# CHSP Community Transport Pricing Pilot (CTPP)

ACTA Conference 28-29 August 2024





Community Transport Pricing Pilot **aims** and **objectives** 

2 What we have done on the pilot to date



4 CHSP and aged care reform updates



The objective of the CTPP is to develop and test a more accurate way of calculating CHSP transport costs. This includes co-designing alternative policy arrangements and developing a new pricing model, both of which need to incorporate factors such as provider sustainability, social engagement and client choice.



Co-design **alternative policy** arrangements to better define a trip and support a new pricing model.

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Collect and analyse a **robust set of data** to inform a pricing model that accounts for other variables such as time and/or distance.

3

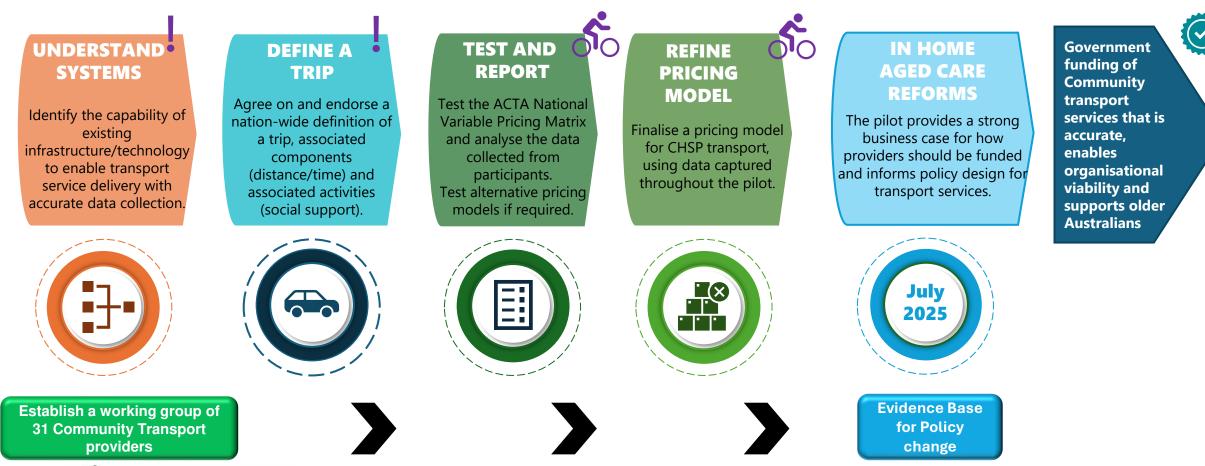
Quantify **social value and benefits** created by Community Transport (CT) services.

4

Understand how the **outcomes of the CTPP** could be implemented in practice for the wider CHSP.



#### Community Transport Pricing Pilot





## What we have done so far?

- ACTA and the Department established a working group of 31 CHSP transport providers.
- We are using the ACTA National Variable Pricing Matrix (NVPM) as a base model to develop the CHSP Community Transport Pricing model (CTPM).
- UniSA has identified providers trip-level data points necessary for pilot study (e.g. trip distance, time, client complexity, vehicle details, etc).
- > UniSA has **analysed participants**' annual organisation-level **financial** and **operational data**.
- ACTA has coordinated with several transport software providers to finalise the data collection process.

## > Through **co-design**:

- Developed **new definitions** for CHSP transport service
- Identified **policy** and **pricing parameters** that need to be considered in the pilot study
- Established evaluation questions and the framework for policy parameters



## **Pilot participants**





**31 CHSP transport services** were selected to pilot a pricing model over 2024-25.

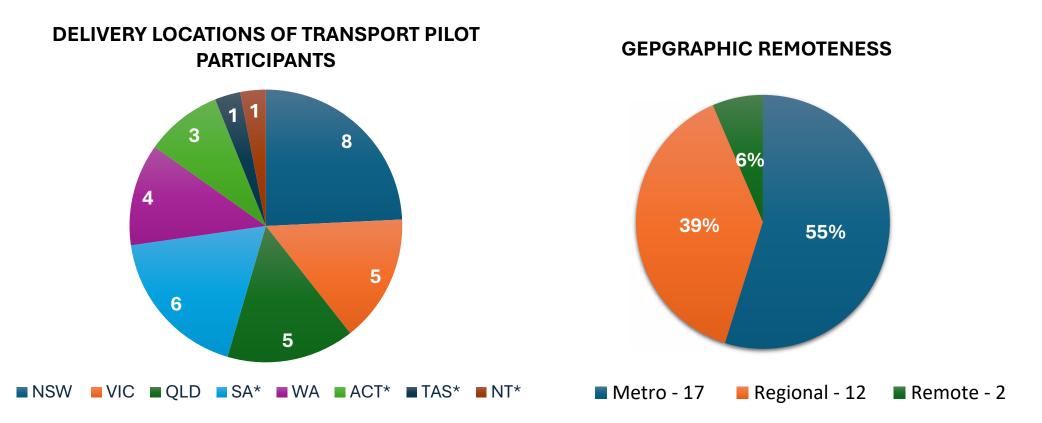
Participating providers represent services that are small, medium and large with differing business models, and deliver services in metro, rural and regional locations.



In 2023-24 there were **121,352 individual clients** using CHSP Transport and **4,705 group client sessions.** 



The participating providers range from **small, medium**, and **large organisations**, delivering to **metropolitan**, **regional** and **remote** areas.



\*Dementia, Alzheimer's Australia & Red Cross operates in these states and is one count.

Australian Government Department of Health and Aged Care

### **UniSA - Research objectives**

This study has the following four inter-related objectives:



The University of South Australia is the research partner. They will collect pilot data, evaluate the pilot, and report independently on its results



**Design an evaluation framework** that can be used to assess the impacts of the pricing model on the sustainability and quality of CT service offerings.

**Undertake a trial of the pricing model** with 31 CT operators across Australia and use the evaluation framework to assess impacts in practice.

**Identify changes or improvements** to the pricing model to maximise the sustainability and quality of CT service offerings across different service contexts.



Estimate costs associated with providing social engagement.



In February 2024, the CTPP project team and ACTA **tested definitions** for CHSP Transport services with the 31 participating service providers in the study.

The definitions will be tested under the Pilot and **included.** 

Community Transport



Service complexity/ client needs



Social engagement



## What Is happening now?



UniSA is **collecting data** both at the **participants Operator-level** and **Trip-level**.



CTPP information within the CHSP Manual (Appendix J) has been developed and will be published shortly.



There will be opportunities for the CHSP transport sector to engage with the pilot through **surveys, webinars and web-content.** 



#### CHSP Extension 2025-2027

- The CHSP has been further extended until 30 June 2027.
- This means CHSP providers will transition to the new Support at Home program no earlier than July 2027.
- This allows CHSP providers more time to prepare for the reforms and ensure a smooth transition for their clients.

More information on funding arrangements for the 2025 - 2027 extension will be available in the coming months.



 CHSP Growth Funding 2024-25 Grant Opportunity will fund up to \$100 million (excl GST) in identified Aged Care Planning Regions for the following service types:

- Domestic assistance.
- Allied health and therapy.
- Transport services.
- Home maintenance.
- A \$10 million 2024-25 CHSP First Nations Growth Grant Opportunity targeted new Aboriginal Community Controlled Organisations providers to increase the service footprint and provider availability to deliver culturally safe CHSP services where there is unmet demand by older First Nations people.

#### Additional ad hoc funding

- CHSP providers where transport costs are more than 5% of annual grant funding were able to apply for additional one-off funding to support service delivery demand, innovative delivery models and respond to emergencies with increased fuel costs under GO5672.
- This was a one-off payment, equivalent to 30 cents per litre for increased fuel costs during July 2023 to June 2024.

The department is currently looking at further ad hoc funding opportunities and information will be available in the coming months.



Australian Government Department of Health and Aged Care A new *Aged Care Act* (the new Act) will take effect on or after **1 July 2025**, putting the rights of older people at the centre of the aged care system. The new Act will change the way in-home aged care services are funded, regulated, and delivered.

#### Taskforce

- Interim report has been **provided to Government**.
- Recommendations made by the Taskforce will be considered by Government.

## New Aged Care Act

This will trigger the start of a **new service list**, **registration categories** and **funding arrangements** for in-home aged care.

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# Provider regulations under the *New Aged Care Act*

# **Provider registration**

- The new regulatory model for aged care will introduce universal provider registration.
- Providers will register into one or more registration categories.

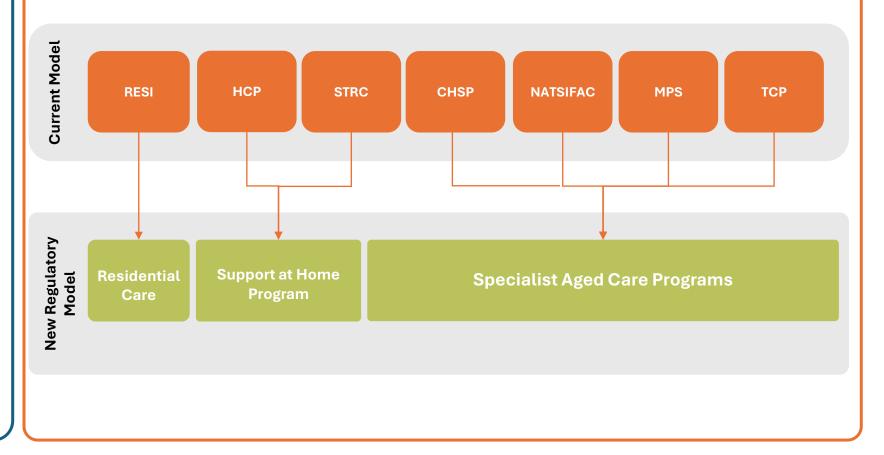
# Transition to the new model

- Existing providers will be automatically 'deemed' to be registered when the new Aged Care Act commences.
- This will be based on the services they are currently delivering

# Groups not being deemed

• Subcontractors for aged care providers

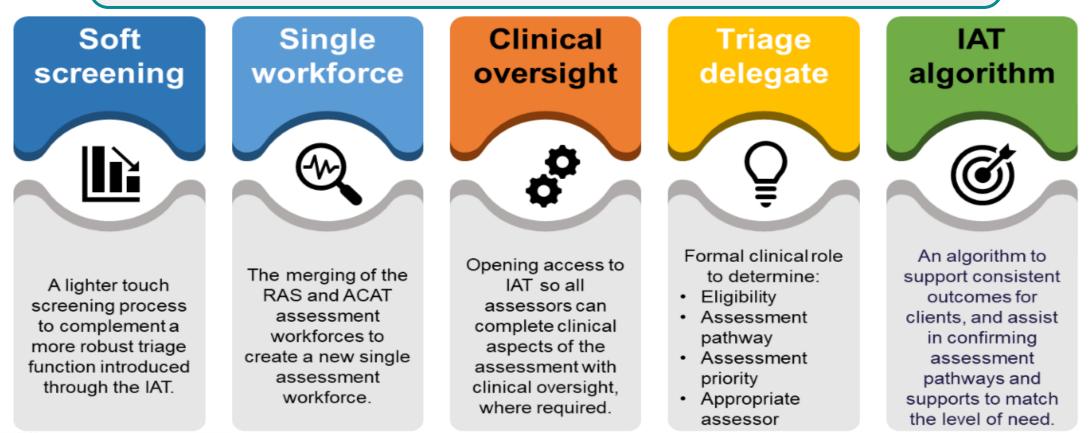
# Deeming providers from the current to the new regulatory model





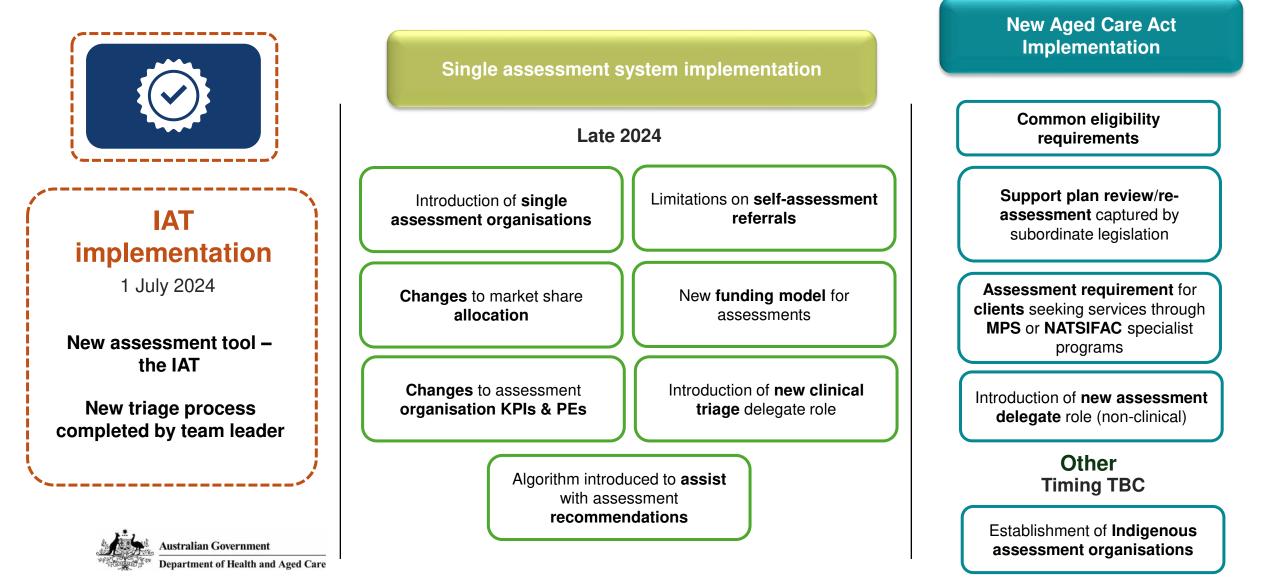
Single assessment and integrated assessment tool

The New Integrated Assessment Tool (IAT) will support other functions of the Single Assessment System (SAS), which was introduced iteratively from 1 July 2024, including:





### What went live: 1 July 2024



The Department of Health and Aged Care will **keep providers informed** about planned changes to the CHSP and action that needs to be taken.

There will be several **opportunities for information and consultation** with providers in **2024** and **2025**.

You can follow pilot **progress** on the DOHAC website<sup>•</sup> under **CHSP Community Transport Pricing Pilot.** 



# Thank you for attending



health.gov.au/our-work/CHSP-community-transport-pricing-pilot



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