

A GUIDE TO

# Support at Home

*Your* Side



# Contents

- 2 Categories
- 6 Care Management
- 7 Classifications
- 8 Contributions
- 9 Additional Funding
- 12 General Information



# UNDERSTANDING Support at Home

Support at Home is the new Aged Care Program that replaces Home Care Packages from 1 November 2025. The changes are driven by the Department of Health and Aged Care in response to the Aged Care Royal Commission and are designed to generate the following positive outcomes for aged care:

- Support for 300,000 more people over the next 10 years.
- Shorter waiting times from assessment to receiving support.
- No cost to any older person for clinical support.
- Means-tested contributions only for services used, no more flat daily fees.
- More tailored support, with eight classifications of care funding levels.
- Three short-term funding streams to complement the ongoing funding.
- Support for home modifications, with up to \$15,000 to make homes safer.
- Fast access to assistive technology and a new equipment loan scheme.

As a registered aged care provider, **Your Side** has been preparing for the change to **Support at Home** for many months, and we can help you adjust to the changes as smoothly as possible. This booklet will guide you through the three key components of Support at Home.

## The Three C's

### Categories

The services you can access and the contribution status.

### Classifications

The level of funding you are approved for.

### Contributions

The amount you may be required to pay for services.

To encourage you to sustain your independence in daily living tasks, **Support at Home** services are designed with a “wellness approach”. This means planning and delivering support to build on an individuals’ strengths, capabilities, and goals.

# Categories

There are three categories of service under Support at Home.

The **Clinical** category covers professional healthcare services to maintain your mental and physical health. This will be fully funded by the government for all participants.

The **Independence** category covers services that keep you out of hospital and residential aged care. There will be a moderate contribution from participants.

The **Everyday Living** category covers services that help you live a full life and maintain a safe environment. This category will have the highest contribution from participants.

## 1. Clinical

Specialised services to help older people maintain or regain functional and/or cognitive capabilities.

### Service Types Included

- Nursing
- Allied Health
- Nutrition
- Care Management

### Client Contributions

There will be **no client contribution for anyone** with assessed clinical care needs in this category.

Clinical category services will be fully funded by the government across the whole aged care system.

## 2. Independence

Support for older people to help them manage activities of daily living and loss of skills required to live independently.

### Service Types Included

- Personal care
- Social support & community engagement
- Therapeutic services
- Respite
- Transport
- Home modifications & Assistive Technology

### Client Contributions

**Full Pensioners** pay 5% of hourly rates.

**Part-pensioners** pay a means-tested contribution of between 5% - 50% of hourly rates.

**Fully self-funded retirees** pay 50% of hourly rates.

## 3. Everyday Living

Support for older people to keep their home safe so they can stay living independently at home.

### Service Types Included

- Domestic Assistance
- Home maintenance and repairs
- Meal preparation and delivery

### Client Contributions

**Full Pensioners** pay 17.5% of hourly rates.

**Part-pensioners** pay a means-tested contribution of between 17.5% - 80% of hourly rates.

**Fully self-funded retirees** pay 80% of hourly rates.

# 1 Clinical Supports



There will be no client contribution for anyone accessing services in the Clinical category. The assessed clinical care needs of clients will be fully funded by the government across the whole aged care system.

## Community based nursing care

This covers nursing and clinical care to assist older people with:

- assessing, treating and monitoring clinical conditions
- administration of medications
- wound care, clinical continence management and skin integrity
- health and clinical education
- links to specialist services

## Allied health & other therapeutic services

This includes services and treatments delivered by the following practitioners and clinicians:

- Aboriginal and Torres Strait Islander health practitioner
- Aboriginal and Torres Strait Islander health worker
- Allied health therapy assistant
- Counsellor or psychotherapist
- Dietitian or nutritionist
- Exercise physiologist
- Music therapist
- Occupational therapist
- Physiotherapist
- Podiatrist
- Psychologist
- Social worker
- Speech pathologist

## Prescribed nutrition

This covers prescribed supplementary enteral and oral dietary products and aids to address functional decline or impairment. If you are eligible, your provider can also help you to apply for the Enteral Feeding for Aged Care Supplement.



# 2 Independence



Contributions for services in the Independence category will be moderate, recognising that many of the services in this group play an important role in keeping people out of hospital and residential aged care.

Full pensioners will pay 5% of the hourly rate. Part-pensioners will be means-tested for a contribution between 5 - 50% of the hourly rate. Self-funded retirees will pay 50% of the hourly rate.



## Personal Care

Assistance with self-care and activities of daily living, including:

- Help with grooming, personal hygiene, mobility and eating
- Support to take medication
- Continence management

## Social Support & community engagement

Access to services that support a person's need for social connection and participation in community life. This might be participating in groups, cultural activities, or attending appointments.

- Assistance to maintain personal affairs
- Expenses to maintain personal affairs
- Digital education and support
- Referrals and links to social, religious, cultural and special interest groups
- Help to access translating and interpreting services
- Personal care
- Social support and community engagement
- Therapeutic services for independent living

## Therapeutic services for independent living

Allied health treatment programs to support social, mental and physical wellbeing. Where possible, the treatment should aim to equip the older person with skills and knowledge to manage their own condition and promote independent recovery.

- Acupuncturist
- Remedial masseuse
- Chiropractor
- Art therapist
- Diversional therapist
- Osteopath

## Other

- Respite care
- Direct transport (driver and car provided)
- Indirect transport (taxi or rideshare service vouchers)



# 3 Everyday Living



Everyday living services will attract the highest contribution rates, recognising that the government does not typically fund these services for people at other stages of life.

Full pensioners will pay 17.5% of the hourly rate. Part-pensioners will be means-tested for a contribution between 17.5 - 80% of the hourly rate. Self-funded retirees will pay 80% of the hourly rate.

## Domestic assistance

This supports you in doing your shopping and general house cleaning.

- Essential light cleaning such as mopping, vacuuming, washing dishes
- Laundering and ironing clothing
- Accompanied and unaccompanied shopping

## Home Maintenance and repairs

Covers assistance and expenses for home maintenance and repairs.

- Essential light gardening, e.g. lawn-mowing, pruning, yard clearance for safe access
- Assistance with home maintenance and repairs to maintain safe living conditions

## Meals

- Meal preparation
- Meal delivery



# Care Management

When your funding becomes available, you are assigned the budget corresponding to your classification. The funds are issued through Services Australia and you must choose a registered aged care provider to administer your budget and organise and deliver the services outlined in your Support Plan.

Care management is the work of experienced Care Partners in care planning; service coordination; monitoring, reviews and evaluation; advocacy; and support and education for clients.

Alternatively called Care Managers, or Care Consultants, Care Partners are staff members who check-in regularly with the care recipient and ask questions to assess if they are well and getting enough support. They have the expertise to detect signs of common conditions, ailments and risks for older people. They also know the prevention and treatment options available and can make recommendations for using your aged care funding to help.

Care Partners have professional knowledge of community, welfare and funding support for special needs in the areas of mental health and dementia, diabetes, Alzheimer's and Parkinsons disease, incontinence and many other conditions.

If you try to manage your own aged care needs – or if you are caring for a loved one and managing their aged care budget – the care recipient may miss out on tools or services that could make their lives much easier or more pleasant.

Many clients report they didn't know what they needed or were eligible for in terms of care, and they rely on the support of an experienced care manager to guide them through the options, not just at the beginning of receiving aged care services but as their health needs change.

Under Support at Home, Care Management is available within all categories. 10% of each client's budget will be held in a pooled funds account by Services Australia for providers to draw down for delivering Care Management services to all their clients.



# Classifications



Under Support at Home your needs will be assessed for aged care services that help you live safely and independently at home. The Assessor will co-design a Support Plan with you that details your goals, strengths and needs.

This creates the basis for the funding and services you can receive from Support at Home. Depending on your level of need, you will be approved for a classification which determines the amount of funding you will be able to access.

There are eight classifications of funding, ranging from low (1) to high (8). You will receive an annual budget for your approved classification, which is issued quarterly. You may request a review if your needs change at any time.

PER	1	2	3	4	5	6	7	8
QTR	\$2,674	\$3,995	\$5,480	\$7,386	\$9,884	\$11,989	\$14,531	\$19,427
YR	\$10,698	\$15,982	\$21,920	\$29,545	\$39,535	\$47,957	\$58,122	\$77,709

Classification budget allocations indicated by the Department of Health and Aged Care on 8 May 2025.

## AGED CARE PROVIDER

When the funding becomes available, you are assigned the budget corresponding to your classification and you must choose a registered aged care provider to organise and deliver the services aligned to your Support Plan.

Contact our Aged Care Support Specialists at Your Side, who can guide and advise you on solutions to best suit your needs within your Support at Home funding.


## QUARTERLY BUDGETS

A Support at Home participant's classification amount will be divided into four approximately equal budgets that each cover three months of the year. Your budget will be held in an account managed by Services Australia.

## UNSPENT FUNDS

Funds you don't use within the quarter can be carried over at a maximum of \$1,000 or 10% of your quarterly budget (whichever is higher) from one quarter to the next.

# Contributions

 Under Support at Home, everyone must make a contribution towards the cost of some services. The Department of Health and Aged Care will still fund the majority of essential aged care services, however, People will have to pay a percentage of the hourly rate of services in the Independent and Daily living categories.

The contribution will vary based on the categories and your personal financial situation. Services under the Clinical Support category will be fully funded by the government. You will only pay contributions for services you receive, unlike under the Home Care Packages system, where you may have paid an income-tested fee.



## FULL PENSIONERS

Australians living on a full pension will be required to pay contributions of:

**Independence** - 5% of the hourly rate of services

**Everyday Living** - 17.5% of the hourly rate of services

## PART PENSIONERS & COMMONWEALTH SENIORS HEALTH CARD HOLDERS

Contributions for part pensioners are based on an assessment of their income and assets. For part pensioners this will be based on their Age Pension means assessment. Your contribution will be within these ranges:

**Independence** - between 5% - 50% of the hourly rate of services

**Everyday Living** - between 17.5% - 80% of the hourly rate of services

To protect self-funded retirees with lower incomes, participants eligible for a Commonwealth Seniors Health Card (CSHC) will have lower contributions. This lower rate will apply whether or not the individual has applied for a CSHC.



## FULLY SELF-FUNDED RETIREES

Self-funded retirees will be required to pay contributions of:

**Independence** - 50% of the hourly rate of services

**Everyday Living** - 80% of the hourly rate of services

## FEE REDUCTION SUPPLEMENT & LIFETIME CAP ON CONTRIBUTIONS

Your aged care provider can help you apply for a financial assistance supplement if you cannot afford to pay Support at Home contributions. You are eligible if you have less than 15% of the single basic age pension amount left after covering all your essential expenses, including your home care fees. If approved, some or all of your contribution fees will be waived temporarily.

There will be a \$130,000 lifetime cap on contributions to protect those who receive aged care for a long time. This is a combined cap with the non-clinical care contribution in residential aged care.

# Additional Funding Streams

In addition to **ongoing** Support at Home funding, you can be assessed by My Aged Care to receive **short-term funding** from the:

- Assistive Technology and Home Modifications Scheme
- Short-term Restorative Pathway
- End of Life Pathway

## Assistive Technology and Home Modifications

If you are eligible for the Assistive Technology and Home Modifications Scheme, you can access up to \$15,000 for home modifications and \$15,000 for assistive technology. Access to home modifications and complex assistive technology products and equipment may require prescription from a suitably qualified health professional. You have a 12 month period to use your budget.

Participants may be required to make a co-contribution towards their assistive technology or home modifications.

### ASSISTIVE TECHNOLOGY FUNDING MAY BE USED TO SUPPORT:

#### Managing body functions:

- blood circulation
- administering medicines
- enhance cognitive function
- orthoses
- memory support
- assist hand or arm function
- incontinence alarms

#### Safety and hygiene:

- speciality clothing
- body protection
- body stabilisation
- dressing and undressing aids
- toileting aids
- bathing aids
- grooming tools

#### Daily domestic activities:

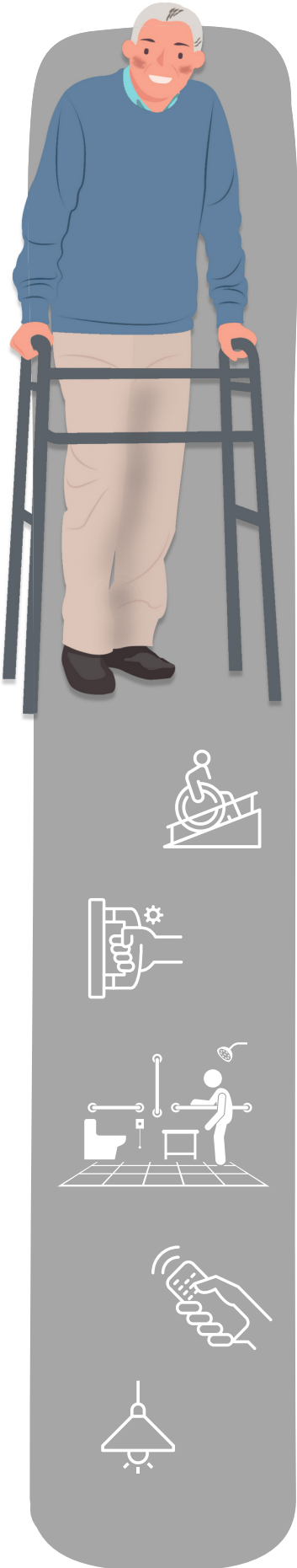
- adaptive products for access and safety
- specialty task lighting
- tools for carrying and transporting items
- products for caring for pets

#### Communication and information:

- vision aids
- voice and speech aids
- reading, writing and drawing
- in-person and distance communications systems
- signalling devices and personal alarms

Continues on next page

## ASSISTIVE TECHNOLOGY FUNDING MAY BE USED TO SUPPORT:



### Mobility:

- walking aids, such as crutches, grips, frames, trolleys
- accessories for walking aids
- vehicle accessories and adaptations for driving
- wheelchairs and wheelchair accessories
- motorised mobility vehicles
- bed and seated position aids and hoists

### Installing equipment and facilities such as:

- accessible bathroom fixtures
- handrails and grab bars
- safety equipment e.g. grips, barriers, rescue equipment
- lighting
- fire-resistant floor coverings
- ramps, elevators, lifting platforms and stairlifts
- pushbuttons, handles and knobs
- door openers and closers
- curtain and sunblind openers and closers
- locks
- remote controls for operating electrical devices

## Restorative Care Pathway

The Restorative Care Pathway under Support at Home will replace the Short-Term Restorative Care (STRC) Programme from 1 July 2025.

Restorative Care Pathway funding is used to implement early intervention and prevention measures through a coordinated program of intensive allied health services designed to build strength and capabilities and to restore function.

Supporting participants to slow functional decline allows them to remain living independently at home for longer.

If you are eligible for the Restorative Care Pathway, you receive an extra budget of **\$6,000 for multidisciplinary allied health services** which must be used over a **16 week period**.

## End of Life Pathway

The End-of-Life Pathway is funding to support older people who have been diagnosed with three months or less to live and wish to remain at home. The funding will enable them to increase the level of services they receive under Support at Home.

A total of **\$25,000 will be available for extra Support at Home services over a three month period**, with a total of 16 weeks to use the funds.

The funding is not for specialist palliative care services, as these are available through state and territory-based specialist palliative care schemes.

The End of Life pathway funding is intended for putting in place additional in-home aged care services to complement those palliative care services.

Older people assessed as requiring end-of-life care will also be able to access assistive technology under the Assistive Technology and Home Modifications Scheme.



The End-of-Life Pathway provides the highest funding amount per day under Support at Home.

# MOVING TO Support at Home



## GRANDFATHERED CLIENTS OF HOME CARE PACKAGES

People who have been receiving Home Care Package funding, have been on the National Priority System, or were approved for a package **before 12 September 2024**, will be 'no worse off' under Support at Home. This means you will receive an equivalent classification of funding to your approved Home Care Package level and you will not be required to make additional contributions for services.

If you are a full pensioner and you previously paid no fees with a Home Care Package as at 12 September 2024, you will not pay fees under Support at Home.

If you were required to pay fees under your Home Care Package as at 12 September 2024, your contribution rates may change but the government warrants you will pay the same or less under Support at Home.

## TRANSITIONING FROM HOME CARE PACKAGES

People who were not receiving Home Care Package funding prior to 12 September 2024, and those who entered the National Priority System since then, will receive an equivalent classification of funding to their approved Home Care Package level.



## SERVICE RATES & CAPPED PRICES

The government is staging the introduction of price caps on services in the new Support at Home program.

From 1 July 2025, in-home aged care providers will continue to set their own prices for Support at Home services. This is what currently occurs in the Home Care Packages (HCP) Program.

Packages From 1 July 2026, government set price caps will apply.



# CONTACT US

## for more information and advice

With so much change ahead, we know it can be confusing and you may have more questions. Our Aged Care Support Specialists are here to help you navigate the change and understand what Support at Home means for you.

We can answer your questions, check your My Aged Care status and advise on the available services you are eligible for. Most importantly, we can help you access the aged care support you need to live the life you want, at home.

**PHONE**  **1300 134 332**

**EMAIL**  **athome@yourside.org.au**

**WEBSITE**  **yourside.org.au**

**Your Side**  
*Every life can be a good one*