

#### **HCP Expenditure Inclusion & Exclusion List**

The primary purpose of a Home Care Package (HCP) is to provide care and services to meet the assessed care needs identified and outlined in your care plan. We understand that care needs change and a regular review of those care needs by the Care Advisory team, along with clinical and allied health professional assessments, will ensure services are delivered to support those changing care needs.

This expenditure guide has been designed to assist you to make choices about how best to use your HCP funds within the Government guidelines and is to be used in conjunction with the Decision-Making Tool

Included	Approved as long as it relates to a care need outlined in your care plan
Provisional	The decision-making tool must be completed with supporting documentation from a health professional or specialist for consideration
Excluded	Specifically excluded and HCP funds cannot be used to purchase these items

Expenditure	Included	Provisional	Excluded	Additional information
Direct Care Services				
Personal Care such as showering, grooming, toileting, dressing	✓			Identified in the care plan
Domestic Assistance; basic domestic duties	✓			Identified in the care plan
Pet walking	✓			Identified in the care plan
Meal preparation	✓			Identified in the care plan
Banking	✓			Identified in the care plan
Assistance to pay bills	✓			Identified in the care plan
Medication prompt or assistance	✓			Identified in the care plan
Transport to medical appointments and social activities	✓			Identified in the care plan
Social support e.g. assistance with use of technology to stay connected with family and friends, accompany to social activities and to access the community	<b>√</b>			Identified in the care plan
Shopping	✓			Identified in the care plan
Care Management e.g. referrals, liaising with health professionals, develop a careplan, coordinate services, identify potential risks, monitor ongoing care needs and supports	<b>√</b>			Identified in the care plan
Planned activity groups	✓			Identified in the care plan and full cost recovery
Day Therapy program; Accredited Physio led group exercise programs delivered face to face or virtually via zoom or skype	<b>√</b>			Identified in the care plan and full cost recovery
In-home respite e.g. companion support in the home up to 24hrs per day	✓			Identified in the care plan
Day respite	✓			Identified in the care plan and full cost recovery
Cottage Respite	✓			Identified in the care plan and full cost recovery



Expenditure	Included	Provisional	Excluded	Additional information
Clinical and Allied Health Services				
General nursing	✓			Full cost recovery only
Nursing assessment (continence, general	✓			Full cost recovery only
clinical, wound, cognitive etc.)				, ,
Wound management	✓			Full cost recovery only
Catheter Care	✓			Full cost recovery only
Medication administration	<b>√</b>			Full cost recovery only
Occupational Therapy (OT) assessment; includes functional assessment and assessment of home environment	<b>√</b>			Full cost recovery only
Physiotherapy	✓			Full cost recovery only
Dietitian/Nutritionist	✓			Full cost recovery only
Speech Pathologist	✓			Full cost recovery only
Therapeutic Massage	✓			Full cost recovery only
Osteopath	<b>✓</b>			Full cost recovery only
<u> </u>	<b>✓</b>			
Acupuncture	· ·			Full cost recovery only
Chiropractor	✓			Full cost recovery only
Exercise Physiologist	✓			Full cost recovery only
Podiatrist/Orthotist	<b>√</b>			Full cost recovery only
Social worker	✓			Full cost recovery only
Orthoptist	<b>√</b>			Full cost recovery only
Optometrist	✓			Full cost recovery only
Audiologist	✓			Full cost recovery only
Bowen Therapy		*		If assessed by GP as essential to support care need and will be reviewed by GP every 3-6 months
Medical Fees e.g. GP, Medical consults, Emergency fees			Х	Item already subsidised by the Government is an excluded item
Specialist clinician (e.g. Oncologist, radiologist, anaesthetist)			X	Item already subsidised by the Government is an excluded item
Health practitioner (non- approved or non- accredited therapy)			X	Excluded item
Pharmacist			X	Excluded item
Dentist			X	Excluded item
Medical Equipment				
Wheelchair		*		Must be assessed by an OT or allied health professional
Walking stick		<b>.</b>		Must be assessed by an OT or allied health professional
Wheelie Walker		<b>.</b>		Must be assessed by an OT or allied health professional
Hi/Low electric hospital bed		<b>.</b>		Must be assessed by an OT or allied health professional
Medical lift recliner chair		<b>*</b>		Must be assessed by an OT or allied health professional
Shower chair		*		Must be assessed by an OT or allied health professional
Commode		<b>*</b>		Must be assessed by an OT or allied health professional
Non-slip mat	✓			Identified in the care plan
Over bed table (hospital)	✓			Identified in the care plan
Enteral feeding	<b>√</b>			Identified in the care plan and receiving the enteral feeding supplement
Oxygen equipment e.g. oxygen concentrator, oxygen masks, oxygen tubing		*		Identified in the care plan and receiving the oxygen supplement or assessment by the GP that oxygen is required



Expenditure	Included	Provisional	Excluded	Additional Information
Pressure relieving cushion		*		Must be assessed by an OT or allied health professional
Pressure relieving Mattress		*		Must be assessed by an OT or allied health professional
CPAP machine	<b>√</b>			Identified in the care plan
Electric shaver	✓			Identified in the care plan
Medication reminders e.g. dosette box, tab timer	<b>√</b>			Identified in the care plan
Webster pack preparation	✓			Identified in the care plan
Magnifier	✓			Identified in the care plan
Skin integrity products e.g. Sorbolene, sudacrem	<b>√</b>			Identified in the care plan
Mobility scooter		*		Must be assessed by an OT or allied health
				professional. Please note the eligibility may
				differ between States based on alternate
				funded availability e.g. SWEP
Lifting machine/hoist for the home		<b>*</b>		Must be assessed by an OT or allied health
· ·				professional
Continence aids	✓			Identified in the care plan
				A continence assessment is required
				before ordering products for the first time
				Note: CAPS funding must be exhausted
				before HCP funds can be used
Catheter products	<b>✓</b>			Identified in the care plan
				A continence assessment is required
				before ordering products for the first time
				Note: CAPS funding must be exhausted
				before HCP funds can be used
Wound care products	✓			Identified in the care plan
				A wound assessment is required before
				ordering products for the first time
				This may be a nurse or GP/specialist
Hearing aids			Х	Item already subsidised by the Government is an excluded item
Glasses			X	Item already subsidised by the
				Government is an excluded item
Dental treatments e.g. dentures, fillings,			X	Item already subsidised by the
extractions				Government is an excluded item
Orthotics		*		Must be assessed by an OT or allied health
				professional
Home Maintenance				Excludes general footwear
Light Gardening e.g. lawn mowing, edge	<b>✓</b>			Identified in the care plan
trimming, spraying weeds, tree trimming to				is critica in the care plan
clear pathway				
Landscaping	1		Х	General household income item
Changing light bulb	<b>✓</b>			Identified in the care plan
Smoke alarms	<b>✓</b>			Identified in the care plan
Gutter cleaning	<b>✓</b>			Identified in the care plan
Gutter repairs or replacement			X	General household income item
Expenditure	Included	Provisional	Excluded	Additional Information
			ZAGIGUEG	,
Ramp installation		<b>*</b>		Must be assessed by an OT or allied health
Namp nistanation		*		professional



Deck repairs or installation (not related to a ramp installation)			х	General household income item
Rail installation e.g. bathroom, toilet, front or back entrance		*		Must be assessed by an OT or allied health professional
Bathroom modification (minor) such as installation hand held shower rose, easy access taps, grab rails		*		Must be assessed by an OT or allied health professional
Home and Bathroom modifications (major)			X	General household income item The HCP can only assist with obtaining advice on major home modifications, it cannot be used to fund the modifications That advice may be arranging an OT assessment, quotes or SWEP funding application
Carpet replacement		*		Must be assessed by an OT or allied health professional
Repair of heating/cooling units			X	General household income item
Pool maintenance/repairs			X	General household income item
Hot water service repairs/replacement			X	General household income item
Repair of electrical equipment/appliances such as dishwasher, washing machine, oven			X	General household income item
Installation/repair Solar systems			X	General household income item
Electrical Rewiring			X	General household income item
Assistive Technology				
I-Pad/Tablet		<b>*</b>		Identified in the care plan
Assistance with IT Setup	✓			Identified in the care plan
Large Button Phone	✓			Identified in the care plan
Loop System	✓			With Audiology Assessment
Speech Out-Put Software	✓			If assessed by relevant Specialist
Telehealth Telecare devices including	✓			In consultation with Telehealth experts to
personal monitoring alarm, fall detector, room sensors etc.)				determine which products are suitable
General Household Items				
Assistive or self-help devices e.g. modified cutlery, lever handles, tipper kettle, vacuum, swivel seat, long reach handle, raised toilet seat, detachable bidet		*		Must be assessed by an OT or allied health professional
Bidet			X	General household income item
Microwave		*		Only in circumstances where there are no other reheating options available e.g. gas is turned off in the home
Medication Fridge		*		Must be for medication storage only
Household furniture			X	General household income item
Fridge			X	General household income item
Oven			X	General household income item
Stove			X	General household income item
Lawnmower			Х	General household income item
Expenditure	Included	Provisional	Excluded	Additional Information
Home security system such as CCTV			Х	General household income item
Washing machine			X	General household income item
Non-Hospital bed			X	General household income item
Bed linen			X	General household income item
Dryer			X	General household income item
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Transport		
Vehicle Costs- e.g. Servicing/Repairs/Fuel/modifications	X General household income item	
Car Wash	X General household income item	
Public transport card such as Myki card or bus card	X General household income item	
Taxi card (cab charge) ✓	For client use only, and the purpose me be stated in the care plan	ust
General Household Expenses		
Hair Cut/Beard Trim	X General household income item	
Supermarket groceries e.g tissues, haircare products, soaps, make-up, toiletries	X General household income item	
Takeaway food	X General household income item	
Manicure/Pedicure	X General household income item	
Motor vehicle costs e.g. petrol, car wash, insurance, vehicle modifications	X General household income item	
Insurance	X General household income item	
Utility bills e.g. phone, electricity, gas, water, rates	X General household income item	
Internet	X General household income item	
Pet care e.g. food, medications, grooming, accommodation, vet bills, purchase animal	X General household income item	
Funeral costs	X General household income item	
Nutritional supplements e.g. Sustagen, Souvenaid, Ensure Plus, thickening agents	X The purchase of food, except as part of enteral feeding requirements, is a specience exclusion based on the Quality of Care Principles 2014 and cannot be included the package of care and services under HCP Program.	ified d in
Non-PBS listed pharmaceuticals e.g Vitamins, mild analgesia, aperients	Medication management is support to your medication. It is not to be a source subsidy for medical expenses and non-medications, including vitamins and supplements. These are classified as general income and therefore an exclusitem as per the Quality of Care Principl 2014.	e of PBS ded
Pharmaceuticals listed on the PBS	X Items covered by the Medicare Benefi	+c
e.g Paracetamol, Ventolin, Allergy medication, Insulin, Blood Pressure medication	Schedule or the Pharmaceutical Benefi Scheme are excluded	
Social Activities		
Dating Sites	X General household income item	
Cost of Hobbies	X General household income item	
Club Memberships, subscriptions	X e.g. U3A / Probus/Sporting clubs - Gen household income item	eral
Entertainment Activities e.g. movie tickets	X General household income item	
Other		
Pre-prepared meals   ✓	Identified in the care plan HCP can only pay to prepare the meals Client must pay the food cost portion	
Gap Payments for Medical Costs E.G. X-Rays	X Item already subsidised by the Government is an excluded item	
Residential Respite Fees	X Item already subsidised by the Government is an excluded item	



Private Aged Care Placement Services	X	Payment for services for a client who is
		moving into an aged care facility are
		excluded items.