

Frequently Asked Questions for

Support at Home

Support at Home Overview

1. What is Support at Home?

The Support at Home program is a new Government initiative starting on 1 November 2025. It will change how aged care is delivered at home. It aims to meet the needs of older people better by providing more services and easier access to resources.

2. What is changing from 1 November 2025?

Support at Home will replace the Home Care Package (HCP) and Short-Term Restorative Care (STRC) programs. The Commonwealth Home Support Programme (CHSP) will transition no earlier than 1 July 2027.

3. What are the key changes under Support at Home?

The key changes under Support at Home include:

- Moving to a quarterly budget
- Basic Daily Care Fee (BDCF) and Income Tested Care Fee (ITCF) replaced by participant contributions
- A defined service list
- No separate administrative/package management charges
- Care management funding set at 10% of government subsidy per quarter and pooled across participant base
- Introduction of separate funding for short-term care pathways – Restorative Care, End-of-Life Care
- Introduction of Assistive Technology and Home Modifications (AT-HM) Scheme.

Transitioning from Home Care Package to Support at Home

4. What will happen to my HCP under the new system?

You will automatically transition to Support at Home from 1 November 2025. Your current level of funding will stay the same and you can continue receiving services with your current provider unless you choose to change.

5. What will happen to my unspent funds?

You will keep your existing unspent funds when transitioning to Support at Home. These funds can be used to top up services if your quarterly budget is used up, or for assistive technology/home modifications before accessing the new AT-HM Scheme. Once accumulated funds exhaust, clients will move to Support at Home rollover fund model of \$1,000 or 10% (whichever is higher) of quarterly budget can be retained for the next quarter.

6. Is there anything I need to do to prepare for 1 November 2025?

Rest assured, your Care Advisor will contact you to discuss your care plan and services and ensure you are prepared for Support at Home.

Funding under Support at Home

7. Will my current HCP package level be the same under Support at Home?

Home Care Package levels 1 through 4 will remain. When additional funds are required, you may be reassessed for a higher level, and at that time, you will be aligned with a Support at Home classification.

8. What will happen to unspent funds after 1 November 2025?

You can carry over up to \$1,000 or 10% of your quarterly budget (whichever is higher) to the next quarter.

9. How do Supplement payments work under Support at Home?

Under the Support at Home program, supplements will continue to be paid for specific complex, or high care needs to assist individuals to remain independent at home. Eligibility is based on care need and circumstance. E.g. Dementia and Cognition Supplement (grandfathered only), Oxygen, Enteral Feeding etc. Your Care Advisor or Care Partner Team will discuss what is relevant to you.

10. What happens in the future if I need to save up for the purchase of equipment?

There is a new type of funding for Assistive Technology and Home Modifications (AT-HM), which you may be eligible for. Your Care Advisor or Care Partner Team can assist you with this.

11. How does Care Management work under Support at Home?

Ten percent (10%) of your quarterly budget will be set aside and pooled specifically for care management activities such as care planning, coordination and reviews.

Fees/Contributions under Support at Home

12. How much will I pay under Support at Home?

It is expected that you will pay a contribution based on the requirements below:

- Your participant status (grandfathered, transitioned, new to Support at Home)
- Your pension status and
- The services you receive.

13. How do I determine my participant status?

Your Care Advisor will be happy to assist you with this. Participants who were receiving a Home Care Package, were on the National Priority System, or assessed as eligible for a package on or before 12 September 2024, are considered to have grandfathering arrangements. These arrangements include a special discounted rate for contributions. This means you will pay the same or lower contributions that you are liable for under the home care packages program (under HCP that means the BDCF for all participants, and ITCF for Part-Pensioner or Self-Funded Retiree).

14. Will my Income Tested Care Fee (ITCF) and Basic Daily Care Fee (BDCF) change under Support at Home?

Fees under the Support at Home program will change. Under the Home Care Package model, Catholic Healthcare was able to waive the BDCF. Under Support at Home, client contributions will be mandated under the new government aged care model. The Support at Home contributions replace the ITCF and BDCF that were applied as a daily rate.

15. How do I work out my contribution rate?

You will receive a letter from Services Australia that outlines your contribution rate. The percentage will then be applied to each service under Independence and Everyday Living categories once the service is delivered. Clinical services are exempt from contributions.

There is a contribution estimator available on the Government My Aged Care website:

[Contribution Estimator and Funding Arrangement Examples](#)

Useful Links

- [Support at Home – Catholic Healthcare Website](#)
- [Support at Home – Fact sheet | Australian Government Department of Health and Aged Care](#)
- [Support at Home service list | Australian Government Department of Health and Aged Care](#)
- [Restorative Care Pathway Fact Sheet | Australian Government Department of Health and Aged Care](#)
- [End-of-Life Pathway Fact Sheet | Australian Government Department of Health and Aged Care](#)
- [Assistive Technology and Home Modifications List \(AT-HM List\) | Australian Government Department of Health and Aged Care](#)
- [What to do if you have a complaint | Aged Care Quality and Safety Commission](#)

Disclaimer

The information in this document is correct as at 19 August 2025.

The information has been sourced through the Australian Government Department of Health and Aged Care.