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SPEAKING OUT FOR PENSIONERS SINCE 1931

HOME CARE PACKAGE: WHAT YOU CAN AND WHAT YOU CAN'T GET

ONE of our readers wrote in about his Home Care Package: "They have cut down so many things...", he wrote.

He wasn't the only one to complain. Recently the Daily Telegraph published a story claiming a range of services, medications and equipment had been cut from the Home Care Packages program list.

Home Care Packages are basically set amounts of money home care recipients can spend on their aged care. The idea is that recipients decide what the money is spent on, because they know best what their aged care needs are.

But it's not without limitations. Some things which seem logical inclusions are, in fact, excluded from package funding.

Telegraph quotes The Daily the example of a man living with advanced Parkinson's disease who now cannot get a special medication. A Home Care Package can't pay for it, because the PBS (Pharmaceutical Benefits Scheme) subsidises Parkinson's medications. The problem in this case is that the PBS list does not have this particular medication on it. So, now this man has to pay for this prescription medication out of his own pocket.

The Government's argument would be that the PBS list has everything on it that people could need, so a Home Care Package can't



fund a medication not on the PBS list.

Need urgent dental work done? Not on your Home Care Package! There are state and territory programs which are meant to take care of that. Too bad they generally don't, because they're underresourced, but there's a program, so your Home Care Package can't pay for your dental work.

The trouble started in January of this year, when the Department of Health published an updated Home Care Packages Program Operational Manual. The January 2023 update was the manual's third update and the first attempt after six years of operation to give providers (and consumers) rules about what a Home Care Package does and does not fund.

Given that package recipients

could change providers if they were not happy with them, it's logical that providers would interpret the unwritten rules generously and in their clients' favour. Otherwise, they might walk.

By finally publishing detailed guidelines, the Government did the right thing, but it also lay itself open to the criticism that it had cut services, medications and equipment to package recipients.

The Government's response continues to be that the guidelines they published last January are nothing new.

But while there may technically not have been an actual change in policy, effectively there has been.

No wonder people are angry.

Ask your provider for a copy of the manual if you can't access it online.

Wishing all our readers season's greetings and a happy new year!







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Anne-Marie Kestle
CPSA Assistant Treasurer

Victor Borg
Marolga (Mara)
Tudorin

Megan LeeGeneral Manager

THE VOICE

Phone: 1800 451 488
Email: voice@cpsa.org.au
Giggle Page: Pam Townsend
Design: Antoine Mangion
Printer: Spotpress
24/26 Lilian Fowler Place,
Marrickville NSW 2204

All content is prepared by the CPSA VOICE editorial and production team.

THE VOICE CPSA Level 3 17-21 Macquarie Street Parramatta NSW 2150

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Please ring Head Office on 1800 451 488 if you would like a copy of the CPSA Constitution or CPSA's 2022/23 Annual Report to be posted to you. Alternatively, copies can be obtained online at

www.cpsa.org.au/about-combinedpensioners-and-superannuantsassociation/

CPSA Funding

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Garden of Remembrance

MAUREEN ANNE COWAN 28/4/1933 - 9/10/2023

Maureen was a foundation member of Dubbo Orana Branch. Maureen made delicious cookies and cakes and sold them each meeting to boost Branch funds. In recent times Maureen moved to St Mary's Villa, Dubbo.

Maureen passed away peacefully at the Holy Spirit Hospital Dubbo. A requiem mass was held on Monday 23rd October at St Bridget's Church Dubbo.

Vale Maureen

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THE VOICE publishes donations to CPSA of \$35 and over. All other donations are most welcome and equally appreciated.

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COMBINED PENSIONERS &

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I'd like to renew my membership o	or join CPSA as a Member and I enclose my individual Membership fee
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Please send to: CPSA, Level 3, 17-21 Macquarie St, Parramatta NSW 2150



2023 CPSA Annual Conference



IN late October, the CPSA Annual Conference and AGM were held at the Rydges Hotel near to Sydney's Central Station. Members from across New South Wales gathered in person and online to discuss important issues and vote on CPSA policy for the coming year.

This was the first Annual Conference since the beginning of the pandemic. It was a wonderful opportunity to come together and hear updates on Branch activities. Attendees also heard from several distinguished guest speakers.

Minister for Seniors, the Hon. Jodie Harrison MP, delivered the opening address. The Minister highlighted CPSA's role in advocating for older people and expressed that she is keen to hear our members' views.

Following this, the Minister kindly presented certificates to this year's Association Life Members.

Mary de Fries, West Wallsend CPSA Branch Secretary was in attendance and received her Life Membership from the Minister. Brian Buckett, CPSA President and Hastings Combined Seniors CPSA Branch President, was also presented with Association Life Membership at the Conference.

Jackalyne Parker, Blacktown CPSA Branch Treasurer, and Gizella Kendrella, Blacktown CPSA Branch President were unable to attend but received their Association Life Membership citations at a later date. Lorraine Scoble received hers at the Dubbo/Orana CPSA Branch meeting in November, presented by Dubbo Regional Counsellor Josh

A big thank you to our Association Life Members for all your efforts, both in support of your local Branch and of CPSA as a whole. The greater our membership, the stronger our voice!

Attendees also heard from Commissioner Robert Fitzgerald AM from the NSW Ageing and Disability Commisson. Commissioner discussed the abuse of older people, with a focus on financial and psychological exploitation. It was highlighted that often this situations can be difficult to identify, especially where family is involved or things have escalated slowly over a long period of time. If you are concerned about yourself or someone in the community, you can contact the NSW Ageing and Disability Abuse Helpline during business hours on 1800 628 221 for advice.

Our final guest speaker for the day was John Engeler, CEO of Shelter NSW and Chairperson of Shelter Australia. Shelter is an independent, organisation not-for-profit that advocates for better housing outcomes. The vision of Shelter is to create a sustainable housing system that provides secure homes for everyone. John spoke about the current housing crisis which is affecting more and more people, especially those on low incomes.

All speakers were presented with a CPSA letter opener as a

gesture of thanks for their time and efforts. This seemed particularly fitting for the Hon. Jodie Harrison MP, who regularly receives letters from CPSA about important issues that affect our Members.

2023 CPSA Annual **General Meeting**

THE 2023 AGM saw the re-election of Victor Borg, Brian Buckett, Margaret Cuddihy and Alan **Dickinson** to the CPSA Executive. Mara Tudorin was elected to the CPSA Executive for the first time. **John Hollis** continues in his position as the Returning Officer.

Minutes of the AGM and Conference will be available from early 2024.



CPSA President and Hastings Combined Seniors CPSA Branch President Brian Buckett, pictured with the Hon. Jodie Harrison MP, Minister for Seniors, after receiving his Association Life Membership citation from the Minister



CPSA Assistant Treasurer Anne-Marie Kestle presenting Commissioner Robert Fitzgerald AM with a small token of appreciation after his speech on the abuse and exploitation of older people



CPSA Secretary and Dubbo/Orana CPSA Branch Secretary Barbara O'Brien OAM, pictured with CEO of Shelter NSW John Engeler after his speech on the housing crisis Minister for Seniors



The Hon. Jodie Harrison MP,

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Life membership for Lorraine Scobie

Clr Josh Black was delighted to present Lorraine Scoble with her Association Life Membership Certificate on Friday 10 November 2023.

Lorraine is a member of the Dubbo/Orana CPSA branch.

Lorraine was completely surprised and overwhelmed at the honour bestowed on her.

Clr Black said organisations like CPSA not only provided friendship and social outings but were important as a strong advocacy group for issues affecting pensioners.



HAVE YOUR SAY ABOUT BUSES IN YOUR LOCAL AREA



DO you catch the bus to get around? If so, do you have something to say about your experience?

The NSW Government has created a Bus Industry Taskforce that will make recommendations to improve the reliability and quality of bus services across NSW.

You can let the NSW Government know what you think by filling in an online survey that asks questions about bus routes in your local area. This includes questions about what works, what doesn't work, and your ideas to fix things up. The survey will be open until 31 March 2024.

If there is more that you'd like to say, you can also make a submission that goes into more detail. This can be written it as a letter, though you will have to submit it online.

If you would like more information or some help you can call CPSA on 1800 451 488. We can fill out the survey for you over the phone or provide other support if needed. We will make sure you get a chance to have your say.

You can find the survey or make a submission to the Bus Industry Taskforce at <u>transport.nsw.gov.au</u> before 31 March.

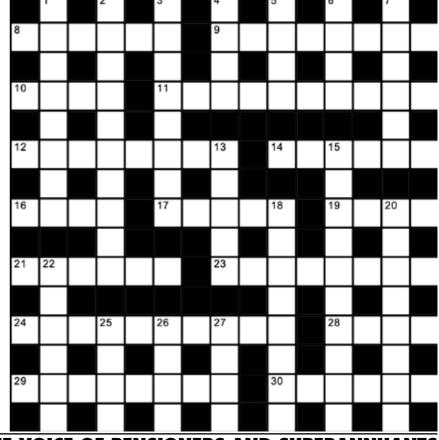
Crossword by Luke Koller

Across

- 8 Doctor's health facility
- 9 In the open air
- 10 Single
- 11 A feeling of delighted approval
- 12 Tree of the genus Catalpa
- 14 Densely wooded area
- 16 Half
- 17 A formal objection law
- 19 Sugar _ _ _
- 21 Large celestial body
- 23 Generally approved
- 24 Extra
- 28 On which a wheel rotates
- 29 Took the place of
- 30 Walk through a puddle

Down

- 1 Distribute
- 2 The creation of something new
- 3 Dispose of something
- 4 Free from storm or wind
- 5 A great distance
- 6 Make warm
- 7 Theatrical performers
- 13 Dance from Brazil
- 15 A container
- 18 Careless unconcern
- 20 Uncalled-for
- 22 Deposited
- 25 Not active
- 26 A unit of length
- 27 The source of lymph



Solution on back page



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CPSA News



Have we got COVID-19 licked?

THINGS are really looking up with COVID-19.

According to the World Health Organisation, the number of new COVID-19 cases worldwide had gone down by 42 per cent by the end of October 2023 compared with the month before. Deaths went down by 43 per cent, with 4,700 new fatalities reported.

That was worldwide, but in Australia things have improved even more.

First some Australian stats. This year there have been 805,603 confirmed cases of COVID-19. The age group with the most cases is 30 to 34 years: 58,024. The number per age group then starts to reduce, right down to the age of 85, with 28,331 cases.

After that age, cases shoot up again: 47,478. Clearly, if you are older than 85, you are at greater risk of getting COVID-19 than most seniors.

Centrelink call wait times worse than ever

LAST week Services Australia released their 2022-23 Annual Report. This comes after media attention around a significant blowout to wait times, with only 23 per cent of calls to Centrelink making it through to a service representative in July and August this year.

That means less than one in four calls were answered.

Medicare and Centrelink both come under the Services Australia banner, as well as several other important social programs.

Many services can be accessed online through MyGov, but for some people that isn't an option. Not all of us live close to a service centre or have the means to travel. Many have a hard time using online services, or have accessibility needs that mean telephone contact is a necessity.

As always, it's the people who most need Government services that have the hardest time accessing them.

Services Australia's annual

But the good news is that deaths due to COVID-19 are becoming rare. The rolling 7-day average of COVID-19-related deaths, which was still 56 a day on 1 January of this year, has since gone down to zero (7 November).

This doesn't mean COVID-19 can't kill you, but vaccinations and medications are doing their job.

In Australia's nursing homes, the situation is also improving. Since the beginning of the Omicron outbreak in mid-December 2021, there have been 115,364 deaths. COVID-19 deaths account for 4.4 percent of this figure, or 5,076.

But for the period of 1 July 2023 to 11 November 2023, COVID-19 is recorded as the cause of death in 1.3 percent of all deaths in nursing homes. That's an improvement.

So, good news on the COVID-19 front, although it's no reason to slack off with getting vaccinated.

This week the Australian Government accepted the latest advice from the Australian Technical Advisory Group on Immunisation

report is creative in its performance measures – there is a self-identified target of serving 70 per cent of customers within 15 minutes. Overall, only 60 per cent of customers received support in this time, and only 36 per cent of callers who were seeking information on social security and welfare. The report classifies this as 'partially achieved'.

This does not measure the full length of transferred calls, nor does it include calls that were terminated by customers after a long wait.

This also ignores customers who receive a congestion message that dumps them out of the call queue, advising them to use online services instead. Around 9 million callers received this treatment last year. If you call again during a high-volume call period, the system will recognise your number, categorise you as a repeat caller and in many cases, continue to drop your call.

There is also a target of 90 per cent of work processed in a timely manner, which was achieved less than 70 per cent of the time. (ATAGI) on the use of a new COVID-19 vaccine (XBB 1.5).

While all available COVID-19 vaccines continue to provide strong protection against serious disease, the new XBB 1.5 vaccines have been found to provide modest improved protection against the COVID-19 strains circulating in the community.

The Government has not changed the current vaccine eligibility recommendations.

The new vaccine is a good reminder to get vaccinated if you haven't had your recommended doses. Those who have had their 2023 COVID-19 vaccinations need not get vaccinated again with the new XBB 1.5 vaccine. They remain well protected against severe disease from COVID-19.

Have we got COVID-19 licked? Well, it seems so, although you can still catch it as easily as you catch a cold. Nobody wants to be that exception and get sick, so keep on getting the COVID jab is the best policy to adopt.



Again, this is considered 'partially achieved'.

It does make one wonder if it's possible to fail.

With all of this said, it has been announced that there will be a \$228m boost to help Services Australia deal with call wait times, allowing an additional 3,000 staff to be employed. Of course, it will take some time to recruit and train this many new staff and in the meantime it is more difficult than ever to speak with a person. This leaves millions of people with unanswered questions and unprocessed claims.

It has been reported that nearly 20 per cent of Services Australia staff plan to leave in the next year, and up to 180 staff are leaving each month. It's apparent that current staff shortages are taking a toll on everyone involved.

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CPSA News



Is Robodebt targeting pensioners now?

A READER sent us a note about how Centrelink can simply cut off your pension:

Twice we have had our couple's part pension cancelled and just a note sent saying that it was done. (...) The explanation of the automatic cut-off of the pensions was: the automatic machine did it during a routine scan. This means that Robodebt is alive and well under another name and applied to pensioners.

Robodebt was proposed in 2015 to recover supposed overpayment of unemployment benefits going back to 2010.

Robodebt checked with the Tax Office how much employers had paid to social security recipients and then compared it with what had been declared to Centrelink by the recipient. This is known as 'data matching'.

If the Tax Office's data didn't match Centrelink's information, recipients were asked to explain. If the recipient did not respond or could not explain the difference, Robodebt would swing into action and raise a debt.

However, Robodebt went even further. It averaged out income declared to Centrelink over the period reported to the Tax Office by the employer. It did so regardless of whether the social security recipients had worked during the whole period. This was known as

Automated deeming rates set to reduce pensions

CURRENT deeming rates are frozen until 1 July next year. After that, rates can be changed at any time.

It's very likely that, in the absence of a 'freeze', deeming rates would be sitting at something like 1 per cent and 4 per cent. That's 0.25 per cent and 2.25 per cent at the moment.

Changes to the deeming rates are usually made in March and September.

September 2024 will be very close to the next federal election. The earliest date on which this can be held is 3 August 2024, and the latest date is 17 May 2025.

'income averaging'.

For example, if a recipient had worked full time for four weeks in a financial year, their pay would be, say, \$25 an hour or \$4,000 for four weeks. The fortnightly unemployment benefit is currently \$750, or \$1,500 over two fortnights. Our recipient loses 50 cents of every dollar they earn through work, so should have missed out on their \$750 unemployment benefit twice.

Our recipient would therefore lose \$1,500 in unemployment benefits over the year.

However, average out \$4,000 over the 26 fortnights in a year, our recipient's unemployment benefits would be cut by \$77 each fortnight.

Our recipient would therefore lose \$2,000 in unemployment benefits over the year.

That's \$500 more, and Robodebt would raise that \$500 as a debt,

even though our recipient did not owe this \$500. Collection would be farmed out to debt collectors.

It's easy to see that Robodebt (now abolished) had generally no effect on pensioners as few pensioners have employment income.

However, the aspect of Robodebt that causes the reader who sent us a note (and others) to feel ill-treated by Centrelink is usually: automation. It is frightening to know that *an automatic machine* (...) *during a routine scan* can stop your pension.

The federal Government has accepted the Robodebt Royal Commissioner's recommendations which relate to automation at Centrelink. Specifically, it has agreed to put in place clear review procedures for automated decisions and to the establishment of a body to monitor and audit automated decision-making.



It's obvious that, during the election campaign, the Government and the Opposition will be forced into saying what they will do with deeming rates.

It wouldn't be smart for either to say it would increase them.

Still, the Government will have to say something. What options does it have?

It is only speculation, but it's very likely that the Government will extend the deeming rates freeze by another twelve months, citing the continuing cost-of-living crisis. This would postpone having to do anything to a point in time after the next federal election.

However, it may also spot the opportunity for reform of how deeming rates are set.

Deeming rates are based on the at-call-account bank interest rate (lower deeming rate) and the twelve-month term deposit rate (higher deeming rate). Usually, the higher deeming rate is a little bit lower than the term deposit rate, which favours pensioners who have term deposits.

But, obviously, not everyone puts their savings into term deposits.

Superannuation, for example, generally achieves higher returns than term deposits, as do investments

Continued page 7





in shares generally.

Others have invested in residential real estate. Their net rental income is not deemed. It is all included in the pension income test. No advantage!

Given that there is now technology called data matching, there really is no need for the complicated, antiquated mechanism of deeming rates.

The Government can easily check balances, superannuation

Is GP bulk-billing making a comeback?

BULK-BILLING rates have declined substantially over the past two years, with many general practices across the country moving towards mixed and private billing so as to maintain profitability.

From 1995 to 2022, the Medicare Benefits Schedule has had an annual average indexation rate of 1.1 per cent, whereas the average annual changes to the Consumer Price Index (CPI) were 2.4 per cent.

As a result of these long years of inadequate indexation, the Medicare rebate, which underpins bulkbilling, became significantly lower than the actual cost of consultations.

Many doctors say they had no choice but to scrap bulk-billing, although until recently some still gave it to concession cardholders.

Measures announced in the last federal Budget in May took effect on 1 November.

Indexation of 3.6 per cent was applied to most items on the

Regional bus 'tap and go' payment trial excludes seniors, other concession card holders

CONCESSION fares for regional public transport are complicated

There's a \$2.50 Regional Excursion Daily (RED) ticket for seniors that allows for unlimited travel on local buses in a regional area, but you cannot use this on coaches or trains.

You can get a \$2.50 Country Pensioner Excursion (CPE) ticket to travel between regional locations by train or coach, but you must get off and get a new ticket or tap on with an Opal card before you reach

stockbroker balances, account balances and what have you and determine how much investment income pensioners have made for real.

CPSA's So, prediction deeming rates is that the current freeze will be extended from 1 July 2024 to 1 July 2025. The Government rates with data matching. will simultaneously announce an independent review of deeming rate setting. Independent, because if

Medicare Benefit Schedule. additional half a per cent is added to most general medical services including items, ordinary GP consultations. So, that's 4.1 per cent all up, and it also applies to most diagnostic imaging services (but excluding nuclear imaging) and some pathology items.

It's easy to see that indexation alone, when the rate of inflation is significantly higher than the rate of Medicare Benefit indexation, will not make it any more attractive for GP practices to restore bulk-billing.

That is why the Government tripled bulk-billing incentives paid to GPs for visits by concession card holders and children. With threeout-of-five GP consultations falling within the tripled bulk-billing category, the Government's measure is a significant one.

The incentive for a GP to bulk-bill for an ordinary GP consultation has now risen from \$6.85 to \$20.65 in metro areas, and from \$13.15 to \$39.65 in very remote areas. Again, this only applies to visits by concession

the boundary of the greater Sydney Metropolitan region.

You may also be entitled to four Pensioner Travel Vouchers a year, or two return trips. Of course, these are only valid within NSW so if you're crossing a border you're out of luck. You'll have to pay 50 per cent of the relevant fare for the interstate part of your trip.

Seniors in regional and rural NSW have been asking for this complicated system to be replaced by Opal readers and a standard \$2.50 concession fare for some time.

It isn't an unreasonable request.

CPSA members have said that

there is a public backlash against the review's findings, the Government can always throw the review under the bus.

And that's what they might well for have to do, because this independent review will sure as anything recommend deeming replacing

> Real income would replace deemed income. No pensioner would gain and most would lose.

cardholders and children. The GP bulk-billing incentive for visits by anyone else will be \$6.85.

In major cities, a doctor will now get one-third more for a standard bulk billed consultation of under 20 minutes, taking the Medicare payment for eligible patients to \$62.05.

In regional and rural Australia, a doctor will get around half more for the same visit, taking the Medicare payment to between \$72.80 and \$81.10, depending on location.

On the face of it, there is now plenty of scope for GPs to help the Government achieve its aim of restoring bulk-billing for concession cardholders at least.



they would like to see pensioner concessions expanded to include people who are currently only eligible for half-price including many people who receive a Jobseeker payment.

Unfortunately, instead it seems that we might be slowly going backwards. The operator Bathurst's local bus line has been trialling a 'tap and go' system on select routes since December 2022.

As of last month, Dubbo Buslines has also introduced this system across its 57X routes.

Unfortunately, these new 'tap

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and go' readers only accept debit or credit cards and concession fares are not available. Opal cards are not compatible with the readers. Those wishing to pay the concession rate will have to continue paying the old-fashioned way, though most likely with increasingly impatient bus drivers and fellow travellers.

You'll be happy to know that the 'tap and go' readers do accept the Regional Seniors Travel Card. Pity

that was axed in this year's NSW Budget.

The Bathurst and Dubbo trials are using card readers designed by Littlepay, which is 'open loop', meaning that you can use any bank card designed for contactless payment.

A 'closed loop' system requires purpose-made cards, such as Sydney's Opal cards.

Currently, Opal readers are set up



Council rate changes to add further pressure on NSW households

THE Independent Pricing and Regulatory Tribunal (IPART) has released a final report about a new methodology for rate pegs in NSW.

The rate pegs determine how much more income local councils can generate through rates.

For 2023-24, the base rate peg has been set at 3.7 per cent. This doesn't mean that individual ratepayers pay 3.7 per cent more, rather it means that local councils can increase their overall revenue from rates by this amount.

For instance, rates may be calculated differently for residential properties than farmland.

Insurance company greed working for downsizers (and everyone else)

IF you keep up with the news, you'll remember Opal Tower, an apartment building in Sydney Olympic Park. It was completed in August 2018, and by Christmas, over 3,000 people had been evacuated: serious building defects.

After Opal Tower and a few other

The IPART review was brought about by concerns that rate pegs are being set too low, that they are determined based on outdated data, and that the current methodology does not address the differences between rural, regional and metropolitan councils.

As a result, 86 councils applied for a special variation in 2022-23, the largest of which was 1.8 per cent higher than the rate peg.

It is likely that the IPART review will result in a higher rate peg for many councils. For reference, IPART's new methodology would have put the base rate peg up by an extra 1.2 per cent last year and an extra 0.5 per cent this year.

Perhaps the most interesting point IPART have made in their draft paper

big problems, buying into new apartment buildings has become risky business.

This is a massive roadblock for the state's plan to increase housing stock through high density developments.

The solution may be insurance: a strict liability, statutory guarantee that protects building owners from certain types of defects over ten years from the completion of construction. In NSW, this is known as Decennial

for both.

Open loop systems are not great at incorporating concession rates. Many cities that use open loop systems allow pensioners to access free travel so a tiered payment system isn't necessary – others provide special cards that are designed to be used by people with concession entitlements.

There's been radio silence on how this issue will be addressed in NSW.

Rest assured, if this becomes a vehicle for rolling back pensioner travel entitlements, CPSA will certainly have plenty to say.

The NSW Government has created a Bus Industry Taskforce to make recommendations to improve the reliability, quality and effectiveness of bus services across NSW. You can find out more here. If you would like some help to have your say, you can email us at cpsa@cpsa.org.au or give us a call on (02) 8836 2100 or 1800 451 488.

is that the actual financial model that councils are operating under requires review. Is it reasonable that ratepayers pay a large proportion of increases to operating costs – should other sources of revenue be explored?

CPSA is concerned that concessions for pensioners do not automatically increase in line with rates. Currently, the general rebate is set at a flat \$250 regardless of changes to costs of living and actual council rates. This concession is not indexed in line with CPI and has not changed since it was introduced in 1993.

CPSA strongly supports a formal review of concessions for council rates, which should be indexed regularly.

Liability Insurance (DLI).

This covers major and minor defects that might become obvious over time. The clever thing about this is that the insurers don't want to cover buildings that might cost them money. As a result, their building experts inspect buildings throughout construction.

In NSW, the existing model for

Continued page 9





funding defect repairs is known as a strata bond. Developers pay 2 per cent of the total build cost to Fair Trading. This is held to usually within three years after construction is completed.

But sometimes major defects aren't visible, and only become evident after the building has been in use for more than three years. This means that shonky operators

can knowingly construct buildings that will look good until they get their money back.

According to the Australian Financial Review, defects might cost 20-30 per cent of the total build.

NSW is the first state to allow developers to opt in to Decennial Liability Insurance (DLI) instead of using the current bond scheme.

The success of DLI depends

on buyers asking whether the development they want to buy into is covered by DLI.

This happens at a time of big change, when free-standing homes are on the way out to be replaced with apartments.

Downsizing incentives may mean more people over 55 will start to seriously consider apartment living.

Enduring powers of attorney: reform, finally!

AN enduring power of attorney allows someone to make financial and legal decisions on someone else's behalf and continues even if that person loses the ability to make decisions for themselves.

Enduring powers of attorney are an indispensable legal tool, but the way things are set up in Australia means that they can be a big problem, too.

In Australia, problems arise from the poor regulation of enduring powers of attorney.

For starters, every state and territory regulates enduring powers of attorney differently. So, you can't always be certain that an enduring power of attorney made in one state will be recognised in another.

No Australian jurisdiction recognises enduring powers of attorney made overseas.

Because there's no certainty an enduring power of attorney made in one state is enforceable in another, people with, for example, real estate in two states may find their nominated attorney cannot deal with both real estate portfolios.

Then, none of these eight

jurisdictions require enduring powers of attorney to be registered and lodged. None maintain a register for the voluntary registration of enduring powers of attorney.

This leaves room for confusion and complications where a person has made multiple enduring powers of attorney. It also invites fraud and forgery.

The problems are well-known and federal, state and territory Attorneys-General have talking a long time about how to address them. Maybe this is finally going to lead to meaningful reform of enduring powers of attorney.

The biggest push for reform of enduring powers of attorney has come from the Australian Law Reform Commission. It's landmark inquiry into elder abuse looked at enduring powers of attorney, among a host of other issues.

In September, the Standing Council of Attorneys-General (all the state, territory and federal Attorneys-General agreed to release a consultation paper specifically on enduring powers of attorney.

The paper offers a number of reform proposals for the laws governing enduring powers of attorney.

How should an enduring power of attorney be executed? A fairly basic question. In a notable omission, the consultation paper's answer to that question does not suggest that enduring powers of attorney should be registered and lodged.

Who can be a witness? Should bankrupts those convicted or of violent criminal offences be excluded?

Who can become an attorney? This is an area where many disputes about conflicts of interests arise.

Then there's the issue of how an enduring power of attorney is revoked, especially in cases of perceived or actual fraud.

The duties of an attorney may seem simple but can be quite complex. What sort of qualifications must an attorney have?

Finally, in so many cases families feel powerless to raise issues in relation to the way the person appointed as attorney carries out their duties. Often legal action is prohibitively expnsive.

To find out how to comment on the discussion paper, go to consultations.ag.gov.au/familiesand-marriage/epoa/ or ring CPSA on 1800 451 488.

Why artificial sweeteners are good for you

AN eminent nutritional scientist, Prof. Martijn Katan, argues that we should ignore the World Health Organisation's (WHO) earnest advice not to use artificial sweeteners in food and drink.

Prof. Katijn notes that every expert, including the WHO, on the basis of evidence, believes that sweeteners don't cause cancer.

WHO bases its advice on studies exclusion of factors that can cloud of what happens to real people using artificial sweeteners in real life. The WHO believes that the use of artificial sweeteners leads to overeating and obesity.

Prof Katijn argues that in deciding whether sweeteners are good or bad, effective or ineffective, experiments are of greater value than real life experiences.

Generally, experiments are to be

Prof. Katijn explains that the preferred, because it allows for the the issue.

> The way the WHO approached the issue was that it looked at the real-life experiences of two groups of people. One group used sweeteners of their own accord. The other group didn't use sweeteners.

> In such real-life studies, it turns out that many people who use

> > Continued page 10

1800 451 488 www.cpsa.org.au



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CPSA News



sweeteners of their own accord are obese.

It could be that people in this group think they can eat anything with sweeteners rather than sugar in it (deserts, cake, chocolate bars) without putting on a lot of weight.

The WHO's conclusion was (1) that sweeteners caused people to put on weight and (2) that people should therefore not use sweeteners.

Of course, Prof. Katijn says, another possibility why people who carry more weight use sweeteners is that they think it will make them lose weight.

The WHO's conclusion is very similar to a conclusion that is sometimes drawn from real-life studies which show that people who use vitamin supplements suffer less disease than people who don't use vitamin supplements. Conclusion: taking vitamin supplements is good for you.

But in experiments in which one group of people is given vitamin supplements and another

Treasury: pensioners should pay income tax

"ONLY 18 per cent of Australians aged 65 and above pay income tax", the Financial Review reports the federal Treasury Secretary Steven Kennedy saying recently. He meant income tax, not other taxes like the GST, for example.

Mr Kennedy was discussing the fairness or otherwise of the tax and transfer system.

People used to live shorter lives and didn't cost as much in the pension and in aged care and healthrelated subsidies.

Birth rates are falling, while baby boomer survival-to-well-beyond-80 rates are rising.

The result?

The income tax burden will fall on a shrinking share of working-age taxpayers.

Personal income tax will soar to an unprecedented almost 60 per cent of the overall federal tax base by the 2060s, up from an already record 50 per cent in this financial year, Treasury projects.

group pretend-vitamin supplements (placebos), the same rates of disease occur in both groups. Conclusion: taking vitamin supplements makes no difference at all.

Prof. Katijn points out that people who take vitamins of their own accord in real life are more concerned about their health and will therefore live more healthy lives generally: no smoking, plenty of exercise, keeping thin by not overeating. This is what keeps them healthier than people who are not, or less, concerned about their health, not the vast quantities of vitamins they swallow.

Something similar is going on with sweeteners. Looking at experiments, a different picture emerges from what the WHO found. It's a picture that has prompted Prof. Katijn to reject the WHO's position on sweeteners.

He singles out an experiment with 163 women who were obese. Half of them were asked to follow a weight-loss diet with aspartame (a common artificial sweetener), and the other half were asked to follow the same diet but with sugar.

After three years, the entire group had lost significant weight, but the half using aspartame had lost five kilos more on average than the group using sugar.

This, Prof. Katijn says, is proof that sweeteners have an important role to play in weight-loss and maintaining a healthy weight. Sweeteners cut out all the carbohydrates of sugar.

It is also proof that sweeteners don't cause obesity.



The 'old-age dependency ratio', which measures the number of people aged 65 and over for every 100 people of traditional working age (15 to 64), is projected to jump to 38 per cent in 2063 from this year's 26 per cent.

But maybe the federal Treasury can take heart that life expectancy increases have stalled as a result of the COVID-19 pandemic.

Gross household median income for people aged 65 to 74 was \$50,700 in 2022, according to the Australian Bureau of Statistics. But as a group their disposable household income, which strips out income taxes, was not much lower at \$50,180.

As a group, people aged 65 to 74 are paying only \$520, or one solitary per cent of their income, in income tax.

It's true that pensioners in New Zealand and the UK and quite a few other countries besides do pay income tax (including over their pension!), but here's the rub.

They get the same pension regardless of their income. It's called a universal pension, and in the UK

King Charles and Mick Jagger get it, as do any number of very wealthy Britons over the age of 65.

In Australia, the Age Pension is means-tested. It's not called a tax. Pensioners and retirees overwhelming don't pay tax, remember. But, a dollar being a dollar, what's the difference?

The income test means you lose 50 cents in the dollar if your fortnightly income is higher than \$204 if you are single and \$360 for a couple combined.

Fifty per cent!

Does that sound like a pretty steep income tax to you?

And if you have been a really good saver, there's an even heftier tax. The assets test means you lose \$3 a fortnight (or \$76 a year) for every \$1,000 your savings are over a none-too-high limit.

That may not be an income tax, but does that sound like a wealth tax to you?

Then again, a wealth tax doesn't exist in Australia. You can ask the federal Treasury.

CPSA Information Directory

INCOME SECURITY

Centrelink

Age Pension 13 23 00 DSP/Carer benefits 13 27 17 Family Assistance 13 61 50 Financial Info Service 13 23 00

Welfare Rights Centre 1800 226 028

British Pensions in Australia 1300 308 353

National Debt Helpline 1800 007 007

HOUSING

Housing NSW

Public and community housing 1800 422 322

Tenants' Union Advice Line 1800 251 101

Tenancy Advice & Advocacy
Service

Find your local service tenants.org.au

Find the help you need with myaged care



1800 200 422 myagedcare www.myagedcare.gov.au



Emotional, practical and financial support for carers

1800 422 737

GOODS & SERVICES

NSW Energy & Water Ombudsman (EWON) 1800 246 545

Telecommunications Industry Ombudsman 1800 062 058

NSW Seniors Card 13 77 88

No Interest Loans Scheme

Loans to purchase essential household items
13 64 57

Energy Made Easy

Price comparisons
1300 585 165
energymadeeasy.gov.au

NSW Ageing and Disability Abuse Helpline



1800 628 221 (Mon-Fri 9-4)



medicare

132 011

24/7 GENERAL ENQUIRIES HELPLINE

Advance Care Planning Australia

BE OPEN | BE READY | BE HEARD

1300 208 582

PLANNING FUTURE HEALTHCARE PREFERENCES

ndis

National Disability Insurance Scheme

1800 800 110

DISABILITY
SUPPORT FOR
PEOPLE UNDER 65

afca Australian Financial Complaints Authority

1800 931 678

DISPUTE RESOLUTION FOR FINANCIAL SERVICES

HEALTH, WELLBEING & TRANSPORT

Office of Hearing Services

Subsidised hearing aids 1800 500 726

National Dementia Helpline 1800 100 500

VisionCare

Subsidised spectacles 1300 847 466

Taxi Transport Subsidy
Scheme
transport.nsw.gov.au/ttss
1800 623 724

National Continence Helpline 1800 330 066

> Rape Crisis Centre 24hours/7days 1800 424 017

National Domestic Violence Helpline 1800 200 526

NSW Health Care Commission 1800 043 159 Carers NSW 1800 242 636

Aged Care Complaints Commissioner 1800 951 822

> Lifeline 13 11 14

Australian Men's Sheds 1300 550 009

NSW Public Dental Health Services

Call NSW Health for details 1800 639 398

Cancer Council NSW 13 11 20

Exit International

Information about euthanasia 1300 103 948

Mental Health Crisis Team

24/7 for mentally ill people in crisis **6205 1065**

LEGAL

Seniors Rights Service

Retirement village advocacy 1800 424 079

Fair Trading

Rental bond and tenancy info 13 32 20

Law Access

Referrals for legal help **1300 888 529**

NSW Dispute Resolution 1800 990 777

Women's Legal Services NSW

Family law, domestic, violence, sexual assault & discrimination 1800 801 501

RIGHTS

Australian Human Rights Commission

Complaints about discrimination 1300 369 711

Commonwealth
Ombudsman
1300 362 072

NSW Ombudsman's Office 1800 451 524

NSW Trustee and Guardian 1300 360 466

Guardianship Tribunal 1300 006 228

Older Persons Advocacy Network (OPAN)

Individual advocacy for aged care recipients

1800 700 600

www.cpsa.org.au 1800 451 488 11

GigglePage

Enjoy the holidays?









Crossword Solution



	Crossword on Page 4													
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Dec 2023 - Jan 2024