



Australian Government

Veterans' Entitlements Act 1986
Military Rehabilitation and Compensation Act 2004
Australian Participants in British Nuclear Tests (Treatment) Act 2006

Veterans' Affairs (Treatment Principles – Updating Home and Community Care (HACC) References and other References) Amendment Instrument 2015

Instrument 2015 No.R46/MRCC46

I, Michael Ronaldson, Minister for Veterans' Affairs, as required by subsection 90(5) of the *Veterans' Entitlements Act 1986* (VEA), subsection 286(3) of the *Military Rehabilitation and Compensation Act 2004* (MRCA) and subsection 16(7) of the *Australian Participants in British Nuclear Tests (Treatment) Act 2006* (APBNT(T)A), approve:

- (a) under the VEA — the making by the Repatriation Commission of the legislative instrument in Schedule 1.
- (b) under the MRCA — the making by the Military Rehabilitation and Compensation Commission of the legislative instrument in Schedule 2.
- (c) under the APBNT(T)A — the making by the Repatriation Commission of the legislative instrument in Schedule 3.

Dated this 9th day of September 2015

Michael Ronaldson

MICHAEL RONALDSON

The Repatriation Commission (RC) makes the legislative instrument in Schedule 1 under subsection 90(4) of the *Veterans' Entitlements Act 1986* (VEA) and makes the legislative instrument in Schedule 3 under subsection 16(6) of the *Australian Participants in British Nuclear Tests (Treatment) Act 2006* (APBNT(T)A).

The Military Rehabilitation and Compensation Commission (MRCC) makes the legislative instrument in Schedule 2 under subsection 286(2) of the *Military Rehabilitation and Compensation Act 2004* (MRCA).

Dated this 3rd day of September 2015

The Seals of the)
Repatriation Commission and) SEAL

Military Rehabilitation and Compensation Commission)
were affixed hereto in the) SEAL
presence of:)

Simon Lewis

Craig Orme

Major General Mark Kelly

.....
SIMON LEWIS

CRAIG ORME
AM CSC

MAJOR GENERAL MARK KELLY
AO DSC

RC PRESIDENT/MRCC CHAIR

DEPUTY PRESIDENT

RC COMMISSIONER/MRCC MEMBER

Rear Admiral Robyn Walker

Jennifer Taylor

Air Vice-Marshal Tony Needham

.....
REAR ADMIRAL ROBYN WALKER
AM RN

MS JENNIFER TAYLOR

AIR VICE-MARSHAL TONY NEEDHAM
AM

MRCC MEMBER

MRCC MEMBER

MRCC MEMBER

Name

- 1 This instrument is the *Veterans' Affairs (Treatment Principles – Updating Home and Community Care (HACC) References and other References) Amendment Instrument 2015*.

Commencement

- 2 This instrument is taken to have commenced on 1 July 2015.

Authority

- 3 This instrument is made under the *Veterans' Entitlements Act 1986*, the *Military Rehabilitation and Compensation Act 2004* and the *Australian Participants in British Nuclear Tests (Treatment) Act 2006*.

Schedules

- 4 Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1

The *Treatment Principles* (Instrument 2013 No. R52) is varied in accordance with Part A.

Part A

Variations to the Treatment Principles

1 Paragraph 1.4.1 (definitions)

the definition of “excluded service”, substitute:

“excluded service” means:

- (a) a *HACC Review Agreement (National Partnership) service*; or
- (b) a *Commonwealth Home Support Programme service*;

that is the same type of service that may be provided under the *Veterans’ Home Care Program* as a *Home Care service (category A)* or *Home Care service (category C)*.

Note : the intention is that a Home Care service (category A), Home Care service (category B) and Home Care service (category C) are mutually exclusive.

the definition of “Home and Community Care Program service”, substitute:

“Home and Community Care Program service” means a service provided to a person under the auspices of the *Home and Community Care Act 1985* when that Act was in force.

Note: in 2015 there was a proposal to repeal the *Home and Community Care Act 1985* by the *Omnibus Repeal Day (Spring 2014) Act 2014*.

definition of “Home Care service (category B)”, substitute:

“Home Care service (category B)” means:

- (a) for an *entitled person* in Victoria or Western Australia at a time when the *Commonwealth Home Support Programme service* in Victoria or Western Australia, as the case may be, does not include a service that would satisfy the description of a *HACC Review Agreement (National Partnership) service* — the provision of treatment to the person pursuant to the *Veterans’ Home Care Program* that would satisfy the description of:
 - (i) a *HACC Review Agreement (National Partnership) service* ;or
 - (ii) a *Commonwealth Home Support Programme service* other than such a service that would satisfy the description of a *HACC Review Agreement (National Partnership) service*; or
 - (ii) both services in (i) and (ii);

but does not mean the provision of treatment pursuant to the *Veterans’ Home Care Program* that would satisfy the description of an *excluded service*; or

- (b) for an *entitled person* in a State or Territory at a time when the *Commonwealth Home Support Programme service* in the State or Territory in which the person is in includes a service that would satisfy the description of a *HACC Review Agreement (National Partnership) service* — the provision of treatment to the person pursuant to the *Veterans' Home Care Program* that would satisfy the description of a *Commonwealth Home Support Programme service* but does not mean the provision of treatment pursuant to the *Veterans' Home Care Program* that would satisfy the description of an *excluded service*.

Note 1: as at 1 July 2015 some services under the *Commonwealth Home Support Programme* (CHSP) (generally speaking CHSP services are a Home Care service (category B)) were not provided in Victoria or Western Australia. The services in question are known as “HACC services”. HACC services are home or community care services that were originally provided under agreements under the *Home and Community Care Act 1985* (the HACC Act) except in Victoria and Western Australia where similar services were provided under Bilateral Agreements with the Commonwealth Government. At or about 2008/2009 HACC services in States/Territories (except Victoria/Western Australia) were provided under agreements known as “National Partnership Agreements”. The National Partnership Agreements were made under the auspices of the Intergovernmental Agreement on Federal Financial Relations of 2008 and the *Federal Financial Relations Act 2009*. In short, the original agreements under the HACC Act were deemed to be National Partnership Agreements and the HACC Act was rendered obsolete. On 1 July 2015, in all States/Territories except Victoria/Western Australia, HACC services ceased being provided under National Partnership Agreements and were provided under CHSP. However as at 1 July 2015 HACC-type services in Victoria/Western Australia continued to be provided under the Bilateral Agreements between those States and the Commonwealth.

Note 2: the intention of paragraph (a) of this definition is to enable the Department of Veterans' Affairs (DVA) to pay for HACC services for an entitled person in Victoria and Western Australia in addition to paying for services for the person under the Commonwealth Home Support Programme service until the Commonwealth Home Support Programme applies fully in those States and includes the HACC services. The intention in paragraph (b) of this definition is that where the Commonwealth Home Support Programme operates fully in Australia i.e. includes HACC services, DVA will only pay, under this definition, for services under the Commonwealth Home Support Programme. There is to be no potential for double-dipping.

the definition of “residential care amount”, substitute:

“daily care fee” means:

- (a) in relation to an *entitled person* in a hospital — an amount determined under the *Health Insurance Act 1973* to be the resident contribution applicable under that Act to a nursing-home-type patient of that hospital; or
- (b) in relation to an *entitled person* (including a former *prisoner of war* or a person awarded the Victoria Cross) who is receiving, or received, *residential care* — the maximum daily amount of resident fees worked out under section 52C-3 of the *Aged Care Act 1997*.

the definition of “transition care”, substitute:

“**transition care**” has the meaning it has in section 106 of the *Subsidy Principles 2014*.

2 Paragraph 1.4.1 (definitions)

insert:

“**Commonwealth Home Support Programme service**” means a service provided to a person under the programme administered by the *Department of Social Services* called the “Commonwealth Home Support Programme” and includes any service provided under that programme as the name of the programme may change from time to time.

“**HACC Review Agreement (National Partnership) service**” means a service of home or community care that could be, or could have been, provided to a person under an agreement between the Commonwealth and a State or the Northern Territory — being an agreement made under the *Home and Community Care Act 1985* but deemed to be a National Partnership Agreement in the context of the Intergovernmental Agreement on Federal Financial Relations of 2008, made under the *Federal Financial Relations Act 2009*.

3 Paragraph 1.4.1 (definitions)

the note to “emergency short term home relief”, substitute:

Note: emergency short term home relief is not relevant to the calculation of the *daily care fee* for *residential care or residential care (respite)*.

the note to “in-home respite”, substitute:

Note: in-home respite is not relevant to the calculation of the *daily care fee* for *residential care or residential care (respite)*.

4 Paragraph 2.2.4

paragraph (a)(ii)

omit:

residential care amount

substitute:

daily care fee

paragraph (b)(ii)

omit:

residential care amount

substitute:

daily care fee

Note (3)

omit wherever occurring:

residential care amount

substitute:

daily care fee

Note (6)

substitute:

Note (6): the *daily care fee* is the amount worked out under s.52C-3 of the *Aged Care Act 1997*.

5 Paragraph 9.3.2

omit:

residential care amount

substitute:

daily care fee

6 Paragraph 10.1.5 (the Note)

substitute:

Note: under the *Aged Care Act 1997* the Commonwealth is not necessarily liable to pay resident fees such as the *daily care fee*. Liability to pay that amount may be accepted by the *Commission* under the *Principles*.

7 Paragraph 10.2 (the Heading)

substitute:

Daily care fee for former prisoners of war

8 Paragraph 10.2.1

omit wherever occurring:

residential care amount

substitute:

daily care fee

9 Paragraph 10.3 (the heading)

omit:

residential care amount

substitute:

daily care fee

10 Paragraph 10.3.1

omit:

residential care amount

substitute:

daily care fee

11 Paragraph 10.4

omit:

residential care amount

substitute:

daily care fee

12 Paragraph 10.6.2

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

13 Paragraph 10.6 2 (Note (1))

omit:

residential care amount

substitute:

daily care fee

14 Paragraph 10.6 2 (Note (4))

substitute:

Note (4):the *Subsidy Principles 2014* (Principles) are made under subsection 96-1 of the *Aged Care Act 1997*. Under s.23 of the Principles the Secretary of the Department that administers the *Aged Care Act 1997* may increase the number of days a person may be provided with residential care as respite care by 21.

15 Paragraph 10.6.2 (the Table and definitions)

substitute:

LIMITS OF FINANCIAL RESPONSIBILITY ACCEPTED BY THE REPATRIATION COMMISSION FOR RESIDENTIAL CARE (RESPITE)

<i>category of patient</i>	<i>type of care; max.period of care permitted; type of care costs accepted</i>	<i>type of care; max.period of care permitted; type of care costs accepted</i>
	<i>residential care (28 day respite)</i> up to 28 days (inclusive) in a Financial year	<i>residential care (respite) other than residential care (28 day respite)</i> upon an entitled person exhausting 28 days of <i>residential care (28 day respite)</i> in a Financial year — between and including 29 to 63 days* in that Financial year
POW	RCS + DCF	RCS + DCF
VC	RCS + DCF	RCS + DCF
Other person	RCS + DCF	RCS

For the purposes of this table:

‘**POW**’ means an *entitled veteran* who is a former *prisoner of war*.

‘**VC**’ means an *entitled veteran* awarded the Victoria Cross.

‘**Other person**’ means an *entitled person* other than a ‘POW’ or a ‘VC’.

‘**RCS**’ means the *Commission* will accept financial responsibility for the *residential care subsidy* (including any *veterans’ supplement*).

‘**DCF**’ means the *Commission* will accept financial responsibility for the *daily care fee*.

‘**RCS + DCF**’ means the *Commission* will accept financial responsibility for the *residential care subsidy* (including any *veterans’ supplement*) and the *daily care fee*.

* or for such further period permitted under the *Subsidy Principles 2014*.

16 Paragraph 10.6.3

omit:

residential care amount

substitute:

daily care fee

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

17 Paragraph 10.6.4

omit:

residential care amount

substitute:

daily care fee

18 Paragraph 10.6.5

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

19 Paragraph 10.6.6

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

20 Paragraph 10.6.7(2) (the Note)

omit:

residential care amount

substitute:

daily care fee

21 Paragraph 10.6.8 (Note (2))

omit:

residential care amount

substitute:

daily care fee

22 Paragraph 10.11.1(a)

omit:

Flexible Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

omit Note (2).

23 Paragraph 10.11.1(b)(ii)

omit:

section 15.33 of the *Flexible Care Subsidy Principles 1997*

substitute:

paragraph 111(3)(a) of the *Subsidy Principles 2014*

24 Paragraph 10.11.2(a) (Note 2)

substitute:

Note 2: The *Approval of Care Recipients Principles 1997*, the *Subsidy Principles 2014* and the *User Rights Principles 1997* are relevant to *transition care* (flexible care).

25 Paragraph 10.11.2 (b)(i)

omit:

15.33 of the *Flexible Care Subsidy Principles 1997*

substitute:

paragraph 111(3)(a) of the *Subsidy Principles 2014*

26 Schedule 1

substitute:

SCHEDULE 1 DATES FOR INCORPORATED DOCUMENTS
--

The date for :

1. Notes for Local Medical Officers (paragraph 1.4.1);
2. Department of Veterans' Affairs Fee Schedules for Medical Services (paragraph 3.5.1);
3. Notes for Allied Health Providers (paragraphs 3.5.1 and 7.1A.1);
4. Optometrist Fees for Consultation (paragraph 3.5.1);
5. DVA Schedule of Fees Orthoptists (paragraph 3.5.1);
6. Pricing Schedule for visual aids (paragraph 3.5.1);

7. The fifth edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (commonly known as DSM-5) (paragraph 2.4.2A);
8. Fee Schedule of Dental Services for Dentists and Dental Specialists (paragraph 3.5.1);
9. Fee Schedule of Dental Services for Dental Prosthetists (paragraph 3.5.1);
10. Chiropractors Schedule of Fees (paragraph 3.5.1);
11. Diabetes Educators Schedule of Fees (paragraph 3.5.1);
12. Dietitians Schedule of Fees (paragraph 3.5.1);
13. Exercise Physiologists Schedule of Fees (paragraph 3.5.1);
14. Occupational Therapists Schedule of Fees (paragraph 3.5.1);
15. Osteopaths Schedule of Fees (paragraph 3.5.1);
16. Physiotherapists Schedule of Fees (paragraph 3.5.1);
17. Psychologists Schedule of Fees (paragraph 3.5.1);
18. Podiatrists Schedule of Fees (paragraph 3.5.1);
19. Social Workers Schedule of Fees (paragraph 3.5.1);
20. Clinical Counsellors Schedule of Fees (paragraph 3.5.1);
21. Speech Pathologists Schedule of Fees (paragraph 3.5.1);
22. Australian Government Department of Veterans' Affairs Classification System and Schedule of Item Numbers and Fees — Community Nursing Services (paragraph 6A.4.2(b));
23. Notes for Coordinated Veterans' Care Program Providers (Part 6A);

24. Rehabilitation Appliances Program (RAP) National Guidelines (paragraph 11.2A.1);
25. RAP National Schedule of Equipment (paragraph 11.2A.1);
26. Veterans and Veterans Families Counselling Services (VVCS) Outreach Program Counsellors (OPC) Provider Notes (paragraph 1.4.1 and 7.1A.1);
27. Veterans and Veterans Families Counselling Service (VVCS) Outreach Program Counsellors (OPC) Schedule of Fees (paragraph 3.5.1);
28. General information about VVCS – Veterans and Veterans Families Counselling Service (paragraph 1.4.1);
29. Better Access to Psychiatrists, Psychologists & General Practitioners through the Medical Benefits Schedule Initiative

<http://www.health.gov.au/internet/mentalhealth/publishing.nsf/Content/better-access-through-mbs-1>;
30. Gold Card (paragraph 1.4.1);
31. White Card (paragraph 1.4.1).

is 1 August 2015.

Schedule 2

The *MRCA Treatment Principles* (Instrument 2013 No. MRCC53) is varied in accordance with Part A.

Part A

Variations to the MCRA Treatment Principles

1 Paragraph 1.4.1 (definitions)

the definition of “excluded service”, substitute:

“excluded service” means:

- (a) a *HACC Review Agreement (National Partnership) service*; or
- (b) a *Commonwealth Home Support Programme service*;

that is the same type of service that may be provided under the *MRCA Home Care Program* as a *Home Care service (category A)* or *Home Care service (category C)*.

Note : the intention is that a Home Care service (category A), Home Care service (category B) and Home Care service (category C) are mutually exclusive.

the definition of “Home and Community Care Program service”, substitute:

“Home and Community Care Program service” means a service provided to a person under the auspices of the *Home and Community Care Act 1985* when that Act was in force.

Note: in 2015 there was a proposal to repeal the *Home and Community Care Act 1985* by the *Omnibus Repeal Day (Spring 2014) Act 2014*.

definition of “Home Care service (category B)”, substitute:

“Home Care service (category B)” means:

- (a) for an *entitled person* in Victoria or Western Australia at a time when the *Commonwealth Home Support Programme service* in Victoria or Western Australia, as the case may be, does not include a service that would satisfy the description of a *HACC Review Agreement (National Partnership) service* — the provision of treatment to the person pursuant to the *MRCA Home Care Program* that would satisfy the description of:
 - (i) a *HACC Review Agreement (National Partnership) service* ;or
 - (ii) a *Commonwealth Home Support Programme service* other than such a service that would satisfy the description of a *HACC Review Agreement (National Partnership) service*; or
 - (ii) both services in (i) and (ii);

but does not mean the provision of treatment pursuant to the *MRCA Home Care Program* that would satisfy the description of an *excluded service*; or

- (b) for an *entitled person* in a State or Territory at a time when the *Commonwealth Home Support Programme service* in the State or Territory in which the person is in includes a service that would satisfy the description of a *HACC Review Agreement (National Partnership) service* — the provision of treatment to the person pursuant to the *MRCAs Home Care Program* that would satisfy the description of a *Commonwealth Home Support Programme service* but does not mean the provision of treatment pursuant to the *MRCAs Home Care Program* that would satisfy the description of an *excluded service*.

Note 1: as at 1 July 2015 some services under the *Commonwealth Home Support Programme* (CHSP) (generally speaking CHSP services are a Home Care service (category B)) were not provided in Victoria or Western Australia. The services in question are known as “HACC services”. HACC services are home or community care services that were originally provided under agreements under the *Home and Community Care Act 1985* (the HACC Act) except in Victoria and Western Australia where similar services were provided under Bilateral Agreements with the Commonwealth Government. At or about 2008/2009 HACC services in States/Territories (except Victoria/Western Australia) were provided under agreements known as “National Partnership Agreements”. The National Partnership Agreements were made under the auspices of the Intergovernmental Agreement on Federal Financial Relations of 2008 and the *Federal Financial Relations Act 2009*. In short, the original agreements under the HACC Act were deemed to be National Partnership Agreements and the HACC Act was rendered obsolete. On 1 July 2015, in all States/Territories except Victoria/Western Australia, HACC services ceased being provided under National Partnership Agreements and were provided under CHSP. However as at 1 July 2015 HACC-type services in Victoria/Western Australia continued to be provided under the Bilateral Agreements between those States and the Commonwealth.

Note 2: the intention of paragraph (a) of this definition is to enable the Department of Veterans’ Affairs (DVA) to pay for HACC services for an entitled person in Victoria and Western Australia in addition to paying for services for the person under the Commonwealth Home Support Programme service until the Commonwealth Home Support Programme applies fully in those States and includes the HACC services. The intention in paragraph (b) of this definition is that where the Commonwealth Home Support Programme operates fully in Australia i.e. includes HACC services, DVA will only pay, under this definition, for services under the Commonwealth Home Support Programme. There is to be no potential for double-dipping.

the definition of “residential care amount”, substitute:

“daily care fee” means:

- (a) in relation to an *entitled person* in a hospital — an amount determined under the *Health Insurance Act 1973* to be the resident contribution applicable under that Act to a nursing-home-type patient of that hospital; or
- (b) in relation to an *entitled person* (including a former *prisoner of war* or a person awarded the Victoria Cross for Australia) who is receiving, or received, *residential care* — the maximum daily amount of resident fees worked out under section 52C-3 of the *Aged Care Act 1997*.

the definition of “transition care”, substitute:

“**transition care**” has the meaning it has in section 106 of the *Subsidy Principles 2014*.

2 Paragraph 1.4.1 (definitions)

insert:

“**Commonwealth Home Support Programme service**” means a service provided to a person under the programme administered by the *Department of Social Services* called the “Commonwealth Home Support Programme” and includes any service provided under that programme as the name of the programme may change from time to time.

“**HACC Review Agreement (National Partnership) service**” means a service of home or community care that could be, or could have been, provided to a person under an agreement between the Commonwealth and a State or the Northern Territory — being an agreement made under the *Home and Community Care Act 1985* but deemed to be a National Partnership Agreement in the context of the Intergovernmental Agreement on Federal Financial Relations of 2008, made under the *Federal Financial Relations Act 2009*.

3 Paragraph 1.4.1 (definitions)

the note to “emergency short term home relief”, substitute:

Note: emergency short term home relief is not relevant to the calculation of the daily care fee for residential care or residential care (respite).

the note to “in-home respite”, substitute:

Note: in-home respite is not relevant to the calculation of the daily care fee for residential care or residential care (respite).

4 Paragraph 1.4.1 (paragraphs (b)(including the note), (e)(including the note) and (f)(including the note) of the definition of “proscribed amount”)

omit.

5 Paragraph 2.2.4

paragraph (a)(ii)

omit:

residential care amount

substitute:

daily care fee

paragraph (b)(ii)

omit:

residential care amount

substitute:

daily care fee

Note (3)

substitute:

Note (3): the daily care fee is the amount worked out under s.52C-3 of the Aged Care Act 1997.

6 Paragraph 7.3A.11 (subparagraphs (i), (ii) and (iii) of paragraph (a))

substitute:

(i) the person is an exempt entitled person; and

7 Paragraph 7.3A.11 (paragraphs (d) and (e)(including the Note))

omit.

8 Paragraph 9.3.2

omit:

residential care amount

substitute:

daily care fee

9 Paragraph 10.1.5 (the Note)

substitute:

Note: under the *Aged Care Act 1997* the Commonwealth is not necessarily liable to pay resident fees such as the *daily care fee*. Liability to pay that amount may be accepted by the *Commission* under the *Principles*.

10 Paragraph 10.2 (the Heading)

substitute:

Payment of daily care fee for certain entitled members with dependants

11 Paragraph 10.2.1

omit:

residential care amount

substitute:

daily care fee

12 Paragraph 10.3.2

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

13 Paragraph 10.3 2 (Note (1))

omit:

residential care amount

substitute:

daily care fee

14 Paragraph 10.3 2 (Note (4))

substitute:

Note (3):the *Subsidy Principles 2014* (Principles) are made under subsection 96-1 of the *Aged Care Act 1997*. Under s.23 of the Principles the Secretary of the Department that administers the *Aged Care Act 1997* may increase the number of days a person may be provided with residential care as respite care by 21.

15 Paragraph 10.3.2 (the Table and definitions)

substitute:

LIMITS OF FINANCIAL RESPONSIBILITY ACCEPTED BY THE COMMISSION FOR RESIDENTIAL CARE (RESPITE)

<i>category of patient</i>	<i>type of care; max.period of care permitted; type of care costs accepted</i>	<i>type of care; max.period of care permitted; type of care costs accepted</i>
	<i>residential care (28 day respite)</i> up to 28 days (inclusive) in a Financial year	<i>residential care (respite) other than residential care (28 day respite)</i> upon an entitled person exhausting 28 days of <i>residential care (28 day respite)</i> in a Financial year — between and including 29 to 63 days* in that Financial year
entitled person	RCS + DCF	RCS

For the purposes of this table:

‘**RCS**’ means the *Commission* will accept financial responsibility for the residential care subsidy (including any *veterans’ supplement*).

‘**DCF**’ means the *Commission* will accept financial responsibility for the *daily care fee*.

‘**RCS + DCF**’ means the *Commission* will accept financial responsibility for the residential care subsidy (including any *veterans’ supplement*) and the *daily care fee*.

* or for such further period permitted under the *Subsidy Principles 2014*.

16 Paragraph 10.3.4

omit:

residential care amount

substitute:

daily care fee

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

17 Paragraph 10.3.5

omit:

residential care amount

substitute:

daily care fee

18 Paragraph 10.3.6

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

19 Paragraph 10.3.7

omit:

Residential Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

20 Paragraph 10.3.8 (2) (the Note)

omit:

residential care amount

substitute:

daily care fee

21 Paragraph 10.3.9 (Note (2))

omit:

residential care amount

substitute:

daily care fee

22 Paragraph 10.8.1(a)

omit:

Flexible Care Subsidy Principles 1997

substitute:

Subsidy Principles 2014

omit Note (2).

23 Paragraph 10.8.1(b)(ii)

omit:

section 15.33 of the *Flexible Care Subsidy Principles 1997*

substitute:

paragraph 111(3)(a) of the *Subsidy Principles 2014*

24 Paragraph 10.8.2(a) (Note 2)

substitute:

Note 2: The *Approval of Care Recipients Principles 1997*, the *Subsidy Principles 2014* and the *User Rights Principles 1997* are relevant to *transition care* (flexible care).

25 Paragraph 10.8.2 (b)(i)

omit:

15.33 of the *Flexible Care Subsidy Principles 1997*

substitute:

paragraph 111(3)(a) of the *Subsidy Principles 2014*

26 Schedule 1

substitute:

SCHEDULE 1 DATES FOR INCORPORATED DOCUMENTS
--

The date for :

1. Notes for Local Medical Officers (paragraph 1.4.1);
2. Department of Veterans' Affairs Fee Schedules for Medical Services (paragraph 3.5.1);
3. Notes for Allied Health Providers (paragraphs 3.5.1 and 7.1A.1);
4. Optometrist Fees for Consultation (paragraph 3.5.1);
5. DVA Schedule of Fees Orthoptists (paragraph 3.5.1);
6. Pricing Schedule for visual aids (paragraph 3.5.1);

7. Fee Schedule of Dental Services for Dentists and Dental Specialists (paragraph 3.5.1);
8. Fee Schedule of Dental Services for Dental Prosthetists (paragraph 3.5.1);
9. Chiropractors Schedule of Fees (paragraph 3.5.1);
10. Diabetes Educators Schedule of Fees (paragraph 3.5.1);
11. Dietitians Schedule of Fees (paragraph 3.5.1);
12. Exercise Physiologists Schedule of Fees (paragraph 3.5.1);
13. Occupational Therapists Schedule of Fees (paragraph 3.5.1);
14. Osteopaths Schedule of Fees (paragraph 3.5.1);
15. Physiotherapists Schedule of Fees (paragraph 3.5.1);
16. Psychologists Schedule of Fees (paragraph 3.5.1);
17. Podiatrists Schedule of Fees (paragraph 3.5.1);
18. Social Workers Schedule of Fees (paragraph 3.5.1);
19. Clinical Counsellors Schedule of Fees (paragraph 3.5.1);
20. Speech Pathologists Schedule of Fees (paragraph 3.5.1);
21. Australian Government Department of Veterans' Affairs Classification System and Schedule of Item Numbers and Fees — Community Nursing Services (paragraph 6A.4.2(b));
22. Notes for Coordinated Veterans' Care Program Providers (Part 6A);
23. Rehabilitation Appliances Program (RAP) National Guidelines (paragraph 11.2A.1);
24. RAP National Schedule of Equipment (paragraph 11.2A.1);

25. Veterans and Veterans Families Counselling Services (VVCS) Outreach Program Counsellors (OPC) Provider Notes (paragraph 1.4.1 and 7.1A.1);
26. Veterans and Veterans Families Counselling Service (VVCS) Outreach Program Counsellors (OPC) Schedule of Fees (paragraph 3.5.1);
27. General information about VVCS – Veterans and Veterans Families Counselling Service (paragraph 1.4.1);
28. Better Access to Psychiatrists, Psychologists & General Practitioners through the Medical Benefits Schedule Initiative:

<http://www.health.gov.au/internet/mentalhealth/publishing.nsf/Content/better-access-through-mbs-1>;
29. Gold Card (paragraph 1.4.1);
30. White Card (paragraph 1.4.1);

is 1 August 2015.

Schedule 3

The Treatment Principles (Australian Participants in British Nuclear Tests) 2006 (Instrument 2013 No. R54) is varied in accordance with Part A.

Part A

Variation to the Treatment Principles (Australian Participants in British Nuclear Tests) 2006

1 Schedule item 4 – substituted paragraph 1.4.1

the definition of “residential care amount”, substitute:

“daily care fee” means:

- (a) in relation to an *entitled person* in a hospital — an amount determined under the *Health Insurance Act 1973* to be the resident contribution applicable under that Act to a nursing-home-type patient of that hospital; or
- (b) in relation to an *entitled person* who is receiving, or received, *residential care* — the maximum daily amount of resident fees worked out under section 52C-3 of the *Aged Care Act 1997*.

the definition of “transition care”, substitute:

“transition care” has the meaning it has in section 106 of the *Subsidy Principles 2014*.

the note to “emergency short term home relief”, substitute:

Note: emergency short term home relief is not relevant to the calculation of the daily care fee for residential care or residential care (respite).

the note to “in-home respite”, substitute:

Note: in-home respite is not relevant to the calculation of the daily care fee for residential care or residential care (respite).

2 Schedule item 42 — Paragraph 10.6.2 (the Table and definitions)

substitute:

42. Paragraph 10.6.2 (Table and definitions)

substitute:

LIMITS OF FINANCIAL RESPONSIBILITY ACCEPTED BY THE REPATRIATION COMMISSION FOR RESIDENTIAL CARE (RESPITE)

<i>category of patient</i>	<i>type of care; max.period of care permitted; type of care costs accepted</i>	<i>type of care; max.period of care permitted; type of care costs accepted</i>
	<i>residential care (28 day respite)</i> up to 28 days (inclusive) in a Financial year	<i>residential care (respite) other than residential care (28 day respite)</i> upon an entitled person exhausting 28 days of <i>residential care (28 day respite)</i> in a Financial year — between and including 29 to 63 days* in that Financial year
<i>entitled person</i>	RCS + DCF	RCS

For the purposes of this table:

‘**DCF**’ means the Commission will accept financial responsibility for the *daily care fee*.

‘**RCS**’ means the Commission will accept financial responsibility for the residential care subsidy.

‘**RCS + DCF**’ means the Commission will accept financial responsibility for the residential care subsidy and the *daily care fee*.

* or for such further period permitted under the *Subsidy Principles 2014*.

3 Schedule item 59 Schedule 1

substitute:

59. Schedule 1

substitute:

SCHEDULE 1 DATES FOR INCORPORATED DOCUMENTS
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The date for :

1. Notes for Local Medical Officers (paragraph 1.4.1);
2. Department of Veterans' Affairs Fee Schedules for Medical Services (paragraph 3.5.1);
3. Notes for Allied Health Providers (paragraphs 3.5.1 and 7.1A.1);
4. Optometrist Fees for Consultation (paragraph 3.5.1);
5. DVA Schedule of Fees Orthoptists (paragraph 3.5.1);
6. Pricing Schedule for Visual Aids (paragraph 3.5.1);
7. Fee Schedule of Dental Services for Dentists and Dental Specialists (paragraph 3.5.1);
8. Fee Schedule of Dental Services for Dental Prosthetists (paragraph 3.5.1);
9. Chiropractors Schedule of Fees (paragraph 3.5.1);
10. Diabetes Educators Schedule of Fees (paragraph 3.5.1);
11. Dietitians Schedule of Fees (paragraph 3.5.1);
12. Exercise Physiologists Schedule of Fees (paragraph 3.5.1);
13. Occupational Therapists Schedule of Fees (paragraph 3.5.1);
14. Osteopaths Schedule of Fees (paragraph 3.5.1);
15. Physiotherapists Schedule of Fees (paragraph 3.5.1);
16. Psychologists Schedule of Fees (paragraph 3.5.1);

17. Podiatrists Schedule of Fees (paragraph 3.5.1);
18. Social Workers Schedule of Fees (paragraph 3.5.1);
19. Clinical Counsellors Schedule of Fees (paragraph 3.5.1);
20. Speech Pathologists Schedule of Fees (paragraph 3.5.1);
21. Australian Government Department of Veterans' Affairs Classification System and Schedule of Item Numbers and Fees — Community Nursing Services;
22. Rehabilitation Appliances Program (RAP) National Guidelines (paragraph 11.2A.1);
23. RAP National Schedule of Equipment (paragraph 11.2A.1);
24. White Card (paragraph 1.4.1);

is 1 August 2015.