



West Coast District Health Board
Te Poari Hauora a Rohe o Tai Poutini

Information sheet

9 July 2015

Funding of aged residential care services for relocated Ultimate Care Allen Bryant residents

- An Admission Agreement sets out certainty about what is provided by aged residential care services and the charges for the services.
- An aged residential care provider will make sure any new residents get a copy of the agreement, to discuss, read and sign. An authorised representative is able to agree to the document and sign on behalf of a resident.
- Anyone evacuated from Ultimate Care Allen Bryant who is now living in another aged residential care facility will receive a new Admission Agreement from their new temporary home to discuss, read and sign.
- If an Ultimate Care Allen Bryant resident is now living in the temporary Allen Bryant space in Grey Base Hospital, the Admission Agreement they have had with Ultimate Care Allen Bryant may still be valid. Residents or their representatives should discuss any questions they have about this with Allen Bryant Manager Jill Gillman, 0274 177 763.
- If an Allen Bryant resident had been receiving or had been notified that they were eligible to receive the Residential Care Subsidy as of 18 June 2015, the funding for their aged residential care service, (which is made up of their client contribution from superannuation, and the remainder of the daily fee from the residential care subsidy) will be paid to the current provider of their residential care. Where a resident is in a higher level of aged residential care than rest home, the West Coast DHB pays a further amount to the provider for the higher level of care (i.e., dementia rest home, general hospital, dementia hospital). Residents can decide to accept and pay privately for additional services like a larger room, ensuite etc, in discussion with the aged residential care provider. For advice about funding, contact the Complex Clinical Care Network 03 768 0492.
- Where an Ultimate Care Allen Bryant resident was paying privately for their aged residential care service at the time of the 18 June flood, they will continue to pay privately unless they have experienced a change in circumstances and had approval for a Residential Care Subsidy by the Ministry of Social Development. To inquire about the subsidy, contact the Complex Clinical Care Network 03 768 0492.. These residents will directly pay the new aged residential care provider who is now providing their residential care. Shortly the West Coast aged residential care providers will send letters to private paying residents to advise that the new maximum contribution amount from 1 July 2015 is \$875.85 per week including GST. This equates to the weekly cost of rest home level care. The new asset threshold from 1 July 2015 appears on page two for your information.

Asset threshold

Asset thresholds are adjusted annually with new thresholds coming into effect on 1 July each year.

The value of assets that you may retain (asset threshold) and still be eligible for subsidised residential care from 1 July 2015 are as follows:

	Asset Level
A single or widowed person in care	\$218,598
Couples with both partners in care	\$218,598
Couples with one partner in care	Either \$119,709 (the family home, car, and a pre-paid funeral of up to \$10,000 are exempt assets) Or \$218,598 total assets

How to apply for a financial means assessment

The changes to the asset thresholds may mean that the result of your financial means assessment has changed and you may qualify for a residential care subsidy. This means that the amount that you pay for your residential care could change.

You have the right to apply for a review of your financial means assessment.

If you wish to apply for a review of your financial means assessment to see whether the changes to the asset thresholds affect the amount that you have to pay for your residential care, please contact your local needs assessment and service coordination agency who will provide you with the necessary application form. Alternatively, contact Specialised Processing Services at the Ministry of Social Development toll free on 0800 999 727.

When you receive the form you need to complete it, and send it to:

Specialised Processing Services

Ministry of Social Development

Private Bag 9032

Whangarei

The effect of any change to a financial means assessment will only be backdated for 90 days so it is in your best interests to apply for a review of your financial means assessment, should you wish to, as soon as possible.

Should you have any queries on financial means assessments, maximum contributions, asset thresholds, and/or applying for a review, please contact the Complex Clinical Care Network on 03 768 0492.

From the Ministry of Health website (www.health.govt.nz):

The following may assist with consideration of the aged residential care Admission Agreement.

While a person is in care, what individual services/items do they have to pay for that are not covered by Government funding (the residential care subsidy)?

The services covered by the subsidy (contracted care services) include:

- Food services
- Laundry

- Nursing and other care
- General practitioner visits
- Prescribed medication
- Continence products
- All health care that is prescribed by a general practitioner
- Transport to health services.

The aged residential care contract with district health board requires rest homes and hospitals to tailor services to meet the needs of each resident. They cannot charge subsidised residents for services that are covered in this contract. The services a person can expect should be set out in the Admission Agreement or private contract they sign with their rest home or hospital.

The services that are not covered by the subsidy (that are not contracted care services) include:

- Specialist visits (where they are not publicly funded by the DHB or ACC)
- Transport to other services or outside social functions
- Toll calls (made by the resident)
- Private phone or cellphone
- Newspapers, books and magazines (personal)
- Personal toiletries
- Recreational activities, where those are not part of the normal programme
- Hairdresser
- Dietitian, podiatrist or other services that have not been prescribed by a doctor or are not funded by the DHB
- Spectacles, hearing aids and dental care.

Any extra services a person agrees to pay for must be set out in their Admission Agreement or private contract with their rest home or hospital.

A person has the right to refuse any or all of the extra services offered by a rest home or hospital (that are not required under the DHB contract). This should be noted in their Admission Agreement.

Information is also available in the brochure [Long-term residential care for older people: What you need to know](#). This brochure should be available from aged residential care providers, from the DHB or the Ministry of Health website (www.health.govt.nz).