14.4 CLIENT FEES/CONTRIBUTIONS

14.4.1 FEES POLICY - PRINCIPLES

It is expected by our funding body/s, that we raise money towards the cost of service provision. Because we provide services to a special needs group i.e. remote & rural clients, many of whom are also financially disadvantaged, we ask only for a client contribution.

In making this decision, consideration was also given to the high administrative cost of collecting fees across such a large geographical area.

1. The revenue from donations is used to enhance and/or expand service provision to clients
2. Clients who do not make a contribution will continue to receive services

Fee guidelines

Should the funding body decide in the future that fees will be mandatory we will observe the CHSP guidelines for fees collection.

Contribution payments

Clients are invoiced for their contributions ever 4 weeks by post or email (whichever is their preferred method).

Clients can pay their contribution for services by cheque, cash, money order, online transfer (internet banking) or direct debit. Direct debit is the preferred method (of R&RHCS).

The necessary information for fee payments is included in the Client's Service Agreement, and included on issued client contribution invoices and statements.

Fees/Client contributions for CHSP and QCSS clients are currently set at $10.00/hour as of 11th July, 2022. Fees for other contract types are explicitly stated in their service agreement.

Contribution processing

1. Contributions paid directly to senior staff in the R&RHCS office are receipted and a copy handed to the client
2. Fees paid by cheque or money order are received by the Finance Administration Team receipted, entered into the system and banked at the end of each week
3. Fees paid by direct debit & online EFT are entered into the system by the Finance Administration Team.

Rural and Remote Client Contribution Principles – taken from the CHSP Program Manual.

- Consistency – All clients who can afford to contribute to the cost of their care should do so. Client contributions should not exceed the actual cost of service provision.
- Transparency – Client contribution policies should include information in an accessible format and be publicly available, given to, and explained to, all new and existing clients.

- Hardship – Individual policies should include arrangements for those who are unable to pay the requested contribution.
- Reporting – Grant agreement obligations include a requirement for providers to report the dollar amount collected from client contributions.
- Fairness – The Client Contribution Framework should take into account the client's capacity to pay and should not exceed the actual cost to deliver the services. In administering this, providers need to take into account partnered clients, clients in receipt of compensation payments and bundling of services.
- Sustainability – Revenue from client contributions should be used to support ongoing service delivery and expand the services providers are currently funded to deliver.

NOTE: RCC Inc – RnRHCS will regularly review the client contribution amount.

Any changes will be clearly communicated with clients (in writing) prior to being implemented.

Clients have the option of requesting a discounted and affordable hourly contribution which will be considered by the organisation, where appropriate and relevant to client circumstances.

NOTE:

- There are different arrangements in regard to client contributions for Veteran's Home Care clients (with contribution amounts set by DVA);
- There is no client contribution amount currently applied to brokered clients – with other Associated Providers or via the NDIS plan managed participants.