

COMMUNITY PROGRAM 3:

HEALTH AND WELLBEING

3.4 HOME SUPPORT FOR ELDERLY AND INFIRM

This program provides benefits for IBN Elders (55 years and over) or members with mobility problems to pay for HACC meals and Mobility Aids (as required), and up to **\$10,000 per financial year** for accessibility modifications to a home or vehicle.

I am applying for:

HACC Meals

Home accessibility modifications

Mobility Aids

Vehicle accessibility modifications

Applicant details

Name

Date of Birth

Gender

Male

Female

Current home address

Postcode

Phone

Email address

Have your personal details changed?

No

Yes (If yes, please complete an 'Update personal details' form and attach it to your application.)

Language Group:

Yinhawangka

Banyjima

Nyiyaparli

Patient's Medicare Number

Name of private health fund

Private health fund number

What is the reason for the request?

Have you applied to NDIS or Aged Care for assistance?

Yes

No

If yes – what amount was approved?

Items for purchase (NO CASH PAYMENTS)

For details on what expenses IBN will cover, please see the IBN 2020-21 Community Programs Handbook, or the IBN website www.ibngroup.com.au

Description of item

Supplier

Amount

\$
\$
\$
\$

\$

\$

TOTAL \$

Comments

Required Documents (please attach)

- Copy of private health insurance (if applicable)
- Supplier quotes or invoices including payment details

Where relevant:

- HACC documents
- Report from a doctor or qualified health professional (for mobility aids & accessibility modifications)
- NDIS or Aged Care (Department of Health) documents
- Proof of home ownership (for home modifications)
- Vehicle registration in the name of the member (for vehicle modifications)
- IBN Update Personal Details form

Declaration

I declare that the information I have provided in this form is true and correct, the benefits requested are for my own use.

I agree that IBN may share my information with other organisations for application assessment purposes.

Signature

Date

/ /

Approved by the IBN Service Delivery Team Leader

Signature

Date

/ /

Need help?

Contact: (08) 9140 0900
Freecall: 1800 014 401

Return this application to:

Email to: applications@ibngroup.com.au
Post: PO Box 2390, South Hedland, WA 6722
Fax: 08 9140 0996
In person: 3 Brand Street, South Hedland
973 Central Road, Tom Price
Unit 3, 4 Welcome Road, Karratha

Office use only

Date received

/ /

 CP# Received by

IBN Corporation Pty Ltd | ACN 093 140 240