348	10 January 2022	04/06/2022	Pending Upload

Aged 75 (15 January 1947), Male

Classification details

Care type Residential Permanent
Classification Class 98
Effective date 10 January 2022
Classification status Active

VIEW RESIDENTIAL CARE AND CLIENT **1** UPLOAD PALLIATIVE DOCUMENTS

The screenshot shows the 'Upload Palliative Documentation' form. It includes a warning message: 'All fields marked with an asterisk (*) must be completed before submission. Palliative Care Plan must be submitted by the 4 June 2022'. A red box highlights the 'UPLOAD PALLIATIVE DOCUMENTATION' button, with a circled '2' next to it. Below this, the uploaded file 'Palliative Care Status Form MACEJKOVIC [pdf 142.62KB]' is listed, along with the upload date and user. A red box highlights the 'SUBMIT DOCUMENTS' button, with a circled '3' next to it. Other buttons include 'SAVE DOCUMENTS & EXIT' and 'CANCEL'.

Upload Palliative Documentation

All fields marked with an asterisk (*) must be completed before submission.
Palliative Care Plan must be submitted by the 4 June 2022

2 **UPLOAD PALLIATIVE DOCUMENTATION**

Palliative Care Status Form MACEJKOVIC [pdf 142.62KB]
Palliative care status form uploaded 1 June 2022
Uploaded by BL_NY311638

3 **SUBMIT DOCUMENTS** SAVE DOCUMENTS & EXIT CANCEL

Palliative On Entry - Q&A

How do I know if the palliative care plan form has been accepted?

Following submission of your palliative care form, the status of the record will change from 'Pending Upload' to 'Pending Approval'. If the form has been completed correctly, a Departmental Officer will approve the request and the status will change to 'Approved' and an AN-ACC class 1 will be applied. Where more information is required, the Departmental Officer will change the status of the request to 'More Information Requested'. You will receive an additional 14 days to submit the additional requested documentation.

Are there file type and size limits for palliative care documentation?

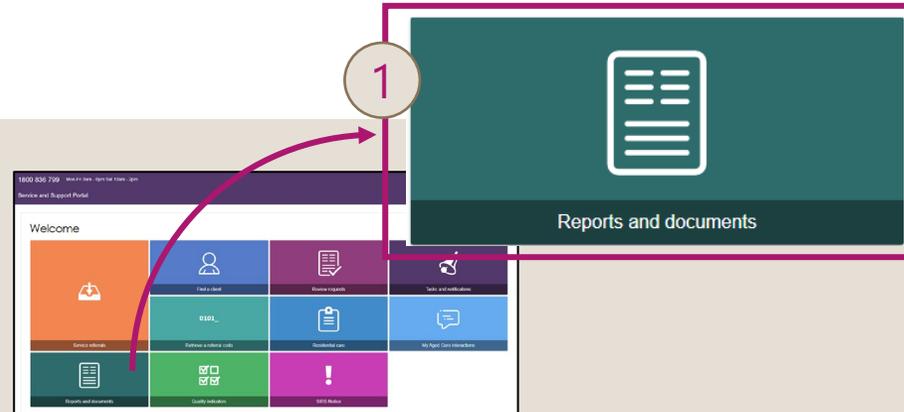
Yes. A maximum of 5 documents may be uploaded for the palliative care process. The Palliative Care Status Form itself must be submitted in PDF format. Additional documentation if requested may be submitted with file types .jpeg, .jpg, .bmp, .png, .pdf. Each individual file must be under 5mb.

What happens if the palliative care form submitted is not approved by the Department?

The status of the request will change to 'Rejected'. The default class 98 that was assigned to the resident will be changed to default class 99 and a referral for assessment will be issued to determine an AN-ACC classification.

Care Minutes Targets

- You can access the care minute targets for your facility from the My Aged Care Service and Support Portal.



Actions

- On the Home page, click *Reports and Documents*
- Click the *Care Minutes* tab and select the facility from the list
- Expand and view the current care minutes targets of a residential facility
- Click *Care Minutes History* to view previous care minutes targets

Service and Support Portal

Home | Reports and documents

Reports and documents

Reports | Forms | Links | QI Reporting | **Care Minutes**

Filter by

NAPS Service Id	Service Provider	Facility name
97812	Star RFA Provider	Star Aged Care Homes - Zeera org
97811	Star RFA Provider	Zeera Aged Care home

Facility details:
NAPS Service ID: 97812
Service Provider: Star RFA Provider
Facility Name: Star Aged Care Homes - Zeera org
Status: Operational

Care Minutes details:
Calculation date: 3 July 2022
Period type: Quarterly
Period start date: 1 April 2022
Period end date: 30 June 2022

Average care minutes per resident per
Total care minutes: 237.37
RN care minutes: 43.76

CARE MINUTES HISTORY

My Aged Care Service & Support Portal – System User Guide

[Home](#) > [Resources](#) > [Publications](#)

[Listen](#) [Print](#) [Share](#)

My Aged Care – Provider Portal User Guide: Part 2 Team Leader and Staff Member Functions

This guide explains to team leaders and staff members how to use the My Aged Care service and support portal.



Downloads

My Aged Care – Provider Portal User Guide: Part 2 Team Leader and Staff Member Functions

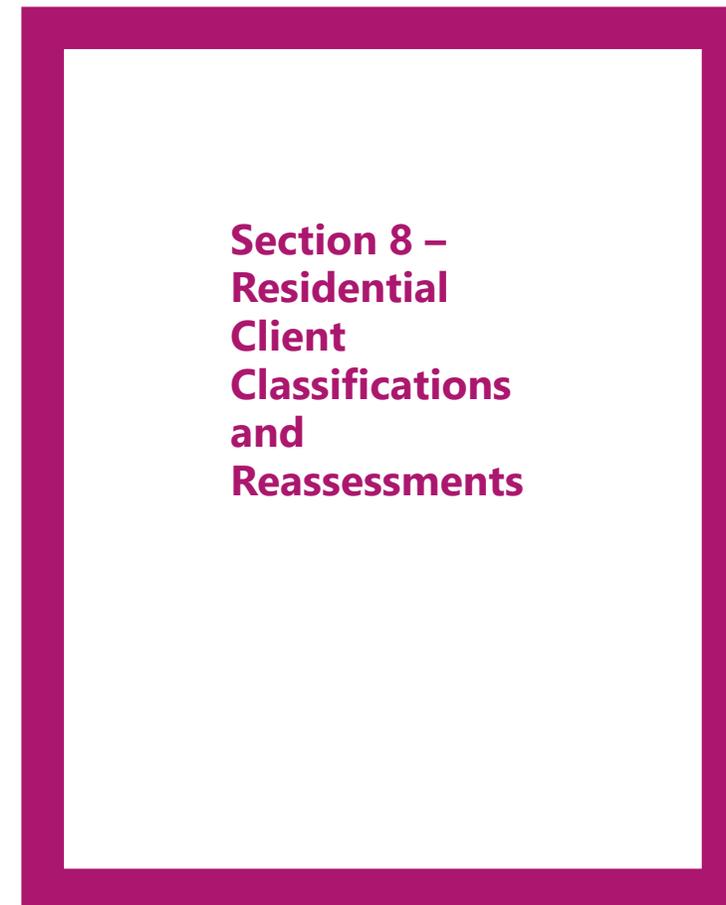
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Publication date:

18 August 2022



[My Aged Care – Provider Portal User Guide: Part 2 Team Leader and Staff Member Functions | Australian Government Department of Health and Aged Care](#)



5 – Services Australia Portal



Australian Government

Services Australia

Residential Aged Care Funding Reform

Aged Care Payment System

30 August 2022

Key topics

- Provider Education material
- Payment statements
- Palliative Care
- Emergency Leave



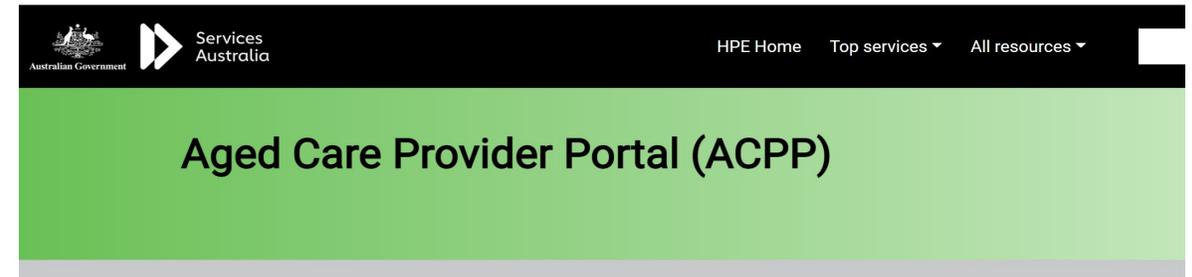
Health Professional Education Resources



Top services

The 'Top services' section displays six service cards in a 2x3 grid:

- Aged Care Provider Portal**: The Aged Care Provider Portal (ACPP) is a secure place to access online services for aged care payments.
- Australian Immunisation Register**: The AIR is the national register where vaccinations are recorded.
- Child Dental Benefits Scheme**: Claiming and service information for the Child Dental Benefits Scheme (CDBS).
- Department of Veterans' Affairs**: Information on Department of Veterans' Affairs (DVA) billing.
- HPOS**: Health Professional Online Services (HPOS) allows health professionals to access online services.
- Incentive Programs**: Information on the Practice Incentives Program (PIP).



Home / Aged Care Provider Portal

The ACPP homepage features four service cards:

- General**: General overview and introductory information on the Aged Care Provider Portal.
- Home Care**: Information for home care providers when submitting home care claims using the Aged Care Provider Portal.
- Flexible Care**: Information for flexible care providers when submitting flexible care claims using the Aged Care Provider Portal.
- Residential Care**: Information for residential care providers when submitting residential care claims using the Aged Care Provider Portal.

Educational resources are available on Health Professional Education Resources Gateway:

[Health Professional Education Resources \(servicesaustralia.gov.au\)](https://servicesaustralia.gov.au)

[Aged Care Provider Portal \(ACPP\) - Health Professional Education Resources \(servicesaustralia.gov.au\)](https://servicesaustralia.gov.au)

Health Professional Education Resources

Aged Care Provider Portal (ACPP)

Residential Care



eLearning



Register Residential Aged Care events

This module provides information supporting the registering of Residential Care events through the ACPP.



Finalise a Residential Aged Care claim

This module provides information on how to finalise a Residential Aged Care claim through the ACPP.

Residential Aged Care – Infographics

Submitting an Aged Care Funding Instrument online

What is an Aged Care Funding Instrument?
Residential aged care providers use the Aged Care Funding Instrument (ACFI) to claim residential care funding to subsidise the care recipient's care. It consists of:
12 QUESTIONS (CARE NEEDS) – 2 DIAGNOSTIC SECTIONS

You can use the Aged Care Provider Portal to submit ACFIs online easily.

Display elements of the form are displayed and highlighted on the screen's site, available for each session.

The progress bar on the right of each screen displays the status of each question. Each of these stages can be accessed via the progress bar after they have been completed (and saved).

ACFI on the Tab II will display a warning message if you do not enter the required information. Questions II (supplemental) are optional to complete care needs.

You can save or cancel or save and mail a draft ACFI at any time and come back to it within 7 days.

Before submitting your ACFI you'll see a verification screen with an overview of the information you have entered.

Click the Submit button to complete the process.

Selecting the Cancel button will cancel the ACFI without saving the data.

ACFIs are processed in real time. You can check the status of the submitted ACFI under ACFI Summary.

For more information on how to use the portal, check out: servicesaustralia.gov.au/agedcareportal

Services Australia Help: 132 222 2222 | servicesaustralia.gov.au

Submitting an Aged Care Funding Instrument online

Residential Care Claiming Tips

Here are some tips worth remembering when claiming online with the Aged Care Provider Portal (ACPP).

- Are you approved?**
Ensure that you're approved to provide residential care, and that relevant places have been allocated to your service to avoid errors in your claim.
- Confirm valid approval before entry**
A care recipient will need valid approval before you enter them into your service. Entry dates can't be before the approval start date.
- Confirm care recipient details**
Check valid identification for example a pension card or drivers license. You won't be able to change care recipient details.
- Submit ACFI on time**
Ensure Aged Care Funding Instrument (ACFI) for care recipients is submitted within appraisal period to avoid any late penalties. For further information read the ACFI guide.
- Avoid over occupancy**
Ensure that the number of care recipients in your claim doesn't exceed the approved number of places. You'll be unable to submit your claim if you're over occupied.
- Leave without an end date**
You can submit a leave event without an end date. Once you know the leave end date, you can update the original leave event.
- Select correct departure reason**
There are multiple codes to report departures. Using the right code will reduce errors and delays in your claim.
- Limited editing when deceased**
If 'deceased' is selected as a departure reason, further actions to the care recipient record may be limited after finalising the claim.
- Confirm date of death is correct**
For deceased care recipients, confirm the correct date of death as advised to Centrelink. This will reduce errors and ensure you get the correct payment.
- Edit accepted events**
If you need to update any new information, you can update when the event has an 'accepted' status. Finalised claims and some events may not be 'accepted' until the next working day.
- Updates to previous claims**
You have a limit of 2 years after the end of a payment period to vary a claim. You can't submit, update or delete an event more than 2 years old through the ACPP.
- Access to historical information**
You can view a maximum of 24 months of claims and payment history in the ACPP.
- Check data**
Double check all the data provided as part of your claim before finalising. Any discrepancies will lead to errors and delays in your claim.

For more information on how to use the portal, check out: servicesaustralia.gov.au/agedcareportal

Services Australia Date: August 2022 Code: ACPPM04INFO2
<https://servicesaustralia.gov.au>

Residential Aged Care – Payment Summary

Residential Care Payment statement: How to read and reconcile

The payment statement for Residential Aged Care has recently changed.
This resource will help you understand the new Payment statement, and reconcile it with the Service payment summary.

Reading the different sections of the Payment statement:

- Service payment summary
- Care recipients' itemised payments
- Care recipients' details
- Subsidy classification
- Respite care and incentive summary
- Supported resident ratio
- Supported resident ratio adjustments
- Payment statement notes



Australian Government



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Australia

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Services Australia

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Residential Aged Care – Payment Statement

MENU  Aged Care Staff Portal  Worklist Select or type
60653 - RE

Home [Service: 60653 - RBK SERVICE](#)

 [Claims](#) [Payment statements](#) [Payment management](#)

 **Service**

- Service payment summary
- Care recipients' itemised payments
- Care recipients' details
- Subsidy classification
- Respite care and incentive summary
- Supported resident ratio
- Supported resident ratio adjustments
- Payment statement notes

- Accommodation supplement
- Means tested accommodation supplement
- Accommodation charge top-up supplement
- Clean energy supplement
- Concessional resident supplement



Residential Aged Care – Payment Statement

Service payment summary

[Home](#) [Claims](#) [Payment statements](#) [Payment management](#)

Service payment summary			
			Claim month: <input type="text" value="Jul"/>
Description	Payments	Deductions	Total
Subsidies			
Fixed subsidy	\$0.00		
Variable subsidy - permanent	\$17,560.50		
Variable subsidy - respite	\$0.00		
SUBTOTAL subsidies			\$20,188.20
Supplements			
Accommodation supplement	\$0.00		
Means tested accommodation supplement	\$0.00		
Veterans supplement	\$0.00		
SUBTOTAL supplements			\$0.00
Adjustments for current period			
Accommodation contribution refund	\$0.00		
Compensation payment reduction	\$0.00		
Extra service reduction	\$0.00		
Income tested subsidy reduction	\$0.00		
Income tested subsidy review refund	\$0.00		
Manual adjustment - care recipient	\$0.00		
Manual adjustment - service	\$0.00		
Means tested subsidy reduction	\$0.00		
Means tested subsidy review refund	\$0.00		
SUBTOTAL adjustments for current period			\$0.00
Adjustments for previous periods			
Fixed subsidy	\$0.00		
Variable subsidy - permanent	\$0.00		
Veterans supplement	\$0.00		
Viability supplement	\$0.00		
SUBTOTAL adjustments for previous periods			\$0.00
SUBTOTAL subsidies, supplements and adjustments			\$20,188.20
Outstanding balance and advance			
Outstanding balance from April 2022		\$0.00	
Advance		\$0.00	
SUBTOTAL outstanding balance and advance			\$0.00
Payment held over			\$0.00
TOTAL amount paid to provider			\$20,188.20

Residential Aged Care – Payment Statement

Care recipient details

[Claims](#)[Payment statements](#)[Payment management](#)

Care recipients' details

[Legend](#)Claim month: Search

Search using any keyword in the table. To search for multiple keywords, provide a space between words.

Filter by

Care recipient			Admission details			AN-ACC			Days remaining					
ID	Family name	Given name	Entry	Departure	RCT	SR	ACAT	Classification	Effective date	Room type	Compensation	Respite care	Social leave	Transition care leave
412841570	BrekkewPCm	BrielleQZud	01/04/2022				R	Class 99	01/04/2022				42/52	
412841569	HaneRwJc	VadakshG	01/04/2022				R	Class 99	01/04/2022				47/52	
412841566	KilbackpOXX	TobyaRUH	01/04/2022				R	Class 99	01/04/2022				46/52	
412841565	LeuschkedtKI	KarinaDazY	01/04/2022				R	Class 99	01/04/2022				52/52	
412841455	LuetngenrXS	MicaelaWsKm	01/05/2022				H	Class 100	01/04/2022			2/63		
412841567	ZiemannrRZO	HenryNnwD	01/04/2022				R	Class 99	01/04/2022				47/52	

Show records - Showing 1 to 6 of 6 records[Download payment statement](#)[CSV](#)[XML](#)

Residential Aged Care – Payment Statement

Care recipient itemised payments



[Claims](#)

[Payment statements](#)

[Payment management](#)



Care recipients' itemised payments

Legend

Claim month:

Search

Search using any keyword in the table. To search for multiple keywords, provide a space between words.

Filter by

Care recipient							Paid leave days				Unpaid leave days						
ID	Family name	Given name	Payment type	Rate effective date	Entitlement type	Adjustments for claim month	SL	HP	TC	EL	L	TC	Paid care days	Non claimable days	Rate per day	Subtotal	Total
412841570	BrekkewPCm	BrielleQZud	Variable subsidy - class 99	01/07/2019	Current								30		\$117.07	\$3,512.10	\$3,512.10
412841569	HaneRwJc	VadakshG	Variable subsidy - class 99	01/07/2019	Current								30		\$117.07	\$3,512.10	\$3,512.10
412841566	KilbackpOXX	TobyaruH	Variable subsidy - class 99	01/07/2019	Current								30		\$117.07	\$3,512.10	\$3,512.10
412841565	LeuschkedtKI	KarinaDazY	Variable subsidy - class 99	01/07/2019	Current								30		\$117.07	\$3,512.10	\$3,512.10
412841455	LuetngenkrXS	MicaelaWsKm	Variable subsidy - class 100	01/07/2019	Current								30		\$87.59	\$2,627.70	\$2,627.70
			Variable subsidv - class														

Residential Aged Care – Payment Statement

Subsidy classification

[Claims](#)[Payment statements](#)[Payment management](#)

Subsidy classification

Claim month: Search

Total operational bed days: 6030

Search using any keyword in the table. To search for multiple keywords, provide a space between words.

Subsidy	Classification	Care recipients	Rate per day	Paid care days	Subtotal	Total
Variable subsidy - permanent	Class 99	5	\$117.07	150	\$17,560.50	\$17,560.50
Variable subsidy - respite	Class 100	1	\$87.59	30	\$2,627.70	\$2,627.70
TOTAL					\$20,188.20	\$20,188.20

Download payment statement

[CSV](#)[XML](#)

Residential Aged Care – Payment Statement

Respite care and incentive summary



[Claims](#) [Payment statements](#) [Payment management](#)



Respite care and incentive summary

Claim month:

No records available

Download payment statement

CSV

XML

Residential Aged Care – Payment Statement

Supported resident ratio

[Claims](#)[Payment statements](#)[Payment management](#)

Supported resident ratio

Claim month:

Description	
Supported resident ratio met?	No
Total number of payable days of eligible care recipients receiving supplements	0
Total number of payable days of eligible care recipients receiving basic subsidy	150
Supported resident ratio %	0.00

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Residential Aged Care – Payment Statement

Supported resident ratio adjustments

[Claims](#)[Payment statements](#)[Payment management](#)

Supported resident ratio adjustments

Claim month: *Adjustment month:

Description	
Supported resident ratio met?	No
Total number of payable days of eligible care recipients receiving supplements	0
Total number of payable days of eligible care recipients receiving basic subsidy	155
Supported resident ratio %	0.00

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Residential Aged Care – Payment Statement

Payment statement notes

[Claims](#)[Payment statements](#)[Payment management](#)

Payment statement notes

Claim month:

No records available

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Residential Aged Care – Palliative Care

Palliative Care

- Entry requirements for palliative care recipients changed on 23 July 2022.
- You now need to tell us if someone is entering a service to receive planned palliative care
- This is now available on the Aged Care Provider Portal

Register entry

All fields are optional unless marked with an asterisk *

Step 1
Step 2
Step 3
Step 4

Type of care

Please provide the type of care the care recipient is entering

Type of care *

Palliative care

Is the care recipient entering to receive Palliative care? * Yes No

Entry details

Entry date *

Pre-entry date

Approved care in unfunded capacity details

Please complete the following only if the care recipient has been in receipt of approved care in an unfunded capacity prior to entry

Original entry date

Residential Aged Care – Emergency Leave

Emergency Leave

- Emergency leave was introduced with the Aged Care Payment System
- Social leave is not to be used for an emergency situation
- Emergency leave can be used when an emergency situation is declared for the service by the Department of Health and Aged Care
- There is no limit on the amount of emergency leave that can be used in this situation

Register leave

All fields are optional unless marked with an asterisk *.

Note: Social (claimable) remaining balance for financial year 2020-21 as at 25/05/2021 is 52 day(s).

Note: An Emergency situation has been declared for this service

Leave type *	Emergency Leave
Leave start date *	02/04/2021
Leave end date	15/04/2021

Thank you



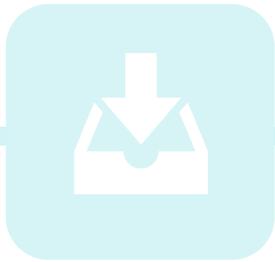
Q&A

Use the My Aged Care Provider Portal for assessment requests and details and viewing your care minutes targets

Use the Services Australia Portal for client entry, exits, claims and payments



Next steps...



September

Base Care Tariff verifications



Mid-September

Provider Preparation Checklist

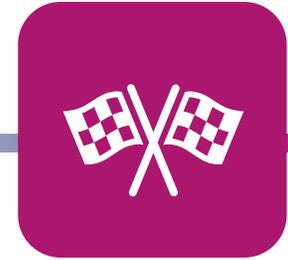
Online tutorials



Mid-September to October

Publish Residential Care Funding User Guide

Providers continue to submit ACFI appraisals for residents in care



1 October 2022

AN-ACC go live

Respite classifications available

Reconsideration available

Watch:

<https://www.health.gov.au/resources/webinars>

Subscribe:

<http://www.health.gov.au/aged-care-newsletter-subscribe>

Engage:

<http://www.agedcareengagement.health.gov.au>

Read:

<http://www.health.gov.au/aged-care-funding-reforms>

**Readiness
self-assessment
QR code**





Thank you

For more information, please contact
the Department of Health.

If you have any questions after the session please
send them to acfr@health.gov.au