

Scaling with Confidence:

Keeping Coordinators in the Loop

March 2026 Information Session

Session Protocols & Agenda

Overview and session guidelines for today's information session

Session Protocols



Microphones & cameras on mute
throughout the presentation



Questions are welcome
Please use the chat function — our team
will monitor actively

Overview

- 1 **Care Team** Coverage · Escalation · New Partner Onboarding · Invoices & Budgets
- 2 **Compliance Team** TPC Requirements & Compliance Obligations for External Coordinators
- 3 **Finance Team** Growth, Efficiency & RCTI Improvements for External Coordinators
- 4 **Growth Team** Client Communications · Response Times · Payments · Statements
- 5 **Resources**

Working with Your Care Partner

Coverage · Escalation · New Partner Onboarding · Invoices & Budgets

Care Continued...

01 When a Care Partner is Unavailable

Coverage arrangements & escalation contacts

02 Escalating Client Concerns

The correct process for urgent or unresolved issues

03 New Care Partner Onboarding

What to expect during high-growth periods

04 Invoices & Budget Compliance

Ensuring submissions align with approved budgets

01 | When a Care Partner is Unavailable

When your allocated Care Partner is on leave or temporarily unavailable, Trilogy Care ensures continuity. Here's what that looks like in practice.

Coverage Arrangement

A nominated Trilogy Care team member will be assigned to cover your Care Partner's caseload.

You will be notified of the covering contact where practical, and all client care plans and notes remain accessible to the covering staff member.

Business as Usual

Invoice processing, care plan reviews, service approvals and urgent requests all continue without interruption.

The covering team member has full visibility of active cases, care partner inbox and can action time-sensitive items on your behalf.

01 | When a Care Partner is Unavailable

How to reach the right person during a Care Partner's absence.

Email & Voicemail Are Still Monitored

You can still email your Care Partner directly or leave a voice message – both are monitored and will be followed up during any period of absence. Use these as your first point of contact for non-urgent matters.

02 | Escalating Client Concerns

As a coordinator, you play a key role in identifying and escalating concerns. Use this pathway to ensure issues are resolved at the right level without delay.

1

Contact the Allocated Care Partner Directly

Your first point of contact for any client concern is the allocated Care Partner — by phone or email. Include relevant client details and a clear description of the concern.

2

Request Team Leader or Manager Escalation

For urgent, sensitive or persistent matters, call 1300 459 190 and ask for escalation to a Team Leader. You can also flag this through the portal.

3

Partnership Manager Escalation

Please contact your partnerships manager if you cannot get through to the team leader or manager and they will escalate internally.

02 | Escalating Client Concerns

Safety incidents must always be reported formally – do not manage these informally.

Reporting a Safety Incident

Any client safety incident must be formally reported using the dedicated Incidents form at trilogycare.com.au/incidents. This triggers a mandatory review by Trilogy Care's clinical team and ensures the incident is recorded in line with regulatory requirements under the Aged Care Act.

Confidentiality & Compliance

All formal concerns and safety incidents are managed confidentially. Trilogy Care will keep you informed of the outcome where appropriate and will not escalate further without coordinating with you first.

03 | New Care Partner Onboarding

Trilogy Care is currently onboarding a high volume of new Care Partners to support growth. Some coordinators may be reassigned to a new Care Partner.

Coordinator Notification

You will be notified directly when a new Care Partner has been assigned to your shared clients.

Expect a formal introduction from the new Care Partner within their first few business days of being assigned.

Continuity of Care Plans

All existing care plans, service schedules and client notes carry over automatically.

There is no need to re-submit documentation — the new Care Partner will review everything and confirm continuity with you.

03 | New Care Partner Onboarding

How coordinators can support a smooth transition.

Relationship Building

We encourage coordinators to accept a brief introductory call or teams meeting with the new Care Partner early in the relationship. Sharing client context upfront — preferences, routines, known risks — significantly reduces transition friction and leads to better client outcomes.

When to Escalate

If a new Care Partner has not made contact within 5 business days, or if you have concerns about the quality of the transition, escalate to your Partnerships Manager.

04 | Invoices & Budget Compliance

Reminder: All invoices submitted on behalf of clients must align with their approved quarterly budget and service plan.

Budget Approval is Mandatory

Under the Support at Home program, all expenditure must be pre-approved and reflected in the client's quarterly budget.

Coordinators should always verify budget alignment before arranging or approving any service on a client's behalf.

Invoice Submission Process

All invoices must be submitted via the Trilogy Care portal or using the Supplier Invoice Template at trilogycare.com.au/supplier-invoice.

Do not process payments outside the portal — all claims must flow through Trilogy Care.

04 | Invoices & Budget Compliance

What happens when something doesn't match — and how to stay on top of budgets.

Handling Discrepancies

If an invoice amount does not match the approved budget or service agreement, the Care Partner will contact the relevant coordinator or provider to resolve the discrepancy before processing. Do not re-submit the invoice without instruction from the Care Partner.

Budget Monitoring & Your Role

Care Partners actively monitor quarterly budgets, but coordinators are expected to track service hours and proactively flag if a client is approaching their limit. Use the SAH Quarterly Calculator at trilogycare.com.au to check estimates at any time.

Compliance Team Update

Third Party Contract Requirements · Compliance Obligations

Why We Always Require a TPC

Even if a supplier has signed an APA with Trilogy Care, a TPC is still required

The Three Layers

ASSOCIATED PARTNER AGREEMENT (APA)

Governs the supplier relationship — does not confirm client pricing or service scope

CLIENT AGREEMENT

Sets the maximum rate ceiling — does not confirm agreed price, frequency, or scope

THIRD PARTY CONTRACT (TPC)

Confirms exactly what was agreed: rate, scope, frequency, and client consent

What the TPC Does

1 Confirms the Agreed Rate

The exact rate charged — not just a ceiling — is documented and signed off by the client.

2 Locks in Scope & Frequency

What service, how often, and the link between client, worker, and delivery.

3 Protects All Parties

Client: no surprise charges. Supplier: dispute protection. Trilogy Care: audit trail.

What a TPC Does

The TPC turns a rate ceiling into a confirmed, enforceable agreement

What It Defines

Agreed rate, scope, frequency, and the link between client, worker, and service.

Why It Matters

Without a TPC, there is no documented proof that the client agreed to the specific rate, scope, or frequency of services — leaving both the supplier and Trilogy Care exposed.

Who It Protects

- 1 Client**
No surprise charges — the agreed rate and scope is documented before services begin.
- 2 Supplier**
Dispute protection — if a client queries a charge, the TPC is the primary evidence of what was agreed.
- 3 Trilogy Care**
Audit trail — evidence of client consent and service agreements for compliance.

No Evidence = Compliance Issues

From backlog resolution to a better process for coordinators

Acceptable Evidence

SHIFT NOTES

Care notes documenting what occurred during each service visit

TIMESHEETS

Verified timesheets confirming worker hours and attendance

SERVICE LOGS

Logs evidencing service delivery aligned to the TPC

What Evidence Must Show

1

Service Occurrence

That the service actually took place.

2

Correct Client & Worker

The right person received the service, delivered by the identified worker.

3

Duration

Time of arrival and departure confirmed.

Key Principle: If either the TPC or delivery evidence is missing, the supplier may need to refund the costs as agreement and proof of delivery cannot be substantiated.

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Finance Team Update

Growth · Efficiency · RCTI Improvements

Significant Growth

Where we are today

+150%

Transaction Growth
Year on Year



Thousands of invoices processed daily across our growing client base – **(2,834 bills daily – 154% more than last year)**



Significant transaction volumes requiring validation and reconciliation **(Avg 77k invoices a month)**



More clients, more coordinators, more interactions — scaling fast



Growth brings both opportunity and operational complexity to manage

Managing Growth with Efficiency

Our plan to scale smarter, not just harder



Invoice Processing

With thousands of invoices flowing through daily, we are refining how these are received, matched, and approved. Automated matching logic reduces manual handling and speeds up turnaround for both providers and coordinators.



Transaction Validation

As claim volumes grow significantly, we are building smarter validation layers — cross-referencing service agreements, approved budgets, and care plans to catch discrepancies early and protect client funds. Implementing technology changes takes time to scope and validate before going into production.



Leveraging Technology

We are making the most of the platforms and tools already in our ecosystem. From automated workflows to system integrations, the goal is reducing manual touch points while improving accuracy and speed.

Automation and referencing is built by the Data teams.

Claims & RCTI — Where We're Heading

From backlog resolution to a better process for coordinators

Phase Progress

COMPLETED

Backlog of claims from the November transition — multiple teams working to finalise

NOW

Moving to a phase of incremental improvements — focused on clarity and coordinator experience

NEXT

Enhanced RCTI process — better visibility, easier for coordinators and BDs to review

How RCTI Payments Work

1

80% Advance

Trilogy Care pays 80% of the coordinator's expected payment in advance — keeping cash flow consistent. This is a temporary measure while we transition to more efficient claims processing.

2

Claims Completed & Reconciled

Once services are delivered and claims are processed through PRODA, the reconciliation to RCTI is finalized. We need to ensure the claim is not rejected before paying.

3

Remaining 20% Paid

After reconciliation, the outstanding 20% balance is paid to the coordinator.

4

RCTI Provided

Recipient Created Tax Invoices (RCTIs) are then issued to coordinators — we are actively reviewing this step to improve clarity and ease of review for Business Development.

What This Means for You

What coordinators can expect as we improve our finance processes



Faster Invoice Turnaround

As automation and validation improvements roll out, invoice processing times will improve — meaning fewer delays and faster reconciliation for your clients.



Clearer RCTI Statements

We are reviewing the RCTI process to make statements easier to understand and simple to review. Our aim is for coordinators and BD contacts to be able to reconcile payments at a glance.



Improved Payment Clarity

The 80/20 advance payment model remains in place. As our improvements take effect, we will communicate the timeline more clearly, so you know when to expect the remaining 20% and accompanying RCTI.



Better Tools & Visibility

Technology improvements underway will give Trilogy Care better internal visibility — which in turn means more accurate answers to your payment and claims queries, faster. We are always looking for better more timely alternatives.

TRILOGY CARE . MARCH INFORMATION SESSION

Growth Team Update

Client Communications · Response Times · Payments · Statements

February Coordinator Payments

Payment progress update for February billing cycle

80% COMPLETED — as of 23 March 2026



What This Means for Coordinators

February coordinator payments are currently tracking at 80% completion as of 23 March 2026.

Our finance and growth teams are actively working to finalise the remaining 20% of payments as a priority. We understand timely and accurate payments are critical to your operations, and we appreciate your continued patience as we work through the remaining processing.

If you have a specific query about your payment status, please contact your Partnership Manager or Relationship Manager directly.

Statements

November & December statements have now been issued



Statements Issued

November and December statements have now been sent to all relevant coordinators and their clients.

These statements provide a clear breakdown of services, funding utilisation, and any applicable charges for the respective periods.



Spot a Discrepancy?

If you identify any discrepancies in your November or December statements, please advise your:

- Partnership Manager, or
- Relationship Manager

as soon as possible so our team can investigate and resolve the matter promptly.

Unsigned Clients & Co-Contributions

Important updates regarding SaH agreements and client contributions



Unsigned Clients — SaH Agreements

Clients who have not yet re-signed under their November 1 Support at Home (SaH) agreement will soon receive formal letters advising that Trilogy Care may not be able to continue overseeing their care in the near term.

Coordinators are encouraged to support clients in completing their SaH agreements as soon as possible to ensure continuity of care and avoid any disruption to services.



Co-Contribution Letters — NOV & DEC

Co-Contribution letters will be sent to clients for their November and December contributions under the Support at Home program.

These letters outline the client's applicable co-contribution amount as determined under the SaH framework.

If you have questions about a specific client's co-contribution, please speak with your Partnership Manager or Relationship Manager.

Response Times

Our commitment to timely communication with coordinators and clients



2

BUSINESS DAY KPI

for email responses

Our Standard

The Trilogy Care team works toward a 2-business day turnaround for all email responses, ensuring coordinators and clients receive timely, considered replies.

Continuous Improvement

Wherever possible, our teams work to reduce response times beyond this KPI — we see 2 business days as a ceiling, not a target.

Why It Matters

Fast, reliable communication supports coordinators in making timely decisions for their clients and reflects Trilogy Care's commitment to quality service.

Client Communication Points

How we keep clients informed — and keep you connected



Emails to Clients

Outbound emails to clients cover key updates, budget information, and important notices. Messages are written in plain language to keep clients well-informed and confident in their care management.



SMS Updates

SMS messages are used for timely, short-form communications — including reminders and time-sensitive updates — ensuring clients receive important information promptly.



Your Details Included

Coordinator information is now being embedded directly into client emails and SMS messages, reinforcing the relationship between clients and their coordinators and reducing confusion about who to contact.

TRILOGY CARE

Resources

Essential Resources for Support at Home Implementation

Access comprehensive tools and expert guidance to navigate the transition to Support at Home with confidence. Our resource hub provides everything coordinators need for successful implementation.



Expert Q&A Sessions

Watch our founder James Whitelaw and Executive Team address frequently asked questions in two comprehensive video sessions, providing clarity on complex implementation issues.



Calculation Tools

Utilise our purpose-built calculators: the Coordinator Calculator for planning support packages and the Client Quarterly Calculator for tracking client progress and budgets.



Comprehensive Resource Hub

Access transition materials, previous webinar recordings, case study videos, and implementation guides—all centralised for your convenience.

Quick Links

[Support at Home Hub](#)

[Coordinator Calculator](#)

[Client Quarterly Calculator](#)

Remember to check out resources on:

[Supplier Hub](#)

[Trilogy Care Website](#)

[Coordinator Resource Page](#)

thank you

We appreciate your participation and engagement throughout our session today. A copy of this presentation will be uploaded to your Coordinator Resource Page in the next week

To help us enhance future sessions, we kindly ask that you complete our brief feedback survey.

[Complete Feedback Survey](#)



We look forward to seeing next month-

Save the date...

April 29th at 12pm AEST