

# Strengthening Medicare – Supporting Older Australians (Tasmania)

## FEDERATION FUNDING AGREEMENT - HEALTH

**Table 1: Formalities and operation of schedule**

Parties	Commonwealth and Tasmania
Duration	This Schedule is expected to expire on 30 October 2028 or upon completion of the initiative(s), including final performance reporting.
Purpose	<p>This agreement's objective is to support older people who are or are at-risk of becoming long stay older patients by:</p> <ul style="list-style-type: none"> <li>• avoiding hospital presentation and admission;</li> <li>• where hospital admission is necessary, reducing the length of the in-hospital stay;</li> <li>• supporting earlier discharge; and</li> <li>• improving the transition out of hospital to other appropriate care.</li> </ul> <p>This Schedule will support the delivery of:</p> <ul style="list-style-type: none"> <li>• <b>Specialist Residential Respite Care Services</b> One-off payments to residential aged care homes to provide specialised respite care for older people with complex needs transitioning from public hospital to permanent accommodation.</li> <li>• <b>Hospital Liaison Officer Initiative</b> Statewide recruitment of hospital liaison officers who will provide care navigation services to patients to support their transition from hospital to aged care.</li> <li>• <b>Virtual Multidisciplinary Outreach Services</b> Statewide virtual and face-to-face specialist multi-disciplinary outreach care for older people living in residential aged care homes (RACHs).</li> </ul>

Estimated financial contributions	<p>The Commonwealth will provide an estimated total financial contribution to Tasmania of \$9.92m in respect of this Schedule.</p> <table border="1" data-bbox="395 277 1442 577"> <thead> <tr> <th data-bbox="395 277 794 331">(\$ million)</th> <th data-bbox="794 277 938 331">2024-25</th> <th data-bbox="938 277 1066 331">2025-26</th> <th data-bbox="1066 277 1193 331">2026-27</th> <th data-bbox="1193 277 1337 331">2027-28</th> <th data-bbox="1337 277 1442 331">Total</th> </tr> </thead> <tbody> <tr> <td data-bbox="395 331 794 385">Estimated total budget*</td> <td data-bbox="794 331 938 385">2.57</td> <td data-bbox="938 331 1066 385">2.46</td> <td data-bbox="1066 331 1193 385">2.45</td> <td data-bbox="1193 331 1337 385">2.44</td> <td data-bbox="1337 331 1442 385">9.92</td> </tr> <tr> <td data-bbox="395 385 794 474">Less estimated National Partnership Payments*</td> <td data-bbox="794 385 938 474">2.57</td> <td data-bbox="938 385 1066 474">2.46</td> <td data-bbox="1066 385 1193 474">2.45</td> <td data-bbox="1193 385 1337 474">2.44</td> <td data-bbox="1337 385 1442 474">9.92</td> </tr> <tr> <td data-bbox="395 474 794 577">Balance of non-Commonwealth contributions-</td> <td data-bbox="794 474 938 577">0.0</td> <td data-bbox="938 474 1066 577">0.0</td> <td data-bbox="1066 474 1193 577">0.0</td> <td data-bbox="1193 474 1337 577">0.0</td> <td data-bbox="1337 474 1442 577">0.0</td> </tr> </tbody> </table> <p data-bbox="395 589 951 622">*Combined figures may exceed total due to rounding.</p>	(\$ million)	2024-25	2025-26	2026-27	2027-28	Total	Estimated total budget*	2.57	2.46	2.45	2.44	9.92	Less estimated National Partnership Payments*	2.57	2.46	2.45	2.44	9.92	Balance of non-Commonwealth contributions-	0.0	0.0	0.0	0.0	0.0
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Additional terms	<p>Tasmania will ensure the Commonwealth is provided with contemporary information about the expected delivery schedule for each project (expected major milestone delivery dates including completion) and advise the Commonwealth as soon as practicable of any significant deviations from agreed project plans.</p> <p>Initiatives delivered through this schedule will be targeted at older Australians aged 65 years and over, or 50 years and over for people who identify as Aboriginal and/or Torres Strait Islander.</p> <p>The Parties agree that information about the outputs delivered under this Schedule and an evaluation of their outcomes will be shared with all states and territories by the Commonwealth. To inform continuous improvement, the Commonwealth will share data and insights with all states and territories in a timely manner and at least annually.</p> <p>The National Health Reform Agreement (NHRA) provides that the Commonwealth will not fund a service where the same service, or any part of the same service, is otherwise funded by the Commonwealth. Tasmania will ensure that any claim for funding under the NHRA is not funding services, or any part of a service, provided for under this agreement and will maintain appropriate records.</p> <p>The Health Insurance Act 1973 prohibits the payment of Medicare benefits where other government funding is provided for that service. Tasmania will ensure any agreement for the provision of services using funding under this agreement recognises the operation of the Health Insurance Act 1973.</p> <p>The Parties acknowledge their respective roles and responsibilities in supporting the provision of health and aged care for older Australians in</p>																								

accordance with any relevant health and aged care legislation, intergovernmental agreements and statements.

The Parties agree that Tasmania will undertake an evaluation of each initiative funded under this schedule. Tasmania will undertake best endeavours to align with the nationally agreed evaluation plan (national evaluation plan) agreed for all initiatives funded through the Strengthening Medicare Supporting Older Australians investment. Tasmania will determine the methodology for data collection and scope of any additional evaluation criteria. Evaluation findings will be used to inform future policy and programs. The evaluation will assess effectiveness and efficiency of initiatives across the desired outcomes:

- to reduce avoidable hospital presentations and admissions of older people; and,
- where hospital admission is necessary for older people, to reduce the length of the in-hospital stay, facilitate earlier discharge, and improve their transition out of hospital to other appropriate care.

The parties agree that Tasmania will aim to achieve the identified targets for the initiatives in this schedule, noting these are new initiatives. The parties agree that, in the instance of not achieving targets, Tasmania will provide advice on reasonable progress and factors that have impacted delivery of the initiative.

The Parties agree the Virtual Multidisciplinary Outreach Services initiative will serve to establish services statewide and develop a comprehensive model of care. The initiative will aim to achieve the following:

- Year 1: 5 residential aged care homes engaged, with 100 older people supported by initiative.
- Year 2: 12 residential aged care homes engaged, with 150 older people supported by initiative.
- Year 3: 14 residential aged care homes engaged, with 200 older people supported by initiative
- Year 4: 16 residential aged care homes engaged, with 250 older people supported by initiative.

The Parties agree the Hospital Liaison Officer Initiative will serve to expand existing residential aged care hospital liaison service teams, with the recruitment of 6 Hospital Liaison Officers. The initiative will aim to achieve the following:

- Year 1: Establish relationships with 5 Residential Aged Care Homes (RACHs), with the objective of supporting 40 older people to transition from hospital to aged care.
- Year 2: Maintain existing relationships and establish relationships with an additional 3 RACHs, with the objective of supporting 80 older people to transition from hospital to aged care.
- Year 3: Maintain relationships with 8 RACHs, with the objective of supporting 100 older people to transition from hospital to aged care.
- Year 4: Maintain relationships with 8 RACHs, with the objective of supporting 120 older people to transition from hospital to aged care.

The Parties agree the Specialist Residential Respite Care initiative will serve to deliver one-off supplement payments to residential aged care homes, supporting patients to discharge from hospital when clinically appropriate. Once fully operational (likely by year 2) the initiative will aim to deliver:

- Year 2: 80 eligible patients receive care under the pilot.
- Year 3: 90 eligible patients receive care under the pilot.
- Year 4: 100 eligible patients receive care under the pilot.

Table 2: Performance requirements, reporting and payment summary

Output	Performance milestones	Report due	Payment
<b>Specialist Residential Respite Care Services</b> <i>One-off payments to residential aged care homes to provide specialised respite care for older people with complex needs transitioning from public hospital to permanent accommodation.</i>	Provision of an Implementation Plan for the Commonwealth's approval for the establishment of payments to residential aged care homes to provide short-term care enabling earlier discharge for older people including: <ul style="list-style-type: none"> <li>• Information about the development of a Model of Care, including eligibility criteria, referral and payment processes and one-off payment amounts to RACHs.</li> <li>• Planning for an expressions of interest process to identify and select suitable providers through a future tender process.</li> <li>• Information about the arrangements for the establishment and oversight of the initiative including:               <ul style="list-style-type: none"> <li>○ Progress on feasibility testing with Hospitals and Health Services (such as Tasmania's Local Health Network) and other key stakeholders.</li> <li>○ planned recruitment activities,</li> <li>○ plans for stakeholder engagement and consultation,</li> <li>○ delivery milestones and anticipated rollout of the initiative,</li> <li>○ A program logic using the template provided by the Commonwealth.</li> </ul> </li> <li>• An initiative-specific evaluation plan in line with the national evaluation plan. This will outline:               <ul style="list-style-type: none"> <li>○ the planned evaluation methodology for measuring initiative effectiveness and,</li> <li>○ the initiative-specific minimum evaluation criteria outlined in the national evaluation plan agreed by Tasmania and the Commonwealth.</li> <li>○ Data collection and reporting arrangements.</li> </ul> </li> <li>• Identification and, where feasible, collection of baseline data for initiative and in line with the National Evaluation Plan.</li> </ul>	31 March 2025 or two months from execution of schedule, whichever is sooner.	\$0.5m
	Provision of a Progress Report for the Commonwealth's approval demonstrating the following: <ul style="list-style-type: none"> <li>• Progress against the implementation plan, including updates regarding anticipated service commencement.</li> <li>• Updates (where relevant) to baseline data in line with the National Evaluation Plan or other relevant data for this initiative.</li> <li>• Risks and issues identified for the initiative, including mitigation and intervention strategies.</li> </ul>	28 April 2025 (reporting period: 1/9/24-1/3/25)	\$0.329m

	<p>Provision of an Annual Status Progress Report with delivery and data metrics for the Commonwealth's approval including:</p> <ul style="list-style-type: none"> <li>• Progress against the implementation plan.</li> <li>• Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators for: <ul style="list-style-type: none"> <li>○ the indicators provided for the Specialist Respite Care Initiative provided in the 'general terms of the agreement' section; and</li> <li>○ Indicators identified by Tasmania in their initiative-specific evaluation plan, presented either month-by-month or quarterly.</li> </ul> </li> <li>• Initiative risks and issues (including intervention plans where services are not performing) and lessons learned.</li> </ul>	1 February 2026 (reporting period: 1/1/25-31/12/25),	\$0.829m
		1 February 2027 (reporting period: 1/1/26- 31/12/26),	\$0.829m
		1 February 2028 (reporting period: 1/1/27-31/12/27)	\$0.829m
	<p>Provision of a Final Report for the Commonwealth's approval, including:</p> <ul style="list-style-type: none"> <li>• An evaluation of the impact of the initiative on long stay older patients against the initiative evaluation plan, aligned with the agreed minimum evaluation criteria outlined in the national evaluation plan.</li> <li>• Data reporting on the following indicators for duration of schedule, presented either month by month or quarterly: <ul style="list-style-type: none"> <li>○ the indicators provided for the Specialist Residential Respite Care Services initiative provided in the 'general terms of the agreement' section; and</li> <li>○ indicators identified by Tasmania in their initiative-specific evaluation plan.</li> </ul> </li> <li>• Outcomes of the initiative, key achievements and challenges, and lessons learned with supporting data where available.</li> </ul>	30 October 2028	Nil
<p><b>Hospital Liaison Officer Initiative (HLO)</b></p> <p><i>Statewide recruitment of hospital liaison officers who will provide care navigation services to patients to support their transition from hospital to aged care.</i></p>	<p>Provision of an Implementation Plan for the Commonwealth's approval for expansion of Hospital Liaison Officers (HLOs) across Tasmanian health services including:</p> <ul style="list-style-type: none"> <li>• Information about the development of a Model of Care, including eligibility criteria, the distribution of HLOs across Tasmania's three regions and the design of the process which the HLOs will use to maintain and enhance cohesion between various health care settings.</li> <li>• Information about the arrangements for the establishment and oversight of the initiative, including: <ul style="list-style-type: none"> <li>○ Tender process planning and planned advertisement of EOI.</li> <li>○ Progress on feasibility testing with Hospitals and Health Services (such as Tasmania's Local Health Network) and other key stakeholders.</li> <li>○ planned recruitment activities,</li> </ul> </li> </ul>	31 March 2025 or two months from execution of schedule, whichever is sooner.	\$0.5m

	<ul style="list-style-type: none"> <li>○ plans for stakeholder engagement and consultation, and</li> <li>○ delivery milestones and anticipated rollout of HLOs.</li> <li>● A program logic using the template provided by the Commonwealth.</li> <li>● An initiative-specific evaluation plan in line with the national evaluation plan. This will outline:             <ul style="list-style-type: none"> <li>○ the planned evaluation methodology for measuring initiative effectiveness and,</li> <li>○ the initiative-specific minimum evaluation criteria outlined in the national evaluation plan agreed by Tasmania and the Commonwealth.</li> <li>○ Data collection and reporting arrangements</li> </ul> </li> <li>● Identification and, where feasible, collection of baseline data for initiative and in line with the National Evaluation Plan.</li> </ul>		
	<p>Provision of a Progress Status Report for the Commonwealth's approval demonstrating the following:</p> <ul style="list-style-type: none"> <li>● Progress against the implementation plan.</li> <li>● Outcomes of services monitored against the initiative evaluation plan (where services are established).</li> <li>● Report relevant available data to the Department of Health and Aged Care, including aggregate agreed relevant agreed LSOP data indicators outlined in the national evaluation plan, presented either month-by-month or quarterly.</li> <li>● Risks and issues identified for the initiative, including mitigation and intervention strategies.</li> </ul>	<p>28 April 2025 (reporting period: 1/9/24-1/3/25)</p>	<p>\$0.409m</p>
	<p>Provision of an Annual Progress Report with delivery and data metrics for the Commonwealth's approval including:</p> <ul style="list-style-type: none"> <li>● Progress against the implementation plan.</li> <li>● Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators for:             <ul style="list-style-type: none"> <li>○ the indicators provided for the Specialist Respite Care Initiative provided in the 'general terms of the agreement' section; and</li> <li>○ Indicators identified by Tasmania in their initiative-specific evaluation plan, presented either month-by-month or quarterly.</li> </ul> </li> <li>● Initiative risks and issues (including intervention plans where services are not performing) and lessons learned.</li> </ul>	<p>1 February 2026 (reporting period: 1/1/25-31/12/25),</p>	<p>\$0.834m</p>
		<p>1 February 2027 (reporting period: 1/1/26- 31/12/26),</p>	<p>\$0.827m</p>
		<p>1 February 2028 (reporting period: 1/1/27-31/12/27)</p>	<p>\$0.814m</p>
	<p>Provision of a Final evaluation report for the Commonwealth's approval, including:</p> <ul style="list-style-type: none"> <li>● An evaluation of the impact of the initiative on long stay older patients against the</li> </ul>	<p>30 October 2028</p>	<p>Nil</p>

	<p>initiative evaluation plan, aligned with the agreed minimum evaluation criteria outlined in the national evaluation plan.</p> <ul style="list-style-type: none"> <li>• Data reporting on the following indicators for duration of schedule, presented either month by month or quarterly: <ul style="list-style-type: none"> <li>○ the indicators provided for the HLO initiative provided in the 'general terms of the agreement' section; and</li> <li>○ Indicators identified by Tasmania in their initiative-specific evaluation plan; and</li> <li>○ the relevant indicators outlined in the National Evaluation Plan.</li> </ul> </li> <li>• Outcomes of the initiative, key achievements and challenges, and lessons learned with supporting data where available.</li> </ul>		
<p><b>Virtual Multidisciplinary Outreach Services (VMOS)</b> <i>Statewide virtual and face-to-face specialist multi-disciplinary outreach care for older people living in residential aged care homes.</i></p>	<p>Provision of an Implementation Plan for the Commonwealth's approval or the development of a virtual and face to face multi-specialist outreach service to support hospital avoidance for older people including:</p> <ul style="list-style-type: none"> <li>• Information about the development of a Model of Care, including eligibility criteria and the process for identifying RACHs to provide virtual and face to face outreach services under the initiative.</li> <li>• Information about the arrangements for the establishment and oversight of the initiative, including: <ul style="list-style-type: none"> <li>○ Progress of feasibility testing with Hospitals and Health Services (such as Tasmania's Local Health Network) and other key stakeholders,</li> <li>○ Progress of feasibility testing technology capability with RACHs,</li> <li>○ Tender process planning and planned advertisement of Expressions of Interest (EOI),</li> <li>○ planned recruitment activities,</li> <li>○ plans for stakeholder engagement and consultation,</li> <li>○ delivery milestones and anticipated phasing</li> </ul> </li> <li>• A program logic using the template provided by the Commonwealth.</li> <li>• An initiative-specific evaluation plan in line with the national evaluation plan. This will outline: <ul style="list-style-type: none"> <li>○ the planned evaluation methodology for measuring initiative effectiveness and,</li> </ul> </li> </ul>	<p>31 March 2025 or two months from execution of schedule, whichever is sooner.</p>	<p>\$0.5m</p>

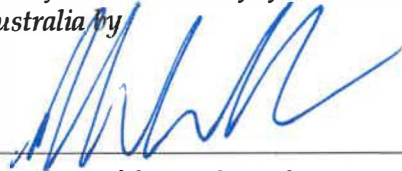


	<ul style="list-style-type: none"> <li>○ the initiative-specific minimum evaluation criteria outlined in the national evaluation plan agreed by Tasmania and the Commonwealth.</li> <li>○ Data collection and reporting arrangements.</li> <li>● Identification and, where feasible, collection of baseline data for initiative and in line with the National Evaluation Plan.</li> </ul>		
	<p>Provision of Progress Report for the Commonwealth’s approval demonstrating the following:</p> <ul style="list-style-type: none"> <li>● Progress against the implementation plan, including progress made in developing the model of care.</li> <li>● Progress to identify RACHs providing virtual and face to face outreach services.</li> <li>● Updates (where relevant) to baseline data in line with the National Evaluation Plan or other relevant data for this initiative.</li> <li>● Risks and issues identified for the initiative, including mitigation and intervention strategies.</li> </ul>	<p>14 April 2025 (reporting period: 1/9/24-1/3/25)</p>	<p>\$0.331m</p>
	<p>Provision of an Annual Progress Report with delivery and data metrics for the Commonwealth’s approval including:</p> <ul style="list-style-type: none"> <li>● Progress against the implementation plan.</li> <li>● Report relevant data to the Department of Health and Aged Care, including aggregate agreed LSOP data indicators for: <ul style="list-style-type: none"> <li>○ the indicators provided for the Specialist Respite Care Initiative provided in the ‘general terms of the agreement’ section; and</li> <li>○ Indicators identified by Tasmania in their initiative-specific evaluation plan, presented either month-by-month or quarterly.</li> </ul> </li> <li>● Initiative risks and issues (including intervention plans where services are not performing) and lessons learned.</li> </ul>	<p>1 February 2026 (reporting period: 1/1/25-31/12/25),</p>	<p>\$0.795m</p>
		<p>1 February 2027 (reporting period: 1/1/26- 31/12/26),</p>	<p>\$0.795m</p>
		<p>1 February 2028 (reporting period: 1/1/27-31/12/27)</p>	<p>\$0.795m</p>

	<p>Provision of a Final evaluation report for the Commonwealth's approval, including:</p> <ul style="list-style-type: none"> <li>• An evaluation of the impact of the initiative on long stay older patients against the initiative evaluation plan, aligned with the agreed minimum evaluation criteria outlined in the national evaluation plan.</li> <li>• Data reporting on the following indicators for duration of schedule, presented either month by month or quarterly: <ul style="list-style-type: none"> <li>○ the indicators provided for the Specialist Residential Respite Care Services initiative provided in the 'general terms of the agreement' section; and</li> <li>○ indicators identified by Tasmania in their initiative-specific evaluation plan.</li> </ul> </li> <li>• Outcomes of the initiative, key achievements and challenges, and lessons learned with supporting data where available.</li> </ul>	<p>30 October 2028</p>	<p>Nil</p>
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The Parties have confirmed their commitment to this schedule as follows:

*Signed for and on behalf of the Commonwealth of Australia by*



**The Honourable Mark Butler MP**  
Minister for Health and Aged Care

[Day] [Month] 2025

28 Jan

*Signed for and on behalf of the State of Tasmania by*



**The Honourable Roger Jaensch MP**  
Acting Minister for Health

5 February 2025