

Pension Based Fees

**Summary** This Information Bulletin provides an update to the pension-based fees following the bi-annual Commonwealth Government review.

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## Pension Based Fees

### PURPOSE

This Information Bulletin provides an update of the pension-based fees, following the bi-annual Commonwealth Government review. The advised charges are effective from 20 March 2024.

This Information Bulletin is to be read in conjunction with NSW Health Policy Directive *Charging Arrangements for Pension Based Scale of Fees* ([PD2021\\_009](#)).

### KEY INFORMATION

All rates listed in this document below are daily rates of the pension-based fees.

Nursing Home Type Patients	
Patient Contribution (Public Patient)	75.55
Patient Contribution plus Fund Benefits (private patient)	248.15

### State Government Residential Aged Care Facilities (SGRACF) subject to the *Aged Care Act 1997* (Commonwealth)

Residents who entered an aged care facility before 1 July 2014 Maximum Basic Daily Fee for Residents Eligible for Basic Daily Fee Supplement (Historical)	
Standard Resident Contribution	61.27
Residents who entered an aged care facility before 1 July 2014 Residential Care	
Standard Resident Contribution	61.96

The Basic Daily Fee Supplement is payable to SGRACF on behalf of non-pensioners who **do not** hold a Commonwealth Seniors Health Card and who were in permanent residential care on 30 June 2012.

To receive the supplement, providers must notify the Services Australia that it will charge eligible residents no more than the rates above.

Residents entering an aged care facility on or after 1 July 2014 or are opting for the Post 1 July 2014 fee arrangement	
Basic Daily Fee	61.96

### **Flexible aged care services subject to the *Aged Care Act 1997* (Commonwealth)**

Residential Aged Care Services provided in Multipurpose Services (MPS)	
Standard Resident Contribution	69.50
Respite Resident Contribution	57.73
Transitional Aged Care Services (TACS)	
Residential places (hospital/ facility)	61.96
Community based places	12.75

Community-based Transitional Aged Care places involve the provision of a package of care in the care recipient's own home for a period up to 12 weeks, where the frequency and hours of service may vary according to the care recipient's needs.

Recipients are to be charged in fortnightly blocks, which equates to 14 times the daily rate. The counting of days includes all calendar days during the package of care from the date of commencement to the date of completion inclusive. For example, if a person's length of stay on the program is eight weeks and six days, the recipient contribution will be 62 days. This will be invoiced on a fortnightly basis.

### **Residential services which are not subject to the *Aged Care Act 1997* (Commonwealth)**

Such as transitional behavioural assessment and intervention service (t-basis) units.

Residential Services not subject to the Aged Care Act	75.55
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### **Patients of public psychiatric hospitals and residents of homes and home sections of hospitals**

Excluding approved aged care facilities under the *Aged Care Act 1997* (Commonwealth)

Persons in receipt of a Pension	
Single Rate	64.75
Partner Rate (each)	51.25
Partnered – Illness separated (each)	64.75

**Persons in receipt of benefits**

Single without a dependant benefit	
Under 18 years of age at home	30.85
18-21 years of age at home	33.95
Under 22 years of age away from home	43.65
22 years of age and over away from home	50.15
Single with a dependant benefit	
Under 22 years of age	52.40
22 years of age and over	53.00
Partner rate (each) without dependant benefit	
Under 22 years of age	43.65
22 years of age and over	46.75
Partner rate (each) with dependant benefit	
Under 22 years of age	46.40
22 year of age and over	46.75
Non-Pensioner patients	
Standard Contribution	64.75