

Online Training | Home care expenditure: what are the rules?

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Webinar housekeeping

- All attendees will be on mute and their cameras turned off for the entire webinar
- We have BD tech support live to assist with any technical issues
- Use the chat function for any comments/technical issues. Use the Q&A function for specific questions related to the training content
- Questions will be addressed at the end of the webinar and answered live throughout
- There will be a post webinar survey link sent at the end of the training - we value attendee feedback
- We will also have a QR code linking to our feedback survey towards the end of the presentation so you can provide instant feedback

Disclaimer

The information contained in this presentation is intended as **general commentary only** and should not be regarded as legal advice

Should you require specific advice on the topics or areas discussed, please contact the presenters directly

What you should take home

- Consequences of getting it wrong
- An understanding of the law, what are the rules?
- Key risk areas: everyday “living” expenses and home modifications
- Engaging family members as service providers – only ok in certain circumstances
- HCP expenditure is particularly important in light of assurance reviews!

There will be time for questions at the end. Add your questions into the Q&A function!

KEY MESSAGE

Getting expenditure right is YOUR responsibility

Current trends regarding expenditure

- Renewed area of focus for ACQSC and Department
 - Audits
 - Complaints
 - Quality Assurance Review
- The rules have not changed, but the interpretation has – particularly everyday items, building works and use of family members
- More guidance to come: *watch this space*
- Consequences of getting this wrong more serious:
 - Refunds with no ability to recoup this from the customer
 - Manual mentions possibility of being charged with fraud

Whose decision (and responsibility) is it?

- Providers must work with clients to design their care plan but that doesn't mean clients have the right to demand something
- Health professionals can give opinions but aren't the decision-makers. They provide *guidance* only
 - eg, if a GP says the consumer needs an “unlimited” amount of something – good idea to say no!
 - make sure the person recommending the purchase is practicing within their expertise, eg an OT should not be advising on specialised food
- * Your role as the approved provider is to work with the client, their representatives and health professionals to come up with a care plan that meets the client's needs and is compliant with the law.

Where are the rules for HCP expenditure?

- The *Quality of Care Principles 2014*
 - This is where you find the law/rules
- The Home Care Packages Program Manual (September 2021) see [here](#) contains the regulators' *guidance* on the rules
- Difference between the legislation and the guidance?

Key legislation: Section 13 Quality of Care Principles

A HCP provider:

- **must** provide a package of care and services selected from the care and services specified in Part 1 of Schedule 3 of the Principles
- **may agree to include**, in the package of care and services, **other care and services required to support the care recipient to live at home**, provided that:
 - the AP is **able** to provide the care and services within the limits of the resources available; and
 - the item is not specified in Part 2 of Schedule 3 as an excluded item.
- **may** support telehealth and digital technology such as remote monitoring
- must ensure the care and services are **consistent with the care plan** and that they meet the Aged Care Quality Standards

Three categories

- **Allowed** items
- **Excluded** items
- **Other** items:
 - Need to be clearly mentioned in the client's care plan.
 - Need to show that it is “required to support the consumer to live at home”
 - May require an assessment by a health professional to evidence that it is “required” to support the client to live at home
 - **BEWARE: many** things that look like “other” items can really be **excluded**. More on this to follow!

Guidance material

- The Manual states that you can only make a purchase if:
 - It is linked to the care recipient's care needs and goals;
 - It supports the care recipient's health and wellbeing in daily living;
 - It is required to support functional safety in their home;
 - It is within the scope of their package budget; and
 - It **“would be considered an acceptable use of Government funds.”**

Excluded items

- As a source of general income
- Food (excluding enteral feeding) and other special medical food (more on this to come)
- White goods (unless special purpose such as large print microwave or special washing machine)
- Rent, mortgage and utilities
- HCP fees or fees for other care funded by Australian Government
 - (eg residential respite care)
- MBS/PBS items (including gap fees)
- Home modifications/capital items not related to needs (such as building a kitchen, sunroom or modifying windows or roof)
- Entertainment activities, eg club memberships, tickets to events
- Gambling and travel

Excluded items: Everyday expenses

- You cannot use HCP funds as “a source of general income for the care recipient”
- Very broad category!
- Includes “everyday” items that might otherwise look like they are in the grey zone

Ask yourself:

- Is there a clinical need for the item?
- Is this something the average person (not just a HCP consumer) needs to buy?
 - eg groceries, phone bill, fridge, washing machine, furniture

Debit cards and vouchers

- The draft manual says credit cards / debit cards / vouchers will now be excluded
- The issue is the need to ensure that they are being used for permitted items and not excluded items (like groceries)
- Taxi vouchers may be permitted so long as:
 - You ensure the consumer is not using a state/territory based scheme to fund taxi rides at the same time as using HCP funding
 - Taxi vouchers must be well documented in the care recipient's Home Care Agreement and the care recipient's care plan
 - Documentation must address the purpose of their use (eg visits to the doctor), with all costs agreed to by the care recipient

Food

- You can pay for the preparation of food but not the raw ingredients
- Take-away food is not ok
- Exceptions for meal substitutes needed for a medical reason such as Resource Plus / Resource Protein
 - The new Manual will specify this
- You can choose how you want to charge for food preparation – often client will charge about 70% of the food (such as Lite 'n' Easy) to the package
- Delivery can be charged to the package too

Limits of HCP funds: Home modifications

The following are allowed:

- Home maintenance, reasonably required to maintain the home and garden in a condition of functional safety and provide an adequate level of security - see next slide
- Modifications to the home such as easy access taps, shower hose or bath rails, removing shower screens, widening doorways to improve accessibility
- Assisting the care recipient and homeowner to access technical advice on major home modifications
- Clinical needs

Home maintenance

- The following are examples of what would be permitted:
 - Cleaning gutters
 - Essential pruning
- The following would not be ok:
 - planting and maintaining crops
 - installation / maintenance / removal of garden beds (unless a trip hazard)
 - landscaping
- Minor home maintenance inside the house is ok – maintenance activities that the consumer previously did for themselves but can't anymore (such as changing a light globe, fixing a broken cupboard)
- This is different to home modifications

Home modifications

What is allowed:

- Minor modifications where there is a safety risk / related to care needs such as:
 - installation of easy access taps, shower hose or bath rails
 - widening a doorway to allow easier access
 - lowering a kitchen bench
 - ramps
 - lifts
 - step modifications
- It must be in line with the 'Building Code of Australia' and in compliance with state and territory building regulations.

Home modifications (cont)

What is not allowed:

- Capital works not related to the care recipient's needs (ie no clinical justification)
- Guidance:
 - windows, roofs, pergolas, sunrooms, etc
 - non-accessible home modifications (complex home modifications must be assessed via an occupational therapist to ensure value for money)
 - home modifications requiring *development applications* or significant changes to the floor plan
 - aesthetic modifications of any kind

Other risks with home modifications

- Home modifications are particularly risky for HCP providers due to:
 - Issues overseeing the quality of work
 - Costs of rectification
 - eg, if the builders cause damage to pipes, you may need to pay to fix them
- Tripartite agreement with consumer and the builder
- One issue to consider: the new draft manual states that Providers are responsible for resolution of disputes with the builder that is engaged

Gap fees

- Cannot use HCP funds to pay for services that are funded (even in part) by MBS or PBS
 - Private health insurance
 - Specialists



Natural therapies

- Natural therapy is not permitted
- There needs to be clear evidence that the treatment will work
 - eg, naturopathy, aromatherapy, kinesiology, yoga – none of these are allowed



Family members as service providers

- DoH and ACQSC taking harder line
- May be acceptable in “thin markets” but never if the person is receiving a carer’s pension
- Need to consider suitability requirements eg:
 - Insurance, police checks, qualifications
 - Service agreement
 - How will you oversee the quality of service?
 - Workers’ compensation
 - Conflict of interest policies

New manual may provide clarity

- Installing internet and phone versus ongoing costs
- IT equipment linked to care needs is ok, but consider what has already been purchased that would have the same function. Should not exceed \$500 a year
- Confirmation that health practitioners can suggest but not demand an item or service
- Specialised furniture (eg adjustable bed / recliner): if in dispute consult an occupational therapist, physiotherapist, registered nurse or medical specialist
- Equipment can be hired – it can also be repurposed after use

Tips

- Make sure you know your policy on expenditure
- Be careful in 'high risk' areas, eg everyday type expenses and home modifications. Say "No" if in doubt or refer it to your manager
- Get your documentation right
- Get things in writing from DoH / ACQSC if in doubt: interpretations change!



Where is home care heading?

New In Home Support Program may make it easier to manage



Case studies

Consumer requests specific Nike shoes...

Case studies

When the consumer asks for a new pair of shoes every month..

Case studies

When the consumer wants a spot lights out the front of their house..

Quiz - now its your turn!



Q1

Which of the following items might be a permitted expenditure?

1. Gluten free bread
2. Meals on wheels
3. Take-away meals from a local restaurant that caters to the client's cultural needs

Q2

Which of the following would not be permitted?

1. Replacing cracked flooring that represents a trip hazard
2. Replacing a rotting window frame that can't open and creates a ventilation issue
3. Replacing stained, worn old carpet

Q3

Which of the following is permitted?

1. Cleaning gutters
2. Replacing old gutters that are leaking
3. Installing a garden bed

Q4

Which of the following would be permitted?

1. Installing blinds in the consumer's lounge room so there is no glare on the TV
2. Widening a doorway
3. Replacing a very old stove top

Presenters



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