

Silverchain submission

Productivity Commission Inquiry into business reporting requirements

30 September 2026

Acknowledgement of Country

Silverchain respectfully acknowledges the Traditional Custodians of the lands on which we work and live. We acknowledge Elders past and present, whose ongoing efforts to protect and promote Aboriginal and Torres Strait Islander cultures will leave a lasting legacy for future leaders and reconciliation within Australia. Our Innovate Reconciliation Action Plan artwork was created by artist Charmaine Mumbulla from Mumbulla Creative. The artwork is crafted from many individual pieces and is layered to tell the Silverchain story, including our increased commitment and efforts towards healing, reconciliation and social justice.



Contents

Executive summary	2
About Silverchain	3
The aged care reforms and impact on business.....	3
Consultation Question: Upfront compliance costs of reporting against the aged care reforms	6
Consultation Question: How is the reported information used by stakeholders, and how does it affect their decisions, activities or outcomes?	7
Consultation Question: What changes to reporting requirements, processes or mechanisms could reduce costs and data duplication?	7
Conclusion	7

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Executive summary

Silverchain is one of Australia's largest specialist providers of home-based health and aged care, with 130 years' experience delivering care in people's homes and communities. As a not-for-profit business with annual revenue of over \$500 million, more than 5,900 employees, and services supporting more than 140,000 people each year, Silverchain operates at significant scale across aged care and health care delivered in or close to home. This gives us direct operational experience of how government reporting requirements work in practice for a large, complex and highly regulated care business.

We note that the Productivity Commission is currently focused on payment times reporting, sustainability and environmental reporting, and workplace gender equality reporting, and is also seeking evidence about other business reporting issues that warrant attention. This submission focuses on reporting requirements in aged care following the *Aged Care Act 2024*. These requirements impose significant costs on businesses, increase prices for consumers, place further pressure on the financial sustainability of home-based aged care services and weaken the sector's capacity to attract investment. It is important that the Commission consider the efficiency and value of non-financial business reporting requirements in quasi-markets such as aged care and disability, where Government regulates both pricing and demand through funded service arrangements.

The current reporting model for home-based aged care places a universal administrative burden on businesses instead of using more targeted fraud detection and enforcement. This approach is inefficient and disproportionate. Government should invest in data analytics and investigation capability to identify unusual or suspicious claiming patterns, rather than requiring every business to meet highly granular evidentiary requirements for every service. This would better protect public funds while reducing unnecessary compliance costs for the large majority of businesses that operate responsibly.

Our recommendations

1. The Commission should consider the consultation feedback and results of the Department of Health, Disability and Aged Care's Aged Care Data and Reporting Review to reduce the reporting burden on home-based aged care businesses.
2. The current payment assurance approach for Support at Home should be redesigned to better align evidence requirements with risk, focusing detailed scrutiny on higher-risk services and businesses rather than applying a uniform, high-burden model across all businesses. A specific focus should be made to ensure that:
 - a. the granularity of reporting of Support at Home services be reduced.
 - b. evidentiary requirements for reporting Support at Home services be reduced by establishing reasonable thresholds for when supporting evidence must be reported. This would allow resources to be targeted to claims that are more likely to have a material impact on Government expenditure, while reducing unnecessary administrative reporting burden for routine, low-risk and low-cost services.
3. Government should simplify Associated Provider aged care worker reporting by adopting a risk-based assurance model that avoids duplicating individual worker screening, qualification and compliance information already held by Associated Provider businesses. An "aged care worker passport" or standardised industry credentialing would mitigate the compliance checking burden on providers, and reduce risk to consumers.
4. Government should invest in the use of artificial intelligence (AI) to better identify businesses with unusual or suspicious reporting or claiming patterns in the aged care sector and investigate these through a better-resourced fraud and investigation unit.
5. Government should simplify consumer-reporting requirements under Support at Home by amending the legislative requirements that necessitate prescriptive, lengthy service agreements and monthly statements with short, plain-language templates limited to information that older people need to understand their care, costs and available funding. Requirements should be co-designed and tested with older people and providers to ensure they deliver genuine consumer value and do not impose disproportionate administrative cost. Quarterly price reporting by aged care businesses for Support at Home services on the My Aged Care website should be replaced with Department reporting of common pricing based on actual financial reporting through Services Australia.

6. Government should publish timely, de-identified, granular and aggregated Support at Home data that supports sector benchmarking, consumer transparency, business decision-making and quality improvement proportionate to the level of reporting required from aged care businesses.

About Silverchain

For 130 years, Silverchain has provided high quality in-home health and aged care services to generations of Australians. As a not-for-profit business, we employ more than 5,900 people, including nurses, doctors, allied health professionals, care experts and a dedicated research and innovation division.

Our ambition is to create a better home-care system for all Australians.

Silverchain is one of Australia's largest specialist providers of home-based health and aged care, delivering services at significant scale across multiple jurisdictions, funding streams and regulatory regimes. Each year, our workforce supports more than 140,000 people, including older people, people living with chronic and complex conditions, and people requiring acute, palliative, restorative or ongoing community-based support. This scale means Silverchain has direct operational experience of how non-financial reporting requirements work in practice for a large, complex care provider.

Silverchain operates at a scale that makes its evidence directly relevant to this inquiry. With annual revenue of more \$500 million, Silverchain is the third largest provider of in-home aged care services in Australia. Our experience reflects the realities faced by large service-based businesses that must maintain significant governance, workforce, technology, assurance and compliance infrastructure while continuing to deliver essential care to the community.

Silverchain delivers a broad range of Commonwealth-funded aged care services, including Support at Home and Commonwealth Home Support Program services, as well as state-funded health services including hospital in the home and palliative care. This means we operate across intersecting health and aged care systems, with reporting obligations arising from mainstream business regulation, government contracts, clinical governance, accreditation, quality and safety standards, and program-level funding requirements where reporting of activity is directly linked to payment.

Our health and aged care services are accredited against the relevant national standards, including the National Safety and Quality Health Service Standards and Strengthened Aged care Quality Standards. These frameworks are critical to safe, high quality and clinically governed care, but they also create substantial reporting and assurance obligations. In recognition of the constraints of our current data and legacy digital infrastructure and our future needs as a home care provider, Silverchain is investing in a major digital transformation within our business to deliver a new, best-practice digital program across both our health and aged care services. Our digital transformation is designed to align with best practice in health care data and digital systems, the directions set out in the National Digital Health Strategy and the Aged Care Data and Digital Strategy 2024–2029.

This submission provides the Commission with evidence from a large, complex and highly regulated care business about the cumulative burden of non-financial reporting, particularly where obligations are duplicated, misaligned, highly granular or not clearly proportionate to regulatory value in the aged care sector since the implementation of the *Aged Care Act 2024* in November 2025.

Our foundational principle as a provider of care and support services is that data (personal, clinical and care needs) is collected primarily for the purpose of care delivery. Reporting to government, funding, quality improvement etc should be secondary uses of the data. The amount and type of data collected for the purposes of care delivery and reported to Government should be proportionate to the complexity of need.

The aged care reforms and impact on business

Silverchain welcomes the opportunity to provide feedback and evidence to the Productivity Commission's inquiry into business reporting. To provide context to our submission, an overview of the recent reforms to the aged care sector is provided.

The recent aged care reforms represent the most significant redesign of Australia's aged care system in a generation. The new *Aged Care Act 2024* replaces the previous legislative framework and establishes a

rights-based approach to aged care, with stronger obligations for Registered Providers, strengthened quality standards, clearer accountability and a greater focus on older people's dignity, autonomy, safety and choice. These reforms sit alongside major changes to aged care assessment, provider registration, quality regulation and prudential oversight, creating a more integrated but also more compliance-intensive operating environment for aged care businesses.

A central reform is the introduction of Support at Home, which replaced the Home Care Packages Program and Short-Term Restorative Care Programme from 1 November 2025. This marks a fundamental change in the funding of in-home aged care: rather than providers managing funding through broad package levels and monthly subsidies, funding is now attached more directly to the individual older person through assessed classifications, quarterly budgets, defined service categories and activity-based claiming. While this is intended to improve transparency and alignment between assessed need, services delivered and public funding, it also requires businesses to operate with much greater granularity in service recording, pricing, reporting, client invoicing, claiming, reconciliation and assurance. For all providers, the shift to individualised budgets and reporting-based payment has significant implications for systems, workforce training, care management, financial administration and ongoing compliance reporting.

The most significant 'pain points' of reporting in this new system are:

- Support at Home requires highly granular service activity reporting to Services Australia before payments can be made for services rendered. Support at Home businesses must claim individual services of 15 minutes or more through the Services Australia funding portal, using an overly complex service matrix. Claims also require evidence that the service has been delivered. Until the program matures and new technology systems are fully embedded, this evidence cannot be uploaded automatically, creating a significant manual administrative burden and driving up prices for consumers.
- Support at Home's Assistive Technology and Home Modifications (ATHM) scheme also requires highly detailed service activity reporting to Services Australia before payments can be made. The scheme funds equipment, assistive technology and home modifications that help older people live safely and independently at home. However, its reporting and claiming requirements are widely regarded across the sector as needlessly complex. Frontline staff must refer to a 32-page service list to determine how to report activities and claim for eligible services and products. Although the Department has consulted with the sector about these challenges over the past six months, it has not yet made significant changes to reduce the administrative burden on providers. Providers are adapting their technology systems to manage this workload, but ongoing changes to the ATHM Service List and related reporting and claiming processes continue to add cost, complexity and uncertainty to compliance.

Case example – Associated Provider worker reporting:

The requirement of reporting aged care worker compliance information to the Aged Care Quality and Safety Commission is impractical when services need to be delivered flexibly and safely. For example, if the Registered Provider's worker is unavailable and the Registered Provider uses a registered nurse from an Associated Provider to backfill the service, the nurse will already meet stringent professional registration, police check and employer compliance requirements through the Associate Provider. However, Silverchain is still required to collect and report worker-level information for that individual before the service can be fully acquitted under aged care reporting requirements. This creates a compliance and reporting process that is poorly aligned with how care is delivered in the community, where providers must respond quickly to workforce absences, client need and service continuity. It also duplicates information already held by the direct employer (the Associated Provider), and imposes disproportionate administrative burden for temporary workforce substitutions.

- The consumer-reporting requirements under the *Aged Care Act 2024* and Support at Home program are disproportionate to what is needed to give older people clear, useful information about their care and funding. Silverchain supports transparent and accurate reporting, but the prescribed monthly statements require providers to supply lengthy, highly granular and complex information each month, much of which is unlikely to assist consumers in understanding their care. The Department of Health, Disability and Ageing's [service agreement template](#) is already 10 pages long, yet is insufficient as a legal agreement governing care arrangements. Its [Support at Home monthly](#)

[statement template](#) is 11 pages before details of actual services delivered, co-contributions and the legal information needed for an invoice are added to a monthly statement. The result is an unnecessarily burdensome reporting regime that creates substantial administrative effort without a commensurate benefit for older people. This all adds time and cost to an already overburdened sector. The *Aged Care Act 2024* differentiates between Registered Providers, which are registered and accredited against the aged care standards by the Aged Care Quality and Safety Commission, and Associated Providers, which are contracting organisations used to help deliver care. As such, Silverchain is required to maintain and report detailed workforce and compliance information for Associated Providers and their individual workers to the Aged Care Quality and Safety Commission, including information about worker screening, qualifications and suitability. This requirement is impractical when services need to be delivered flexibly and safely.

- Much of the reporting required for the aged care reforms must still be completed manually while program settings continue to change. There are limited mechanisms for large providers such as Silverchain to upload reporting data automatically to Services Australia or My Aged Care. In practice, reporting systems appear to have been designed and tested for low-volume reports, rather than the scale required by large national businesses. As a result, these systems can be difficult to use at scale and often require significant additional resources to complete reporting manually. After advocacy, we have had some success in Services Australia developing bespoke bulk upload solutions for Silverchain but this has not been consistently offered for all reporting 'pain points'.
- Despite this complex and granular reporting environment, businesses are still required to manually upload average prices for Support at Home services for the My Aged Care website every two months. Silverchain supports pricing transparency so older people can make informed choices. However, Services Australia already receives detailed claims data for every service delivered during the quarter. Government could use this existing data to automate quarterly price reporting, rather than requiring businesses to manually duplicate information the Commonwealth already holds.

The current reporting model appears to use universal administrative burden as a substitute for targeted fraud detection and enforcement. This is inefficient and disproportionate. Government has access to detailed claims data and should invest in analytics and investigation capability to identify providers with unusual or suspicious claiming patterns, rather than requiring every provider to meet highly granular evidentiary requirements for every service.

We note that the Senate Community Affairs References Committee is undertaking a broad-ranging inquiry into Support at Home, with its report expected by 24 November 2026. It is anticipated that the inquiry will duplicate, to some extent, the Commission's inquiry into business reporting in the aged care sector. In addition, the Department of Health, Disability and Aged Care has undertaken two phases of an Aged Care Data and Reporting Review through the University of Queensland and the National Ageing Research Institute, but has made no announcement about changes to be made in response to this review.

Case example: reporting to prove service has been provided:

The Department recently audited Silverchain's Support at Home reported services (claims) and required evidentiary data for a selection of claims regardless of the amount or service type. There is a lack of clarity about what evidence would be acceptable. For example, how do you provide evidence that continence pads or ready meals were provided to the client? How do you easily demonstrate that a nurse attended on a specific day/time? How do you provide evidence that a personal care worker helped someone shower during the appointment? Or that a falls alarm has been monitored?

We technically can provide evidence of these from multiple systems but the requirements to keep evidence on file in a format that is easily extractable of each service provided for Support at Home is well beyond what is required for any other services we provide across the health sector. This adds millions of hours of administration time to the sector for the development of and recording of data to substantiate beyond any doubt that service has been provided.

Reporting this level of data for pricing and payment assurance is not risk proportionate, and it does not focus on client outcomes (rather, it is focused on processes). We support robust fraud investigation and compliance activity where there is evidence that it is warranted and we recognise the importance of protecting public funds. However, the level of evidentiary data currently expected under Support at Home is not proportionate to the level of risk being managed, and imposes unnecessary administrative burden on businesses and cost for system redesign to accommodate this type of reporting.

Consultation Question: Upfront compliance costs of reporting against the aged care reforms

For Silverchain, the upfront costs of implementing the reporting and compliance requirements associated with the aged care reforms have run into many millions of dollars. These costs include technology changes, restructuring of finance functions, strengthened executive and Board reporting, organisation-wide workforce training, and additional compliance and quality assurance activity. Implementation has also required careful separation of aged care reporting processes from the health services side of our business, to ensure existing clinical, operational and contractual requirements could continue without disruption. While the Commonwealth provided access to once-off transition support grants of \$10,000 excluding GST to assist businesses with technology system upgrades for the new Act and Support at Home, this funding was not commensurate with the scale of reform. For large and complex providers, it represented only an insignificant contribution towards the true cost of transitioning to the new legislative, funding and reporting environment.

The upfront costs of complying with the new Act and its reporting requirements should not be considered one-off implementation costs confined to the early transition period. In practice, Government has continued to refine Support at Home during its first year of operation in response to sector and community concerns about program settings. Examples include changes to funding arrangements for personal care and revisions to evidentiary requirements for ATHM prescriptions. While these refinements are welcome where they improve the operation and effectiveness of the program, each change requires businesses to make further adjustments to technology systems, reporting processes, staff training and day-to-day practice. These repeated program refinement cycles create additional costs for businesses and prolong the transition burden.

The Government's *Quarterly Financial Snapshot for the aged care sector – Quarter 3 2025–26*, covering 1 January to 31 March 2026, provides the first full-quarter view of Support at Home in operation. It shows a sharp deterioration in the financial position of the home-based aged care sector compared with previous quarters, suggesting that the new funding model has placed additional pressure on provider margins. This reinforces the importance of considering the cumulative impact of new compliance and reporting obligations. The scale and granularity of the reporting introduced through the aged care reforms, combined with limited automated upload and reporting functionality, is adding material cost to service delivery and increasing the risk that reporting obligations will undermine the financial sustainability of home-based aged care businesses. We mustn't lose sight of the implications of this; it translates to increased cost to government and older people for access to the very services that keep them at home and out of costly hospital or residential-aged care services.

Consultation Question: How is the reported information used by stakeholders, and how does it affect their decisions, activities or outcomes?

There is limited transparency about how the information reported by providers under Support at Home is used by Government, consumers or the sector. While service prices are published on the My Aged Care website to support consumer choice and the Government publishes a quarterly financial report for the aged care sector, these outputs do not provide timely or sufficiently granular information to support business planning, benchmarking or service improvement. Publication lag times also reduce the usefulness of available data for operational decision-making. In residential aged care, more information is publicly available through the Australian Institute of Health and Welfare's GEN Aged Care Data program, but this data is also affected by publication lags. By contrast, Support at Home providers are required to report highly detailed service, pricing and claims information, yet little of that information is returned to the sector in a form that supports benchmarking, market transparency, evidence-based improvement or business decisions.

Consultation Question: What changes to reporting requirements, processes or mechanisms could reduce costs and data duplication?

The policy intent of strengthening safeguards against fraud and misuse of public funds is legitimate and important. However, the current approach places highly granular reporting obligations on the entire aged care sector, and on every individual service delivered, rather than adopting a more targeted, risk-based model of fraud detection, investigation and enforcement. This creates a significant compliance burden for all aged care businesses, including the vast majority that operate responsibly and present a low risk to public expenditure. A more proportionate approach would use claims data, analytics and targeted investigation to identify unusual or suspicious claiming patterns, so regulatory effort is directed to areas of genuine risk rather than imposing universal reporting costs across the sector.

Government reporting should provide clear public value and be proportionate to the cost imposed on reporting businesses. In aged care, current reporting requirements are excessive, with compliance costs borne largely by providers and ultimately flowing through to consumers and service sustainability. The same objectives could be achieved more efficiently through a risk-based approach that better balances assurance, transparency and administrative burden. We have made a number of recommendations in the Executive Summary of this submission to support the Commission's deliberations about reducing the cost and burden of aged care business reporting, particularly under Support at Home, and by making reporting more proportionate, risk-based and useful.

Conclusion

Silverchain appreciates the opportunity to contribute to the Commission's inquiry. Our submission highlights the need for business reporting requirements in aged care to be proportionate, risk-based and clearly connected to improved outcomes for older people, Government and the sector. We would welcome the opportunity to provide further information, practical examples or evidence from our experience, and invite the Commission to contact us if this would assist its inquiry.

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