



Australian Government
Department of Health



Continenence Aids Payment Scheme

Application Guidelines

The Continenence Aids Payment Scheme (CAPS) is an Australian Government scheme that assists eligible people who have permanent and severe incontinence to meet some of the costs of continence products and continence related products.

The Department of Health has overall program and policy responsibility for the CAPS, while the Department of Human Services, through the Medicare Program, is responsible for the administration of the CAPS.

www.health.gov.au

All information in this publication is correct as at October 2018.

Continence Aids Payment Scheme

Application Guidelines

Eligibility for CAPS

An applicant is eligible for CAPS if the applicant is five years of age or older and meets either one of the following requirements:

- A** The applicant has permanent and severe loss of bladder and/or bowel function (incontinence) due directly to an **eligible neurological condition**; or
- B** The applicant has permanent and severe loss of bladder and/or bowel function (incontinence) caused by an **eligible other condition**, provided the applicant has a Centrelink or Department of Veterans' Affairs (DVA) Pensioner Concession Card entitlement.

Definition of Permanent and Severe Incontinence

Permanent and severe incontinence is defined as the frequent and uncontrollable, moderate to large loss of urine or faeces which impacts on a person's quality of life and is unlikely to improve with medical, surgical or clinical treatment regimes.

Not Eligible for CAPS

Applicants must complete the Eligibility Guide questions **E1 to E6** in the CAPS application form to test their eligibility for CAPS.

An applicant is not eligible for CAPS if:

- 1** The applicant is not an Australian citizen or a permanent Australian resident;
- 2** The applicant is a resident in an Australian Government funded aged care home and is assessed with a high ACFI rating in any category or a medium in two or more categories;
- 3** The applicant is receiving an Australian Government funded Home Care Package and their care plan includes continence products;
- 4** The applicant is eligible for assistance with continence products under the Rehabilitation Appliances Program (RAP) which is available through the Department of Veterans' Affairs;
- 5** The applicant receives funding from the Australian Government National Disability Insurance Scheme and their plan covers continence products;
- 6** The applicant is currently living outside Australia and has done so for a continuous period of three years;
- 7** The applicant's incontinence is one of the following types:
 - Transient incontinence (not permanent);
 - Incontinence that can be treated with an existing conservative treatment regime (eg pelvic floor exercises or bladder re-training), medication or surgery; or
 - Confined to night time bed wetting (enuresis); or

- 8** The applicant's incontinence results from a condition other than an eligible neurological condition AND the applicant *does not* have Centrelink or DVA Pensioner Concession Card entitlement.

Recipients of Australian Government Funded Aged Care

If the applicant is living in an Australian Government funded aged care home and has been assessed with a high ACFI rating in any category or a medium in two or more categories, the applicant is not eligible for CAPS.

If the applicant is receiving an Australian Government funded Home Care Package, and continence products have been included in the applicant's care plan, the applicant is not eligible for the CAPS. Continence products will be provided as part of the applicant's care plan.

State and Territory Government Continence Schemes

If the applicant is eligible for the CAPS, and is currently receiving assistance with continence products or continence related products through a state or territory government funded continence scheme, the applicant should contact their state or territory scheme manager to find out if that assistance will be affected by the applicant's eligibility for the CAPS.

Completing the CAPS Application Form

The CAPS application form must be completed in black or blue pen. This form has three sections:

- 1** Applicant Details
- 2** Representative Details
- 3** Health Report

The Eligibility Guide on Page 2 must be completed.

Section 1 – Applicant Details

This section should be completed by the applicant or the applicant's representative.

This section is mandatory.

Section 2 – Representative Details

This section should only be completed if the applicant requires a person to receive the CAPS payment and/or sign the application form to act on their behalf. Information about who can act on behalf of an applicant is contained in the application form.

This section should only be completed if required.

Section 3 – Health Report

This section should only be completed by a Health Professional who is in a position to make an accurate continence assessment of the applicant.

Health Professionals, for example a continence nurse, general practitioner, medical specialist, community nurse, physiotherapist, occupational therapist or an Aboriginal health worker should complete this section.

This section is mandatory.

Centrelink Pensioner Concession Card (PCC)

A Centrelink Pensioner Concession Card is required only if the applicant has an eligible 'other' condition. Applicants who have a neurological condition do not require a PCC. A Centrelink PCC is issued by Centrelink to people in receipt of certain income support payments such as the Age Pension, Disability Support Pension, Mature Age Allowance or Carer Payment.

Other concession cards such as a Commonwealth Seniors Health Card, a low Income Health Care Card or a State Seniors Card are not acceptable for CAPS.

For questions regarding eligibility for a Centrelink Pensioner Concession Card please contact Centrelink on **132 717** (Disability, Sickness and Carers line) or **132 300** (Retirement Line) or visit www.centrelink.gov.au

Correspondence Recipient

A correspondence recipient may be a carer, family member or anyone the applicant or the applicant's representative wishes to receive correspondence from Medicare on their behalf.

Authorised Representatives

An authorised representative may act on behalf of a CAPS applicant if the applicant is unable to act on their own behalf because of mental or physical impairment. The representative can complete and sign the CAPS application form and change details about the applicant in relation to the CAPS on behalf of the applicant. *Further information about the authorised representative is at Page 1 and in 'Section 2 – Representative' of the CAPS application form.*

Authorised Payment Recipient

An authorised payment representative, which may include an organisation that agrees to assist the applicant with the purchase of continence or continence related products, can receive the CAPS payment on behalf of the CAPS applicant. *Further information about the authorised payment representative is at Page 1 and in 'Section 2 – Representative' of the CAPS application form.*

CAPS Payment

This program is not a retrospective payment scheme. The applicant's initial CAPS payment is based on a pro-rata rate calculated from the date Medicare receives a complete application form.

Applicants can receive the CAPS payment in one annual payment or in two bi-annual payments. Annual payments are processed in July and bi-annual payments are processed in July and January of each financial year.

If an applicant chooses to receive two payments their eligibility to receive the second payment may be tested. The payment amount is indexed annually.

The payment will be made into the bank account nominated on the CAPS application form. This may be the applicant's account, the account of a legal representative or the account of an organisation nominated to receive the payment. Payments cannot be made into credit cards, loan or mortgage accounts.

Declaration

It is mandatory that an applicant sign the declaration to agree and acknowledge that they have read the CAPS application guidelines and will use the CAPS payment for the purchase of continence and continence related products.

If the applicant is unable to act on their own behalf then it is mandatory that their authorised representative sign the declaration to agree and acknowledge that they have read the CAPS application guidelines and will use the CAPS payment for the purchase of continence and continence related products for the applicant.

Role of the Health Professional

CAPS applicants are required to obtain a continence assessment from an appropriate Health Professional.

A Health Professional should only complete the Health Report (Section 3) of the CAPS application if they are in a position to make an accurate assessment of the applicant in relation to their incontinence and the cause of their incontinence.

The Health Professional's assessment must be based on evidence that the applicant has been diagnosed with an eligible neurological condition or an eligible other condition.

Appropriate Health Professionals include but are not limited to a continence nurse, general practitioner, medical specialist, community nurse, physiotherapist, aboriginal health worker or occupational therapist.

Eligible Neurological Conditions

Applicants with incontinence caused by eligible neurological conditions listed under any of the following categories are eligible for the CAPS. Applicants with an eligible neurological condition do not require a Centrelink or DVA Pensioner Concession Card provided they meet other CAPS eligibility criteria.

This is a list of the most common conditions in the categories.

Category 1 – Spina Bifida and Syringomyelia

Category 2 – Cerebral Palsy

Eligible Neurological Conditions continues next page...

Category 3 – Intellectual Disability
Congenital neurological infections
Developmental Delay associated with;
Aspergers Syndrome
Autism
Autism Spectrum Disorder
Down Syndrome
Rare congenital neurological syndromes
and conditions

Category 4 – Paraplegia and Quadriplegia

Category 5 – Acquired Neurological Conditions
Acquired brain injury
Alzheimer's Disease
Epilepsy
Encephalitis
Lewi Body Disease
Pick's Disease
Poliomyelitis
Stroke/Cerebrovascular Accident (CVA)

Category 6 – Degenerative Neurological Disease
Huntington Chorea/Disease
Motor Neurone Disease
Muscular Dystrophy
Multiple Sclerosis
Parkinson's Disease

Category 7 – Bladder Innervation Disorders
Ectopia Vesica
Neurogenic Bladder
Neuropathic Bladder

Eligible Other Conditions

Eligible *other* conditions require that the applicant has a valid Centrelink or DVA Pensioner Concession Card or entitlement, whether as a primary cardholder or a dependant of a cardholder.

Further information on eligible neurological conditions and eligible other conditions is available at www.bladderbowel.gov.au

General information

If the CAPS applicant's eligibility has ceased, but their circumstances then change, the applicant would need to reapply to access the CAPS providing they meet the eligibility criteria.

If the applicant's circumstances change (the applicant no longer meets the eligibility criteria, address changes, moves into high care, no longer holds a valid Pensioner Concession Card, change of nominee etc) the applicant or the applicant's representative must notify Medicare as soon as possible.

The applicant or the applicant's representative may be asked to confirm the applicant's eligibility for the CAPS payment.

CAPS clients do not need to reapply each financial year, however it is advisable for children aged 5 years to 15 years to have their continence reassessed at least every 2 years by a health professional.

All other CAPS clients should discuss the need for regular review of their continence needs with their Health Professional.

Submitting the CAPS Application Form

It is important that **Section 1** is signed by the applicant, **Section 2** by the applicant's representative (if required), and **Section 3** signed by the health professional before returning the completed form.

The applicant or their authorised representative must send the completed CAPS application form (including certified copies of the representative's documentation, if required) to:

Fax: 02 9895 3523

OR

Post: Department of Human Services
Continence Aids Payment Scheme
Medicare Services
GPO Box 9822
Sydney NSW 2001

Applications are no longer accepted by email

Medicare will contact you if they require further information. If the application is complete Medicare will provide a written statement of the payment amount and date the CAPS payment was deposited into your nominated bank account.

Organisations Submitting the CAPS Application Form

If an organisation agrees to receive the CAPS payments on behalf of an applicant, the organisation must complete the Organisation authorised as payment recipient section of the CAPS application form and send the completed form on behalf of the CAPS applicant to Medicare (details above).

Useful Contact Details

Medicare – 1800 239 309

Call Medicare for enquiries regarding the CAPS payment

Bladder Bowel website – www.bladderbowel.gov.au

The Australian Government website dedicated to bladder and bowel health.

National Continence Helpline – 1800 330 066

This is a free information and referral telephone service, with professional continence advisors, for people affected by incontinence. This Helpline can also advise about state and territory continence schemes and continence product suppliers.

Continence Foundation of Australia website – www.continence.org.au

Translating and Interpreting Service – TIS National 131 450

National Relay Service (NRS)

133 677 (TTY/Voice)

1300 555 727 (speak and listen)

Calls from mobile telephones are charged at applicable rates.