

Self-Managed Home Care Packages General Information

28 October 2023

Fees and other financial information

- There is no setup fee. There is no exit fee.
- A 5% Care Management fee will be charged to the Package Recipient's HCP (Home Care Package).
- A 10% Administration fee will be charged to the Package Recipient's HCP Package.
- The Package Recipient will receive a monthly statement that will include the administration fee, along with any other purchases or services for the previous month.
- Any variations to our fees will commence on 1 July each year and you will be advised in writing at least 14 days before the variations take effect and will be in accordance with Government Policy guidelines.
- Help at Home have a weekly pay run that will ensure all suppliers are paid on a regular basis. Please note that the first time a supplier sends an invoice to inbox: hathinvoices@montefiore.org.au. It can take up to one week to set up the new supplier for payment.
- All invoices will be approved by the Package Recipient to ensure budgetary compliance.
- Providers cannot charge for package management in a calendar month when no services (other than care management) are delivered, except for the first month of care.
- Providers can continue to charge for care and package management at a fortnightly or monthly rate and do not have to pro rata the price if the care recipient ceases their home care part way through a period.

Supply of services to you by independent service providers

- Your care workers are independent service providers contracted by you to provide care services to you directly. You are required to provide Montefiore Help at Home a copy of your signed service agreement with your provider (if the provider is from Mabel, a copy of their service agreement with Mabel is acceptable)
- Help at Home is required to sign up each service provider by way of Supplier Agreement, including providers through Mabel

Montefiore Daily Contribution Fee:

There is no daily fee.

Home Care Package Funding When in Hospital or Respite

Every care recipient can stay up to 28 days in Hospital or Respite without any reduction in their HCP subsidy. After 28 days, the Aged Care Department will reduce the funding by 75%. This reduction applies to the subsidised funding only. The Income Tested Fee does not change at any time.

Home Care package Inclusions and Exclusions

When self-managed it is up to the consumer to understand the guidelines and manage purchases etc. themselves. There are advocacy groups and my aged care that can provide guidance across these decisions.

Payments and reimbursements

You can choose to pay your supplier and then request reimbursement. To be reimbursed, we require your bank account details. Payment terms should be stated on the invoice. Payments are made every Friday and usually within two weeks of receipt of the invoice, unless the stated payment terms are less.

Communication

We will have a Case Manager available to you for any questions. It will be a dedicated person that will understand your needs, create your care plan etc.

Management of Plan

We have a CRM that contains all information about clients, front line staff, communications, and documentation.

Commencement of Services

The turnaround time from enquiry to service commencement depends on the complexity of the care plan (i.e., level 1 low care to level 4 high care), a care plan can be generated and signed off by the consumer in a 48-hour period after signing the agreement.

Funding and Budget

The Care Coordinator will work with you to set out a budget and what you want to achieve with your care.

Transition from CHSP (Commonwealth Home and Support Program) to HCP

Once the Home Care Package recipient is accepted on the My Aged Care Portal. The CHSP funding ceases.

Home Care Package Acceptance

You have 56 days from the date of your letter to enter into a Home Care Agreement with your chosen provider. If you do not enter into a Home Care Agreement within that period, your package will expire. It will then be allocated to the next person on the national priority system.

If you cannot find a suitable provider during this time, you can call My Aged Care and ask for an extension of 28 days.

Care Plan Requirements

Currently the government requirement is that the provider should be reassessing every 12 months for self-managed clients. Montefiore Help at Home will review your care plan after the first 3 months and then 6 monthly, and if there is a change in circumstance it is up to the client to advise the provider and then the care plan can be updated.

Budget

The budget is a guideline only. It is up to the consumer to ensure that they manage the budget and will also receive monthly statements which will clearly outline how much of the package is left from the previous month. That money can be used toward the next month's services.

Private Health Insurance

You can use your PHI for an Allied Health service if you do not have the service paid by the package. It is either one of the other.

Provider/Supplier Credentials

All suppliers will need to have a police check, insurance, and ABN. This is a regulatory requirement.

Income Tested Fee (ITF)

- Home Care providers do not have visibility of when the ITF will start, and this will depend on back log from Services Australia. You will not be charged until we receive the first letter which will include the daily amount.
- Montefiore is advised by the Dept. of any changes to ITF for the consumer. We invoice the consumer directly for the ITF amount on a fortnightly basis, but this may change later in 2023. If you agree to direct debit you will still receive your monthly statement as well as the invoice (which will state it has been paid) for your ITF.