

Support at Home Program (New entrants from 1 November 2025)

NOVEMBER 2025

From 1 November 2025, the Australian Government is introducing a new Support at Home Program designed to make it easier for older Australians to stay independent and comfortable in their own homes for longer. If you or someone you care about needs help with everyday activities, such as cleaning, cooking, or getting around, this program offers a range of government-subsidised services to support your wellbeing and keep you connected to your community. The amount of support you receive will depend on your care needs, and people with higher or more complex needs will be able to access additional assistance. (All rates and thresholds in this fact sheet current as of 1 November 2025. They will be indexed annually.)

What is Support at Home program and what does it offer?

The Australian Government's new support at home program will help older people live independently for longer in their own homes.

If you are approved, you can get support for everyday tasks like:

- · cleaning
- gardening
- · shopping, and
- · meal preparation.

You'll also have access to clinical care like:

- nursing
- · physiotherapy, and
- continents care.

If you have more complex needs, higher levels of support are available to help you stay in your home.

There are also short-term pathways to meet your needs. The assistive technology and home modifications scheme helps you to access products, equipment, and home modifications that support:

- Mobility
- Daily living
- · Communication.

Support at Home Program (new entrants from 1 November 2025)

This includes things like walking aids, personal alarms, and home modifications such as ramps or handrails.

There is also end of life pathway which provides extra support for those nearing the end of life, allowing older people to stay in their home as long as possible.

Support at Home offers both ongoing services and short-term pathways. Ongoing services are categorised into three categories:

- Clinical care, such as nursing, occupational therapy and physiotherapy.
- Independence care, such as help with showering, taking medications, transport or respite care.
- Every day living, such as cleaning, gardening and meal preparation.

Support at Home short-term pathways:

- The Restorative Care Pathway is for allied health services to help you regain, maintain, and improve your ability to do everyday tasks. Participants can access to up to 16 years of restorative care services from a budget of approximately \$6,000 (or up to \$12,000 if required).
- The End-of-Life Pathway is for additional services to support older people to remain at home in the last 3 months of life. Participants can access more home care services for up to \$25,000 over a 12-week period, with an additional 4 weeks to use the funds.
- The Assistive Technology and Home Modification (AT-HM) scheme is for products, equipment and changes to your home that make daily tasks easier and safer. The funding cap applies separately to assistive technology and home modifications, i.e., participants can access up to \$15,000 for assistance technology and up to \$15,000 for home modifications.

How to enter the Support at Home program

If you are new to receiving any services through My Aged Care, the first step is to check your eligibility for an assessment. To qualify for an assessment, you'll need to be:

- · Over the age of 65; or
- An Aboriginal and Torres Strait Islander person over the age of 50; or
- At risk of, or experiencing, homelessness and over the age of 50.

You can book an assessment online at My Aged Care, or by calling 1800 200 422. If your application is successful, you will be referred for an assessment. Assessment is done in person, at your own home.

When assessed as eligible for the Support at Home program, you will receive a Notice of Decision letter and an individual support plan to share with your provider. This will contain:

- A summary of your care needs and goals
- A classification with an associated ongoing quarterly budget
- · A list of your approved services
- An approval for short-term support, which may include funding for:
 - Assistive technology
 - Home modification
 - Restorative Care Pathway
 - End-of-Life Pathway.

Support at Home Program (new entrants from 1 November 2025)

What is the funding for each classification?

From 1 November 2025, your care needs will be matched to one of eight classifications following the assessment.

The table below outlines the funding amounts for each of the Support at Home classifications. The quarterly budgets and annual amounts are effective from 1 November 2025 and are subject to change in July each year in line with indexation.

Classification	Quarterly Budget	Annual Budget	
1	\$2,682.75	\$10,731.00	
2	\$4,008.61	\$16,034.45	
3	\$5,491.43	\$21,965.70	
4	\$7,424.10	\$29,696.40	
5	\$9,924.35	\$39,697.40	
6	\$12,028.58	\$48,114.30	
7	\$14,537.04	\$58,148.15	
8	\$19,526.59	\$78,106.35	
Restorative Care Pathway	\$6,000 (12 weeks) May be increased to \$12,000 when eligible		
End-of-Life Pathway	\$25,000 (12 weeks)		

If you don't end up using up all of your quarterly budget, you'll be able to roll \$1,000 or 10% of your quarterly budget (whichever is greater) to the next quarter. Any other unused funds cannot be accumulated.

If you receive ongoing services, 10% of your budget each quarter will go to your provider for care management, even if you decide to self-manage some or all of your services.

How much will it cost you?

To ensure the system is fair and sustainable, recipients of services from the Support at Home program will contribute towards the cost of some services, while other services are fully funded by the Government. Contribution rates will vary depending on the types of service and

your income and assets. That is, an income and asset assessment, like the age pension means test, will be used to determine your contribution rate.

Those on the Age Pension and Commonwealth Seniors Health Card holders will pay lower contributions than self-funded retirees.

Standard participant contribution rate from 1 November 2025

Age Pension status	Clinical care	Independence	Everyday Living
Full Pensioner (minimum threshold)	0%	5%	17.5%
Part Pensioner and eligible for a Commonwealth Seniors Health Card	0%	5% - 50% depending on income and assets	17.5% - 80% depending on income and assets
Self-funded retiree (maximum threshold)	0%	50%	80%

Likewise, if you are receiving Independence and Everyday Living care, your participation contribution will depend on your assets and income. The following table provides the minimum and maximum asset thresholds for Independence and Everyday Living contributions.

	Minimum thresholds	Maximum Threshold
Single person, homeowner	\$321,500	\$933,275.64
Single person, no-homeowner	\$579,500	\$1,191,275.64
Couple, homeowner	\$481,500	\$1,455,141.03
Couple, non-homeowner, combined	\$739,500	\$1,713,141.03
Couple, separated by illness, homeowner, combined	\$481,500	\$1,714,384.62
Couple, separated by illness, non-homeowner, combined	\$739,500	\$1,972,384.62

You could use the Support at Home fee estimator to get an estimate of what your contributions may be. MyAgedCare home support program fee estimator

Support at Home Program (new entrants from 1 November 2025)

Lifetime cap

There is a lifetime cap on participant contributions. Once you have reached the cap you will not be charged any more for the service you receive. The cap will be indexed annually. The cap on 1 November 2025 is \$135,318.69.

If you can't afford to pay your fees or contribution to your care costs, you can apply for financial hardship support. Speak to your financial adviser about this.



Case study

Mary was approved to receive services through Support at Home after an aged care needs assessment. She was given a Level 5 funding classification, which provides \$39,697.40 per year (or \$9,924.35 per quarter).

Her Support at Home provider worked with her to create an individual care budget, showing how the funds will be used across different service types. A 10% care management fee is deducted from the total funding.

Mary's annual funding allocation:

- \$3,969.74 Care management
- \$5,954.61 Clinical care services
- \$9,924.35 Independence services
- \$19,848.70 Everyday living services

Because Mary is a part pensioner, she must contribute towards her independence and everyday living services, but not clinical care, which is fully funded by the government. Mary is a single homeowner with \$20,000 in assessable income (not including her Age Pension) and \$400,000 in assessable assets.

After applying the contribution formula, Mary's contribution rates are:

- Independence services: 11.8%
- Everyday living services: 26.9%

Mary's total annual fees:

- Clinical care services Nil
- Independence services \$9,924.35
 × 11.8% = \$1,171.07
- Everyday living services \$19,848.70
 × 26.9% = \$5,338.30

Total participant contribution: \$6,509.37 per year (or about \$1,627 per quarter)

IMPORTANT INFORMATION: This publication is prepared by Fortnum Private Wealth Ltd ABN 54 139 889 535 AFSL 357306 and Fortnum Advice ABN 52 634 060 709 AFSL 519190 (Collectively known as Fortnum) ("Licensee"). The information in this publication is general only and has not been tailored to individual circumstances. Before acting on this publication, you should assess your own circumstances or seek personal advice from a licensed financial adviser. This publication is current as at the date of issue but may be subject to change or be superseded by future publications. While it is believed that the information is accurate and reliable, the accuracy of that information is not guaranteed in any way. Past performance is not a reliable indicator of future performance, and it should not be relied on for any investment decision. Whilst care has been taken in preparing the content, no liability is accepted by the Licensee nor any of its agents, employees or related bodies corporate for any errors or omissions in this publication, and/or losses or liabilities arising from any reliance on this document. This publication is not available for distribution outside Australia and may not be passed on to any third person without the prior written consent of the Licensee. Published November 2025.