

General Implementation Guidelines

Residential Support Services Maintenance and Accommodation Contributions (RSSMACs)

7 January 2022

Glossary

Summary

- 1. Introduction**
 - 1.1 *Scope of guidelines***
 - 1.2 *Legislative framework***
 - 1.2.1 Statutory requirement to contribute
 - 1.2.2 Relevant accommodation categories
 - 1.2.3 Exemptions
 - 1.2.4 Waivers
- 2. Determination of RSSMAC rates**
 - 2.1 *Contribution payment days***
 - 2.2 *Relevant RSSMAC Schedule based on accommodation category***
 - 2.3 *Calculation of Recipients' income and RSSMACs***
 - 2.4 *Complex cases***
 - 2.5 *Assessment corrections and updates***
 - 2.5.1 Correcting or updating a financial assessment
 - 2.5.2 Periodic update process (e.g. reflecting DSP rate increases/decreases)
- 3. Appeals and complaints**
- 4. Administrative arrangements**
 - 4.1 *Record-keeping and governance requirements***
 - 4.2 *Manner of payment and collection of monies due***
 - 4.3 *Persons to whom payments are to be made***
 - 4.4 *Disposal by HSE and agents of monies received***
 - 4.4.1 Contributions by Recipients towards rent/kitty etc.
 - 4.4.2 Accounting Procedures
 - 4.5 *Appeals – organisation learning***

Appendix A – RSSMAC rates tables

Appendix B – Financial assessment form

Glossary

In these Guidelines –

- **“Residential support service” or “RSS”** is a term defined in section 67A of the Health Act 1970. It essentially refers to non-acute services provided to a person (under section 67B) by on or behalf of the HSE, where those services include accommodating the person, or meeting his/her maintenance costs (food, utility bills etc.), or both, in a –
 - Hospital,
 - Convalescent home,
 - Nursing home (excluding a Fair Deal-supported service), or
 - Home or other housing accommodation (including in community residential settings) for persons with a physical, sensory, mental health or intellectual disability.
- **“Residential support services maintenance and accommodation contribution” or “RSSMAC”** is defined in section 67C and refers to the statutory contribution towards maintenance and/or accommodation costs required to be paid under section 67C by recipients of residential support services (“RSSs”).
- **“RSS episode”** refers to a Recipient’s period of residential support services provided without any break exceeding 15 days by the same Provider in the same accommodation category.
- **“RSS Provider” or “Provider”** refers to the HSE or to an agency providing RSSs on the HSE’s behalf which is funded to do so under section 38 of the Health Act 2004.
- **“RSSMAC Regulations” or “the Regulations”** means the Health (Residential Support Services Maintenance and Accommodation Contributions) Regulations 2016 (S.I. No. 467 of 2016) as amended by the Health (Residential Support Services Maintenance and Accommodation Contributions) (Amendment) Regulations 2019 (S.I. No. 106 of 2019) and 2022 (S.I. No. 1 of 2022)
- **“RSS Recipient” or “Recipient”** refers to a person who receives RSSs from a Provider.
- References to **“sections”** (e.g. section 53, 53A, 67A, 67B, 67C, 67D etc.) are references to sections of the Health Act 1970 as amended - *unless otherwise stated*.
- **“Standard RSSMAC”** refers to the RSSMAC amount required to be paid based on the service user’s weekly income – prior to consideration of whether or not to grant any waiver.
- **“Waiver”** means reduction or setting aside (under section 67D) of the amount of RSSMAC an individual must actually pay (*see separate Waiver Guidelines*).
- **“Payable RSSMAC”** equals the Standard RSSMAC less waiver (if any) granted (*if waiver is not granted, the Payable RSSMAC equals the Standard RSSMAC*).

Summary

These Guidelines aim to assist the Health Service Executive (HSE) and providers of residential support services on the HSE's behalf ("section 38 agencies"), to correctly determine the income-related Standard RSSMACs required to be paid by service Recipients.

- A short User Guide and Frequently Asked Questions for a more general readership are available at www.hse.ie/longstaycontributions.

Providers must ensure that the operation of the RSSMAC framework is in accordance with the RSSMAC legislation and guidelines, and internal HSE National Financial Regulations and standards.

These General Implementation Guidelines provide guidance on the implementation of section 67C and the Regulations (*see Glossary*) made under that section. They should be read in conjunction with the separate Ministerially-approved Waiver Guidelines¹.

Background – Policy and legislation

The relevant legislative provisions (introduced in 2017 in place of the former framework of "long-stay" charges for in-patient services), are described in *section 1.2*. The policy aims underpinning the RSSMACs framework include:

- A requirement on each RSS Recipient to pay an appropriate and affordable contribution towards the maintenance and accommodation costs associated with the provision of such services.
- Rates set at levels to ensure that each Recipient retains a sufficient level of income for personal use.
- Appropriate safeguards to ensure that contribution requirements can be further reduced or waived in full to reflect an individual Recipient's financial commitments.
- A modern contribution regime reflecting changing residential support models across the health sector on a consistent and equitable basis.

Key features of RSSMAC framework

- Standard RSSMAC rates are based on each Recipient's personal weekly income and the category of accommodation in which s/he receives RSSs. The RSSMAC Regulations provide for three categories of accommodation whose residents are required to pay RSSMACs based on their weekly income as set out in the relevant Schedule for the accommodation type concerned (*see detailed rates at Appendix A*) –
 - **Category A** accommodation where 24 hour medical or nursing care, or both, is generally provided on site: *Schedule 1 applies*.
 - **Category B** accommodation where medical or nursing care, or both, is generally provided on site at least once per week on a less than 24 hour basis: *Schedule 2 applies*.
 - **Category C** accommodation - all other relevant settings (including where there is generally no on-site medical or nursing care provision): *Schedule 3 applies*.
- Providers should engage with Recipients at the earliest possible opportunity to establish their income and correct RSSMAC. Deadlines for Providers in this regard are specified in the legislation (*see 2.3*).
- RSSMACs are contributions towards the maintenance and accommodation aspects of the services provided. There is no requirement to contribute towards the care aspect.

¹ The Waiver Guidelines and related Worked Examples (www.hse.ie/longstaycontributions) aim to assist staff in the next stage following the application of these Guidelines i.e. where in certain circumstances a service user may have difficulty in affording the Standard RSSMAC and may request the service provider to consider waiving some or all of it.

- Standard RSSMAC rates are set at a level intended to ensure that each Recipient is guaranteed to retain sufficient income for personal use to support independence and participation in community activities.
- RSSMACs must take account of each Recipient's existing contributions, if any, towards maintenance and accommodation costs (e.g. rent/kitty). The combined total (rent/kitty plus balancing RSSMAC) must not exceed the Payable RSSMAC determined. Additional contributions in excess of the statutory requirement may not be sought or collected by a Provider in respect of a Recipient's maintenance or accommodation.
- If (upon admission, for example), the Provider does not yet have sufficient information to determine the Recipient's Standard RSSMAC based on income, a default RSSMAC rate (at the maximum within the relevant Schedule) may apply for a brief period pending the determination of the correct rate. *As noted above, Providers should engage with Recipients at the earliest opportunity to establish their income and correct RSSMAC in order to ensure that a default rate applied only remains in place for a short period.*
- The default rate also applies where the Recipient and Provider agree that, if calculated, the Recipient's weekly income would be in the maximum relevant income band and that the maximum RSSMAC rate within the relevant Schedule would therefore apply.

Applicability of RSSMACs

RSSMACs apply only –

- to persons receiving RSSs.
- in respect of any day when a Recipient has received RSSs for more than 30 days in the 12 months period ending on that day.
- to overnight stays.
- to Recipients (including medical card holders and non-holders), other than those who are specifically exempted.
- as a contribution towards the costs of maintenance and/or accommodation associated with the provision of RSSs.

Required / recommended timeframes

Providers should start the RSSMAC financial assessment as early as possible for all Recipients to establish their income and correct RSSMAC. Deadlines for Provider action in this regard are specified in the Regulations (*see 2.3*).

Providers should (insofar as possible and practical) afford Recipients at least 14 days and ideally 21 or more days advance notice of RSSMAC rates they will be required to pay, or changes to those rates.

When calculating a Recipient's weekly income

Include:

The Recipient's own (share of):

- Wages (*net of statutory deductions*) from employment (non-rehabilitative)
- Income in excess of €120 from rehabilitative employment (*see related disregard opposite*)
- Net income from self-employment
- Income from holding an office or directorship
- Pension income (DSP or other)
- Other social welfare income (*if not disregarded – see opposite*)
- Rental income e.g. from property and land
- Income from fees, commissions, dividends, interest etc. (*but disregard savings interest if savings do not exceed €15,000*)
- Payments under a settlement, covenant or estate
- Maintenance payments
- Income from royalties and annuities

Disregard:

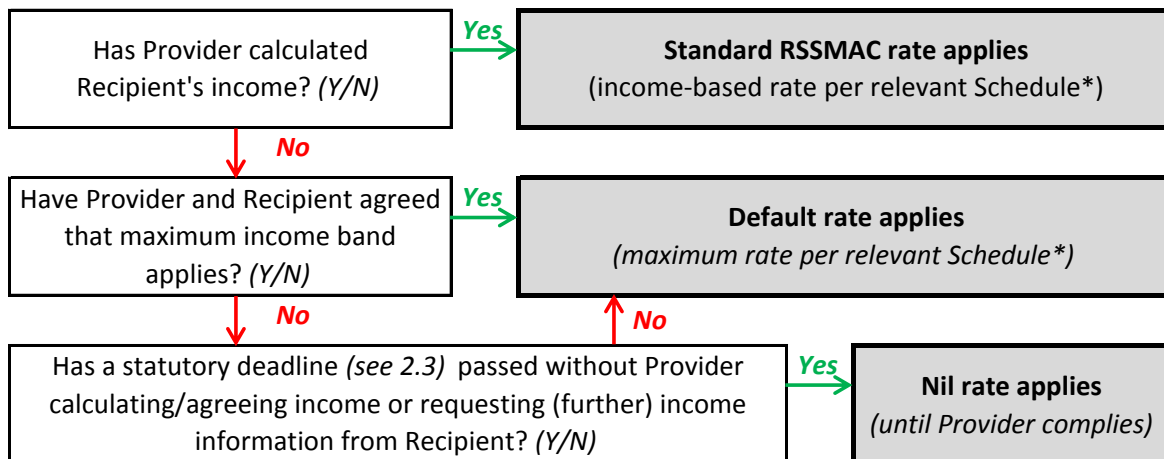
- Statutory deductions (income tax, superannuation, PRSI, pension levy, USC)
- The first €120 of any income from rehabilitative employment
- Training allowances
- Third level maintenance grants
- Rent supplements or similar subsidies towards accommodation costs
- The following DSP income:
 - Specified² SWA supplements other than rent supplements
 - Family income supplement
 - Child benefit
 - Guardian's payments (contributory and non-contributory)
 - Domiciliary care allowance
 - Foster care or Placement of children with relatives allowances
 - Fuel Allowance
 - Island allowance/increase
 - Living alone allowance/increase
 - Mobility allowance
 - Qualified adult or qualified child allowances/increases
- Interest on savings (if savings do not exceed €15,000)
- Certain payments, ex-gratia payments or income derived from payments –
 - under the Redress for Women Resident in Certain Institutions Act 2015 (e.g. Magdalen Laundries),
 - under the Lourdes Hospital Redress Scheme 2007 or Lourdes Hospital Payment Scheme,
 - under the Symphysiotomy Payment Scheme,
 - in respect of Thalidomide.

² Specified in Schedule 4 of the Regulations as: *"The amount (if any) of a supplementary welfare allowance received under sections 198, 200, 201 and 206 of the [Social Welfare Consolidation Act 2005], other than a rent supplement received pursuant to regulations made under section 198(3) of that Act"*.

The Flowchart and Rates Tables below are a simplified version of the RSSMAC rates determination framework, which is detailed in these Guidelines.

Long stay contribution (RSSMAC) rate determination flowchart

RSSMAC rate on a given day



* Schedule 1 for Category A accommodation, Schedule 2 for Category B, Schedule 3 for Category C. See summary rates table below and/or detailed tables in Appendix A.

Standard RSSMAC rates applicable

Refer to the rates tables (at Appendix A and summarised below) appropriate to the Recipient's category of accommodation to establish the correct Standard RSSMAC level based on the Recipient's weekly income.

Standard RSSMAC Rates by Accommodation Category and Income

(rates applicable from 7 January 2022*)

Schedule 1 - Category A accommodation			Schedule 2 - Category B accommodation			Schedule 3 - Category C accommodation		
Assessed weekly income	Contribution		Assessed weekly income	Contribution		Assessed weekly income	Contribution	
	Daily	Weekly		Daily	Weekly		Daily	Weekly
€228 or more	€ 25.58	€179	€214 or more	€ 19.15	€134	€208 or more	€ 10.58	€74
€223 to €227.99	€ 24.86	€174	€209 to €213.99	€ 18.43	€129	€204.50 to €207.99	€ 10.08	€70.50
€218 to €222.99	€ 24.15	€169	€204 to €208.99	€ 17.72	€124	€201 to €204.49	€ 9.58	€67
€213 to €217.99	€ 23.43	€164	€199 to €203.99	€ 17.00	€119	€197.50 to €200.99	€ 9.08	€63.50
€208 to €212.99	€ 22.72	€159	€194 to €198.99	€ 16.29	€114	€194 to €197.49	€ 8.58	€60
€203 to €207.99	€ 22.00	€154	€189 to €193.99	€ 15.58	€109	€190.50 to €193.99	€ 8.08	€56.50
€198 to €202.99	€ 21.29	€149	€184 to €188.99	€ 14.86	€104	€187 to €190.49	€ 7.58	€53
€193 to €197.99	€ 20.58	€144	€179 to €183.99	€ 14.15	€99	€183.50 to €186.99	€ 7.08	€49.50
€188 to €192.99	€ 19.86	€139	€174 to €178.99	€ 13.43	€94	€180 to €183.49	€ 6.58	€46
€183 to €187.99	€ 19.15	€134	€169 to €173.99	€ 12.72	€89	€176.50 to €179.99	€ 6.08	€42.50
€178 to €182.99	€ 18.43	€129	€164 to €168.99	€ 12.00	€84	€173 to €176.49	€ 5.58	€39
€173 to €177.99	€ 17.72	€124	€159 to €163.99	€ 11.29	€79	€169.50 to €172.99	€ 5.08	€35.50
€168 to €172.99	€ 17.00	€119	€154 to €158.99	€ 10.58	€74	€166 to €169.49	€ 4.58	€32
€163 to €167.99	€ 16.29	€114	€149 to €153.99	€ 9.86	€69	€162.50 to €165.99	€ 4.08	€28.50
€158 to €162.99	€ 15.58	€109	€144 to €148.99	€ 9.15	€64	€159 to €162.49	€ 3.58	€25
€153 to €157.99	€ 14.86	€104	€139 to €143.99	€ 8.43	€59	€155.50 to €158.99	€ 3.08	€21.50
€148 to €152.99	€ 14.15	€99	€134 to €138.99	€ 7.72	€54	€152 to €155.49	€ 2.58	€18
€143 to €147.99	€ 13.43	€94	€129 to €133.99	€ 7.00	€49	€148.50 to €151.99	€ 2.08	€14.50
€138 to €142.99	€ 12.72	€89	€124 to €128.99	€ 6.29	€44	€145 to €148.49	€ 1.58	€11
€133 to €137.99	€ 12.00	€84	€119 to €123.99	€ 5.58	€39	€141.50 to €144.99	€ 1.08	€7.50
€128 to €132.99	€ 11.29	€79	€114 to €118.99	€ 4.86	€34	€138 to €141.49	€ 0.58	€4
€123 to €127.99	€ 10.58	€74	€109 to €113.99	€ 4.15	€29	€137.99 or less	Nil	Nil
€118 to €122.99	€ 9.86	€69	€104 to €108.99	€ 3.43	€24			
€113 to €117.99	€ 9.15	€64	€99 to €103.99	€ 2.72	€19			
€108 to €112.99	€ 8.43	€59	€94 to €98.99	€ 2.00	€14			
€103 to €107.99	€ 7.72	€54	€89 to €93.99	€ 1.29	€9			
€98 to €102.99	€ 7.00	€49	€84 to €88.99	€ 0.58	€4			
€93 to €97.99	€ 6.29	€44	€83.99 or less	Nil	Nil			
€88 to €92.99	€ 5.58	€39						
€83 to €87.99	€ 4.86	€34						
€78 to €82.99	€ 4.15	€29						
€73 to €77.99	€ 3.43	€24						
€68 to €72.99	€ 2.72	€19						
€63 to €67.99	€ 2.00	€14						
€58 to €62.99	€ 1.29	€9						
€53 to €57.99	€ 0.58	€4						
€52.99 or less	Nil	Nil						

* The above rates apply to service users in place of the rates published in the previous (March 2019) version of these Guidelines, with effect from 7 January 2022.

Corrections, Updates and Appeals

These Guidelines provide for corrections/updates of required contributions (*see 2.5*) and for an appeals process (*see section 3*). The Regulations require Recipients' income calculations to be kept up to date and the Guidelines recommend updating each individual's RSSMAC assessment annually, at least.

Waiver requests

Refer to the Waiver Guidelines (www.hse.ie/longstaycontributions) – if a Recipient wishes to be considered for a waiver for the avoidance of undue hardship and/or the advancement of specified needs, including needs set out in a care plan. If a waiver is granted, the Recipient does not pay the full Standard RSSMAC but a reduced contribution based on adjusted income ("Payable RSSMAC" i.e. Standard RSSMAC less waiver granted).

Cap on total payable contributions towards maintenance and accommodation

All contributions towards the maintenance and accommodation costs associated with the provision of residential support services must be within the scope of the RSSMAC legislation i.e. must be either:

- The statutory contribution only i.e. the total Payable RSSMAC, or
- A combination of contributions amounting to and not exceeding the Payable RSSMAC (e.g. agreed rent/kitty contribution plus a balancing RSSMAC), or
- A separate agreed contribution towards maintenance and/or accommodation costs e.g. rent/kitty, capped at the level of the Payable RSSMAC.

Clear RSSMAC implementation instructions must be provided to all relevant staff in the HSE and section 38 agencies. These guidelines along with the Waiver Guidelines (www.hse.ie/longstaycontributions) will assist staff in implementing the RSSMAC provisions.

7 January 2022

National RSSMAC General Implementation Guidelines

**Residential Support Services Maintenance and
Accommodation Contributions (RSSMACs)**

7 January 2022

1. Introduction

These Guidelines are for use by personnel of “RSS Providers” (*see Glossary below*) who have responsibility for implementing and managing the framework of residential support services maintenance and accommodation contributions (RSSMACs) under sections 67A to 67D of the Health Act 1970³. They should be read in conjunction with the separate Ministerially-approved Waiver Guidelines and related Worked Examples (www.hse.ie/longstaycontributions).

No statutory or other contributions towards maintenance and/or accommodation costs may be sought by Providers from “Recipients” (*see Glossary*) except in accordance with these Guidelines and the associated Waiver Guidelines. If a Provider encounters circumstances not set out clearly in the guidelines but believes that a contribution may validly apply, clarification and prior approval must first be sought from the *HSE Central RSSMAC Unit, Health Service Executive, Block D, Parkgate Business Centre, Parkgate St, Dublin D08 YFF1; Tel: 01 – 6352895*

1.1 Scope of guidelines

These guidelines apply to contributions required to be paid under section 67C in respect of the provision of residential support services to Recipients under section 67B by the HSE or by persons or bodies providing such services on its behalf on foot of a Service Agreement under section 38 of the Health Act 2004. Where such services are provided by a private provider under a contract with the HSE, the HSE is responsible for implementing the appropriate RSSMAC arrangements.

RSS Recipients are required to contribute towards costs of maintenance and accommodation under section 67C and related Regulations. Subject to some exemptions (*see 1.2.3*), RSSMACs apply to any person (“RSS Recipient”) who receives health or personal social services in any of the settings specified in section 67A (*see 1.2*) and –

- who is directly accommodated by an RSS Provider, or
- whose ongoing ‘*costs of maintenance*’ are met in full or in part by an RSS Provider, while being provided with accommodation by a different body/agency (e.g. a supported placement provided by a voluntary housing association or a local authority subject to an arrangement for required health-related supports to be provided by the RSS Provider). (*In this context, ‘costs of maintenance’ refers to the costs of a Recipient’s essential daily living requirements including food and essential utilities.*)

It should be noted that it is only the costs of maintenance and/or accommodation that are subject to contributions and not the cost of care.

RSSMACs do **not** apply where a health sector provider delivers health-related supports such as home help, home care packages, public health nurse visits, etc. in the service user’s own principal private residence. Residential support services do **NOT** include the following services:

- Acute in-patient services (up to the point where the in-patient is certified to be medically fit for discharge from the acute hospital or unit, after which point, if the person remains in the hospital or unit, the services received there are RSSs).

³ As inserted by section 19 of the Health (Amendment) Act 2013 and as amended by Part 3 of the Health (Miscellaneous Provisions) Act 2014.

- Long-term residential care services as defined under the Nursing Homes Support Scheme Act 2009 (“Fair Deal”).
- Out-patient services (*e.g. overnights in A&E*).
- Residential or accommodation services provided to individuals by:
 - private sector providers, or
 - persons or bodies grant-aided by the HSE under section 39 of the Health Act 2004, except where, under contract, such providers or persons or bodies provide residential support services under section 67B of the Health Act 1970 on behalf of the HSE e.g. contract beds.

1.2 Legislative framework

The RSSMACs framework is based on:

- **sections 67A, 67B, 67C and 67D** of the Health Act 1970,
- the **Health (Residential Support Services Maintenance and Accommodation Contributions) Regulations 2016** (as amended*), and
- a requirement that Providers must exercise waiver powers under section 67D in accordance with **Waiver Guidelines** approved by the Minister for Health.

* *The Health (Residential Support Services Maintenance and Accommodation Contributions) (Amendment) Regulations 2022 (S.I. No. 1 of 2022) provided for revised income bands and contribution rates (with effect from 7 January 2022).*

Section 67A defines key terms including “accommodation” and “residential support services”.

- “Accommodation” essentially means accommodation provided to an RSS Recipient (in specified settings – *see definition of ‘residential support services’ below*) either –
 - directly by an RSS Provider, or
 - by another body (e.g. a voluntary housing association or local authority) if –
 - the accommodation is provided under an arrangement to facilitate the provision of RSSs in that accommodation by the RSS Provider, and
 - the Recipient’s associated ongoing costs of maintenance (e.g. food and/or utility bills) are met by the Provider.
- “Residential support services” essentially means any health or personal social service – excluding acute in-patient services, long-term residential care services (Fair Deal) or out-patient services (e.g. overnights in A&E) – provided under any enactment by or on behalf of the HSE in accommodation (*see definition above*) which is a –
 - hospital,
 - convalescent home,
 - nursing home, or
 - home/housing accommodation for persons with a physical, sensory, mental health or intellectual disability.

Section 67B formally enables the HSE to provide residential support services.

1.2.1 Statutory requirement to contribute

Section 67C(1) makes it a requirement that RSS Recipients make maintenance and accommodation contributions (RSSMACs).

Section 67C(2) provides for the making of RSSMAC Regulations –

- (i) *making it a requirement that persons to whom residential support services are provided, or persons belonging to a specified class or classes of such persons, shall pay a contribution, in specified circumstances, towards the costs of maintenance or accommodation, or both, associated with the provision of such services, and*
- (ii) *specifying the amounts of the contributions or the limits to the amounts of such contributions...'*

Section 67C(3) sets an upper RSSMAC limit i.e. 80% of the maximum daily rate of the State Pension (non-contributory), provides for an automatic contribution reduction where the RSS Provider does not directly accommodate the Recipient, and stipulates that a long stay contribution/RSSMAC applies to a day where the Recipient received RSSs at midnight (at the end of that day).

Section 67C(4) provides that the RSSMAC requirement applies to a Recipient in respect of any given day when s/he has been provided with RSSs on more than 30 days during the 12-month period ending on that day.

- For example, where a person is admitted to residential support services on 15 January 2022 (at any time up to midnight), the 12-month period runs from 16 January 2021 to 15 January 2022, inclusive. A contribution requirement applies in respect of 15 January 2022, provided the person has, during the period 16 January 2021 to 15 January 2022, inclusive, received residential support services for more than 30 days.

1.2.2 Relevant accommodation categories

The Regulations provide for three accommodation categories to which RSSMACs apply:

- **Category A accommodation** – where medical, and/or nursing care*, is generally provided by, or on behalf of the HSE on a 24-hour basis.
- **Category B accommodation** – where medical, and/or nursing care, is generally provided by or on behalf of the HSE at least once per week and on a less than 24-hour basis.
- **Category C accommodation** – all other accommodation (including accommodation where there is no medical or nursing care) for people in receipt of residential support services e.g. independent living settings.

** Medical and/or nursing care means care provided by a fully qualified and registered medical practitioner and/or by a fully qualified and registered nurse, as applicable. It does not mean care provided by a nurse's aide, care assistant or house parent.*

Three corresponding Schedules of RSSMAC rates based on income are set out in the Regulations (see 2.2). The maximum Standard RSSMAC rates (weekly equivalents) are €179 per week (Category A), €134 (Category B) and €74 (Category C) in respect of Recipients whose weekly income is equal to or more than €228, €214 and €208, respectively. Contributions reduce progressively for income bands below these levels as set out in the Schedules. A "nil" rate applies where weekly income is less than €52.99 in the case of Category A, less than €83.99 for Category B, or less than €137.99 for Category C.

1.2.3 Exemptions

Section 67C(7) provides for exemptions from payment of maintenance and/or accommodation contributions where the residential support services concerned are provided to:

- A person under 18 years of age.
- A woman receiving services in respect of motherhood or services in respect of termination of pregnancy.
- A person detained involuntarily under the Mental Health Acts 2001 to 2009
- A person detained in a designated centre under the Criminal Law (Insanity) Act 2006.
- A person who in the opinion of the HSE has contracted Hepatitis C from the use of Human Immunoglobulin Anti-D or the receipt within the State of another blood product or a blood transfusion.
- A person receiving services for the diagnosis and treatment of infectious diseases as prescribed under Part IV - Health Act 1947 (e.g. Covid-19, tuberculosis, clostridium difficile infection, influenza, typhoid etc.⁴).
- A person who pays charges under section 53A⁵ of the Health Act 1970.
- A person who receives State support or ancillary State support under the Nursing Homes Support Scheme.

1.2.4 Waivers

Section 67D provides for waivers (i.e. reduction or setting aside of the amount of contribution required to be paid in certain circumstances e.g. for the avoidance of financial hardship) – *see separate Waiver Guidelines and related Worked Examples*.

⁴ The most recent list (as of January 2022) of RSSMACs-exempt prescribed infectious diseases is set out in the Infectious Diseases (Amendment) Regulations 2020 ([S.I. No. 53 of 2020](#))

⁵ Section 53A provides that a charge, based on the average cost of long-term residential care in public nursing homes, may apply to persons residing in (a) acute hospitals where the person does not require medically acute care or (b) public nursing homes (and where the person does not co-operate with the application process for the Nursing Homes Support Scheme (Fair Deal) when long-term residential care becomes appropriate to meet their needs.

2. Determination of RSSMAC rates

2.1 Contribution payment days

The requirement to pay a long stay contribution/RSSMAC applies to a person who, on a given day,

- is provided with RSSs by a Provider in a specified setting (*see definition of residential support services at 1.2*), and
- has previously received at least 30 days of residential support services in the 12-month period ending on the day in question in any combination of relevant settings, regardless of whether or not nursing or medical care was provided.

An implication of this rule is that, once a Recipient has received RSSs for 30 days continuously, a long stay contribution/RSSMAC must be paid for the **remainder** of his/her time in uninterrupted continuous receipt of such services. However, the position should be reviewed in the event of any break in service provision (e.g. if Recipient requires and receives acute in-patient services in an acute hospital or unit).

If, however, the Recipient has not been in receipt of residential support services for more than 30 days continuously, a check should be carried out to establish whether the Recipient has, at midnight at the end of a given day, received residential support services for an aggregate of more than 30 days in the 12-month period ending on that day. If so, a contribution is required.

The legislation provides that, in calculating the number of days that a person has received RSSs within the immediately preceding 12-month period, each of the following is treated as a day on which a person has been provided with residential support services:

- A day on which a person has received acute in-patient services unless the person was liable to pay a charge under section 55 (*i.e. liable to pay for private care as the person did not avail of public care*).
- A day on which a person was in receipt of "Fair Deal" State support (*excludes service users in receipt of long-term residential care services under Fair Deal but who - because their income exceeds the cost of care - are not in receipt of State support under the Scheme*).

Short-term absences

Under the Act, a person is considered as receiving RSSs on a particular day where s/he is receiving such services at midnight at the end of the relevant day. As a result, a Recipient is not liable to pay RSSMACs while absent on a short-term basis for various reasons such as being admitted to an acute hospital/unit for acute in-patient services, returning home for a number of days from time to time etc.

However, if a Recipient in an acute hospital/unit is medically discharged from acute care but for whatever reason does not transfer back to his/her long-stay facility, the Recipient ceases to qualify for exemption in respect of acute in-patient services and is required to pay RSSMACs to the acute hospital/unit on a given day provided that s/he, has previously received at least 30 days of RSSs in the 12 month period ending on the day in question in any relevant settings.

Note: If a period of absence continues for more than one month, a review should be undertaken of the circumstances in regard to the Recipient's absence. In the case of admission to an acute hospital/unit, local management should establish whether the Recipient will be returning to the long-stay facility and the expected date of his/her return.

2.2 Relevant RSSMAC Schedule based on accommodation category

The relevant Schedule of RSSMAC rates (*see Appendix A*) applicable to each individual depends on the category of accommodation (*see 1.2.2 above*) in which s/he receives RSSs:

- In **Category A accommodation** (*nursing and/or medical care generally provided on a 24-hour basis*), a contribution is required based on assessed weekly income bands (decreasing in €5 increments), at the rates in **Schedule 1 of the Regulations** (max: €25.58 daily/€179 weekly). All Category A Recipients retain a minimum of €49 for personal use.
- In **Category B accommodation** (*nursing and/or medical generally provided at least once per week and on less than a 24-hour basis*), a contribution is required based on assessed weekly income bands (decreasing in €5 increments), at the rates in **Schedule 2 of the Regulations** (max: €19.15 daily / €134 weekly). All Category B Recipients retain a minimum of €80 for personal use.
- In **Category C accommodation** (*all other relevant accommodation including where there is no nursing or medical provision*), a daily contribution is required based on assessed weekly income bands (decreasing in increments of €3.50), at the corresponding rate shown in **Schedule 3** (up to a maximum daily rate of €10.58/weekly equivalent rate of €74). All Category C Recipients retain a minimum of €134 from their total weekly income for personal use.

2.3 Calculation of Recipients' income and RSSMACs

Standard RSSMAC

Each Recipient receiving residential support services should be individually financially assessed in order to determine –

- (a) his/her total weekly income, taking account of any relevant income disregards which may be applicable to his/her individual circumstances and the Standard RSSMAC rate applicable (by reference to the relevant Schedule) based on that total weekly income,
- (b) whether waiver in full or in part from Standard RSSMAC should be considered having regard to his/her financial circumstances (*see Waiver Guidelines*),
- (c) the Payable RSSMAC having applied any relevant waivers (payable in any agreed combination of separate household contributions and balancing RSSMAC).

The Financial Assessment Form (*see hard copy at Appendix B – an electronic copy is also available to Providers at www.hse.ie/longstaycontributions or from the HSE Central RSSMAC Unit*) must be completed for all Recipients in order to calculate the correct Standard RSSMAC. The form should be completed by the deciding officer, with appropriate input by and involvement of the Recipient and/or personal representative (*enduring power of attorney, person nominated by Recipient, person acting in the best interest of the Recipient*).

It is important to note that the requirement to pay a long stay contribution/RSSMAC does not apply until the Recipient has received RSSs for in excess of 30 days in the previous 12-month period. However, **the assessment process should begin as soon as possible** prior to the date the contributions are first due to be paid (noting that there will be circumstances where this may not be practicable). For example, where a Recipient transfers from home or other non-RSS settings into settings providing RSSs with little or no opportunity for prior notification or planning (e.g. emergency respite), it may not be possible to afford the

Recipient the guideline notification periods referred to in these Guidelines. In such circumstances, the assessment process should begin as soon as possible after admission.

The details required from the Recipient in the relevant sections of the form should be completed by the Recipient or his/her personal representative or by the deciding officer with appropriate input by the Recipient/personal representative. The Provider / deciding officer then completes all remaining parts of the form (with input if and as appropriate by the Recipient / personal representative), determines the relevant Standard RSSMAC and, if appropriate, undertakes a waiver assessment (*see Waiver Guidelines and related Worked Examples: www.hse.ie/longstaycontributions*). The Recipient and/or his/her personal representative where appropriate, should be advised in writing of the amounts determined and the basis for the calculations.

Default RSSMAC

A **default RSSMAC rate** (the maximum rate in the relevant Schedule) applies (until a Standard RSSMAC rate is determined based on calculating the Recipient's income), in the following circumstances:

- Where the Recipient and the Provider have agreed that the Recipient's income would, if calculated, fall into the maximum income band in the relevant Schedule and would result in a requirement to pay the maximum rate in the Schedule (*in these circumstances, it is not necessary to calculate the Recipient's income or to seek further income details from the Recipient*), or
- For an initial period of up to 28 days from the first day during the relevant RSS episode on which the Recipient is required to pay RSSMACs – pending commencement of the RSSMAC assessment process by the Provider, or
- While a Provider is waiting for a Recipient to provide income information requested as part of the RSSMAC assessment process, and for a further period of up to 28 days after the Recipient provides that information.

Note, however, that a default rate is not applicable where a Standard RSSMAC rate has already been determined based on calculating the Recipient's income.

Where a default rate is applicable while income information is awaited from a Recipient, the Provider should write to the Recipient/personal representative to explain that, upon provision of the required income information, the Provider will reimburse any overpayment of RSSMAC based on the difference between the sum of the contributions collected during the 'default' period and the sum of the contributions which would otherwise have been determined to be payable. The letter should also explain the potential benefits to the Recipient of also providing details of any ongoing expenses etc (*see Waiver Guidelines*) which might be deemed as waivable expenses and might therefore result in the granting of a full or partial waiver.

Automatic RSSMAC reduction in certain circumstances

In cases where a Recipient is maintained, but not directly accommodated, by the RSS Provider, an automatic RSSMAC reduction applies: i.e. a reduction by the greater of €30 per week or the Recipient's net contribution towards his/her accommodation (i.e. rent less rent allowance or similar subsidies received).

Nil RSSMAC

The RSSMAC Regulations afford Providers a reasonable period (28 days) to commence the RSSMAC assessment process once a Recipient's RSS episode with a Provider commences (e.g. by requesting income information) and to complete the process (4 weeks after receiving satisfactory income information). However, the last day of the 28-day period is a

statutory deadline for action by Providers, as the Regulations also require Providers to comply with those timeframes and provide for the application of a nil RSSMAC rate where a Provider, within 28 days of a Recipient first becoming liable to pay that Provider an RSSMAC during an RSS episode, fails to either:

- Determine the Recipient's income and Standard RSSMAC rate, or
- Agree with the Recipient that the default (maximum) rate applies, or
- Issue a first request for income information to the Recipient.

Providers should ensure that the above situation does not arise by commencing and completing all RSSMAC assessments and determinations at the earliest opportunity. However, in the event that a specified deadline is missed and a nil contribution rate triggered, the nil rate continues in effect until the day before the Provider:

- Issues a (first or further) request for income information, or
- Determines the correct RSSMAC rate, or
- Agrees with the Recipient that the default (maximum) rate applies.

There is no provision in the legislation for Providers to recover RSSMACs in respect of a period when a nil contribution rate applies.

Income calculation and RSSMAC determination

Income calculation and RSSMAC determination steps – summary

Step A: Calculate weekly income or determine income band (default RSSMAC rate)

- Calculate the Recipient's **weekly income** – *excluding statutory deductions and specified income disregards*

except where

- The Provider and Recipient agree that it is clear that the Recipient's income, if calculated, would result in a requirement to pay the maximum RSSMAC applicable under the appropriate Schedule (the "default RSSMAC rate"). In such cases, the default RSSMAC rate applies, with no further enquiry into the Recipient's financial affairs. The "default RSSMAC rate" should be noted at Step F on the Financial Assessment Form. The Recipient/personal representative and Provider should formally sign off on such an agreement with the original filed on the Recipient's administration file and a copy provided to the Recipient/personal representative.

Step B: Determine Standard RSSMAC

- If the default rate does not apply, refer to appropriate Schedule (*see 2.2*) to establish the **standard RSSMAC** based on total weekly income at Step A. If the default rate applies, refer to the appropriate Schedule to establish the maximum RSSMAC rate.
- If appropriate (i.e. where the accommodation is not provided by or on behalf of the HSE e.g. voluntary housing association), apply automatic RSSMAC reduction – i.e. reduce default rate or standard rate by the *greater* of €30 *or* rent paid by the Recipient to his/her accommodation provider (net of any rent subsidies received by the Recipient).

If there is a basis for a long stay contribution/RSSMAC reduction or a waiver is sought, refer to the accompanying Waiver Guidelines and related Worked Examples (www.hse.ie/longstaycontributions).

Step A: Calculate weekly income or determine income band (default RSSMAC rate)

If the default RSSMAC rate does not apply (*see above*), calculate the Recipient's **weekly income** from all sources *less* statutory deductions (tax, superannuation, PRSI, pension levy, USC) and *less* disregards shown in the weekly income calculation table below.

Important notes on treatment of couples when calculating income

- In regard to married couples/civil partners/cohabiting couples, only the Recipient's own income can be included in the assessment.
- A Recipient who is not in receipt of an income in his/her own right is not obliged to pay any RSSMAC (or any separate rent/kitty-type contribution). It may however be appropriate in such circumstances for the Provider to liaise with the Department of Social Protection (DSP), with a view to considering the Recipient's eligibility to be provided with an income in his/her own right. If such eligibility is established, an RSSMAC assessment or updated assessment, as appropriate, should be undertaken based on the Recipient's updated income details.
- If a DSP qualified adult allowance is being paid to either member of the couple, the income must be assigned to the person who actually receives the payment. In the

interests of fairness and equity, it should be established whether that person would be agreeable to splitting the DSP payment with the partner/spouse. If the allowance is split, only the amount actually received by the Recipient can be attributed to him/her when assessing weekly income.

- If both members of the couple are in receipt of RSSs, separate RSSMAC assessments must be carried out for each partner based on personal, not joint, income.

Wards of Court

If the service user is a ward of court, the appreciated value on the roll over fund from investments made by the Courts Service on behalf of the service user should not be taken into account when determining RSSMAC rate. However, if the service user is in receipt of other income e.g. pension, rental income etc. such income must be included in the financial assessment.

Weekly income calculation table

When calculating the Recipient's weekly income (Step A)	
Include:	Disregard:
<p>The Recipient's own (share of):</p> <ul style="list-style-type: none"> ▪ Wages (<i>net of statutory deductions</i>) from employment (non-rehabilitative) ▪ Income in excess of €120 from rehabilitative employment (<i>see related disregard opposite</i>) ▪ Net income from self-employment ▪ Income from holding an office or directorship ▪ Pension income (DSP or other) ▪ Other DSP income (<i>if not disregarded – see opposite</i>) ▪ Rental income e.g. from property and land ▪ Income from fees, commissions, dividends, interest etc. (<i>but disregard savings interest if savings do not exceed €15,000</i>) ▪ Payments under a settlement, covenant or estate ▪ Maintenance payments ▪ Income from royalties and annuities 	<ul style="list-style-type: none"> ▪ Statutory deductions (income tax, superannuation, PRSI, pension levy, USC) ▪ The first €120 of income from rehabilitative employment ▪ Training allowances ▪ Third level maintenance grants ▪ Rent supplements or similar subsidy towards accommodation costs ▪ The following DSP income: <ul style="list-style-type: none"> • Specified SWA supplements⁶ other than rent supplements • Family income supplement • Child benefit • Guardian's payments (contributory and non-contributory) • Domiciliary care allowance • Foster care or Placement of children with relatives allowances • Fuel Allowance • Island allowance/increase • Living alone allowance/increase • Mobility allowance • Qualified adult or qualified child allowances/increases ▪ Interest on savings (if savings do not exceed €15,000) ▪ Certain payments, ex-gratia payments or income derived from payments - <ul style="list-style-type: none"> • under the Redress for Women Resident in Certain Institutions Act 2015 (e.g. Magdalen Laundries). • under the Lourdes Hospital Redress Scheme 2007 or Lourdes Hospital Payment Scheme. • under the Symphysiotomy Payment Scheme. • in respect of Thalidomide.

⁶ Specified in the relevant Schedule to the Regulations as follows: "Any moneys received by way of a supplementary welfare allowance granted under sections 198 (other than rent supplements), 200, 201 and 206 of the [Social Welfare Consolidation Act 2005]".

Step B: Determine Standard RSSMAC based on weekly income

Based on Step A, refer to the appropriate Schedule (*see Appendix A*) to establish the correct standard RSSMAC.

Automatic RSSMAC reduction in certain circumstances

In cases where RSS Recipients are not directly accommodated by the RSS Provider, an automatic RSSMAC reduction applies. The Standard RSSMAC (or the default rate if applicable) is reduced by the *greater* of €30 per week *or* the Recipient's net contribution towards his/her accommodation (i.e. rent paid less rent allowance or similar subsidies received).

For example:

- €75 total rent paid by RSS Recipient who receives a DSP rent allowance of €35 i.e. net contribution is €40. The automatic reduction equals the greater of €30 or the Recipient's €40 net contribution. The RSSMAC is reduced by €40.
- €25 total rent paid by RSS Recipient who receives no rent subsidy i.e. net contribution is €25. The automatic reduction equals the greater of €30 or the Recipient's €25 net contribution. The RSSMAC is reduced by €30.

Notification of outcome of financial assessment

Following assessment, the Recipient/personal representative should be notified in writing of the determined RSSMAC rate and advised of options on how to pay the contribution (e.g. agent on pension book/invoice). An assessment summary outlining how the rate was calculated (including, if appropriate, details of expenses considered for waiver calculation purposes – *see Waiver Guidelines*) should be issued with the notification. A copy should be placed on the Recipient's administration file, subject to arrangements for restricted access to ensure appropriate confidentiality (e.g. records containing sensitive personal/financial information relating to Recipients and their dependants should be kept separate from the Recipients' medical/therapeutic records).

Rent/kitty - compliance with RSSMAC legislation (*see Waiver Guidelines for details*)

Contributions towards rent/kitty, household expenses, etc. by recipients of residential support services are fully in keeping with the purpose of the RSSMAC legislation i.e. they are a form of RSSMAC and should be treated as such. To ensure legal compliance, the Payable RSSMAC amount may, by agreement between the Provider and the Recipient, be paid in any combination of:

- An agreed contribution (e.g. rent/kitty) towards maintenance or accommodation costs (net of rent subsidies, if any e.g. HAP, rent allowance), plus
- A balancing RSSMAC

subject to the Recipient not being required to pay, in any combination, a combined contribution in excess of the Payable RSSMAC amount (post-waiver).

2.4 Complex cases

Where circumstances arise which are not covered – or are not clear – in the guidelines, but where a Provider believes that an RSSMAC may nonetheless apply, clarification must be sought and prior approval obtained from the *HSE Central RSSMAC Unit, Health Service Executive, Block D, Parkgate Business Centre, Parkgate St, Dublin D08 YFF1; Tel: 01 – 6352895*

Any resulting guideline clarifications and/or practice changes will be communicated by the Unit to all relevant HSE and section 38 staff to ensure consistent application across the system.

2.5 Assessment corrections and updates

The Provider may correct or update a Recipient's contribution on its own initiative or at the request of the Recipient or personal representative. Where a Recipient (or personal representative) notifies a Provider of an assessment error or a change in financial circumstances which may merit a contribution reduction, an early correction or update as appropriate should be arranged.

2.5.1 Correcting or updating a financial assessment

Following an assessment and determination of a Recipient's contribution, the Provider may correct a determination at the request of the Recipient/personal representative, in cases where:

- An error may have occurred e.g. an inaccurate calculation etc.,

or update a determination where:

- Information not submitted at the time of assessment or updated assessment is later submitted.

The outcome of the corrected or updated assessment must be issued in writing to the Recipient / personal representative and a copy maintained on the Recipient's administration file. A corrected or updated decision may be appealed (*see section 3*).

See FAQs at www.hse.ie/longstaycontributions for information on the correction/update process for Recipients or personal representatives.

2.5.2 Periodic update process (e.g. reflecting DSP rate increases/decreases)

A Provider may update a Recipient's RSSMAC assessment on the Provider's own initiative or at the request of the Recipient or personal representative.

Periodic assessment updates

Providers should arrange to undertake systematic updates of all Recipients' financial circumstances and appropriate RSSMACs at least once a year. An updated assessment will be required in any event:

- For individual Recipients – when their financial circumstances change: The determination should be updated *if requested by a Recipient/ personal representative* when a change in their financial circumstances merits a contribution adjustment (e.g. mortgage payment increase/decrease, qualification for State Pension on age grounds etc).
- For specific groups of Recipients (e.g. individuals in receipt of monies from DSP) – when a change in rates affects income (e.g. Budget announcement to changes in DSP allowance / pension rate changes).
- For Recipients generally – when contribution rates change on foot of new Regulations.

Each Recipient/personal representative should be advised in writing of the outcome of each updated assessment and the reasons for any redetermination of the Recipient's contribution, 14 days at least (insofar as possible) and ideally 21 or more days prior to the coming into effect of any contribution adjustment. A copy should be filed on the Recipient's administration file.

In cases where the outcome of an updated assessment (2.5.1 and 2.5.2) results in a **decrease** in the Recipient's contribution, the Provider must implement the revised contribution rate with effect from the confirmed date of the change in circumstances meriting the contribution decrease and make any resulting reimbursement arising.

In cases where the outcome of an updated assessment (2.5.1 and 2.5.2) results in an **increase** in the Recipient's contribution, notice of 14 days at least (insofar as possible) and ideally 21 or more days should be given to a Recipient by a Provider prior to its implementation (among other reasons to allow time for the Recipient to seek a correction or to appeal the determination). *Note however that the RSSMAC legislation empowers a Provider to demand recovery of an underpayment (arising for whatever reason). If this option is exercised, the Recipient is required to pay the amount of the underpayment to the Provider on demand.*

Where a Recipient appeals an RSSMAC rate increase following an RSSMAC assessment update:

- The Provider may implement the updated rate while the appeal is being considered.
- If the outcome of the appeal overturns all or part of the rate increase, the Provider must make any appropriate reimbursement arising without delay.

DSP rate increases/decreases

Should DSP rates increase or decrease, the adjusted rates may give rise to contribution rate adjustments, and each Provider should therefore arrange for a systematic updating of the assessments for all Recipients affected by the change in DSP rates.

Where the level of individual Recipients' DSP payments change for other reasons (e.g. moving from DA payments to State Pension), individual assessment updates should be arranged.

Recipients/personal representatives should be advised, upon admission to care, that any future amendments to income due to DSP rate changes generally or changes to levels of DSP payments to individuals may result in changes to Recipients' contributions. Note, however, that where a person's contribution level is already at the maximum applicable within the relevant Schedule, an income increase for that person will not result in a contribution increase unless new rates are introduced.

Insofar as possible, all relevant Recipients should be advised in writing of any revised determined contribution arising from a DSP rate adjustment at least 14 days (ideally 21 days or more) prior to implementation date. Recipients/ personal representatives should be advised in writing of their options to seek a correction or appeal of this decision.

When DSP rates are due to increase/decrease as a result of, for example, a budget announcement, the Provider must ensure that the revised contribution amount is implemented from the effective date of revised DSP rates. Recipients should be notified of such a change in their contribution at least 21 days in advance of implementation, other than in very exceptional circumstances such as where insufficient time is available between the announcement and coming into operation of revised rates.

The outcome of all assessment updates should be recorded and filed on the Recipient's administration file.

Should a Provider's updated determination be overturned on appeal, the appeal decision should be implemented immediately and any monies owing to the Recipient as a result must be reimbursed. A copy of the appeal decision should be held in the Recipient's administration file.

- *NOTE: The correction / assessment update processes referred to above relate only to RSSMACs. See section 3 in relation to other / wider queries (e.g. regarding issues relating to appropriateness of service provision or accommodation or care or medical/clinical assessment etc.).*

3. Appeals and complaints

A Recipient (or personal representative) may submit an appeal to the HSE in any case where s/he is dissatisfied with a Provider's decision, including the outcome of a financial assessment, a correction or update process (*see 2.5*), regarding the Recipient's:

- Liability to pay RSSMACs on a particular day or days.
- Determined Standard RSSMAC rate (e.g. calculation of income, disregarded income etc).
- Determined Payable RSSMAC rate following a waiver assessment under the Waiver Guidelines (e.g. waivable expenses approved, amount of waiver granted etc.)

All appeals should be dealt with under the existing HSE Appeals process and should follow the HSE Appeals process as outlined on the HSE website at

www.hse.ie/eng/services/yourhealthservice/appeals

Appeals should be made in writing by the appellant within 4 weeks or as soon as possible on receipt of the HSE/section 38 decision notification. Appellants should outline the reasons for the appeal and submit any relevant documentation in support of the appeal.

Appeals should be sent to the HSE's National Appeals Office, An Clochar, Ballyshannon Health Campus, College Street, Co. Donegal F94 TPX4.

The Appeals Service Manager may extend the time limit for initiating an appeal where, in the circumstances of a particular case, it is reasonable to do so.

The Recipient / personal representative and the Provider must be notified of the outcome of the appeal in writing and a copy of the appeal decision should be filed on the Recipient's administration file.

If appellants are not satisfied with the outcome of the HSE's appeals process or are of the view that they have been unfairly treated, the appellant may make a complaint to the Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2. DO2 W773.

The outcome of an appeal and a complaint to the Office of the Ombudsman should be maintained on the Recipient's administration file.

Non-RSSMAC queries and complaints

Staff dealing with Recipients and/or their personal representatives should offer every assistance where there are wider queries or concerns they wish to pursue (e.g. on the appropriateness or quality of service provision or accommodation or care or medical/clinical assessment etc.).

In such circumstances, all staff concerned should make every effort to assist in identifying the appropriate unit or individual responsible for addressing the specific query/concern raised and arrange to put the Recipient / personal representative in contact with that unit or individual.

4. Administrative arrangements

NOTE: Providers should read this section in conjunction with the HSE Data Protection Policy (<https://www.hse.ie/eng/gdpr/hse-data-protection-policy>)

4.1 Record-keeping and governance requirements

The RSSMAC legislation provides that RSS Providers must:

- Account for all RSSMAC-related moneys due and owing to the Provider.
- Account for all RSSMAC-related moneys received by the Provider.
- Submit to the HSE and/or the Minister for Health such information regarding the collection and disposal of RSSMAC-related moneys as they may request.
- Record in writing the basis for any decision by the Provider to exercise a waiver power.

A Provider other than the HSE is subject to a further requirement to submit to the HSE such information as the HSE may request relating to any individual income calculation made by that Provider or the grounds on which the Provider is unable to make that calculation.

Key data items to be recorded by Providers and kept on the relevant Recipients' administration files include:

- A. **Weekly income** calculated per these Guidelines
- B. **Standard RSSMAC** per relevant (Category A, B or C) Schedule based on weekly income
If a waiver assessment is undertaken, record also the following data items (together with the basis for waiver decisions taken and copies of relevant correspondence / invoices / statements etc.):*
- C. **Total relevant means** – see Waiver Guidelines
- D. **Waivable expenses approved** – see Waiver Guidelines
- E. **Adjusted income** – see Waiver Guidelines
- F. **Payable RSSMAC** – see Waiver Guidelines
- G. **Waivers granted** (if any) – see Waiver Guidelines

** The Act requires that where the HSE exercises its waiver powers under the Act, it must in each case record in writing the basis for the decision to exercise that power.*

A copy of all decisions should be maintained centrally by each HSE Community Healthcare Organisation/section 38 agency subject to appropriate confidentiality and data protection safeguards.

Each Recipient (and/or personal representative) should receive a written assessment outlining how the required contribution and any waivers are determined. This document, a copy of which should be kept on the relevant Recipient's administration file, should include all relevant information, including –

- The key data items referred to above.
- The amount, if any, of agreed separate contributions (e.g. rent/kitty) towards the Recipients' own maintenance and/or accommodation costs.

Management information on RSSMAC activity, waiver numbers and value - by year, care division, HSE Community Healthcare Organisation/Local Health Office etc., will be required

from Providers on an ongoing basis. Accordingly, each Provider should have appropriate record-keeping and record-extraction arrangements in place to facilitate this.

In cases where a Recipient does not have capacity and there is no known personal representative or next of kin, the Provider should note same on the Recipient's administration file along with the Financial Assessment Form.

Financial Assessment Forms and all supporting documentary evidence should be filed on each Recipient's administration file in all cases and retained in line with the HSE Data Protection Policy (<https://www.hse.ie/eng/qdpr/hse-data-protection-policy>).

4.2 Manner of payment and collection of monies due

All Recipients/personal representatives should be provided with details in writing of the amount of the determined RSSMAC payable by them under the new framework, together with User Guide/FAQs (www.hse.ie/longstaycontributions) and any relevant information on collection arrangements. All Recipients should be issued regular invoices and receipts (generally weekly) together with periodic statements setting out amounts due to be collected, amounts actually collected and any arrears outstanding. In order to maximise income collection, local staff should have regard to any appropriately approved debt collection policy documents for their services along with HSE National Financial Regulation (NFR) – 25 (which is available to view on the HSE website on the following link: <https://www.hse.ie/eng/staff/resources/financial%20regulations/nfr25.pdf>).

Recipients/personal representatives should be advised of permissible RSSMAC payment methods. Under the Regulations, RSSMACs:

- May be paid by:
 - direct debit mandate or standing order,
 - electronic transfer of funds (to a bank account specified by the Provider),
 - cash, cheque, bank draft, postal order, or
 - credit card or debit card.
- Must generally be collected in arrears on a weekly basis, subject to a provision that where in the Provider's opinion, having consulted the Recipient, it would be inefficient, impractical or uneconomical to collect RSSMACs from an individual on a weekly basis, collection may instead be on the basis of alternative regular intervals (e.g. fortnightly, monthly etc.) determined by the Provider.

Note that the RSSMACs collected in any period must reflect the number of days during that period when RSSs were received (e.g. it would not be appropriate for a Provider to invoice Recipients for an "average" month – i.e. approx. 30½ days – In respect of a 28-day, 29-day or 30-day month). *Appendix A* includes daily RSSMAC rates for each relevant Schedule and weekly and monthly equivalents for 28-day, 29-day, 30-day and 31-day months.

Where appropriate, Recipients/personal representatives should be given the option of the Provider becoming the agent on a Recipient's DSP payments, subject to the Provider giving all relevant information on this option to the Recipients/personal representatives concerned. In the event of refusal by a Recipient in receipt of DSP payments, or his/her personal representative, to pay the RSSMACs (and having exhausted all avenues of communication with the Recipient / personal representative in this regard), the Provider may apply to the DSP to make the Provider the agent on the payments. The Recipient / personal representative must be kept fully informed of the process throughout.

Where the Provider is or becomes the agent on the Recipient's DSP payments, the Provider should arrange for automatic deduction of the statutory contribution from the DSP payment.

4.3 Persons to whom payments are to be made

The method and frequency of the required payments should be agreed with the Deciding Officer.

If payment is made by way of deduction from DSP payments where the HSE acts as agent, payment will be co-ordinated through the Patients Private Property National Office in Tullamore.

If payment is to be made on foot of an invoice, payment should be made to the HSE Accounting Officer (or equivalent in the case of a section 38 Provider) for that unit.

If payments are made in respect of persons residing in community residences the procedures as per the HSE's Financial Regulations – NFR 14 (Financial Management in Community Residence) should be implemented.

4.4 Disposal by HSE and agents of monies received

In disposing of monies received, Providers must act in compliance with the provisions set out in HSE's Financial Regulation NFR 13 (Cash and Bank) and in the RSSMAC Regulations, which require:

- The HSE to account to the Minister for Health, and Providers to account to the HSE, for all RSSMACs due, owing and received.
- The HSE to submit to the Minister for Health, and section 38 Service Providers to submit to the HSE, any requested information regarding the assessment of RSSMACs payable and the collection and disposal of monies due in respect of RSSMACs required to be paid.

4.4.1 Contributions by Recipients towards rent/kitty etc.

RSS Recipients may by agreement with the Provider pay some of the total Payable RSSMAC via separate contribution(s) towards their own maintenance and/or accommodation. For example, in the case of community residences, a standard "contribution to weekly expenses" or "kitty" for the household may be agreed between a Provider and the Recipients and/or their personal representatives. A separate "rent" contribution may perhaps also be applicable, in which case Recipients with tenancy agreements may qualify for a rent allowance or similar subsidy. Such separate contributions, net of any rent subsidies, may be deemed to meet all or part of the Recipient's statutory requirement to pay RSSMACs. Details indicating how the amount of any standard household/kitty contribution and/or "rent" contribution was arrived at should be documented for audit purposes.

Where the amount paid by a Recipient through such separate contributions is less than the Payable RSSMAC, a balancing RSSMAC payment must be paid to the Provider. However, **Recipients are not liable to, and may not be requested to, pay any amount exceeding the total Payable RSSMAC through such separate contributions.** Where a standard amount agreed in respect of such separate contributions (e.g. weekly rent/kitty) exceeds an individual's Payable RSSMAC, the separate contribution by that individual Recipient must be reduced to the amount of the Payable RSSMAC.

- *See Waiver Guidelines for full details where a waiver is sought.*

4.4.2 Accounting procedures

The HSE must ensure that there are proper and adequate record-keeping and accounting mechanisms and procedures in place across the system in relation to RSSMACs and in this regard Providers must adhere to the HSE's Financial Regulations and to any relevant provisions in the Regulations. For example, subject to appropriate accounting / reporting arrangements, the HSE may (or may authorise a Section 38 Provider to):

- Lodge some or all of the amount collected to designated accounts.
- Assign some or all of the amount collected to a household expenses “kitty”.
- Use some or all of the amount collected to meet utility bills.
- Any combination of the above.

4.5 Appeals – organisational learning

The outcomes of appeals against Providers’ decisions may often facilitate organisational learning by clarifying the correct approach to implementing the legislation and guidelines. In each such case, to ensure consistent national application of the RSSMAC framework and to cut down on unnecessary further appeals/complaints on the same issue:

- The HSE Central RSSMAC Unit will provide a summary report to HSE senior management setting out the issue(s) which arose, the appeal outcome and the correct / clarified approach to implementing the RSSMAC framework in the circumstances concerned, and
- HSE will circulate appropriate practice directions to all relevant Providers.

APPENDIX A – Standard RSSMAC rates by Accommodation Category (rates applicable from 7 January 2022*)

* These rates apply to service users, with effect from 7 January 2022 in place of the rates published in the previous (March 2019) version of these Guidelines.

Schedule 1						
Category A accommodation						
Weekly income band	Standard contribution					
	Daily	Weekly	Monthly (days per month)			
			28	29	30	31
€228.00 or any greater amount	€25.58	€179	€716	€741.50	€767	€792.50
€223.00 to €227.99	€24.86	€174	€696	€720.50	€745.50	€770.50
€218.00 to €222.99	€24.15	€169	€676	€700	€724.50	€748.50
€213.00 to €217.99	€23.43	€164	€656	€679	€702.50	€726
€208.00 to €212.99	€22.72	€159	€636	€658.50	€681.50	€704
€203.00 to €207.99	€22.00	€154	€616	€638	€660	€682
€198.00 to €202.99	€21.29	€149	€596	€617	€638.50	€659.50
€193.00 to €197.99	€20.58	€144	€576	€596.50	€617	€637.50
€188.00 to €192.99	€19.86	€139	€556	€575.50	€595.50	€615.50
€183.00 to €187.99	€19.15	€134	€536	€555	€574.50	€593.50
€178.00 to €182.99	€18.43	€129	€516	€534	€552.50	€571
€173.00 to €177.99	€17.72	€124	€496	€513.50	€531.50	€549
€168.00 to €172.99	€17.00	€119	€476	€493	€510	€527
€163.00 to €167.99	€16.29	€114	€456	€472	€488.50	€504.50
€158.00 to €162.99	€15.58	€109	€436	€451.50	€467	€482.50
€153.00 to €157.99	€14.86	€104	€416	€430.50	€445.50	€460.50
€148.00 to €152.99	€14.15	€99	€396	€410	€424.50	€438.50
€143.00 to €147.99	€13.43	€94	€376	€389	€402.50	€416
€138.00 to €142.99	€12.72	€89	€356	€368.50	€381.50	€394
€133.00 to €137.99	€12.00	€84	€336	€348	€360	€372
€128.00 to €132.99	€11.29	€79	€316	€327	€338.50	€349.50
€123.00 to €127.99	€10.58	€74	€296	€306.50	€317	€327.50
€118.00 to €122.99	€9.86	€69	€276	€285.50	€295.50	€305.50
€113.00 to €117.99	€9.15	€64	€256	€265	€274.50	€283.50
€108.00 to €112.99	€8.43	€59	€236	€244	€252.50	€261
€103.00 to €107.99	€7.72	€54	€216	€223.50	€231.50	€239
€98.00 to €102.99	€7.00	€49	€196	€203	€210	€217
€93.00 to €97.99	€6.29	€44	€176	€182	€188.50	€194.50
€88.00 to €92.99	€5.58	€39	€156	€161.50	€167	€172.50
€83.00 to €87.99	€4.86	€34	€136	€140.50	€145.50	€150.50
€78.00 to €82.99	€4.15	€29	€116	€120	€124.50	€128.50
€73.00 to €77.99	€3.43	€24	€96	€99	€102.50	€106
€68.00 to €72.99	€2.72	€19	€76	€78.50	€81.50	€84
€63.00 to €67.99	€2.00	€14	€56	€58	€60	€62
€58.00 to €62.99	€1.29	€9	€36	€37	€38.50	€39.50
€53.00 to €57.99	€0.58	€4	€16	€16.50	€17	€17.50
€52.99 or any lesser amount	Nil	Nil	Nil	Nil	Nil	Nil

Schedule 2						
Category B accommodation						
Weekly income band	Standard contribution					
	Daily	Weekly	Monthly (days per month)			
			28	29	30	31
€214.00 or any greater amount	€19.15	€134	€536	€555	€574.50	€593.50
€209.00 to €213.99	€18.43	€129	€516	€534	€552.50	€571
€204.00 to €208.99	€17.72	€124	€496	€513.50	€531.50	€549
€199.00 to €203.99	€17.00	€119	€476	€493	€510	€527
€194.00 to €198.99	€16.29	€114	€456	€472	€488.50	€504.50
€189.00 to €193.99	€15.58	€109	€436	€451.50	€467	€482.50
€184.00 to €188.99	€14.86	€104	€416	€430.50	€445.50	€460.50
€179.00 to €183.99	€14.15	€99	€396	€410	€424.50	€438.50
€174.00 to €178.99	€13.43	€94	€376	€389	€402.50	€416
€169.00 to €173.99	€12.72	€89	€356	€368.50	€381.50	€394
€164.00 to €168.99	€12.00	€84	€336	€348	€360	€372
€159.00 to €163.99	€11.29	€79	€316	€327	€338.50	€349.50
€154.00 to €158.99	€10.58	€74	€296	€306.50	€317	€327.50
€149.00 to €153.99	€9.86	€69	€276	€285.50	€295.50	€305.50
€144.00 to €148.99	€9.15	€64	€256	€265	€274.50	€283.50
€139.00 to €143.99	€8.43	€59	€236	€244	€252.50	€261
€134.00 to €138.99	€7.72	€54	€216	€223.50	€231.50	€239
€129.00 to €133.99	€7.00	€49	€196	€203	€210	€217
€124.00 to €128.99	€6.29	€44	€176	€182	€188.50	€194.50
€119.00 to €123.99	€5.58	€39	€156	€161.50	€167	€172.50
€114.00 to €118.99	€4.86	€34	€136	€140.50	€145.50	€150.50
€109.00 to €113.99	€4.15	€29	€116	€120	€124.50	€128.50
€104.00 to €108.99	€3.43	€24	€96	€99	€102.50	€106
€99.00 to €103.99	€2.72	€19	€76	€78.50	€81.50	€84
€94.00 to €98.99	€2.00	€14	€56	€58	€60	€62
€89.00 to €93.99	€1.29	€9	€36	€37	€38.50	€39.50
€84.00 to €88.99	€0.58	€4	€16	€16.50	€17	€17.50
€83.99 or any lesser amount	Nil	Nil	Nil	Nil	Nil	Nil

Schedule 3

Category C accommodation

Weekly income band	Standard contribution					
	Daily	Weekly	Monthly (days per month)			
			28	29	30	31
<i>€208.00 or any greater amount</i>	€10.58	€74	€296	€306.50	€317	€327.50
€204.50 to €207.99	€10.08	€70.50	€282	€292	€302	€312
€201.00 to €204.49	€9.58	€67	€268	€277.50	€287	€296.50
€197.50 to €200.99	€9.08	€63.50	€254	€263	€272	€281
€194.00 to €197.49	€8.58	€60	€240	€248.50	€257	€265.50
€190.50 to €193.99	€8.08	€56.50	€226	€234	€242	€250
€187.00 to €190.49	€7.58	€53	€212	€219.50	€227	€234.50
€183.50 to €186.99	€7.08	€49.50	€198	€205	€212	€219
€180.00 to €183.49	€6.58	€46	€184	€190.50	€197	€203.50
€176.50 to €179.99	€6.08	€42.50	€170	€176	€182	€188
€173.00 to €176.49	€5.58	€39	€156	€161.50	€167	€172.50
€169.50 to €172.99	€5.08	€35.50	€142	€147	€152	€157
€166.00 to €169.49	€4.58	€32	€128	€132.50	€137	€141.50
€162.50 to €165.99	€4.08	€28.50	€114	€118	€122	€126
€159.00 to €162.49	€3.58	€25	€100	€103.50	€107	€110.50
€155.50 to €158.99	€3.08	€21.50	€86	€89	€92	€95
€152.00 to €155.49	€2.58	€18	€72	€74.50	€77	€79.50
€148.50 to €151.99	€2.08	€14.50	€58	€60	€62	€64
€145.00 to €148.49	€1.58	€11	€44	€45.50	€47	€48.50
€141.50 to €144.99	€1.08	€7.50	€30	€31	€32	€33
€138.00 to €141.49	€0.58	€4	€16	€16.50	€17	€17.50
<i>€137.99 or any lesser amount</i>	Nil	Nil	Nil	Nil	Nil	Nil

APPENDIX B – Financial Assessment Form

An electronic version of this form is available to Providers at www.hse.ie/longstaycontributions

FINANCIAL ASSESSMENT FORM

Residential Support Services - Maintenance & Accommodation Contributions (RSSMACs)

Sections 67C & 67D of the Health Act 1970 (as amended)

Form to be used in respect of assessments relating to any day on or after 7 January 2022

PART A - PERSONAL AND FINANCIAL DETAILS

NOTE: Grey-shaded cells in this spreadsheet form contain formulae - do not edit

FOR OFFICIAL USE ONLY:		
Enter Name of Unit:		Enter Chart/Medical Record No:
Category of accommodation – Enter "A" or "B" or "C":		B
Category A Accommodation <i>Full-time (24 hr) on-site nursing and/or medical provision generally</i>	Category B Accommodation <i>Part-time (less than 24 hr) on-site nursing and/or medical provision generally (at least once per week)</i>	Category C Accommodation <i>All other relevant accommodation including settings where there is generally no on-site nursing and/or medical provision</i>
-	Category B	-

SECTION 1 - Personal Details	DETAILS TO BE PROVIDED BY SERVICE USER / PERSONAL REPRESENTATIVE - ENTER BELOW
Name (Service User)	
Address	
Date of Birth	
Date of Admission	
Date(s) and duration(s) of any other residential services received in the 12 month period up to the current date of admission	
PPSN No.	

We understand that the Service User may wish to have some help or support from a relative or friend in completing this form. If so, please complete the following:

Name of Contact Person/Personal Representative (if applicable)	
Address of Contact Person/Personal Representative	
Relationship to Service User	
Daytime Contact Phone No:	
E-Mail Address	
Please note that in nominating a contact person/personal representative the service user consents to that person completing this form on his/her behalf and that the person may receive copies of documentation in relation to the service user's financial assessment	

Service User's Spouse/Partner's Name	
Names and DOBs of any Dependant Children	<i>Name</i>
	<i>Date of Birth</i>
Address(es) of Spouse/Partner/Dependant Children	

SECTION 2 – Financial Details

<p style="text-align: center;">If the accommodation provider is <u>not</u> the HSE or a section 38 agency: <i>Enter amount of accommodation contribution e.g. rent (net of any rent subsidies received by the service user e.g. rent supplement) paid by the service user to the accommodation provider [Otherwise: please leave blank]</i></p>	
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<p>Skip Steps A to E / go straight to Step [F] if default rate is agreed with the service user, i.e. where no basis for a waiver is identified or sought and Regulation 5(2) applies (see footnote 1).</p>	<p>If default rate is agreed with the service user (see note) - Enter "Y" and skip to Step F [Otherwise, please leave blank]:</p> <p>NB: Record details of agreement to default rate in the "Notes" section of Part B.</p>
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STAGE 1 [Steps A & B] – Calculate Standard Contribution (pre-waiver)

Step A – Weekly Income net of statutory deductions and excluding disregards

Income per week from all sources, excluding: <i>Statutory deductions (i.e. income tax, PRSI, USC, pension deductions, pension levy) and income disregards</i> <small>(All income must be verified with documentary evidence)</small>	Enter Weekly Amount Below (€) Service User's Income only to be assessed
Department of Social Protection payments (e.g. allowance, benefit, pension etc.) (unless disregarded - see footnote 2) – Specify type(s) of payment below and enter total amount opposite :	
Any income <u>above</u> €120 pw from employment of a rehabilitative nature <i>(Skip if weekly total is €120 or less)</i>	
Income from other employment/self-employment, trade, farming, profession, vocation etc.	
Income from holding an office or directorship	
Occupational Pension	
Overseas Pension	
Rental income (e.g. from property and/or land)	
Income from fees, commissions, dividends etc.	
Interest on savings <i>(Skip if savings are not in excess of €15,000)</i>	
Income from payments under a settlement, covenant or estate or maintenance payments	
Income from royalties and/or annuities	
Please specify any other income below and enter total amount opposite :	
TOTAL WEEKLY INCOME [A]	

Step B – Standard contribution rate based on weekly income [A] above

(see footnote 3 re: automatic reduction under section 67C(3)(aa) if the accommodation is not provided by HSE / s38 agency)

Accomm. Category:	Category B	Weekly income band based on [A]:		RSSMAC rate per relevant Schedule:	
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Amount of (net) rent etc. paid by service user to a non-HSE/section 38 accommodation provider (if any)		Service user's Standard RSSMAC rate [B]:	
--	--	--	--

Stage 2 [Steps C to F] – Calculation of Allowable Expenses and Payable Contribution

Is Service User's Total Amount on Deposit (Savings/Investments) over €36,000 (Y/N)?	
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Step C – Total relevant income and means in accordance with Waiver Guidelines

Weekly Income [A] above:	
Plus: Other relevant income and means (please provide documentary evidence)	<i>Enter amounts below</i>
First €120 of income from rehabilitative employment	
Income (including disregarded income) specified in Waiver Guidelines in relation to particular expens(es) for which waiver is claimed – <i>Specify below and enter total amount opposite:</i>	
Other income (including disregarded income) determined by deciding officer to be directly relevant to particular expense(s) for which a waiver is claimed (e.g. a mobility allowance might be deemed relevant to travel expenses, depending on the circumstances) – <i>Specify below and enter total amount opposite:</i>	
TOTAL relevant income and means [C] = Income [A] Plus Other relevant income and means above	

Step D – Allowable Expenses Approved in accordance with Waiver Guidelines

Expenses in respect of waiver claimed under Section 67D(1)(b)(i) of the Health Act 1970 (to avoid undue financial hardship in respect of the service user) (Please provide documentary evidence of expenditure)	
Type of Expense / Waiver Claim (See relevant sections of Waiver Guidelines as indicated below)	Enter Amount of Allowable Expenses Approved - Service User
Maintenance Payments – provide Court Order (section 3.1)	
Rent/Mortgage - Service User's Principal Private Residence (section 3.2)	
Pre-existing loan repayments (section 3.3)	
Pre-existing life or health or home insurance (section 3.4)	
Service user's other exceptional expenses (section 3.5) – <i>Specify below and enter amount(s) opposite:</i>	
SUBTOTAL (Undue hardship - Service user)	

(Step D continued next page)

Step D (continued)

**Expenses in respect of waiver claimed under Section 67D(1)(b)(i) of the Health Act 1970 (to avoid undue financial hardship in respect of a dependant of the service user e.g. spouse/partner/child)
(Please provide documentary evidence of expenditure)**

Type of Expense / Waiver Claim (See relevant sections of Waiver Guidelines as indicated below)	Enter Amount of Allowable Expenses Approved for Dependant(s) - i.e. each expense net of any income specified in the Waiver Guidelines for the waiver type concerned
Child dependant's reasonable general maintenance expenses (section 3.6)	
Adult dependant's reasonable maintenance expenses (section 3.7):	
Necessary/exceptional travel costs (section 3.8)	
Other exceptional expenses of dependants (section 3.9) – Specify below and enter amount(s) opposite:	
SUBTOTAL (Undue hardship - Dependants)	

**Expenses in respect of waiver claimed under Section 67D(1)(b)(ii) of the Health Act 1970 (per Care Plan)
(Please provide documentary evidence of expenditure)**

Specify service user's care plan etc. objectives deemed necessary under the following headings: (See section 3.10 of Waiver Guidelines)	Enter Amount of Allowable Expenses Approved
Medical needs:	
Therapeutic needs:	
Rehabilitative needs:	
Health-related needs (e.g. socialisation):	
SUBTOTAL (Care Plan - Necessary)	

Specify service user's care plan etc. objectives deemed beneficial under the following headings: (See section 3.11 of Waiver Guidelines)	Enter Amount of Allowable Expenses
Medical needs:	
Therapeutic needs:	
Rehabilitative needs:	
Health-related needs (e.g. socialisation):	

SUBTOTAL (Care Plan - Beneficial)		LESS Service user's retained income in excess of:- €80.00	SUB-TOTAL: Allowable Expenses Approved

Allowable Expenses Approved - Summary

SUBTOTAL (Undue hardship - Service user)	
SUBTOTAL (Undue hardship - Dependants)	
SUBTOTAL (Care Plan - Necessary)	
SUBTOTAL (Care Plan - Beneficial)	
GRAND TOTAL - ALLOWABLE EXPENSES APPROVED [D]	

DEPENDANTS' INCOME AND SAVINGS DETAILS REQUIRED ONLY IF A WAIVER IS CLAIMED FOR DEPENDANTS	IGNORE UNLESS waiver is sought for expenses of service user's spouse/partner (or for expenses of their dependant child[ren]):
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If waiver sought in respect of dependant: Are Service User's and Spouse/Partner's Combined Total Amount on Deposit (Savings/Investments) over €72,000 (Y/N)?	
--	--

	<i>Please provide documentary evidence</i>	
	Spouse/Partner	Child Dependant(s)
Department of Social Protection – <i>State payment type below and amount opposite :</i>		
Income from employment/self-employment, trade, farming, profession or vocation		
Income from holding of an office or directorship		
Occupational Pension		
Overseas Pension		
Rental income from property and land		
Income from fees, commissions, dividends, etc.		
Income from settlement, covenant, estate or maintenance		
Income from royalties and/or annuities		
Interest from Savings/Investments		
Any other Income – <i>Please specify below and enter amount(s) opposite :</i>		
TOTAL WEEKLY INCOME OF DEPENDANTS		

Step E – Adjusted income to establish (post-waiver) contribution

Total relevant income and means [C] above	
Less: Total Allowable Expenses Approved [D] above	
Adjusted income [E] to establish post-waiver contribution	
Notes: [E] = Nil - if result of [C]-[D] is negative. [E] = Weekly Income [A] - if result of [C] - [D] exceeds [A].	

Step F – Payable contribution rate based on adjusted income [E] above or based on service user agreeing that the default rate applies

(see (i) footnote 3 re: automatic reduction under section 67C(3)(aa) if the accommodation is not provided by HSE / s38 agency and (ii) footnote 4 re: Regulation 19)

Accomm. Category:	Category B	Adjusted weekly income band based on [E]:		RSSMAC rate per relevant Schedule:	
Amount of (net) rent etc. paid by service user to a non-HSE/section 38 accommodation provider (if any)				Service user's Payable RSSMAC rate [F]:	
[G]: Waiver = Standard rate [B] LESS Payable rate [F]					

Arrangement for contributing Payable Contribution	Enter amounts below - Please provide documentary evidence of expenditure
Accommodation payments made to HSE or Section 38 Voluntary Organisation (up to agreed maximum payment for the residence/unit) net of rent allowance/subsidy. Do not enter details of any rent paid to an organisation which is <u>not</u> the HSE or a section 38 agency. Please enter name of organisation paid below and weekly amount paid opposite:	
Household Expenses or 'Kitty' payments (up to agreed maximum payment for the residence/unit) made to HSE/Section 38 Voluntary Organisation	
Other accommodation and/or maintenance payments to HSE/s38 – Specify below and enter amount(s) opposite:	
TOTAL SEPARATE CONTRIBUTIONS	

To process this financial assessment the HSE may seek limited access to social welfare data to confirm some details. The signature below indicates consent to this access. The HSE will treat all information and personal data provided to them as confidential. The HSE will only disclose information or personal data to other people or bodies according to law. The service user/personal representative should immediately report to the HSE any changes in circumstances that may affect the level of contribution to be paid. Where an applicant does not disclose or makes a misstatement as respects information on this form, the HSE may retrospectively collect the underpayment of the payable contribution.

I DECLARE THAT THE INFORMATION GIVEN BY THE UNDERSIGNED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNED	
NAME IN BLOCK CAPITALS	
DATE	

NB: Any change in financial circumstances as set out in this form should be notified immediately to the deciding officer

Footnotes:

[1] Regulation 5(2): Applies where RSS Recipient and Service Provider agree that Recipient's income is in the top income band in the relevant rates schedule and that the Recipient will contribute default/maximum rate (without the need to make an income calculation – i.e. [F] = maximum rate in relevant Schedule)

[2] Income disregards: Exclude the following income from weekly income calculation at Step A above: First €120 of net earnings from rehabilitative employment; Rehabilitation training allowance; Third level education grant; Rent supplement (or similar accommodation subsidy) or other supplementary welfare allowance supplements; FIS; Child Benefit; Guardian's payment (contributory or non-contributory); DCA; Foster care allowance; Placement of children with relatives allowance; Fuel allowance; Mobility allowance; Island increase; Living alone increase; Qualified adult or qualified child increase; Interest on savings (if total savings do not exceed €15,000); Certain compensation/redress payments and derived income (i.e. re Lourdes Hospital, Magdalen Laundries etc, Symphysiotomy, Thalidomide).

[3] Section 67C(3)(aa) of the Health Act 1970: provides that the standard rate based on weekly income is automatically reduced by the greater of €30pw or RSS Recipient's net weekly accommodation contribution IF the RSS Recipient is maintained but not accommodated by or on behalf of the HSE

[4] Regulation 19: If Payable RSSMAC [F] = €3.50pw or less, it is reduced to Nil.

Category:
B

PART B - FINANCIAL ASSESSMENT OUTCOME SUMMARY

FOR OFFICIAL USE ONLY

STAGE 1 - Standard RSSMAC (pre-waiver) as calculated - Steps A & B

Step [A]	Assessable Weekly Income to establish contribution per relevant rates schedule, excluding statutory deductions and income disregards (see footnote 2)	
	Weekly income band:	
Step [B]	Standard RSSMAC based on weekly income [A] as per relevant rates schedule (see footnote 3 re: automatic reduction under section 67C(3)(aa) if the accommodation is not provided by HSE / s.38 agency)	

STAGE 2 - Payable RSSMAC (post-waiver) as calculated - Steps C to F

	Weekly Income = [A]	
	Plus Additional income or means, if any, required to be added in accordance with the Waiver Guidelines	
Step [C]	= Total relevant income and means in accordance with Waiver Guidelines	
Step [D]	Allowable Expenses Approved in accordance with Waiver Guidelines	
	Total relevant income and means = [C]	
	Less Allowable Expenses = [D]	
Step [E]	= Adjusted Income to establish (post-waiver) contribution per rates schedule Notes: [E] = Nil - if result of [C]-[D] is negative; [E] = Weekly Income [A] - if result of [C] - [D] exceeds [A].	
	Adjusted weekly income band:	
Step [F]	Payable RSSMAC based on adjusted income [E] per relevant rates schedule (see (i) footnote 3 re: automatic reduction under section 67C(3)(aa) if the accommodation is not provided by HSE / s.38 agency and (ii) footnote 4 re: Regulation 19)	

Waiver Amount:

[G]	Waiver Amount [G] = Standard RSSMAC [B] less Payable RSSMAC [F]	
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Breakdown: Total Payable RSSMAC [F] must not be exceeded and may be paid as follows:

	F(i) Separate contribution(s) if any e.g. household expenses/kitty/other	
	Plus F(ii) Balance (if required) in addition to F(i) to bring total payment up to [F]	
	= Payable RSSMAC [F] TOTAL	

Outcome Summary:

Standard RSSMAC [B]	less	Waiver [G]	equals	Payable RSSMAC [F]
	-		=	

Notes (include any relevant additional information)

Signed: _____ **Date:** _____
Approved: _____ **Date:** _____

Footnotes:

[1] Regulation 5(2): Applies where RSS Recipient and Service Provider agree that Recipient's income is in the top income band in the relevant rates schedule and that the Recipient will contribute default/maximum rate (without the need to make an income calculation – i.e. [F] = maximum rate in relevant Schedule)

[2] Income disregards: Exclude the following income from weekly income calculation at Step A above:
 First €120 of net earnings from rehabilitative employment; Rehabilitation training allowance; Third level education grant; Rent supplement (or similar accommodation subsidy) or other supplementary welfare allowance supplements; FIS; Child Benefit; Guardian's payment (contributory or non-contributory); DCA; Foster care allowance; Placement of children with relatives allowance; Fuel allowance; Mobility allowance; Island increase; Living alone increase; Qualified adult or qualified child increase; Interest on savings (if total savings do not exceed €15,000); Certain compensation/redress payments and derived income (i.e. re Lourdes Hospital, Magdalen Laundries etc, Symphiotomy, Thalidomide).

[3] Section 67C(3)(aa) of the Health Act 1970: provides that the standard rate based on weekly income is automatically reduced by the greater of €30pw or RSS Recipient's net weekly accommodation contribution IF the RSS Recipient is maintained but not accommodated by or on behalf of the HSE

[4] Regulation 19: If Payable RSSMAC [F] = €3.50pw or less, it is reduced to Nil.

Schedule 1 Contributions (Category A accommodation)

Daily rates & weekly equivalent rates (applicable from 7 January 2022 as per Guidelines)

Category A accommodation		
Assessed weekly income	RSSMAC	
	Daily	Weekly Equivalent
€228.00 or more	€25.58	€179.00
€223.00 to €227.99	€24.86	€174.00
€218.00 to €222.99	€24.15	€169.00
€213.00 to €217.99	€23.43	€164.00
€208.00 to €212.99	€22.72	€159.00
€203.00 to €207.99	€22.00	€154.00
€198.00 to €202.99	€21.29	€149.00
€193.00 to €197.99	€20.58	€144.00
€188.00 to €192.99	€19.86	€139.00
€183.00 to €187.99	€19.15	€134.00
€178.00 to €182.99	€18.43	€129.00
€173.00 to €177.99	€17.72	€124.00
€168.00 to €172.99	€17.00	€119.00
€163.00 to €167.99	€16.29	€114.00
€158.00 to €162.99	€15.58	€109.00
€153.00 to €157.99	€14.86	€104.00
€148.00 to €152.99	€14.15	€99.00
€143.00 to €147.99	€13.43	€94.00
€138.00 to €142.99	€12.72	€89.00
€133.00 to €137.99	€12.00	€84.00
€128.00 to €132.99	€11.29	€79.00
€123.00 to €127.99	€10.58	€74.00
€118.00 to €122.99	€9.86	€69.00
€113.00 to €117.99	€9.15	€64.00
€108.00 to €112.99	€8.43	€59.00
€103.00 to €107.99	€7.72	€54.00
€98.00 to €102.99	€7.00	€49.00
€93.00 to €97.99	€6.29	€44.00
€88.00 to €92.99	€5.58	€39.00
€83.00 to €87.99	€4.86	€34.00
€78.00 to €82.99	€4.15	€29.00
€73.00 to €77.99	€3.43	€24.00
€68.00 to €72.99	€2.72	€19.00
€63.00 to €67.99	€2.00	€14.00
€58.00 to €62.99	€1.29	€9.00
€53.00 to €57.99	€0.58	€4.00
€52.99 or less	Nil	Nil

Schedule 2 Contributions (Category B accommodation)
Daily rates & weekly equivalent rates (applicable from 7 January 2022 as per Guidelines)

Category B accommodation		
Assessed weekly income	RSSMAC	
	Daily	Weekly Equivalent
€214.00 or more	€19.15	€134.00
€209.00 to €213.99	€18.43	€129.00
€204.00 to €208.99	€17.72	€124.00
€199.00 to €203.99	€17.00	€119.00
€194.00 to €198.99	€16.29	€114.00
€189.00 to €193.99	€15.58	€109.00
€184.00 to €188.99	€14.86	€104.00
€179.00 to €183.99	€14.15	€99.00
€174.00 to €178.99	€13.43	€94.00
€169.00 to €173.99	€12.72	€89.00
€164.00 to €168.99	€12.00	€84.00
€159.00 to €163.99	€11.29	€79.00
€154.00 to €158.99	€10.58	€74.00
€149.00 to €153.99	€9.86	€69.00
€144.00 to €148.99	€9.15	€64.00
€139.00 to €143.99	€8.43	€59.00
€134.00 to €138.99	€7.72	€54.00
€129.00 to €133.99	€7.00	€49.00
€124.00 to €128.99	€6.29	€44.00
€119.00 to €123.99	€5.58	€39.00
€114.00 to €118.99	€4.86	€34.00
€109.00 to €113.99	€4.15	€29.00
€104.00 to €108.99	€3.43	€24.00
€99.00 to €103.99	€2.72	€19.00
€94.00 to €98.99	€2.00	€14.00
€89.00 to €93.99	€1.29	€9.00
€84.00 to €88.99	€0.58	€4.00
€83.99 or less	Nil	Nil

Schedule 3 Contributions (Category C accommodation)

Daily rates & weekly equivalent rates (applicable from 7 January 2022 as per Guidelines)

Category C accommodation		
Assessed weekly income	RSSMAC	
	Daily	Weekly Equivalent
€208.00 or more	€10.58	€74.00
€204.50 to €207.99	€10.08	€70.50
€201.00 to €204.49	€9.58	€67.00
€197.50 to €200.99	€9.08	€63.50
€194.00 to €197.49	€8.58	€60.00
€190.50 to €193.99	€8.08	€56.50
€187.00 to €190.49	€7.58	€53.00
€183.50 to €186.99	€7.08	€49.50
€180.00 to €183.49	€6.58	€46.00
€176.50 to €179.99	€6.08	€42.50
€173.00 to €176.49	€5.58	€39.00
€169.50 to €172.99	€5.08	€35.50
€166.00 to €169.49	€4.58	€32.00
€162.50 to €165.99	€4.08	€28.50
€159.00 to €162.49	€3.58	€25.00
€155.50 to €158.99	€3.08	€21.50
€152.00 to €155.49	€2.58	€18.00
€148.50 to €151.99	€2.08	€14.50
€145.00 to €148.49	€1.58	€11.00
€141.50 to €144.99	€1.08	€7.50
€138.00 to €141.49	€0.58	€4.00
€137.99 or less	Nil	Nil

