



Your guide to self-management success





Welcome to Trilogy Care

Thank you for choosing Trilogy Care to self-manage your Home Care Package (HCP). We understand the importance of this decision, and we're here to guide you through this new journey.

At Trilogy Care, our mission is to empower you to live independently while receiving the support you need. By self-managing your Home Care Package, you maintain control over who provides your care and how your funds are spent.

This guide outlines the steps to get started, offers tips on selecting support workers, provides essential information, and explains how to use the Trilogy Care Portal to monitor your care.

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The information contained in this booklet was correct at the time of publication and is subject to change.

Understanding your Home Care Package

The Home Care Packages Program is designed to support older Australians with complex care needs while allowing them to live independently in their own homes. The program operates under the philosophy of consumer-directed care, meaning you have the choice and flexibility to decide who provides your care, what services you receive, and how your package funds are spent.

Your package funds, which vary depending on your assigned level, can be used for a wide range of services, including personal care, nursing, allied health, domestic assistance, and social support. However, some items, such as general household bills or Medicare-covered services, are excluded from HCP funding. You'll find more on this topic in the 'Inclusions and Exclusions' section of this guide.

Starting your Home Care Package with Trilogy Care is a simple two-step process designed to set you up quickly and smoothly.



Getting started: the welcome journey



STEP 1: INITIAL QUESTIONNAIRE

The first step is completing our initial questionnaire. This online form collects important information about your health, care needs, goals, and preferences, enabling us to create an accurate care plan and budget with you. The questionnaire is easy to navigate, and you can save your progress to finish later if needed.

IMPORTANT POINTS:

You'll need an up-to-date medical health summary, which you can request from your GP.

- An electronic signature is required; if this isn't an option, our friendly team can offer alternatives.
- After completing the questionnaire, you'll be prompted to book your welcome meeting to finalise your care plan and budget.



STEP 2: WELCOME MEETING

Your welcome meeting is the second step in your journey with Trilogy Care. During this meeting, our intake team will work with you to design your care plan, set budget allocations, and establish personalised goals. The meeting takes place over the phone, and you can invite a family member, friend, or translator for support.

Your care plan is central to how your services are delivered. It reflects your personal goals, care needs, and preferences. Our team will ensure that your care plan evolves as your needs change.

We will conduct a full review of your care plan at least once every twelve months, or more frequently if your needs change. You can request updates to your care plan at any time by contacting your care partner.

IMPORTANT POINTS:

- Prepare for your meeting by considering your care needs, goals, and any specific services you require.
- Joint meetings are available if a family member or spouse is also signing up with Trilogy Care at the same time.
- Your care plan will be ready shortly after this meeting, and you can start receiving services and support from your commencement date.

ENGAGING SUPPORT WORKERS

As a self-managed care recipient, you have the flexibility to choose your support workers. Trilogy Care can assist you in finding care platforms like Careseekers, Hireup, or Mable but does not engage workers on your behalf.

IMPORTANT POINTS:

- Use your budget to identify the types of services you can engage, such as cleaning, transportation, personal care, or medical support.
- Negotiate and agree on payment rates and terms with your support workers.
- Inform them about the requirement to submit compliance documentation to Trilogy Care before commencing services.
- Provide Trilogy Care with the service agreements and rates for your support workers.

WORKER VERIFICATION PROCESS

Before starting, all support workers must be verified by Trilogy Care. They need to provide, at a minimum, their:

- Australian Business Number (ABN)
- Police check
- Public liability insurance
- WorkCover Insurance or personal accident insurance
- Relevant qualifications for the service being provided, for example, AHPRA registration for nursing care

If documentation is incomplete, Trilogy Care cannot pay for their services from your HCP funds. Therefore, it is important that this verification process is completed before the workers start their shifts with you.

If managing support workers becomes overwhelming, you may wish to use our Self Managed PLUS option, which provides a care coordinator to facilitate this process on your behalf.



Understanding your costs: the income-tested care fee

The income-tested care fee (ITF) is an additional contribution that may be required based on your financial situation. This fee is assessed by Services Australia and is dependent on your income and assets, including pensions. If Services Australia has determined that you will need to pay an ITF, this will be invoiced to you by Trilogy Care every month. Note that even some full pensioners are required to pay an ITF.

IMPORTANT POINTS:

- It is important to note that the ITF is not to be confused with the Basic Daily Fee, which will also be listed in the letter you receive from Services Australia. The Basic Daily Fee is optional, and Trilogy Care does not charge it. The ITF is a mandatory requirement by Services Australia that must be paid for (if required).
- The fee is calculated through the income-tested care fee assessment (a means assessment), which you must complete before or during your Welcome Journey with Trilogy Care. This will prevent a larger, back-dated fee from being charged to you by Services Australia in the months after your commencement.
- Upon finalisation of your means assessment, you will receive a letter with the exact amount you will (or won't) be charged daily. It is important that you pass this information on to Trilogy Care so that we can discuss payment options with you.
- Trilogy Care cannot alter or waive this fee. All Home Care Package providers are required to collect this fee on behalf of the Government, which is why your

ITF invoices will come from Trilogy Care, rather than Services Australia.

- If your assessment is still in progress when your package starts, Trilogy Care may provisionally charge the maximum fee until the assessment is finalised, and any overpayments will be reimbursed. To prevent this from occurring, ensure you complete your means assessment as soon as possible.
- If you're facing financial hardship, there are provisions to apply for a hardship reduction or waiver, so please speak to Trilogy Care and Services Australia about this immediately if you are impacted.

UNSPENT FUNDING

If you are transferring to Trilogy Care from another Home Care Package provider, you may have an amount of unspent funding that they will need to provide to us upon your move. It is important to note that this process usually takes a minimum of 70 days to complete.

This occurs because the previous provider must allow you to submit any final invoices for payment for a period of time following your termination date. They must then generate a closing statement within 56 days of your termination date. Following this, the transfer of funds process can begin.

This delay in the receipt of unspent funds is particularly relevant for those wishing to make purchases from the Home Care Package that exceed their monthly subsidy and would dip into that pool of unspent funding, for example, a bathroom modification for increased accessibility. Care recipients should be aware that if they require any urgent support to be

paid out of their unspent funding, they must organise this prior to transferring providers, or they may be left at risk of insufficient support due to the 70-day transfer period.

The Home Care Package guidelines also note that anything paid for privately during your time with the previous provider cannot be reimbursed by your new provider, so ensure you have claimed for everything you need before commencing with Trilogy Care to prevent being left out of pocket.



MANAGING YOUR BUDGET AND COSTS

Your Home Care Package includes government funding budgeted across different care services, depending on your care plan. However, as mentioned previously, you may be required to pay an additional income-tested care fee based on your financial situation.

UNDERSTANDING YOUR COSTS:

- **Government contribution:** The majority of your package funding comes from government subsidies, which accrue daily—your subsidy is not paid in a lump sum like NDIS funding. You may also receive supplements in addition to your subsidy where eligible. For example, if you require dementia support, there is a supplement that can provide further funding toward dementia related support. Please speak to your care partner about any possible supplements you could apply for.
- **Income-tested care fee:** Refer to the section above for more detailed information on the ITF.
- **Basic daily fee:** As outlined above, some providers elect to charge a basic daily fee, but at Trilogy Care, we do not charge this fee.

BUDGET MANAGEMENT TIPS:

- Track your spending using the Trilogy Care Portal
- Allocate funds based on priority needs, leaving flexibility for unexpected expenses
- Regularly review your budget and care plan with your care partner

Funding requests: inclusions and exclusions

Your Home Care Package is designed to support your care needs and help you live independently at home. Understanding what can and cannot be funded is essential for making the most of your package.

WHAT CAN BE FUNDED?

Your package can cover services and items that directly support your care needs and independence that have been impacted by age-related decline, including:

- **Personal care:** Assistance with daily activities like showering, dressing, and grooming
- **Nursing services:** In-home health care, such as wound management and medication support
- **Allied health:** Therapy services like physiotherapy and occupational therapy
- **Domestic assistance:** Help with cleaning, laundry, meal preparation, and shopping
- **Home modifications and maintenance:** Safety improvements like grab rails and repairs
- **Assistive technology:** Mobility aids and medical equipment
- **Social support and transport:** Help with attending appointments and staying socially connected

WHAT CANNOT BE FUNDED?

Certain expenses are excluded from your package, such as:

- **General living costs:** Rent, utilities, groceries, and entertainment

- **Medical services covered by Medicare:** Doctor visits, hospital stays, and medication
- **Private health costs:** Insurance premiums and private dental care
- **Non-essential home modifications:** Renovations unrelated to your care needs
- **Leisure or recreational items:** Holiday costs and non-essential luxury items
- **Services covered by other programs:** CHSP services, disability supports, hearing aids, dentures, CPAP machines, and more, wherever other Government programs fund them

REQUESTING FUNDING

To request funding for a new service or item:

1. **Check your care plan:** Ensure it aligns with your current goals and needs.
2. **Submit your request:** Contact your care partner and request a funding assessment for the support—they will likely ask you for the following evidence to support the request:
 - A recommendation from a medical or allied health professional confirming the support is necessary to ensure you remain safe and independent at home and that it relates directly to your age-related decline and care needs.
 - Two quotes to demonstrate cost-effectiveness.
 - Additional documentation or information required where the request is unique, involves a large purchase, or a typically excluded item.

- 3. Review and approval:** Your request will then be evaluated by your care partner using the Funding Assessment framework set out by the legislators of the Home Care Package program, the Department of Health and Aged Care. In some circumstances, the request will be escalated to our 'Inclusions Committee' for an in-depth review at a senior level. You will be notified of approval or rejection via email, with rejection reasons and suggested alternatives where applicable.

INCLUSION DECISION FRAMEWORK

When evaluating funding requests, all Home Care Package providers must use the Funding Assessment framework mentioned above. This framework ensures that providers approve supports that align with the program's intent and scope and that services being funded by the package are done so lawfully. The full framework can be found [here](#).

We will provide you with a copy of the outcome of any assessments completed using the framework so our decision-making process remains transparent.



Using the Trilogy Care Portal

Once your care plan has been finalised, you and your nominated representatives will be given access to the Trilogy Care Portal. You will each receive a unique, secure login, allowing you to access the necessary details you need. The Portal also displays live updates of your budget and expenditure to provide you with more oversight of your Home Care Package.

While the Portal has been designed with accessibility and ease of use in mind, we understand that it may take some time to become familiar with. To assist you in learning how to use the Portal efficiently, our team has created a support page that provides answers to common problems. The support page is available at [Trilogy Care Portal Support](#).

TRANSPARENT BUDGET TRACKING

One of the key features of the Trilogy Care Portal is budget transparency, as touched on previously in this guide. You can easily track your Home Care Package budget, view your expenditures, and plan for future needs. This provides a clear view of where your funds are being spent, allowing you to make informed choices about your care and ensure that your budget is used effectively. The Portal gives you complete control over your financial decisions, providing peace of mind and confidence in managing your care and support efficiently.

WHAT ELSE CAN I USE THE PORTAL FOR?

Trilogy Care's team is constantly designing additional features in the Portal that will support you navigating your Home Care Package journey. We consider all feedback regarding the Portal and are working to add additional tools that our care recipients have requested. Other features currently available on the Portal include:

- Real-time financial overview
- Detailed breakdown of fees
- Recent transaction history
- Historical account statements
- Improved communication with nominated contacts

We encourage all care recipients to familiarise themselves with the Portal. It is an excellent tool for conveniently managing your Home Care Package without needing to speak to your care partner.

Ongoing support from your care partner

Your care partner is your primary point of contact at Trilogy Care, from the time of your welcome journey onwards. They provide ongoing support with navigating the Home Care Package program and help you manage any issues.

HOW YOUR CARE PARTNER CAN HELP:

- **Adjust your care plan:** Whether your needs change or you want to add new services, your care partner is here to help. Call or email them whenever you wish to contact them.
- **Access additional services:** If you need specialised care or temporary support, your care partner can assist with making referrals or providing you with industry information to help you organise this support, including applying for level upgrades and additional supplements.
- **Manage incidents:** Report any issues or events of concern involving your health condition or your care, such as any falls or medical episodes you experience. Our clinical team can investigate these issues and provide support if you need additional help.
- **Lodge feedback and complaints:** Your care partner is there to support you through any roadblocks or concerns you may have during your time with Trilogy Care and assist with lodging and resolving any complaints you may have.

You will also have regular check-ins every three to six months with your care partner to ensure your needs are being met, so that we can assist you where needed.



Who else can assist me at Trilogy Care?

Your care partner will always be your first point of contact when you have any queries or concerns related to your Home Care Package. However, when those queries or concerns relate to a specific department outside of your care partner's scope, they may need to transfer your call or forward your issue to another team member. Depending on the specific query, it may be sent to one of the following departments for further expert opinion and information:

- Clinical team
- Compliance team
- Accounts team
- Partnerships team
- Sales team
- Service and support team
- Care team management

TRILOGY CARE CONNECT

In December 2023, Trilogy Care Connect was launched—a Facebook community group created exclusively for Trilogy Care care recipients, their families, and unpaid carers. The group is designed to facilitate open discussions about your Home Care Package, allowing you to provide and receive helpful tips for self-managing your package.

Our aim is to foster a supportive, engaging environment where you can connect, share experiences, and find guidance. Whether you're seeking advice or simply looking to engage with others in similar circumstances, Trilogy Care Connect is available to you.



Your rights and responsibilities

The Charter of Aged Care Rights protects your rights as a care recipient. It ensures that you receive safe, respectful care centred around your individual needs and preferences. Understanding your rights and responsibilities is key to ensuring a positive care experience.

YOUR RIGHTS

The Charter of Aged Care Rights guarantees that you have the right to:

- **Safe and high-quality care:** Receive services that are effective, timely, and tailored to your needs.
- **Dignity and respect:** Be treated with dignity, respect, and consideration for your identity, culture, and personal choices.
- **Autonomy in care decisions:** Make choices about your care, and have control over aspects of your daily life, including personal and social activities.
- **Access to information:** Be informed about your care and services in a way that you understand and have access to all information about yourself.
- **Independence:** Maintain your independence and make decisions that align with your lifestyle and preferences.
- **Support and advocacy:** Have a person of your choice, including an aged care advocate, support you or speak on your behalf.
- **Privacy:** Expect your personal information to be kept confidential and your privacy to be respected.
- **Complaints and feedback:** Provide feedback or lodge complaints without fear of reprisal and have your concerns addressed promptly.

YOUR RESPONSIBILITIES

You also have certain responsibilities that help ensure a safe, respectful, and effective care environment. These include:

- **Providing accurate information:** Give accurate and up-to-date information about your care needs to help us deliver the best possible service.
- **Respecting care workers:** Treat Trilogy Care staff and your support workers with courtesy and respect, and avoid behaviours that could harm others.
- **Complying with care agreements:** Adhere to the terms of your Home Care Agreement, including payment of fees and working within the agreed care plan.
- **Safety and consideration:** Take reasonable steps to maintain a safe environment for yourself and those providing your care, and cooperate with any measures put in place for your safety.

MUTUAL RESPECT AND COLLABORATION

Achieving positive care outcomes relies on mutual respect and collaboration between you, your care workers, and Trilogy Care. By understanding both your rights and responsibilities, you can contribute to a caring, respectful environment where your needs are met while maintaining the dignity and autonomy you deserve.

Complaints and feedback

At Trilogy Care, we are committed to ensuring your satisfaction. All aged care recipients can submit complaints or provide feedback at any time. You can easily lodge a complaint through our website or contact your care partner, who can submit it on your behalf. We will acknowledge your complaint within a few business days, followed by a formal response within 28 business days.

We will work with you until the matter is fully resolved. This may involve conference calls with other organisations, escalation to a manager, or additional steps as needed. If necessary, you can also contact the Aged Care Quality and Safety Commission to assist with the investigation.

ADDITIONAL SUPPORT

If you encounter difficulties lodging a complaint or are dissatisfied with the resolution, free advocacy services, such as OPAN, are available to support you. These services are designed to help when your care needs are not being met.



Your journey with Trilogy Care

Thank you for taking the time to review this welcome guide. We understand that self-managing your Home Care Package is an important responsibility, and we are committed to providing the support and resources you need to succeed. This guide is just the beginning—your care journey with Trilogy Care is built on a partnership where your choices and independence are prioritised.

By now, you should have a strong understanding of the following:

- How to get started with onboarding, setting up your care plan, and accessing services
- The types of services and supports covered by your Home Care Package, as well as what is excluded
- The flexibility you have in choosing and managing your own support workers
- The importance of managing your budget effectively and understanding any additional costs, including the income-tested care fee
- The process and guidelines around the approval of funding requests

- Your rights as a care recipient, as well as your responsibilities in maintaining a safe and respectful care environment
- How to use the Trilogy Care Portal to monitor your care and stay in control of your package
- Where to find additional help, information, and support when needed

Trilogy Care is here to empower you to live well at home with the confidence and peace of mind that comes from having control over your care. Whether you're setting new goals, managing changing needs, or simply navigating day-to-day decisions, our team is ready to assist you every step of the way.

Remember, this is your care journey. You have the autonomy and support to make the best decisions for your wellbeing and lifestyle. Should you have any further questions or need assistance at any time, don't hesitate to reach out to your care partner or access our online resources.

We look forward to supporting you and helping you achieve your care goals with Trilogy Care.

Common Terms

ACAS – Aged Care Assessment Service

Victorian equivalent of ACAT.

ACAT – Aged Care Assessment Team

Multi-disciplinary teams who assess the needs of older people and make recommendations for government-funded care and support under the HCP.

CAPS – Continence Aids Payment Scheme

An annual, non-taxable payment to cover some of the cost of products that help with the management of incontinence.

CDC – Consumer Directed Care

A way of delivering care that gives individuals choice and flexibility.

CHSP – The Commonwealth Home Support Programme

Entry-level support for older people who need some help to stay at home.

DAC – Daily Accommodation Contribution

The government contribution to the cost of your room in an aged care facility. The amount is determined by Services Australia based on a means assessment.

DAP – Daily Accommodation Payment

The full amount of your aged care room costs, when paid by yourself on a rental basis. Not refundable.

HCP – Home Care Package

A fixed amount sum allocated by the Australian Government to provide services to an older person which will enable them to continue to live independently. Paid via subsidy, based on a need and means assessment.

ITF – Income Tested Fee

The amount you can be asked to pay towards residential aged care or your Home Care Package, based on a means assessment.

KICA-Cog – Kimberley Indigenous Cognitive Assessment Scale

Method used to test the cognitive impairment of Aboriginal or Torres Strait Islander care recipients living in a rural or remote area.

MAC – My Aged Care

The Australian Government organisation responsible for helping you find and access the right government-funded aged care services.

MBS – Medicare Benefits Schedule

Australian Government subsidies for health professional services.

OPAN –Older Persons Advocacy Network

A network of independent non-profit organisations giving a voice to older people at every stage of their aged care experience.

PAS – Psychogeriatric Assessment Scales

Methods used to test the cognitive impairment of care recipients

PBS - Pharmaceutical Benefits Scheme

Australian Government subsidies for qualifying prescription medicines.

RAS – Regional Assessment Service

Conduct face-to-face home support assessments to facilitate access to aged care services and community-based supports.

RUDAS – Rowland Universal Dementia Assess

Method used to test the cognitive impairment of care recipients from a culturally and linguistically diverse background.



Helpful contacts

AGED CARE QUALITY AND SAFETY COMMISSION

Website: agedcarequality.gov.au

Phone: 1800 951 822

DEPARTMENT OF HEALTH AND AGED CARE

Website: health.gov.au

Phone: 1800 020 103

DEPARTMENT OF HEALTH AND AGED CARE – ELDER ABUSE PHONE LINE

Phone: 1800 353 374

MY AGED CARE

Website: myagedcare.com.au

Phone: 1800 200 422

OPAN – OLDER PERSONS ADVOCACY NETWORK

Website: opan.org.au

Phone: 1800 700 600

SERVICES AUSTRALIA

Website: servicesaustralia.gov.au

Phone: 132 300

TRILOGY CARE

Website: trilogycare.com.au

Phone: 1300 459 190



Our services

HOME CARE PACKAGE MANAGEMENT

Trilogy Care is a registered Home Care Package provider that supports you to confidently manage your Home Care Package so that you can continue to live safely and comfortably in the home you love.

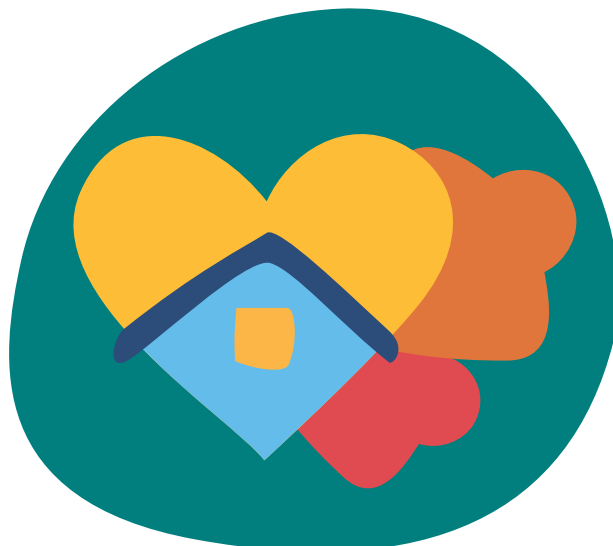
With the option of two tiers of Home Care Package management – Self Managed and Self Managed PLUS – you can have as much or as little control over the management of your Home Care Package as you want and need.

With Trilogy Care, you have absolute freedom to choose the services and providers you want, when you want them, and at a rate they're comfortable paying. We partner with you to get the most from your Home Care Package.

*Support that's all about you
and the life you want to lead.*

For more help understanding your care options, contact us today:

trilogycare.com.au | 1300 459 190





Contact us

Start your self-managed home care journey and start receiving better value from your Home Care Package today!

1300 459 190

trilogycare.com.au

info@trilogycare.com.au

f @TrilogyCare **in** @TrilogyCare **@** @Trilogy.Care **▶** @TrilogyCare

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