

In the Loop

Monthly Coordinator Information Session

Wednesday, 29 April 2026 · 12pm



Today's Agenda



01

Welcome & Housekeeping

Nadia Rivkaris

3 mins

05

Growth Insights

Jay Pery | Baden Crathern

10 mins

02

What's new in The Portal

7 mins

06

Statements Update

Erin Headley

10 mins

03

Compliance & Best Practice

Meagan Ritchie

10 mins

07

Info Session Feedback/ Q&A

Nadia Rivkaris | Baden Crathern

7 mins

04

RCTI & Claims Process Updates

James Morgan

10 mins

08

Conclusion & Close

Nadia Rivkaris

3 mins

01

Welcome & Housekeeping

Nadia

Partnerships Liaison Manager

🕒 3 mins

Nadia | Partnerships Liaison Manager

Joining us today are...

- Meagan | Manager - Quality Assurance
- James | Chief Financial Officer
- Jay & Baden | Growth
- Erin | Chief Quality and Operations Officer

How to participate

- Webinar is presentation style – you'll remain on mute and with cameras off, but we encourage you to use the Q&A function to ask us your questions!
- Trilogy Team are on standby to answer your questions live
- We'll get through as many questions as we can, *but may not be able to answer all of them*

Resources

- Slides will be published on the Coordinator Resource Page after today's session
- FAQ will be compiled and made available also!

02

What's New in The Portal

Innovation & Transformation

7 mins

Overview

Our portal team is always striving to make improvements to help our care coordinators work more efficiently. At a high level:

- It is easier to search with keywords for services on budgets now
- Check-in flags have been temporarily switched off, but everything else behind it is still present
- Client notes on the portal have been improved thanks to Care partner and Coordinator feedback
- Anytime you are reviewing information in tables, there are some new filters, and you can save your favourite views.
- Please keep reporting issues and giving us suggestions when you're in the portal by clicking on the Help Centre icon in the bottom left-hand corner.

Innovation & Transformation

Budget Search - *You can now search the way you actually think*

The old dropdown that forced you to know the exact service name is gone. In its place is a proper search modal that finds services by keywords. This means you don't need to remember the exact wording - just type what the client needs and the right services bubble up.

Examples:

- If you type in "Falls Alarm" and the correct service of "communication and information management products" will appear for selection.
- If you type in "lawn" or "mowing", then the service of "gardening" will appear.

Check Ins - *The check-in views on your Packages tab have been temporarily switched off because we've got some improvements coming soon.*

We know you've been relying on a few visual cues to stay on top of overdue check-ins. Here's what's **no longer** showing on the Packages tab:

- The Check-Ins column: the red and orange icons next to each package that flagged who was overdue or coming up
- The External Check-Ins filter: the badge filter at the top of the table that let you quickly pull up just the packages needing a check-in (Upcoming / Overdue)
- The Last External Check-In date column: the sortable column you could turn on to see when each client was last checked in

The good news: none of your data has been lost and all of your notes functions are still there. We're still tracking the same things in the background - when each client was last checked in, and when they're due next. It's just the on-screen view that's been paused while we get the replacement ready.

Innovation & Transformation

Notes

- Floating dock on every page : notes are now a floating panel you can drag, dock, and resize. Available on Package, Supplier, Care Coordinator, and Bills views
- Rich-text editor: bold, italic, lists, links, all the things you'd expect.
- Search and filters: keyword search plus a filter panel with categories and date range. Active filters show as badges above the list.
- "Mine" badge: your own notes are clearly tagged so you can see what you've contributed.
- Drafts protected: if you start writing and try to navigate away, the system warns you so you don't lose your work.

New Table Views & Filtering

What we noticed

A lot of portal users were saving browser bookmarks to jump between different filtered views of tables. It works, but it's clunky, clutters your bookmarks bar, and you can lose your setup.

What's changed

You can now save your table setups as named views. Filters, columns, sorting - save it once, switch back to it anytime with one click. You can create up to 20 personal views, star your favourites, reorder them, and rename them on the fly. (Your existing handy bookmarks will still work)

Why this benefits you

Less time re-filtering, less bookmark clutter, and a consistent starting point

03

Compliance & Best Practice

Meagan Ritchie

Quality Assurance

🕒 10 mins

Worker Verifications

- Coordinators are responsible for who enters a consumer's home
- Verification must be evidenced, not assumed
- Requirements include police checks or NDIS checks, relevant qualifications, appropriate experience and Code of Conduct awareness
- Common issues include missing documentation, expired checks and workers operating outside scope
- Best practice is being able to provide verification evidence immediately upon request
- If it cannot be supported in an audit, it is not sufficient

Case Note Quality

- Case notes are the primary evidence that services were delivered
- Notes should clearly outline what was done, how the consumer responded and any changes or concerns
- Common issues include vague notes, no notes and notes that do not align with invoices
- Case notes must support the services billed
- If questioned, notes should clearly justify the service delivery

Meagan Ritchie | Quality Assurance

Incident Management

- Incidents include injury, safety risks, behaviour changes, environmental concerns or anything that appears unusual
- Expectations are to recognise, document and escalate incidents promptly
- Common issues include delayed reporting and lack of documentation
- Coordinators are not expected to resolve incidents independently but must ensure escalation occurs
- Raising concerns early reduces risk and supports better outcomes

Key Summary

- Worker verifications confirm who is delivering care
- Case notes confirm care was delivered
- Incident management ensures appropriate response to changes or risks
- Strong practice in these areas reduces compliance risk and supports safe service delivery

04

RCTI Payments & The value you deliver

James Morgan

Finance

🕒 10 mins

How RCTI Payments Work

The 80/20 advance payment model — a quick recap

The Split



The Flow, Step by Step

- 1 80% Advance**
Trilogy Care pays 80% of the expected amount upfront — keeping your cash flow consistent.
- 2 Services Delivered & Claims Processed**
Once services are delivered and claims are processed through PRODA, reconciliation can begin.
- 3 Remaining 20% Paid**
After reconciliation, the outstanding 20% balance is paid to the coordinator.
- 4 RCTI Issued**
The Recipient Created Tax Invoice is then issued — no paperwork needed from you.

Why the 20% Comes Later

The lag sits with providers — not with you or us

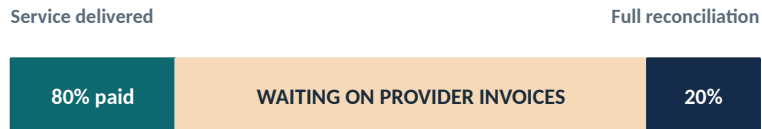


Where the Lag Actually Is

The delay isn't you, and it isn't us. It's the providers you've assigned to clients — each invoicing Trilogy Care on their own schedule.

- Providers invoice on their own cycles — weekly, fortnightly, sometimes longer
- Some providers are consistently slower than others
- PRODA claims can be rejected and need resubmission
- One late provider holds up the whole client's reconciliation

What the Lag Looks Like



Every provider invoices at their own pace.

A client might have three or four providers delivering services. We can't close out the 20% until every one of those providers has submitted their invoice and the claim is confirmed through PRODA. Paying earlier means paying against incomplete data — and that creates clawbacks and rework for everyone.

How You Can Help

An idea we're exploring — a late invoice report for coordinators

You chose the providers for your clients — and here's the key insight: **your coordinator fee only gets added to the RCTI once the provider invoice arrives.** So when you nudge providers to invoice us faster, you're speeding up your own payment too.

The Idea

A simple report, shared with you on a regular cadence, showing the providers you've assigned who haven't yet invoiced for services delivered.

- 1 You see the list** Your clients, your providers, days outstanding.
- 2 You make the call** A friendly nudge carries more weight from you than from us.
- 3 We escalate if needed** Flag persistent issues back to finance for follow-up.

What It Could Look Like

Illustrative — not final format

Provider	Client	Days out	Status
Sunrise Supports	J. Thompson	42	LATE
Coastal Therapies	M. Chen	28	LATE
Northern Care Co.	R. Patel	14	DUE
Horizon Providers	A. Williams	7	ON TIME
Meridian Services	L. Singh	3	ON TIME

Where RCTI Is Heading

From fortnightly catch-up to weekly automation — targeting 100% RCTI by June

RCTI is built from the bills we've received and the claims processed through PRODA. The more frequently providers invoice us, the tighter we can make the cycle. Here's the roadmap.

TODAY



Regular 20% Cadence

RCTI run based on provider bills received and paid to date. Historically the lag existed to capture late invoices.

WHERE WE ARE

NEXT



Weekly API Claims

Automated weekly pulls from PRODA — claims processed as soon as they're ready, not batched up.

BUILDING NOW

BY JUNE



100% RCTI

Full automation — every eligible bill turned into an RCTI as the claim clears. Near-real-time payment cycle.

THE TARGET

W H E R E W E S T A N D

The 80/20 model remains in place.

It's the right structure for where we are right now — stable, fair to coordinators, and protective against reconciliation risk. Goal is to move to 100% payment by June or earlier.

It stays in place until two things are true:

01



A new solution exists

One that demonstrably improves on 80/20 for both coordinators and the business — not a lateral change. Get invoices sent in and fast.

02



We have long-term data

Enough history across the cadence to analyse patterns, validate any proposed change, and be confident it will actually be better.

05

Growth Insights

Jay Pery | Baden Crathern

Growth

🕒 10 mins

Bernie Ng | Growth

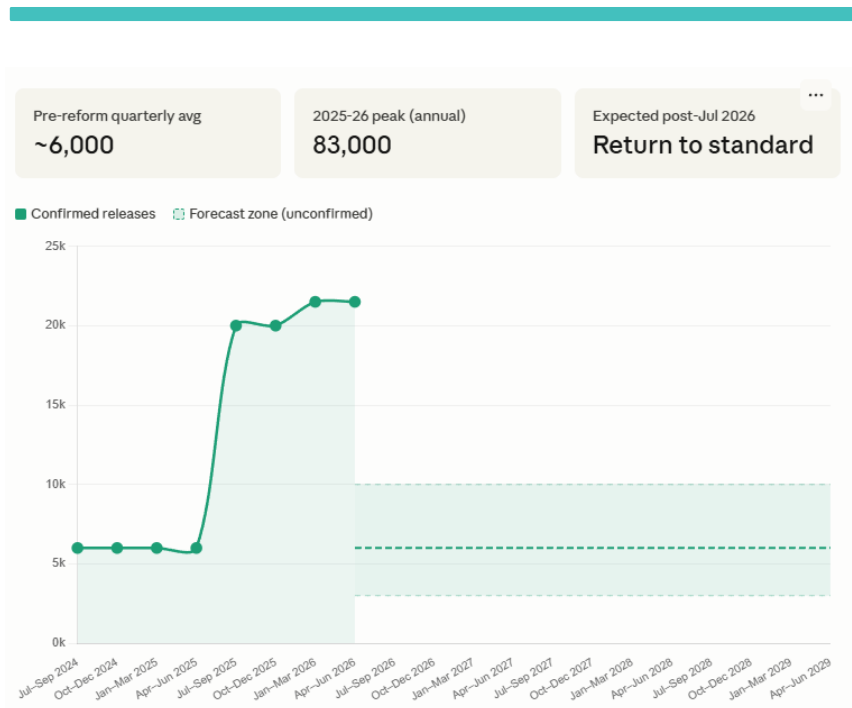
Industry insights: New package allocation

- In case you were not aware, My Aged Care has provided a funding stimulus to the Aged Care Funding stream since July 1st, 2025
- The stimulus accounts for an **ADDITIONAL** 80k new Support at Home funding allocations through FY25/26

How many of the new 80k packages released?

- We're expecting the remaining packages to be exhausted by June 30th, 2026
- We're in the final stages of the Silver Tsunami!
- We can expect funding allocations begin to slow down as we approach June 30th

Bernie Ng | Growth



Release data - Visualised

- Pre-reform release levels saw approximately 6,000 new packages per quarter
- FY 25/26 saw approximately 20,000 new packages released per quarter
- No confirmation has been given on the planned package release numbers post July 1, 2026
- What does this mean? We're getting close to the end of the silver tsunami

Bernie Ng | Growth

Expected package releases: next 2 months

- There are an estimated 10,000 packages available for release, although this has not been confirmed by My Aged Care

Thin Market Grant

- Applications are OPEN for Thin Market Grant support for Coordinators with clients in MMM 3 – MMM 7
- The purpose behind the Grant is to support suppliers and coordinators overseeing clients in remote and rural areas

BD opportunities for coordinators

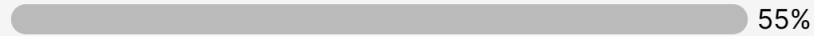
- With Packages still being released, now is the time to catch as many new clients as possible, before the new financial year

What is your main blocker to finding or supporting Support at Home clients?

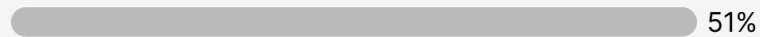
Long wait times from My Aged Care



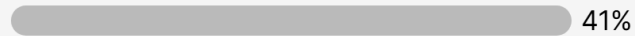
Clients not wanting to pay co contributions



Clients confused about funding



Trilogy Care processes



Only receiving CHSP allocations



Admin work taking up my time



Trilogy Care fees

06

Statements Update

Erin Headley

Operations

🕒 10 mins

Erin Headley | Operations

How did we get here?

HCP Claiming and Statements

- Simple list of incoming and outgoing funds for the prior month
- Fixed/known daily subsidy
- Fixed/known income-tested care fee
- General service descriptions only

SAH Claiming and Statements

- Services delivered within the statement period
- Multiple funding streams
- Multiple contribution categories
- Linkage to prescribed service list

Services Australia Technical Difficulties

- Unable to generate payment statements
- Client funding streams not recognised or used incorrectly
- Rollover amounts incorrectly calculated
- Contribution amounts incorrectly calculated
- Claim loading issues leading to duplicate transactions
- Claim processing and payment delays

“

We apologise for any inconvenience to Trilogy Care, and we will work with them to assist them with their concerns.

Services Australia

The Senior · 22 April 2026

[The Apology](#)

Erin Headley | Operations

Where we are heading

- Trilogy Care has dedicated significant resources to work with Services Australia to eliminate repeat occurrences of issues experienced during the first six months of the Support at Home program.
- We are continuing to work with Services Australia to resolve their existing issues, including duplication of claim items, incorrect or missing client contributions, and funding stream activations.
- Once all issues are resolved and we can comfortably rely on the information held by Services Australia, we will issue all outstanding statements.

What we need from you

Ensure supplier invoices are:

- ✓ submitted within the contract timeframes (within 30 calendar days of service delivery)
- ✓ align with the client's budget; and
- ✓ are itemised by service date and the service provided.

Erin Headley | Operations

Current Status

2025

November



STATEMENT ISSUED

Full formal statement,
in clients' hands.

2025

December



STATEMENT ISSUED

Full formal statement,
in clients' hands.

2026

January



INTERIM LISTING SENT

Itemised transactions
sent last Wednesday.
Waiting on SA for the
formal statement.

2026

February



INTERIM LISTING SENT

Itemised transactions
sent last Wednesday.
Waiting on SA for the
formal statement.

2026

March



INTERIM, IN 1-2 WEEKS

Supplier-bill cut-off for
March services:
30 April. Listing follows
shortly after.



All outstanding statements — Jan, Feb, Mar & Apr — issued in full.

Sooner if Services Australia resolves the underlying issue first; end of May is the floor, not the ceiling.

31 May 2026

07

Closing the Loop - Questions & Feedback

Nadia Rivkaris & Baden Crathern

Growth

🕒 7 mins

Which section did you find most useful today?

Statements update



Best practice for Care Coordination



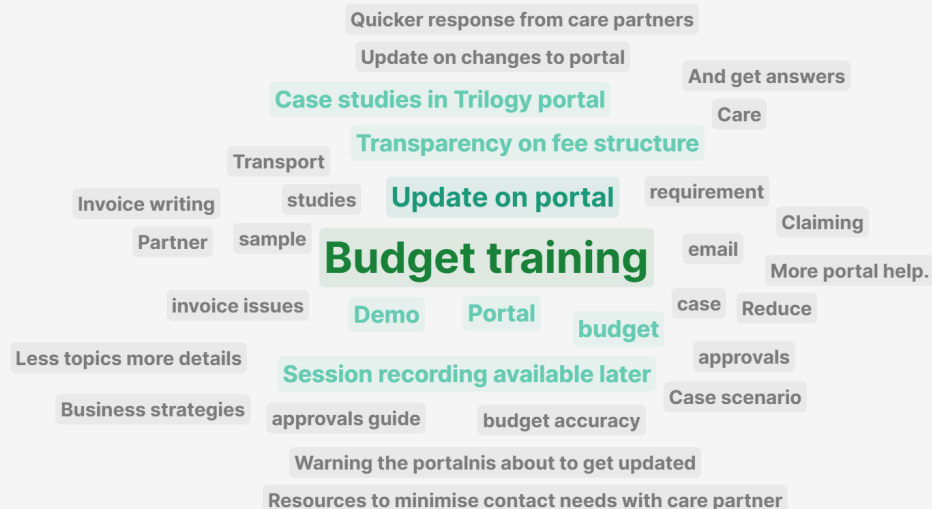
RCTI & claims updates



Growth insights



What would make future sessions more valuable for you?



What now?



Info Session Feedback can be sent to:
nadiar@trilogycare.com.au

08

FAQ Your questions, answered.

These are the questions you raised in the April 2026 Coordinator Information Session, with the answers from the Trilogy Care team.



Question 1

Where can I find the resources for worker verifications and incident submissions?

A Worker verification submissions: trilogycare.com.au/submit-a-worker.
Incident submissions: trilogycare.com.au/incidents.



Question 2

Is it a requirement for Support Workers to provide Coordinators with service notes?

A Not a requirement, but we encourage all Suppliers to provide notes directly to Coordinators as well as within invoices. Depending on the invoice notes, you can request further information directly from the Support Workers.



Question 3

Why are AT-HM submissions and funding upgrades taking so long to be assigned?

A

The AT-HM scheme uses **two separate priority systems**, one for AT, one for HM — that operate independently of the main Support at Home priority queue.

The four categories are: Immediate, High, Medium, Standard.

Scoring is point-based, drawn from the IAT:

Criterion	Points
Lives alone	1
Assessed mobility impairment	1
Aboriginal or Torres Strait Islander	1
Current home poses moderate or severe risk to health/safety	1
Waited >6 months from first referral AND lives in MMS-7	1

Score maps to category:

Score	Priority
2+ points	High
1 point	Medium
0 points	Standard

Immediate is reserved for clients approved under the Restorative Care Pathway or End-of-Life Pathway. The system displays "High" for these clients, but funding is allocated immediately without any wait.

The scoring criteria essentially favour clients who are isolated, functionally compromised, or in unsafe environments and unfortunately we have no control over this



Question 4

We've only received remittance advices for our payments this year - how can we get our RCTIs for our accountant?

A Please reach out to your Relationship Manager, who will be able to support.



Question 5

Can shift notes be added into client records? Options for notes are 'check-in' or 'other'.

A Shift notes can be retained against the consumer file in your own records. We do not currently have a function in Portal for shift notes.



Question 6

What does coordination look like after 1 July - is there an allowance for package management?

A There are no confirmed changes to the coordination agreement post 1 July.

**Question 7**

With the statements delays, can we have a copy of the apology from Services Australia to show our clients?

A

Here is the article:
thesenior.com.au/story/9231004/government-adds-3-billion-to-aged-care-but-providers-want-more/

**Question 8**

We don't have access to the activity statements - when will we be able to see what has been issued to clients?

A

You can access activity statements via the client's Portal profile. Click 'Billing', then 'Transactions', scroll to the bottom and select 'Download' next to 'Generated Transactions PDF'.

**Question 9**

We had queries from clients about services dated 25 December on their statements - why is that?

A

For itemised transaction lists, the date in the first column is the date we processed the bill, not the service date. The service date is shown in the description column.



Question 10

In the Portal Budget page, does the rollover amount show in the total funding available for the current quarter? How can we see it?

A The rollover amount can be seen by hovering over the small 'i' icon above the ON funding stream. It only appears once applied (60 days after quarter end).



Question 11

Client feedback is that fees aren't transparent. They want to see hourly rate + coord fee + admin fee separately, not the total figure.

A Unfortunately, dealing in the final price is a regulatory requirement for us.



Question 12

Who do we reach out to regarding the Thin Markets Grant?

A Please contact your Partnership or Relationship Manager and they'll provide guidance.

**Question 13**

Can we view the client contribution invoices in the portal?

A

Yes - hover over 'Billing' in a client's profile and click the 'Contributions' option to view the client's contribution invoicing.

**Question 14**

I've had issues onboarding RNs insured via ANMF membership (\$10M public liability) - is that sufficient, or do we need \$20M PLI?

A

ANMF cover is generally sufficient from a registration perspective. However, Trilogy requires \$20M as part of its internal risk and compliance framework, so RNs would need to meet that or obtain additional/top-up cover to be onboarded.

**Question 15**

Has anyone noticed that the 'Check Ins' button has disappeared from the Portal?

A

It has, temporarily, while we make some improvements. Please see the Portal Updates section of the Webinar presentation.

**Question 16**

What is the process for us to escalate concerns?

A

Please speak to your Relationship Manager or Partnership Manager in the first instance. If you don't feel comfortable doing so, you can ask to speak to a Team Leader directly.

**Question 17**

Do we have to hold copies of the third party agreements for clients for compliance?

A

Yes - you should always keep these on file.

**Question 18**

Is there a clear statement we can show clients about HC accrued funds being used first?

A

Yes - Program Manual V4.2 covers this: *Section 9.7.5 ('Management of HCP unspent funds') states Commonwealth HCP unspent funds must be used before AT-HM funding tiers. Section 9.3.1.4 details the draw-down priority order. Section 16.4.5 sets out the full claiming sequence: Provider-held HCP unspent funds, then HCP unspent funds in the home care account, then AT/HM budget.*

Nadia | Partnerships Liaison Manager

Key takeaways

- **Portal:** Portal will continue to evolve – stay informed
- **Compliance:** Strong practices in worker verifications, case noting, and incident management reduces compliance risk and supports safe service delivery
- **RCTI:** 80/20 advance payment model remains in place, projected to shift to 100% payments by June
- **Growth:** While packages are still being released, we can expect funding allocations to begin to slow down as we approach June 30th
- **Statements:** We are resolving claims issues with SA and will issue outstanding statements once resolved. In the meantime, please ensure your invoices are submitted on time, within budget, and itemised

Next session date

Wednesday, 27th of May 2026

12:00pm – 1:00pm



Resources

- [Coordinator Resource Hub](#)
- [Support at Home Program Manual](#)
- [Portal Support](#)
- [Incident Submission Form](#)



Thank You

*Have a question after the session?
Reach out to your Partnership Manager or Care Partner for support!*

See you next time!

