



Support at Home - Price & Service Guide

Support We Provide

Examples of Services

CLINICAL SUPPORTS	NURSING CARE	Registered and Enrolled Nursing Nursing care consumables Nursing Assistant Oxygen Supplement	Your Contribution 0%*
	ALLIED HEALTH & OTHER THERAPEUTIC SERVICES	Physiotherapy Occupational Therapy Exercise Physiology Speech Pathology Dietetics Podiatry Music Therapy Allied Health Assistance	
INDEPENDENCE	PERSONAL CARE	Assistance with self-care (e.g Showering) Assistance with daily living (e.g Feeding) Assistance with medication (Self-administered)	Your Contribution 5 - 50%*
	SOCIAL SUPPORT & COMMUNITY ENGAGEMENT	Group social support Individual social support Accompanied activities Cultural support	
	RESPIRE	In-home respite Respite-care (Group)	
	TRANSPORT	Direct transport (Driver and car provided) Indirect transport (Taxi and rideshare service vouchers)	
	ASSISTIVE TECHNOLOGY & HOME MODIFICATIONS	Assistive technology and Home modifications including wrap-around services, maintenance and repairs <i>Assessed & funded separately by the government based on your individual circumstances</i>	
EVERYDAY LIVING	DOMESTIC ASSISTANCE	General house cleaning Laundry services Shopping assistance	Your Contribution 17.5 – 80%*
	HOME MAINTENANCE & REPAIRS	Gardening Assistance with home maintenance & repairs Expenses for home maintenance & repairs	
	MEALS	Meal delivery Meal preparation	

Client contribution amounts are determined by the Federal Government. Hardship provisions are available under select conditions. Speak to us to discuss your options

For other services and support not listed please visit www.livewellhc.com.au

Price List*

Packages managed by LiveWell Home Care – Week Effective From 1st April 2026

		Weekday 6am-8am	Weekday 8pm-6am	Saturday Rate	Sunday Rate	Public Holiday Rate
CLINICAL SUPPORTS	Registered Nurse #	\$160	\$210	\$200	\$280	\$320
	Enrolled Nurse #	\$130	\$165	\$198	\$220	\$260
	Nursing Assistant #	\$115	\$143	\$172	\$201	\$233
	Physiotherapy #	\$160	-	\$200	\$280	\$320
	Occupational Therapy, Speech Pathology, Podiatry #	\$230	-	-	-	-
	Exercise Physiology, Dietetics #	\$185	-	-	-	-
INDEPENDENCE SUPPORTS	Assistance with self-care (Personal Care) and Non-clinical continence management	\$115	\$143	\$172	\$201	\$230
	Cultural support, Accompanied activities, Individual social support, Assistance to maintain personal affairs ^	\$115	\$143	\$172	\$201	\$230
	Group social support (per session)	\$120	-	-	-	-
	LiveWell Day Centre Respite (per session)	\$160	-	-	-	-
			Weekday	Saturday	Sunday	Public Holiday
	Sleepover – 6pm to 6am		\$776	\$1,398	\$1,552	\$1,940
	(12 hours with 4 hours active)		per shift	per shift	per shift	per shift
EVERYDAY SUPPORTS	General house cleaning, Laundry assistance, Shopping assistance, Meal preparation	\$115	\$143	\$172	\$201	\$230
	Gardening	\$ 80	-	-	-	-
	Accompanied Transport (up to 10km)	\$130	\$156	\$163	\$195	\$260
	Accompanied Transport (11km to 20km)	\$145	\$174	\$182	\$218	\$290
	Accompanied Transport (20 to 30km)	\$160	\$192	\$200	\$240	\$320
	Accompanied Transport (Over 30km)		Price On Request			

Terms & Conditions

• Pricing valid to 30 September 2026.

* Prices quoted are for minimum 2-hour bookings unless otherwise stated

^ 1-hour bookings available upon request - \$138.00 per hour

Clinical services are a minimum of 1-hour

• Home Modifications & Equipment -Costs are individualised and depend on the scope of work. Pricing will be agreed upon before work commences.

• GST may apply to additional services or where a client is not eligible for Commonwealth-subsidised services.

• Care Management charged in 15-minute increments based on client requirements.

• Services sourced through our preferred provider network will be charged at the published LiveWell rate.

• A 10% surcharge applies for self-managed/selected services. This will be discussed and agreed to prior to the service.

• Overnight Sleepover Services includes active care from 6:00pm – 10:00pm, and up to 15-minutes of active care during the inactive period if required. Other conditions apply.

FOR MORE INFORMATION CONTACT US

1300 854 893 hello@livewellhc.com.au

Your indicative service proposal

Your name is:

Your SAH Level is:

Your Care Partner is:

Their email is:

Your immediate goals are:

1.

2.

3.

Your indicative client contributions:

Clinical Support	Independence	Everyday Living
0%		

Your initial kick-start service plan (A comprehensive care plan will follow in 14 days)

Week 1 - Dates

Day & Time	Service	Indicative Price	What you may be asked to pay

Week 2 - Dates

Day & Time	Service	Indicative Price	What you may be asked to pay

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