

Residential Care Payment statement: How to read and reconcile for ACFI*

The payment statement for Residential Aged Care has recently changed.
This resource will help you understand the new Payment statement, and reconcile it with the Service payment summary.

Reading the Payment statement:

[Different sections of the Payment statement](#)

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* Aged Care Funding Instrument



Different sections of the Payment statement

Service payment summary

A summary of the total amount paid to the service, displaying the amounts paid for different subsidies and supplements.

Also includes any adjustments or recoveries effecting the payment received by the service for the claim month.

Respite care and incentive summary

Respite care allocation for the service is visible here, as well as care usage and the year to date totals.

The page displays the details used to calculate the residential respite incentive supplement for the selected month.

Care recipients' itemised payments

Detailed information about payments made for individual care recipients will be available in this section.

Supported resident ratio

A daily breakdown of the Supported resident ratio.

Care recipients' details

Important information about the care recipient including admission details, resident contribution type, Aged Care Assessment Team (ACAT) approval, Aged Care Funding Instrument (ACFI) reappraisal dates, room type, compensation, leave days remaining.

Supported resident ratio adjustments

This section will only be available if an adjustment is required to the Supported resident ratio for a previous claim period.

Subsidy classification

Provides details of the subsidy paid for each assessment level. Service based subsidies are based on the number of days the beds were full.

Payment statement notes

Important notes for the service will be visible here. Any notes related to adjustments will also be available on this screen.



Service payment summary

Note: This table is not a complete and accurate recreation of the Service payment summary table found on the Aged Care Provider Portal. This table is only to be used as a visual aid.

Description	Payments
A Subsidies	
Adjusted subsidy - permanent	\$11,190.85
Adjusted subsidy - respite	\$8,907.75
SUBTOTAL subsidies	\$20,098.60
B Supplements	
Accommodation supplement	\$0.00
Enteral feeding supplement	\$1,176.76
Hardship BDF supplement	\$0.00
Hardship means tested accommodation supplement	\$357.46
SUBTOTAL supplements	\$1,534.22

A) Subsidies

Total subsidies paid to the service for the claim month. For more details see *Care recipients' itemised payments* for a breakdown of subsidies by care recipient.

B) Supplements

All the supplements paid to the service for the claim month. All supplements available will be visible, however if no payment was received for the specified supplement a \$0.00 amount will display. For more details see *Care recipients' itemised payments* for a breakdown of supplements by care recipient. Detailed information about respite care incentive supplement will be available on *Respite care and incentive summary*.

NEW Changes to supplements

To help with reconciliation, you'll see detailed information for hardship payments in the *Payment summary* and in *Care recipients' itemised payment*.

Supplements now include:

- Hardship BDF* supplement
- Hardship means tested accommodation supplement, which displays the RAD**/ DAP*** Hardship.

*BDF Basic Daily Fee **Refundable Accommodation Deposit ***Daily Accommodation Payment



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Service payment summary

C	Adjustments for current period	
	Income tested subsidy reduction	\$0.00
	SUBTOTAL adjustments for current period	\$0.00
D	Adjustments for previous periods	
	Adjusted subsidy - permanent	\$0.00
	Adjusted subsidy - respite	\$0.00
	SUBTOTAL adjustments for previous periods	\$0.00
E	Outstanding balance and advance	
	Outstanding balance from January 2021	-\$0.74
	Advance	-\$0.10
	SUBTOTAL outstanding balance and advance	-\$0.84
	Payment held over	\$0.00
F	TOTAL amount paid to provider	\$21,631.98

C) Adjustments for current period

Any adjustments or reductions made in the payment.

For more details on manual adjustments see *Payment statement notes*. View *Care recipients' itemised payments* for a breakdown of adjustments by care recipient.

D) Adjustments for previous periods

Any payment or recovery amount applied to a service due to a change of circumstance that occurred in a previous period. For more details see *Care recipients' itemised payments* for a breakdown of adjustments by care recipient and relevant claim months.

E) Outstanding balance and advance

Outstanding balances (held overs and advances) are recovered through the current month's claim entitlement. Any amounts still owing will be applied for recovery in future months' claims. For more details on current outstanding balances, see payment summaries from previous months.

F) Total amount paid (A + B + C + D + E = F)

Total amount paid to the service for the claim month, including any adjustments for previous months.



Care recipients' itemised payments

Care recipient								G Paid leave days				H Unpaid leave days		I	J	K	L	M
A ID	Family name	Given name	B Payment type	C Rate effective date	D Entitlement type	E Adjustments for claim month	F Appraisal payment indicator	SL	HP	TC	EL	L	TC	Paid care days	Non claimable days	Rate per day	Subtotal	Total
XXXXXXXXXX	Smith	Jane	Basic level 2 ¹	11/08/2021	Original	March 2021								-20		\$48.15	-\$963.00	\$2,022.30
			Basic level 2 ²	11/08/2021	Adjustment	March 2021								31		\$48.15	\$1,492.65	
			Basic level 2	11/08/2021	Current									31		\$48.15	\$1,492.65	

Subtotal (K) = (Paid leave days (G) + Paid care days (I)) x Rate per day (K)

Total = Sum of all the subtotal amounts (M)

Payment Terminology

A ID **NEW**

The **new** Care recipient ID. This is the identifier for ongoing use. You may need to change your care recipient records to document this ID. The previous ID has now been renamed SPARC CR (System for Payments of Aged Residential Care Recipient) ID.

B Payment type

Name of the subsidy and supplement paid.

C Rate effective date **NEW**

Date that the rate for the subsidy came into effect. Note that this isn't the start date for care recipient eligibility to the subsidy / supplement.

D Entitlement type

Outlines if the payment is for the current claim month, or an adjustment for a prior claim month. (Adjustments for claim month will display the respective claim month).

If there is an adjustment:

The payment type from the original claim will be reversed.

¹ This will display as negative Paid care days, negative Paid leave days and a negative Subtotal.

² The payment type will be recalculated.

E Adjustments for claim month

The original month for which the adjustment is taking place. This is only available if the Entitlement type is an adjustment.

F Appraisal payment indicator

When an ACFI appraisal / reappraisal is due, this column specifies the right conditions to the ACFI.

G Paid leave days

Number of temporary leave days funded by the Government. These will be broken down by leave type: Social leave, Hospital leave, Transition care and Emergency leave (leave during an emergency situation, as declared by Department of Health and Aged Care).

H Unpaid leave days

Number of temporary leave days that aren't funded by the Government. These will be broken down by leave type: Leave (includes Social leave) and Transition care.

Note: Paid leave days and unpaid leave days will be displayed on separate lines.

I Paid care days

Number of days the care recipient was eligible for the subsidy / supplement.

J Non claimable days

Number of days that the care recipient was ineligible for the subsidy / supplement. Reasons for ineligibility could be an invalid ACFI.

K Rate per day

How much is paid for subsidy and supplement(s) for each day the care recipient is eligible.

L Subtotal

Total payment amount calculated for each payment type.

M Total

The total amount paid for the care recipient for the claim month, including any adjustments for previous months.

For information on how to view the payment statement on the Aged Care Provider Portal, see our [simulation](#).



Care recipient details

Legend

Claim month August 2022

Search

Search using any keyword in the table. To search for multiple keywords, provide a space between words.

Filter by All Respite Permanent

Care recipient			A Admission details		B	C	D	E Reappraisal dates		F	G	H Days remaining		
ID	Family name	Given name	Entry	Departure	RCT	SR	ACAT	Mandatory	Optional	Room type	Compensation	Respite care	Social leave	Transition care leave
XXXXXXXXXX	Smith	Jane	10/05/2020				R			001A			52/52	
XXXXXXXXXX	Citizen	Example	01/01/2020				R	01/01/2030					52/52	
XXXXXXXXXX	Citizen	Example	01/01/2020				L	01/01/2030						



On the Aged Care Provider Portal, the Legend (top right) will display all the acronyms used on the screen.

A Admission details

Entry and departure dates into the service

B Resident contribution type (RCT)

(Previously known as Basic resident contribution (BRC))
Basic resident contribution type for the care recipient.

C Supported resident status (SR)

(Previously known as Subsidy reduction (SR))
Supported resident status for the care recipient.

D Aged Care Assessment Team approval (ACAT)

Level of care the care recipient is approved for.

E Reappraisal dates

(Previously known as ACFI Appraisal dates)
Date for ACFI reappraisals and if the reappraisals are mandatory.

F Room type

Ward code if the care recipient is receiving extra services.

G Compensation

(Previously known as Workers Compensation (WC) /Third Party Insurance (TP) liability type).
Compensation entitlements for the care recipient that may affect payments.

H Days remaining

Number of approved leave days for social and respite care, and the leave days remaining. These leave days reset on 1 July each year.



Subsidy classification

(previously known as Daily subsidy from ACFI)

Claim month August 2022

(A) Total full bed days: 120

Search

Search using any keyword in the table. To search for multiple keywords, provide a space between words.

Effective date	(B) Daily subsidy levels		Amount per day	(E) (F) Current bed days		(G) Current bed days		Extended hospital reduction
	Assessment type	Assessment level		Full	Late	Adjusted subsidy reduction	(H)	
01/03/2020	Activities of daily living	High	\$115.07	120	0	0	0	
01/03/2020	Behaviour	High	\$37.67	120	0	0	0	
01/03/2020	Complex Health care	High	\$69.59	120	0	0	0	

Show 10 records - Showing 1 to 3 of 3 records

- (A) Total full beds**
Total number of full bed days for the claim month.
- (B) Assessment type**
Different subsidies the service is eligible for. These are broken into 4 categories: Respite, Activities of daily living, Behaviour and Complex Health care.
- (C) Assessment level**
Level of subsidy that the service is eligible for. The level will be high, medium or low.
- (D) Amount per day**
Amount of subsidy paid for each day.
- (E) Full (Current bed days)**
Number of beds that were eligible for the full subsidy for the claim period.
- (F) Late (Current bed days)**
Number of beds that are eligible for a late subsidy for the claim period.
- (G) Adjusted subsidy reduction (Current bed days)**
Number of bed days that will receive a reduced subsidy due to adjustments.
- (H) Extended hospital reduction (Current bed days)**
Number of beds that were empty as the care recipient was on extended hospital leave.



Respite care and incentive summary

Respite care allocation for the service is visible here, as well as care usage and the year to date totals.

The page displays the details used to calculate the residential respite incentive supplements for the selected month.

[Home](#) [Claims](#) [Payment statement](#)

Respite care and incentive summary

Claim month

Description

Respite care allocation	1000
Respite care usage	141
Respite care year to date	408

Incentive payment

Period start	01/06/2022
Period end	31/08/2022
Residential respite incentive allocation	247
Residential respite incentive usage	218
Residential respite % achieved	88.00%

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CSV

XML



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Supported resident ratio

(previously known as Low means supported ratio)

A Day	B Supported resident ratio			E New supported resident ratio		
	C Supported residents	D Eligible residents	% Achieved	F Supported residents	G Eligible residents	% Achieved
01	20	26	76.92	22	20	110.00
02	20	24	83.33	22	27	81.48
03	27	26	103.85	26	18	144.44

Supported resident ratio (D) = Supported residents (B) / Eligible residents (C)

New supported resident ratio (G) = Supported residents (E) / Eligible residents (F)



To receive the maximum accommodation supplement applicable for each care recipient, 40% of the care recipients in the service must have a resident status of concessional / assisted / supported / low means and that 40% must be maintained daily.

If a service doesn't meet the low means resident ratio (supported resident ratio), the accommodation supplement payable is reduced by 25% for each day the ratio isn't met.

Terminology

- A Day**
Date of the claim month.
- B Supported residents** (Supported resident ratio)
Total number of permanent care recipients in your care on the specific day who:
 - fall under Pre-2008, Post-2008, or Post-2014 schemes
 - and Concessional; or Assisted; or Supported; or Low Means.
- C Eligible residents** (Supported resident ratio)
Total number of permanent care recipients in your care on the specific day.
- D % Achieved** (Supported resident ratio)
Percentage of care recipients in care that day that were receiving supported/low means supplements.
- E Supported residents** (New supported resident ratio)
Total number of permanent care recipients in your care on the specific day who meet the eligibility and admission criteria and are determined to be: Post-2008 CRs (Post-2008 or Post-2014 scheme) and Supported or Low Means.
- F Eligible residents** (New supported resident ratio)
Total number of permanent care recipients in Post-2008 schemes (Post-2008 or Post-2014 scheme).
- G % Achieved** (New Supported resident ratio)
Percentage of supported residents in care that day that were recipients of the supported / low means supplements.



Supported resident ratio adjustments

(previously known as Low means supported ratio adjustments)



Aged Care Provider Portal

Select or type in service ID or name

XXXXX - SERVICE ID NAME



Claims

Payment statements



Supported resident ratio adjustments

Claim month: August 2022

*Adjustment month: July 2022

Day	Supported resident ratio			New supported resident ratio		
	Supported residents	Eligible residents	% Achieved	Supported residents	Eligible residents	% Achieved
01	0	2	0.00	0	2	0.00
02	11	22	33.00	44	55	66.00
03	0	2	0.00	0	2	0.00
04	0	2	0.00	0	2	0.00
05	0	2	0.00	0	2	0.00

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This section will only be available if an adjustment is required to the Supported resident ratio for a previous claim month.



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Payment statement notes

(previously known as Provider notes)

Important notes for the service will be visible under Payment statement notes.
These notes may be notes related to payments or general notes.
Any notes related to adjustments will also be available on this screen.

Payment statement notes

Claim month:

Service notes

An emergency event has been declared from 01/04/2020 until 30/06/2022. Care recipients taking emergency leave at this time should have their leave code as claimable social leave. Providers will continue to be paid all subsidies and supplements which will be reflected in the statement as paid social leave.
This is an example of a Global note.

CR: 123456789 Mary Poppins: No valid ACAT on date of admission.
This is an example of a service note.

ADH – Ad-hoc Adjustment: \$1,000.00.
This is an example of a service manual note, where “Display on Payment statement notes” was Yes.

CSP – Covid stimulus package: \$1,000.00.
Adjustment processed due to provider request.

MTR – Means testing review: Total -\$2,000.00; -\$1,000.00 December 2021 to January 2022.
Adjustment over 2 months due to provider request. This is an example of a manual adjustment for a service where payments are split, a note will be mandatory.

Manual adjustment : \$500.00
For ACE – Annual Cap Error manual adjustment, this will display as a Manual Adjustment with no code.

