



Commonwealth Home Support Programme

Interaction with Home Care Packages

Background

On 1 July 2015, the Australian Government launched the Commonwealth Home Support Programme (CHSP). The CHSP represents the entry tier of the Commonwealth aged care system. In conjunction with Home Care Packages (HCP), residential aged care and other specialised aged care programs, it forms part of an end-to-end aged care system offering frail older people a continuum of care options as their care needs change over time.

The Department is aware that there is still some confusion in the sector regarding the interaction between the CHSP and HCP and in particular, the eligibility of aged care clients to receive government-subsidised services under both of these programs. This fact sheet has been developed to provide further information regarding CHSP eligibility for HCP clients.

CHSP Entry-level Support

As an 'entry-level' program, the CHSP is designed to provide relatively low intensity (small amounts) of a single service or a few services to a large number of frail older people who need only a small amount of assistance or support to enable them to maintain their independence, continue living safely in their homes and participating in their communities.

Home Care Packages

The HCP program provides the second tier of support in the aged care system. The HCP program provides a coordinated package of services to help older people with complex care needs to live independently in their own homes.

There are four levels of home care packages. Each level of home care package provides a different subsidy amount which contributes to the total cost of service and care delivery.

The HCP provides a subsidy towards the cost to support clients with higher intensity, ongoing services and case management to develop a care plan with the HCP client and their service provider which sets out how available package funds from their individualised budget will be used to deliver the care and services the consumer needs.

Interaction between CHSP and HCP

In general, government-subsidised CHSP services should not be provided to people who are also receiving other similar government-subsidised services such as a HCP. This ensures that the CHSP is able to provide entry-level services to as many people as possible who have been assessed as requiring access to these services.

Likewise, the care needs of a person receiving a HCP should be addressed through their package funds and any support services delivered to them (such as meals, transport, nursing) must be paid for out of their individualised HCP budget on a full cost recovery basis. This recognises that HCP clients are already receiving access to government-subsidised services through their package.

HCP clients are also able to purchase additional support services above the value of their package (including from CHSP-funded service providers). However, these additional services must be paid for on a full cost recovery basis and cannot be provided at a government-subsidised rate, unless the client meets one of three defined circumstances (as outlined below).



When can CHSP services be accessed by HCP clients?

There are three defined circumstances in which a HCP client may be able to access some government-subsidised CHSP services in addition to the services they are receiving from their HCP budget.

The three defined circumstances are:

1. For clients on a Level 1 or 2 HCP: where the client's HCP budget is already fully allocated, the client can access additional, short-term or episodic **Allied Health and Therapy** services or **Nursing** services from the CHSP, where these specific services may assist the client to recover after a setback.
2. For clients on a Level 1 to 4 HCP: where the client's HCP budget is already fully allocated and a carer requires it, the client can access additional **planned respite services** under the CHSP (on a short-term basis).
3. For clients on a Level 1 to 4 HCP: in an emergency (such as when a carer is not able to maintain their caring role) and where the client's HCP budget is already fully allocated, additional services under the broader CHSP can be obtained on an emergency or short-term basis. These instances must be time limited, monitored and reviewed.

In addition, in all three of the above circumstances the following rules apply:

- HCP clients must be **assessed through a My Aged Care** assessment organisation to receive these additional CHSP services. The assessment should be undertaken by the assessment organisation that undertook the most recent assessment of the client which is usually the Aged Care Assessment Team (ACAT).
- The additional CHSP services can only be provided at an **entry-level of support** consistent with services provided under the CHSP and not at the level of support that the HCP client is eligible for.
- The additional CHSP services must only be provided on a **short-term, time limited basis**, which should be **monitored and reviewed** by the client's most recent assessment service.
- The additional CHSP services will not be charged to the client's individualised HCP budget, however, the client will be expected to contribute to the cost of these services in line with the CHSP service provider's **client contribution policy**.
- CHSP service providers should only supply additional CHSP services to HCP clients where they have capacity to do so without disadvantaging eligible CHSP clients - that is, CHSP service providers should prioritise people who need CHSP support but do not have access to other support services over people who are already receiving care under the HCP program.

Client's waitlisted for HCP

Clients who have been assessed and approved as eligible for a HCP, but who are waiting to be assigned a package, may be eligible to receive some services under the CHSP as an interim arrangement. The services provided should be at an entry-level of support consistent with the CHSP, not at the level of support of the HCP they have been assessed at.

These clients will generally be managed by their ACAT who will explore these options with the clients and refer to CHSP only where the person is able to continue living safely in their home on these entry time-limited services. If this is not the case, the ACAT will discuss other aged care options with the client, carer and family.

Further information

Further information on access and eligibility for the CHSP, as well as the interactions between the CHSP and other aged care programs is provided in the CHSP Program Manual 2018. The Program



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Manual outlines the operational requirements of the CHSP. It is primarily designed for use by CHSP funded service providers and forms part of their CHSP grant agreement.

The updated CHSP Program Manual 2018 released in April 2018 reflects the most current information and the CHSP operational requirements for service providers delivering services under the new CHSP grant agreements from 1 July 2018.



Frequently asked questions

Who determines if a HCP client requires additional CHSP services?

In the first instance, My Aged Care will need to establish the circumstances of the HCP client and whether they are seeking additional services due to a further decline in functionality or an emergency situation such as the client's carer being unwell.

Re-assessment of existing clients is referred to the assessment service who undertook the client's last assessment. In the case of a HCP client, their last assessment would generally have been undertaken by an Aged Care Assessment Team (ACAT).

Can a HCP client who is receiving an interim Level 1 or 2 HCP also receive additional nursing and allied health services under the CHSP whilst they are waiting for their higher level HCP?

Yes. HCP clients who are receiving an interim HCP (Level 1 or 2) can access additional, short-term or episodic Allied Health and Therapy services or Nursing services under the CHSP, where these specific services may assist the client after an adverse event (such as a fall).

However, these additional services can only be provided on a short-term or time limited basis and at an entry-level in line with the circumstances outlined above and not at the level of support of the HCP that the client is eligible for.

How long can the additional short-term or time-limited services be provided for?

There is no definitive time-frame stipulated by the Department regarding how long the additional short-term or time limited CHSP services can be provided for, as this is likely to vary on a case by case basis and depending on the specific circumstances and needs of each individual client.

My Aged Care assessment services are responsible for developing a support plan with the HCP client, which should identify the needs, goals and additional time limited services required to support the client. The assessment information should also identify what other supports the client is receiving, including their HCP.

Although no specific time limit is stipulated within the CHSP Program Manual due to the complexities outlined above, it is anticipated that up to three months would be considered as 'short-term' services. However, it is expected that some additional CHSP services might be delivered for a longer period where specific circumstances warrant it.

Who is responsible for ensuring that additional CHSP services provided are time-limited, monitored and reviewed?

The HCP client's My Aged Care assessment service (usually the ACAT) is responsible for ensuring that where an existing HCP client is referred for additional short-term CHSP services (in line with the three defined circumstances outlined above), a suitable review date for the client is also included. This should be aligned with the expected end date for the additional CHSP services provided in order to review the client's progress against the short-term goals identified.

CHSP service providers also have a responsibility to regularly review a client's progress against their individual goals and should refer the client to their most recent assessment service for a support plan review or re-assessment if their needs change.

What should a CHSP service provider do if they receive a referral to deliver CHSP services that are above entry-level?

Service providers are funded under the terms and conditions of the CHSP Grant Agreement to deliver a range of entry-level CHSP service types to eligible clients that are referred through My Aged Care. If a service provider receives a referral to provide CHSP services to individual clients above the entry-



level they are funded to provide, they can reject the referral for service within the My Aged Care provider portal.

How many CHSP services can clients who are waitlisted for a HCP receive as an interim measure?

Clients who have been assessed and approved as eligible for a HCP, but who are waiting to receive that package, can receive some services under the CHSP as an interim arrangement but only to an entry-level of support consistent with the CHSP, not at the level of support of the HCP they are eligible for.

The CHSP program manual does not stipulate how many services should be provided to clients at entry level as this is likely to vary on a case by case basis and depending on the specific circumstances and needs of each individual client. However, CHSP services delivered to an entry-level client are expected to be, in total, lower than the Government subsidised cost for services provided under a Level 1 HCP (less than \$8,000 per annum). For example, the significant majority of CHSP clients should only require small amounts of one or two support services.

Can CHSP-funded service provider's record CHSP services provided on a full cost recovery basis in the DSS Data Exchange?

No. The DSS Data Exchange is the program performance reporting tool for the CHSP and should only be used to record program outputs that relate to expenditure of government funding under the program. Services that are delivered on a full cost recovery basis cannot be included as CHSP funded program outputs.