



Regulatory Bulletin

Higher Everyday Living Fee

RB 2026-3

The Higher Everyday Living Fee (HELF) is an optional fee for people who choose to receive a higher standard of everyday living services in permanent or respite residential aged care. The HELF can be charged for services that are of a higher standard, or in addition, to what is required to be provided under the Aged Care Rules 2025 and the Residential Care Service List.

The bulletin covers:

- HELF agreements
- supporting choice for older people
- bundled services
- charging practices.

It also describes what the Commission does when providers do not meet their obligations.

Key points

Supporting choice

- We expect providers to talk with people receiving residential aged care services (residents) about their needs, goals and preferences, and the best ways to meet them.
- HELF agreements increase choice for older people in residential care by offering enhanced (better) services. These enhanced services must be optional.
- Providers must not reduce, replace or repackage services that residents should receive as part of funded aged care.
- Providers should offer older people choice and flexibility. This includes offering ad hoc HELF agreements (providing HELF options in the moment, rather than only pre-planned services), where appropriate.



Defining and offering enhanced services

- Bundled services (a combination of services provided together and charged as a group) should offer real value.
- Providers should not push people into paying for services they cannot use, unless it costs less to buy services this way than paying for them individually.
- If a person chooses not to buy a HELF service, providers must not reduce their access to funded aged care services.

Provider obligations

- Whether they offer HELF services or not, providers must comply with the:
 - [Statement of Rights](#)
 - [Residential Care Service List](#)
 - [strengthened Aged Care Quality Standards](#) (Quality Standards)
- Providers must not charge a HELF for meeting an older person's nutritional needs.

Regulating HELF

The way we regulate HELF arrangements is in proportion to the risks for older people. For example, we may:

- work with and educate providers
- require them to change the way they provide HELF services
- make them refund fees to older people
- apply penalties (fines) when they
 - continue not to comply
 - do not comply on purpose.

Key HELF terms

Required services

Care, services and equipment that providers must deliver under the *Aged Care Act 2024* (Aged Care Act), Aged Care Rules, Residential Care Service List and Quality Standards.

Standard service offering

The care, services, experiences and amenities (comforts) available to all residents. This includes required services and extra services provided at no extra cost.

Enhanced services

Optional services that are provided in addition to, or at a higher standard than, the provider's standard service offering. Providers charge fees for these services under a HELF agreement.



Higher Everyday Living Fee

Bulletin number: RB 2026-3

Version number: 1.0

Publication date: 2 October 2026

Replaces: N/A – new release

Information in this bulletin applies to: Providers and individuals (including but not limited to aged care workers and responsible persons registered providers of residential aged care) who may be the subject of, or involved in, the Commission's regulatory processes.

Appendix: Scenarios

Notes: N/A

To be reviewed: November 2027



Higher Everyday Living Fee

HELF arrangements should give older people more choice.

Providers who offer HELF services need to:

- make sure that older people understand what these services give them and what they cost so they can make informed decisions
- make it clear that HELF services are in addition to, and separate from, the services they must deliver through government-funded aged care.
- develop, promote and provide HELF arrangements in line with their obligations under the Aged Care Act. This includes being transparent (open and honest), giving people choice and supporting them to make their own decisions.

Providers thinking about offering HELF arrangements should:

- consider if it is the right thing for the older person – not just focus on what they can charge
- read the [HELF guidance](#) provided by the Department of Health, Disability and Ageing (department).

Transition arrangements for existing residents

The [department clarified in September 2026](#) that providers should not remove services previously available to residents at no cost, and then require a HELF agreement for ongoing access to those same services. Amendments to the [Aged Care Rules 2025](#) (Aged Care Rules) commencing in November 2026 will make removal of services in these circumstances illegal.

Providers must not charge a HELF for a service they were providing to a resident:

- before 1 November 2025
- with a valid resident agreement
- without an additional service fee or extra service fee agreement
- where they continue to offer the service to other residents
- where the service stays the same, or very similar, in purpose, outcome, nature or benefit.

Providers cannot avoid these protections by changing a service and re-offering it through a HELF arrangement.

Providers should review their HELF arrangements to make sure they comply with the Aged Care Rules.



Extra services at no cost

Providers can choose to include extra services in their standard service offering at no cost to residents. Providers do not have to offer all extra services through a HELF agreement.

For example, providers could include in the standard service offering for all residents:

- TVs in every room
- free beer and wine with dinner
- twice-weekly trips to the local shopping centre
- daily newspapers or magazine subscriptions
- barista-style coffee in common areas
- weekly fresh flowers in resident rooms.

Leave arrangements

Whether HELF can continue to be charged during hospital or social leave will depend on the nature of the service and the terms of the HELF agreement.

The HELF agreement should clearly explain what the provider can charge a resident while they are away. Providers should not charge people for services they cannot or will not use during leave, like activities, outings or hairdressing.

Providers can charge for services that continue while the person is away, if this is part of the HELF agreement. This can include wi-fi or subscription services.

Providers cannot charge for HELF services while an older person is on extended hospital leave (on leave for more than 30 days).

Types of HELF agreements

There are 2 types of HELF agreements that an older person and provider can make.

A **standing HELF agreement** includes services that they plan and agree to in advance. These services can be ongoing, for a fixed period or one off. Standing HELF agreements must be in writing.

Ad hoc HELF agreements are only used when a resident asks for a single service that they have not planned or agreed to in advance. For example, buying something from an onsite café or a last-minute request for transport to a social event.

Providers and residents can enter into ad hoc HELF agreements immediately before, or at the time of, providing a service. They can be in writing or verbal (spoken).

Bundling

Providers can offer HELF services in bundles (packages). This can be more efficient for providers and keep costs lower for residents.

When providers offer bundles, they must:

- tell residents the price of each service, including what it costs if the resident buys it:
 - on its own
 - as a bundle
- tell residents that they:
 - do not have to accept the bundle
 - can buy each item individually (separately)
- make sure that the bundle is fair, transparent and good value for money compared to buying services individually.



Providers can include services that an older person cannot use in a bundle. However, the price of the bundle must not be more than the combined price of the services in that bundle that the older person wants or is likely to use. In other words, the older person should be better off buying the bundle than buying those services separately.

Providers should also think about using ad hoc HELF agreements where they can. They do not need to only use standing HELF agreements.

Food, nutrition and dining

[Standard 6](#) of the Quality Standards requires providers to give older people varied, appetising and nutritious food and drinks that meet their needs and preferences, including their cultural, religious and dietary needs.

Providers cannot meet this requirement by offering enhanced services through a HELF agreement. They must meet Standard 6 through their standard service offering.

This means HELF must not be used to compensate for deficiencies in food, nutrition or dining services that providers are already required to deliver under Standard 6.

Providers can offer enhanced services that add to the dining experience under a HELF agreement. For example, an alcoholic drink with a meal, or a restaurant or café outing.

Before providers offer an enhanced service, they should consider if they can meet residents' preferences as part of their standard food and nutrition services.

Communication, transparency and choice

Providers must make sure that people's decisions about HELF services are informed, voluntary and match their preferences.

Choosing not to buy a HELF service must not reduce a person's care, services or supports.

We expect providers to show that they are clearly and regularly communicating with older people about:

- the standard service offering available to them
- how the HELF service differs from the standard service offering
- how they will receive the enhanced services under the HELF agreement, including:
 - which funded service it is connected with
 - the agreed fee for the service
 - when and how often they will receive the service
- details of the HELF agreement, including:
 - invoicing arrangements
 - when fees may change (for example through indexation)
 - bundling arrangements (if applicable)
 - how to change or end a HELF agreement
 - review dates
 - notice periods
 - leave arrangements
 - refund arrangements.



Our regulatory approach

If we are concerned about a provider's HELF practices, we will usually work with them to understand the circumstances, address the risks and help them comply. For example, as a result of working with us, some providers have changed their practices and refunded fees to older people.

We can also compel (force) providers to refund incorrectly charged fees, where appropriate.

If providers do not comply with the HELF requirements, we can use other compliance and enforcement actions, including:

- requiring providers to give us details about, and justify, their HELF practices
- requiring providers to take (or stop taking) certain actions to address risks or non-compliance
- putting conditions on a provider's registration to stop them from offering or entering into HELF agreements
- accepting enforceable undertakings from the provider
- applying civil penalties (fines)
- varying, suspending or revoking a provider's registration.

You can find out more about the way we regulate in our:

- [Regulatory Strategy 2025-26](#)
- [Compliance and Enforcement Policy](#)
- [Regulatory Bulletins](#)



Appendix – Scenarios

Pay TV

Mr Leaf lives in a residential aged care home. The home provides free-to-air TV in communal (shared) areas. This helps residents to have access to news, entertainment and information as part of their standard service offering.

Mr Leaf asks if he can access pay TV in his private room because he enjoys sport, movies and documentaries. He also sometimes wants to watch a show in the privacy of his room.

The provider explains that pay TV is not part of the standard service offering but he can access it as an enhanced service using a HELF agreement.

The provider can give Mr Leaf access to pay TV through:

- a standing HELF agreement, if Mr Leaf wants to have pay TV for an ongoing or fixed-term basis as an enhanced service
- an ad hoc HELF agreement, if Mr Leaf wants access for a single, unplanned event, such as watching a show final, without entering into an ongoing agreement.

Standing agreements are the best option when the service is planned, ongoing or provided for a certain time. An ad hoc agreement is the best option if the service is a one-off, unplanned request made just before or at the time the service is delivered.

The provider works with Mr Leaf to understand his preferences and goals, to make sure the agreement meets his needs.

Lifestyle activities

Mrs Ivy is a resident of a residential aged care home. The home provides lifestyle and social activities, including high tea, happy hour and a weekly theatre performance. These activities are offered through HELF agreements.

Mrs Ivy's representative raises a concern that she can only access these activities by subscribing to a bundled agreement. Mrs Ivy does not want to buy the agreement. She wants to attend individual activities that she chooses when they come up.

Mrs Ivy wants to attend happy hour to take part in the social activity, listen to music and spend time with other residents. Because of her medications, she cannot drink alcohol, so she does not need the drinks package. She is happy to have a soft drink or mocktail instead.

The provider needs to assess if the bundled fee offers value for money when they compare it to the individual cost of the services.

The provider must also consider how Mrs Ivy can access individual parts of the enhanced services, if she wants to.

The provider discusses the situation with Mrs Ivy and her representative, and reviews it using a rights-based approach. Instead of focusing just on the bundled agreement, the provider looks at Mrs Ivy's goals and preferences and why she wants to take part in the activities. The provider also considers alternative (other) arrangements, including ad hoc purchases of food, drinks and events.



The provider finds an arrangement that better meets Mrs Ivy's needs and preferences. As part of their enhanced services, they decide to offer alcoholic and non-alcoholic drinks to residents through standing or ad hoc HELF agreements. Mrs Ivy is able to attend happy hour. She can buy a non-alcoholic drink and take part in specific lifestyle activities without having to pay for services she does not want.

The provider also reviews how they share information about bundled services with residents and their representatives. They want to improve their transparency and to help people make informed decisions.

Food, nutrition and dining

Agapanthus Aged Care (AAC) is reviewing their menus. This includes the meals they provide to residents as part of their standard offering and as part of a HELF package. AAC has residential aged care services across Australia.

AAC understand their obligation to make sure that all the meals and refreshments their homes provide meet the Aged Care Rules and Quality Standards. They know that, under the Residential Service List in the Rules, they must provide residents with at least 3 meals a day. They also know that, under the Quality Standards, providers must offer residents meaningful choice and menu variety.

To better understand their residents' preferences, each AAC residential care home consults residents about what choice and variety mean to them.

Blue Wattle Lodge

Residents at Blue Wattle Lodge in Tasmania say that choice means:

- being able to choose between 2 hot options at every main meal
- having more control over their dining experience
- being able to choose foods that meet their preferences, cultural backgrounds and appetites.

For these residents, variety means that the 2 protein options offered at the same meal are different. This gives them a wider range of flavours and meal experiences and reduces how quickly they get sick of the same menu. It also gives them long-term satisfaction with the food service.

Desert Rose Living

Residents at Desert Rose Living in the Northern Territory say that choice means being able to:

- select a hot or cold protein at each main meal
- serve themselves as much as they want (or have a meal plated up for them) from a buffet-style selection of side dishes – including texture-modified options. This helps residents to eat at a time that suits their preferences and routines.

For these residents, variety means not being offered the same cuisine style more than twice a week. The buffet-style service means they can create further variety by choosing what they want for themselves. This makes sure meals are varied and appealing. Residents can tailor their choices to meet their tastes and preferences.



HELF

To work out what residents across the country want to access under a HELF, AAC runs food focus groups at each service. Residents suggest:

- locally made speciality pastries with breakfast every day
- gourmet gelato and ice cream
- organic, grass-fed beef products.

AAC uses this information to decide what their HELF offerings will be. They regularly check in with the residents to make sure they are happy with what they are offering.

By providing 3 meals a day (breakfast, lunch and dinner), plus snacks and drinks, AAC is complying with the Aged Care Rules.

AAC shows they are complying with the Quality Standards (specifically Standard 6: Food and Nutrition) by:

- asking residents for feedback on standard meal services and HELF offerings
- considering this feedback
- making changes in line with this feedback
- providing choice and variety of food and drinks.

Transport and appointments

Ms Rose lives in a residential aged care home. She regularly attends appointments at the local library, community centre and hairdresser. Her provider offers transport services through a HELF agreement that includes scheduled outings, shopping trips and private transport services.

Ms Rose raises concerns after her provider tells her that to access to transport she needs a subscription to a transport bundle package. This package costs \$15 a day (\$105 a week). Ms Rose does not want to buy the full package because she only needs transport for one community outing each fortnight, and occasional appointments. She is concerned about paying for services she will not use.

The provider meets with Ms Rose to discuss her preferences and transport needs. They clearly explain information about the transport package, associated fees and available alternatives so that Ms Rose can make an informed decision. The provider also discusses if a more flexible arrangement could meet her needs.

As part of the discussion, the provider considers:

- staff escort costs
- their responsibilities for medical and allied health appointments.

Staff escort costs

The provider understands that they can't charge residents staff escort costs for external social and recreational outings the provider organises. They can, however, charge residents staff escort costs if a resident asks for a private outing.



Medical and allied health

The provider considers their responsibilities for medical and allied health appointments:

- Providers must support residents to access necessary health services, including dental services.
- They must help schedule appointments if residents ask them to, and they cannot charge residents for this service.
- They can charge residents transport and escort costs if their appointments are offsite.

They also acknowledge that residents have the right to choose their own health professionals.

After discussing options with Ms Rose, the provider reviews the circumstances using a rights-based approach. Rather than focusing on the bundled transport arrangement, they look at Ms Rose's transport needs and how often she needs help.

The provider suggests an alternative arrangement, where Ms Rose can buy transport on an ad hoc basis rather than through the standing HELF agreement, to make sure the provider's services meet Ms Rose's needs and preferences. This means she can attend community activities and appointments without paying for services she does not need.

After agreeing this arrangement with Ms Rose, the provider also reviews how they communicate information about transport services, agreement inclusions and alternative options to residents and their representatives. This process helps the provider to communicate in a more transparent way, which helps residents to make informed decisions.



Australian Government

Aged Care Quality and Safety Commission

Choice
Dignity
Respect

The Aged Care Quality and Safety Commission acknowledges the Traditional Owners of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.

 1800 951 822

 agedcarequality.gov.au

 Aged Care Quality and Safety Commission
GPO Box 9819, in your capital city

Find this resource online

agedcarequality.gov.au/resource-library/rb-2026-3-regulatory-bulletin-higher-everyday-living-fee

