life care

Shaping positive ageing lifestyles

INFORMATION SHEET - MEANS TESTING

CHURCHES OF CHRIST LIFE CARE LIMITED

Information sheet - Means Testing

A copy of our information sheet on means testing (referred to in clause 28 of our Support at Home service agreement) is set out below.

What this information sheet is about

Before you enter into an agreement with us to receive funded aged care services in the home or community, it is important that you understand how your individual contribution towards the cost of services is worked out, and your obligations about providing information.

This information sheet gives a high-level overview of how means testing works for services under the Support at Home program.

It explains the information you need to provide, and how the outcome of your means testing determination affects the amount you must contribute towards the cost of services.

Means testing information - why this matters

If you receive Commonwealth-funded aged-care in your home or community, you may be asked to pay a share of the cost. The amount you pay is called your individual contribution. The law sets clear rules on:

- how your contribution is set;
- what happens if you choose not to give financial details; and
- when you must tell the Government about changes to your circumstances.

This sheet explains the essentials. If you would like more detailed information, you can refer to the official sources below.

Official sources of information

The primary official sources of this information are the *Aged Care Act 2024* (Cth) **(Aged Care Act)** and the *Aged Care Rules 2025* (Cth) **(Aged Care Rules)**. You can get copies of these from the Australian Government's Federal Register of Legislation at https://www.legislation.gov.au/.

You can also find further Support at Home resources published by the Department of Health, Disability and Ageing at https://www.health.gov.au/our-work/support-at-home/resources.

Who decides your contribution?

The System Governor (the Secretary of the Department of Health and Aged Care) sets your individual contribution rate for each service category.

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The decision is based on the criteria and methods in the Aged Care Rules.
You receive written notice of your rate within 14 days of the decision. The notice includes:

- the percentage you must pay for each category;
- the date the rate starts; and
- your duty to report changes in your circumstances.

Service categories

For Support at Home, the law groups services into three 'means testing categories':

- Clinical supports – such as health and nursing care;
- Independence – help that maintains or restores your ability to live at home;
- Everyday living – including meals, cleaning and similar daily services.

Means testing classes and contribution rates

Your contribution rate depends on your financial position. The System Governor places you in one of four classes, shown in the left-hand column of the table below. Standard contribution percentages (before any special calculations) are:

Means Testing Class	Clinical supports	Independence	Everyday living
Full pensioner	0%	5%	17.5%
Part pensioner*	0%	variable (see below) between 5 - 50%	variable (see below) between 17.5 - 80%
Seniors Health Card holder*	0%	variable (see below) between 5 - 50%	variable (see below) between 17.5 - 80%
Self-funded retiree (includes anyone with 'means not disclosed status')	0%	50%	80%

There are special rules that reduce these rates for some people - for example, grandfathered home care package recipients.

Part pensioners and Seniors Health Card holders - how the variable percentages are worked out

The System Governor uses a set formula (Rules 314-55 to 314-85). In short:

- Your income and assets above free areas reduce the Government subsidy.
- The more your means exceed those free areas, the higher your percentages for Independence and Everyday living, up to a cap of 50 % and 80 % respectively.
- You will receive the exact figures in your determination letter.

Means not disclosed status - what if you do not give financial details?

You may elect not to give financial information, or the System Governor may decide you have not supplied the required details within 28 days.
You will then be given "means not disclosed status".

The consequence is that you are treated as a self-funded retiree, so you pay 50 % of Independence costs and 80 % of Everyday living costs.

You can end this status at any time by giving the missing information. A new, usually lower, rate will then be set.

Your obligations

- **Provide accurate information** If the System Governor asks for details about your income, assets, home ownership or marital status, you must respond within 28 days.
- **Notify changes** Tell the System Governor if your finances or personal situation change in a way that could affect your contribution. Use the approved form and do so within the period set in the Rules (usually 28 days).
- **Keep copies** of letters and decisions. They prove when rates start and what you must pay.

What if your circumstances change?

The System Governor can vary or revoke your contribution rate if:

- Services Australia or DVA changes your pension or card status;
- You report a change (for example, you sell property, receive an inheritance or your relationship status changes);
- The System Governor finds the original decision was incorrect.

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You will get a new notice showing the revised rates and start date.

Questions or disputes

If you think your rate is wrong, you may ask the System Governor for a reconsideration. Follow the steps in your decision letter.

We will help you understand this process.

Need help?

- Call My Aged Care: 1800 200 422
- Speak to an independent aged-care advocate: 1800 700 600 (Older Persons Advocacy Network)
- Visit: myagedcare.gov.au

Keep this sheet handy. It explains the rules that determine what you pay and what you must do.

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This information sheet is Schedule 9 as per the service agreement