



AGED CARE

FINANCIAL PLANNING

VISTA

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tomorrow*

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If you have concerns or questions, please contact us. This document should be read in conjunction with our Financial Services Guide and Privacy Policy which is available on our website or contacting our office.

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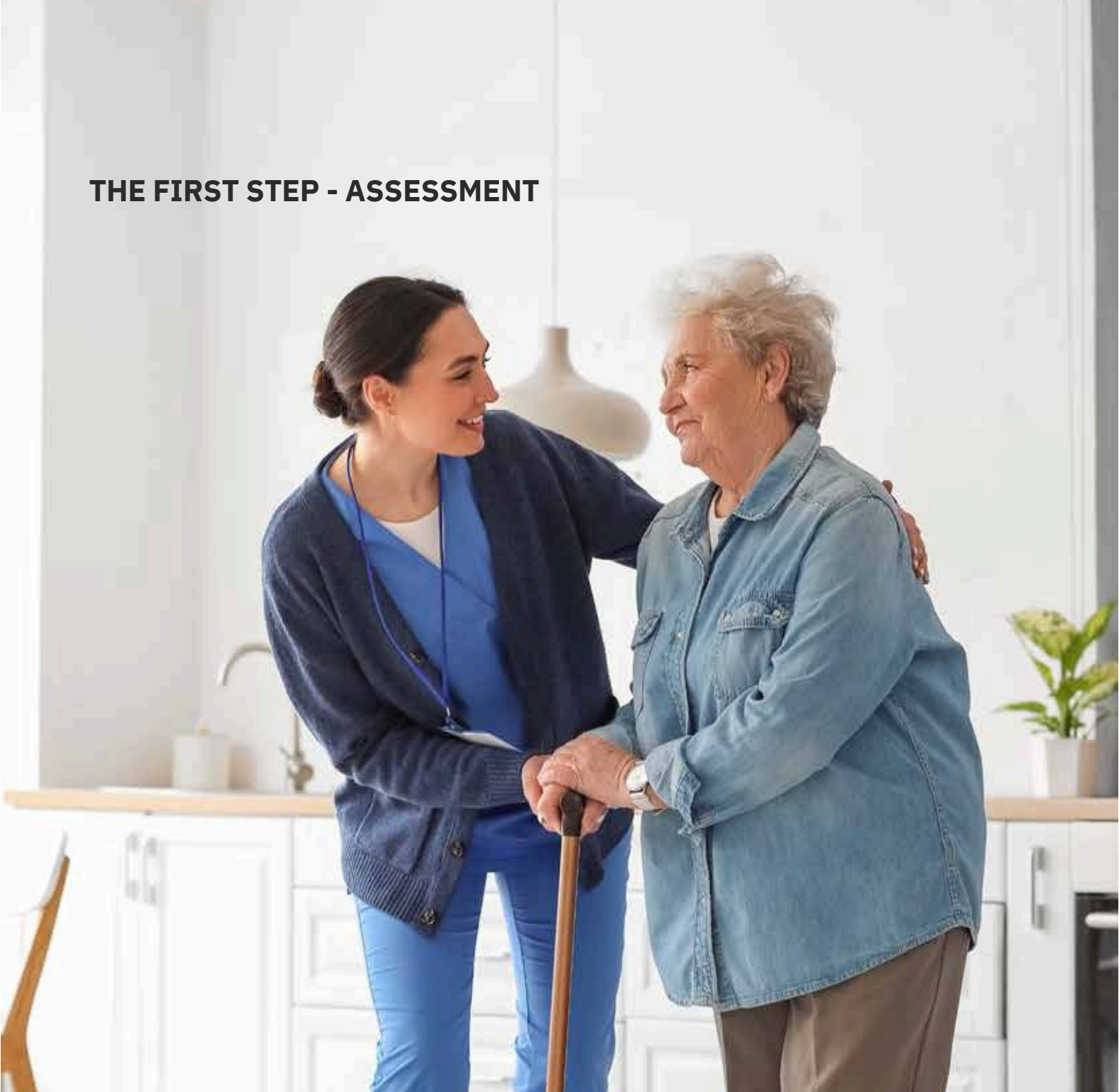
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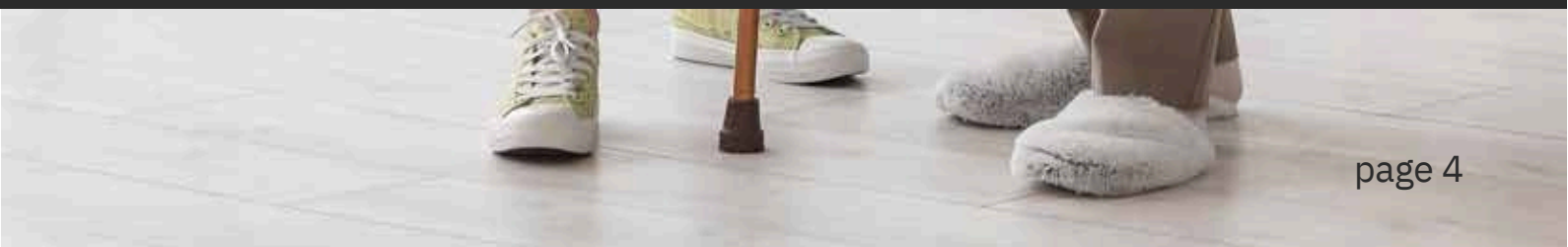
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HOW CAN WE HELP?

THE FIRST STEP - ASSESSMENT



Illness, disability or the passing of the years can make it difficult for you or your loved one to maintain an independent lifestyle. Your first step is a visit to your doctor to discuss you or your loved one's situation. The doctor will then usually refer you to an Aged Care Assessment Team (ACAT). The government provides substantial assistance with the costs of aged care, and eligibility for government support is determined by an Aged Care Assessment Team. You can apply for an assessment online or you can call 'My Aged Care' on 1800 200 422.



The ACAT consists of appropriately qualified people who can visit you or your loved one in your/their home and, following a government-approved guideline, assess how much and what type of care may be required. Following assessment many people make private arrangements for their aged care living.

- They may stay in their own homes, perhaps with help from family or other carers, with the provision of a Home Care Package; or Some may move into a retirement village and retain their independence. Others may need a higher
- level of care earlier than expected and may therefore move into an aged care
- facility for appropriate care. Most people prefer to make their own choice when choosing an aged care facility, and it is worthwhile visiting several facilities. Quite often available places are subject to existing vacancies, so it may be necessary to apply to a few establishments.

LEVELS OF CARE

IN-HOME CARE

Four levels of care:

1. Basic care needs - \$10,597.50 a year
2. Low care needs - \$18,571.30 a year
3. Intermediate care needs - \$40,418.40 a year
4. High care needs - \$61,272.10 a year

As at 01/07/2024.



BEST SUITED FOR

Elderly person/s capable of living safely and independently in their own home.

WHAT IT INCLUDES

Services depend on the level of care required, but include some or a combination of the following:

- Personal care – showering, dressing, grooming, etc.
- Errands – grocery shopping, bill paying, visiting friends, laundry, washing and ironing, etc.
- Meal preparation
- Companionship – outdoor activities, reading, letter writing, assisted exercise, etc.

Nursing, allied health and other clinical services – these services are included under Levels 3 and 4 as more complex clinical needs.

FEE STRUCTURE The cost depends on the means tested income of the client as well as the level of care delivered. The government provides subsidies for home care, but basic fees apply in line with the age pension. Those on incomes in excess of the age pension may be required to pay more. Maximum fees payable are determined by the level of care required and other living expenses: rent, utilities, pharmaceutical, etc.

CARE REQUIRED ON A SHORT-TERM BASIS

RESPIRE CARE Is for those who need some time out from being at home, and who feel they would benefit from a short-term stay in an aged care facility. After assessment, the charges will depend on the level and frequency of services accessed.

TRANSITION CARE PROGRAMS Provide personal and allied health care (eg. physiotherapy) in the person's home or live-in setting for a period of up to 12 weeks. An assessment is required. A fee may be charged to contribute to the cost of care depending on the circumstances.

LEVELS OF CARE

RESIDENTIAL CARE



BEST SUITED FOR

Elderly person/s not able to live safely in their own home or who, due to illness, disability and/or frailty need continuous care.

WHAT IT INCLUDES

- Accommodation services – including bedding, laundry, meals, cleaning and
- toiletries, building maintenance and daily activities. Personal care assistance – including bathing, eating, dressing, moving, communicating, administering medicines and arranging health care appointments.

FEE STRUCTURE

Fees apply to all residents of aged care facilities, depending on level of care and ability to pay. In most cases a contribution towards the cost of aged care is required. Contributions vary and depend upon income, assets and pensioner status.

Fees may include a combination of a means-tested accommodation payment and ongoing care fees, a basic daily care fee and fees for extra optional services. Fees are revised twice yearly in line with pension reviews.

Care recipients have the option of paying their accommodation payment as an upfront refundable deposit and/or as a rent-style periodic payment.

ACCOMMODATION

The four types of fees applicable in aged care are summarised as follows:

ACCOMMODATION COSTS

The government may cover part or all of this as determined by an income and assets means test by Services Australia.

BASIC DAILY CARE FEE

Living costs such as meals, power, laundry.

MEANS TESTED CARE FEE

An additional contribution towards the cost of care, based on a “Means Test” assessment of the resident’s assessable assets and income, and determined by Services Australia. An annual cap and Lifetime cap apply.

EXTRA/ADDITIONAL FEES

Applies where higher accommodation standards or additional services are provided. Fees are variable depending on the facility. Additional Fees may be optional, where Extra fees are generally set.

ACCOMMODATION COSTS Everyone entering an aged care home needs to agree on a room price in writing with their provider before they enter care. Whether or not you need to pay the agreed amount will depend on your means assessment. As a general guide:

- If you're not eligible for government assistance with your accommodation costs (not low means), you will pay the room price you agreed to with your aged care home as an accommodation payment.
- If you are eligible for government assistance (low means), the government will pay some or all of your accommodation costs to your provider. You will be asked to pay an accommodation contribution if the government does not pay the full amount. The amount you contribute is worked out by Services Australia based on your income and assets. You cannot be asked to pay the agreed room price, and your accommodation contribution does not depend on your agreed room price.

Your status as low means or not low means is set based on your income and assets at your date of entry to an aged care home. It does not change while you remain in the same home, regardless of how your financial circumstances may change after entry. If you move to a new aged care home, you will need a new means assessment and your means status may change.



MEANS TESTED CARE FEE This fee is an extra contribution that some people pay, as determined through a means assessment. It is an ongoing fee towards the cost of your personal and clinical care. It is different for everyone, and not everyone will have to pay it. You will need to complete a means assessment to find out the exact amount and Services Australia will let you and your provider know the amount once you enter care. Your means tested care fee does not remain fixed when you enter an aged care home; it can change over time. Annual and lifetime caps apply to the means tested care fee. Once you reach a cap, you cannot be asked to pay any more in means tested care fees. The caps are indexed on 20 March and 20 September each year. The cap amounts that apply to you are those that are current when you reach them, not those that were current when you entered care. The maximum amount of means tested care fees an aged care home can charge you as of 20 September 2024 is:

- \$403.24 per day; with an annual limit
- of \$34,174.16 per year, and
- \$82,018.15 in a lifetime

NOTE: Any income tested care fee you paid while you were receiving home care will also be counted towards the annual and lifetime caps if you move into an aged care home.

WATCH OUT FOR “EXTRAS” Although the government has capped annual and lifetime means-tested care fees, additional charges to cover extras like hairdressing, internet access, excursions, etc, can apply. It’s important to check with the facility first to find out how these extra services are offered and their associated costs. They can sometimes be disproportionate to the services supplied and add up to a substantial amount. Aged care providers must give itemised accounts to the resident breaking down each of these services and the associated charge. Legislation also states that these fees cannot be charged more than one month in advance.

THE FAMILY HOME AND AGED CARE FEES

One of the key tasks for anyone assisting an elderly relative with the move into an aged care facility is to investigate the various fees and charges, some of which are subject to an assets and income means test. As the family home is often the largest asset and can be a source of income if rented out, it's particularly important to understand how it is treated in relation to the means test¹. **ASSETS TEST** For individuals entering aged care the value of the family home is not counted as an asset if it is occupied by:

- a partner or dependent children,
- a carer who is eligible for government income support and who has been living there for at least two years, or
- a close relative who is eligible for income support and has been living there for at least five years.



However, even if that is not the case, the value of the family home that is counted as an asset is capped at \$206,039.20. If the actual value is less than the cap then market value applies. For a couple where neither partner is living in the family home, half of the net market value of the home will be included as an asset for each of them, up to the cap. INCOME TEST For people who entered aged care between 1 July 2014 and 31 December 2015, rent on the family home is exempt from the income test only if they are paying some level of daily accommodation payment. Where aged care commenced after 1 January 2016, net rental income is assessable. EXPERT HELP Everyone's story is different so it's crucial to seek professional advice before making any final decisions about selling a family home or keeping and renting it.

More information: My Aged Care website www.myagedcare.gov.au – “Considering aged care home - Fees and charges”; “Income and assets assessment for aged care home costs” ¹ Note that there are some important differences in the way the family home is assessed by Centrelink and the Department of Veterans' Affairs (DVA) for aged pension or DVA pension purposes. This article only covers the rules that apply to aged care. ² As at 20 March 2023.



AGED CARE FINANCIAL PLANNING

HOW CAN WE HELP?

Leaving your own home and entering an aged care home isn't an easy decision. But it doesn't have to be a daunting experience. An aged care home can give you the care and services you need to maintain your quality of life. Once that decision has been made, I can help prepare a financial plan that works out what you need to do with your assets and income to be able to afford the costs associated with living in aged care, this includes what to do with your home. I can also help with all Centrelink related matters and provide you with an estimate of your entitlements each step of the way. I will guide and assist you every step of the way in a compassionate and easy to understand manner, to ensure the transition into aged care is as smooth as possible, on your financial position. Contact me to make a free, no-obligation appointment and let's begin with a chat.

Call us today!



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