***Cashless Debit Card (CDC) Extended Rollout 2021***

***Briefing Paper***

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# Background to the CDC and Income Management programs

Compulsory income quarantining in Australia commenced in 2007 as a measure targeting Aboriginal communities in the Northern Territory, as part of the Federal Government’s Intervention. It has since been increasingly used in various formats by successive federal governments to micro-manage where and how people spend their Centrelink entitlements. It involves limiting the percentage of specified Centrelink payments a person may receive as cash in their chosen bank account, with the balance (generally between 50 and 80%) quarantined to a separate account. Restrictions are imposed on where and how the quarantined funds can be spent.

Since its inception, compulsory income quarantining has disproportionately impacted Aboriginal and Torres Strait Islander people.

Government rationale is that compulsory income quarantining is designed to reduce social harms associated with alcohol and other drug use, and gambling. However, multiple studies and evaluations have failed to find any conclusive evidence that compulsory income quarantining achieves this goal.

Compulsory income quarantining is currently imposed via two separate schemes: Income Management and Cashless Welfare. These schemes are more commonly known by reference to the debit cards associated with their operation – the BasicsCard is used to administer the Income Management scheme set out in Part 3B of the *Social Security (Administration) Act 1999* (Cth); and the Cashless Debit Card (CDC) is used to administer the Cashless Welfare arrangements contained in Part 3D of that Act - referred to in this paper as the CDC program.

Both schemes operate by:

* limiting cash withdrawals of fortnightly Centrelink entitlements to a specified percentage; and
* restricting the use of quarantined income to purchase excluded goods such as alcohol.

The Income Management and CDC program card systems operate in different ways. Some differences in how the CDC and BasicsCard systems work are the result of different legislation and policy decisions; others are the result of differences in technology.

Both the CDC and the BasicsCard are provided by the same company, Indue[[1]](#footnote-1).

### Income Management program numbers[[2]](#footnote-2)

The majority of people subject to Income Management reside in the Northern Territory. As at 4 September 2020 there were 24,718 income management participants with an active BasicsCard in the Northern Territory.

There are approximately 150 people subject to Income Management in the Cape York area in Queensland. All people on Income Management in the Cape York area will be transitioned to the CDC by 31 December 2021.

Income Management also operates in several other small-scale sites around Australia:

* place-based sites of Logan (Qld), Rockhampton (Qld), Bankstown (NSW), Greater Shepparton (Vic) and Playford (SA)
* child protection sites in Western Australia and South Australia and
* the APY Lands (SA), Ngaanyatjarra (Ng) Lands (WA) and Kiwirrkurra Community (WA).

As at August 2019, of the 24,974 people subject to Income Management in Australia, 79 per cent were Aboriginal or Torres Strait Islander people.

### CDC program numbers[[3]](#footnote-3)

The Cashless Debit Card was initially introduced in 2016 as a trial program in two areas in South Australia and Western Australia. These trials were extended in duration and location a number of times.

The total number of people subject to the Cashless Debit Card trial as at December 2020 was smaller than the number of people subject to Income Management.

The largest trial site was the Bundaberg and Hervey Bay area with 6,084 card users, followed by the Goldfields area with around 3,473.

### How income management and cashless debit cards work

* Income management**:** a prescribed percentage of the person’s Centrelink payment is quarantined to an Income Management account maintained by the Government and accessed via a “stored value card” (issued by Indue), and may be spent on anything other than “excluded goods or services” such as alcohol, tobacco, gambling and pornography. In the Northern Territory, the quarantined portion for most people subject to Income Management is 50% of Centrelink payments (though it is 70% for a small number of people).
  + The BasicsCard is a pin-protected cashless debit card issued to Income Management participants. It operates on the EFTPOS system.
  + The BasicsCard is only accepted in certain stores or venues. A merchant (shop) can only accept the BasicsCard if they have signed an agreement and Services Australia has approved it.
  + The BasicsCard was developed by Indue specifically for the Income Management program, to replace an earlier system that relied on vouchers and store cards.
  + People on Income Management can spend their managed funds by using their BasicsCard, or by arranging for Centrelink to make payments on their behalf (for example, regular rent and utilities payments).
  + For people subject to Income Management, as for the CDC program participants, the unrestricted portion of a person’s Centrelink payment is credited to their ordinary personal bank account.
* Cashless debit card**:** a prescribed percentage of the person’s Centrelink payment is quarantined to a Welfare Restricted Bank Account and may be spent on anything other alcohol or gambling. Cash withdrawals cannot be made from the Welfare Restricted Bank Account. The default for CDC quarantining in most areas is 80% of a person’s Centrelink payment. This quarantined amount is known as the ‘restricted portion’.
  + The CDC is a Visa debit card issued by Indue.
  + Cardholders can use their card at any physical store that accepts Visa debit unless the store has been blocked (for example, liquor stores).
  + Cardholders can also use the card to make online purchases from approved online merchants.
  + The unrestricted portion of the person’s Centrelink payment, generally 20%, is credited to the person’s ordinary personal bank account.
  + For certain recipients, the amount of each portion may be varied, either at the direction of an authorised community body or at the determination of the Secretary or the Minister for Social Services (the delegated Centrelink officer).

### Differences between the BasicsCard and the CDC in practice

##### Eligibility

* + The criteria for forced participation in the CDC program, are broader than the criteria for Income Management.
  + Currently, most people are only placed on Income Management after receiving income support payments for a particular period of time. This is not the case with the Cashless Debit Card – there is no threshold relating to the length of time a person has received payments.
  + The specific criteria for forced participation in the CDC program in each program area are set out later in this brief.

##### Exemptions and options for exiting

* + It is possible for people on the BasicsCard to seek an exemption from Income Management if they satisfy specified parenting, study or work activity requirements.
  + In order to exit or be exempt from the CDC program, however, a person must satisfy the Secretary (i.e. the delegated officer) that either:
    - participating in the program would pose a serious risk to their mental, physical or emotional wellbeing; or
    - they can demonstrate reasonable and responsible management of their affairs (including financial affairs), taking into account a range of prescribed factors.
      * Following the passage of the *Social Security (Administration) Amendment (Continuation of Cashless Welfare) Act 2020,* applications to exit the CDC program on this basis must be determined within 60 days, or are otherwise deemed to be approved.
      * If a person is unable to demonstrate responsible management of their affairs with respect to the prescribed factors because of a disability or (non-parental) caring responsibility, the Secretary may still approve an application to exit the CDC scheme.
  + The Secretary must revoke a decision to exit or exempt a person from the CDC program (i.e. put someone back on the CDC) if no longer satisfied that the person meets the wellbeing or responsible management of affairs criteria. Certain health or government staff can request that the Secretary reconsider exist or exemption approvals.

##### Percentage of payment quarantined

* + People subject to the CDC in areas outside the NT have 80% of their social security income quarantined.
  + People in the NT who switch from Income Management to the CDC program initially have the same percentage of income quarantined as they had under Income Management. For most people on Income Management, this is 50%, however, these percentages can be changed.
  + Under Income Management, the Minister for Social Services has the power to increase the quarantined portion to a higher percentage only if the Minister considers this is necessary to promote the objectives of the Income Management regime. This means the Minister must have a reason or explanation before deciding to increase the percentage.
  + The Minister can increase the portion of quarantined payments under the CDC program up to a maximum of 80%. Under the CDC program in the Northern Territory (only), the Minister can unilaterally increase the portion of money restricted without any reason or justification.
  + Under the CDC program, the quarantined amount can also be *decreased* by the Secretary in specified circumstances (for example, where there is financial hardship or there are technological malfunctions).

##### Merchants:

* + The CDC can be used at a larger number of merchants than the Income Management BasicsCard:
    - The CDC can be used at any merchant the Department has not blocked (provided it is able to accept Visa Debit)
    - The BasicsCard can only be used at merchants that the Department of Human Services has approved.
  + The CDC can be used for online purchases at approved merchants and for online payment of bills via BPay.
  + The BasicsCard cannot be used for online purchases (although regular direct debits can be arranged).

##### Merchant responsibilities:

* + Merchants can only accept the BasicsCard if they have signed an agreement not to process transactions for excluded goods such as alcohol.
  + Most merchants who accept the CDC have no agreement with either the Department of Social Services or the card provider. Generally only mixed merchants, e.g. those selling alcohol as well as groceries, will need to sign an agreement – to avoid being blocked entirely.

##### Face-to-face assistance with budgeting:

* + When a person is placed on Income Management they attend an interview where they and a Centrelink officer decide how to allocate the person’s income managed funds. Centrelink can make payments on the person’s behalf for expenses such as rent with the balance of the person’s income managed funds being allocated to the BasicsCard.
  + People placed on the CDC program are generally not interviewed, however, Centrelink is offering assistance to new NT and Cape York participants with setting up direct debits, transfers and BPAYs for rent and other bills. It remains unclear how this assistance is being delivered.

##### Cash access:

* + Neither CDCs nor BasicsCards allow withdrawal of cash. Cash withdrawals of Centrelink payments may only be made from the portion credited to the person’s personal bank account.

##### Excluded items:

* + Alcohol and gambling are excluded under both the Cashless Debit Card and Income Management schemes.
  + Tobacco and pornography are only excluded under Income Management, not under the CDC program.

##### Cost of administration:

* + Income management imposes a significantly greater administrative burden on Centrelink, the Department of Social Services, the Department of Human Services and merchants compared to the CDC program.
  + For Income Management, Centrelink must conduct interviews with clients, and the Department of Human Services must approve merchants. Merchants must police transactions to ensure that the BasicsCard is not used to purchase excluded goods.

##### Information collection and sharing

* + Under both Income Management and the CDC program, the Secretary of the Department of Social Services (i.e. their delegated Services Australia officers) is able to share personal information about a person who is subject to the program with certain people or organisations – for example, child protection officers or authorised community bodies.
  + Under both programs, the Secretary can require a person to give information or documents to the Department if it is “relevant” to the operation of Income Management or the CDC program. Given the broader criteria for exits and exemptions under the CDC program, which involve substantial scrutiny of an individual’s personal life, the scope of information that a person could be required to produce to the Department under the CDC program is likely wider than under Income Management.
  + Under the CDC program, the Secretary is also able to collect and share personal information about a person who is subject to the program with a financial institution. This facilitates information sharing with Indue, a for-profit company, and also potentially with any other bank that a CDC participant uses.

# The Amended CDC Legislation

# The Social Security (Administration) Amendment (Continuation of Cashless Welfare) Bill 2020 was passed by Parliament on 10 December 2020, receiving Royal Assent on 17 December 2020.

The amending legislation, the Social Security (Administration) Amendment (Continuation of Cashless Welfare) Act 2020, is available at <https://www.legislation.gov.au/Details/C2020A00136> .

The amending Act:

* provides for continuation of the Cashless Debit Card program (CDC program) for a further two years, by extending the sunset date to 31 December 2022 in all existing trial sites
  + the Ceduna area
  + the East Kimberley region
  + the Goldfields area
  + the Bundaberg and Hervey Bay area;
* establishes the CDC program in the Northern Territory (on an opt-in basis) and in Cape York, subject to the same sunset date - 31 December 2022;
* removes all references to the CDC operating as a “trial” and instead uses the language of “program” and “program participants”, to reflect the Federal Government’s intention to make the program ongoing;
* enables people in the Bundaberg and Hervey Bay program area to voluntarily participate in the CDC program (trial participants were previously excluded from voluntary participation in this program area);
* enables a CDC voluntary participant to continue to volunteer for the CDC if they no longer reside in a program area;
* enables the Secretary of the Department of Social Services (effectively Centrelink) to advise a community body when a person has exited the CDC program;
* enables the Minister for Social Services to determine “decision-making principles” which the Secretary of the Department of Social Services (hereafter “the Secretary”) must follow when deciding whether to approve an application to exit the CDC program on the basis that the person can demonstrate reasonable and responsible management of their affairs;
* creates a new obligation for the Secretary to revoke an exit approval if they are no longer satisfied that a person can demonstrate responsible management of their affairs, and enables the Secretary to review and revoke a wellbeing exemption on the referral of a state or territory government employee;
* introduces a 60-day time limit for the determination of valid applications to exit the program on the basis of a participant’s ability to responsibly manage their affairs (after which an application is deemed to be approved);
* provides that where a person is unable to demonstrate responsible management of their affairs, due to disability or caring responsibilities, they may still be eligible to exit the CDC program where the Secretary is nonetheless satisfied that the person has responsible management of their affairs;
* enables the Minister, via disallowable legislative instrument, to vary the percentage of income that is quarantined;
* removes the requirement that any review of the CDC program be evaluated and that evaluation be tabled in Parliament;
* extends the sunset date for Income Management in the Cape York area from 30 June 2020 to 31 December 2021 (to allow time for the transitioning of all Income Management to CDC in that area).

The information below sets out key elements of the amended legislation, as well as information regarding the CDC program rollout in the NT and the Cape York area provided by the Departments of Social Services and Services Australia – including on its websites, at:

* + <https://www.servicesaustralia.gov.au/individuals/news/from-17-march-2021-cashless-debit-card-expanding> (accessed on 31 March 2021)
  + <https://www.dss.gov.au/families-and-children/programmes-services/welfare-conditionality/cashless-debit-card-overview> (accessed at 31 March 2021)

### Existing trial areas

* The amendments mean that the Cashless Debit Card program will continue for a further two years in the existing trial locations of:
  + The Ceduna area
  + The East Kimberley area
  + The Goldfields area
  + The Bundaberg and Hervey Bay area.
* The “program participant” criteria for compulsory participation in the CDC program for each of these existing CDC program areas are set out separately in the Social Security Administration Act:
  + 124PG—Ceduna area
  + 124PGA—East Kimberley area
  + 124PGB—Goldfields area
  + 124PGC—Bundaberg and Hervey Bay area.
* Under the amended legislation, people in the Bundaberg and Hervey Bay area may now voluntarily participate in the program, unless subject to Income Management.

### The Northern Territory

* From 17 March 2021 the whole of the NT is a CDC program area.
* Solely opt-in or voluntary program:The notable distinction between the CDC program in the NT and other CDC program areas, is that a person must make a **request** to become a program participant - on an opt-in basis for people subject to Income Management; and on a voluntary basis for people who are not subject to Income Management.
* Concurrent Income Management program**:** The NT CDC program will operate concurrently with the NT Income Management program. The Federal Government sought to replace Income Management with the CDC program entirely, and forcefully transition all Income Management participants in the NT to the CDC, but it was not able to pass legislation to that effect. The opt-in / voluntary model is the resulting compromise which Parliament approved.
* Option to transition from IM to the CDC program**:** From 17 March 2021, people on Income Management in the NT can opt to transfer from Income Management to the CDC program:
  + People transitioning from Income Management will need to make a request to the Secretary (i.e. to Centrelink) to be transferred. In practice this will involve calling the Cashless Debit Card hotline operated by Centrelink.
  + People transitioning to the CDC will not be able to opt to switch back to Income Management.
    - Even if a person stops being subject to compulsory incoming quarantining for a period of time (for example, if they exit the program or stop receiving Centrelink income support), they will not be able to choose to return to Income Management in the future, even though Income Management is ongoing in the NT.
    - However, if the CDC program is not extended beyond the current sunset date, people who have transitioned from Income Management to the CDC program will be put back onto Income Management at that time.
  + In the NT, there are three categories of criteria for participation in the CDC program. While these criteria largely replicate the criteria for Income Management, there are some key differences. The categories are:
    - people meeting general requirements relating to income support payments (this general category collapses the ‘disengaged youth’ and ‘long term recipient’ categories of Income Management criteria, but does not include the threshold relating to the length of time a person has received payments) (referred to in this document as a **general program participant**);
    - people referred to the program by a child protection officer (referred to in this document as a **child protection program participant)**; and
    - people designated as ‘vulnerable welfare payment recipients’ (referred to in this document as **vulnerable welfare recipient** program **participant**).
  + A person is a **general program participant** if:
    - the person usually lives in the NT;
    - the person is an eligible recipient of a specified Centrelink payment;
    - the person has not reached pension age;
    - the person is not undertaking full time study;
    - if the person has a payment nominee, that nominee is subject to income management or CDC;
    - the person has made a request to become a program participant;
    - the Secretary has given the person a notice that they are now a program participant;
    - the person is, or has been, subject to Income Management; and
    - the person has not been approved to exit or be exempt from the CDC program.
  + A person is a **child protection program participant** if:
    - the person usually lives in the NT;
    - the person, or the person’s partner, is an eligible recipient of a specified Centrelink payment;
    - the person has not reached pension age;
    - a child protection officer of the Northern Territory, or an officer or employee of a recognised State/Territory authority of the Northern Territory, gives the Secretary a written notice requiring that the person be a program participant ;
    - if the person has a payment nominee, that nominee is subject to income management or CDC;
    - the person is not undertaking full time study;
    - the person has made a request to become a program participant;
    - the Secretary has given the person a notice that they are now a program participant;
    - the person is, or has been, subject to Income Management under the child protection or state referral categories; and
    - the person has not been approved to exit or be exempt from the CDC program.
  + A person is a **vulnerable welfare recipient program participant** if:
    - the person usually lives in the NT;
    - the person is an eligible recipient of a specified Centrelink payment;
    - the person has not reached pension age;
    - the person is a ‘vulnerable welfare payment recipient’ – which is determined by the Secretary on an individual basis, where a person is experiencing an ‘indicator of vulnerability’ (financial exploitation, financial hardship, failure to undertake reasonable self-care, or homelessness or risk of homelessness);
    - if the person has a payment nominee, that nominee is subject to income management or CDC;
    - the person is not undertaking full time study;
    - the person has made a request to become a program participant;
    - the Secretary has given the person a notice that they are now a program participant;
    - the person is, or has been, subject to the IM program under the vulnerable welfare recipient category; and
    - the person has not been approved to exit or be exempt from the CDC program.
  + For people who opt to transfer from IM to the CDC, the percentage of payments quarantined will initially be the same as applied under Income Management.
  + The full amount of any lump sum payments and arrears will be quarantined onto the CDC.
  + On transitioning from Income Management to the CDC program, any credit balance of a person’s IM BasicsCard will be transferred to their CDC.
  + Deductions set up under Income Management will stop when a person transfers to the CDC. The person will need to set up new deductions for payments such as rent and utilities to avoid missing payments. Services Australia advises that Centrelink can assist with this.
  + Once a person has been transitioned to the CDC program from Income Management, they will then need to follow the requirements applicable to the CDC program if they wish to exit or be exempt from income quarantining – i.e., they will need to meet the responsible management of affairs or wellbeing tests (see below).
* Voluntary participation**:** From 17 March 2021 people in the NT who are not subject to Income Management can volunteer to participate in the CDC program.
  + People who volunteer for the CDC will have 50% of their payment quarantined to the card, with the balance credited to their normal bank account. The full amount of any lump sum payments and arrears will go onto the CDC.
  + Voluntary participants can exit the CDC program at any time.

### Cape York, Queensland

From 17 March 2021 the “Cape York area” is CDC program area. The Cape York area is an area determined by Ministerial Instrument. The area currently comprises communities and associated outstations of:

* Aurukun
* Coen
* Hope Vale
* Mossman Gorge
* Doomadgee.

The Cape York CDC program, and previous Income Management program, operates very differently to income management in other areas. It is delivered in partnership with an independent statutory body called the Family Responsibilities Commission (FRC) which considers people’s individual circumstances and needs before referring them to income management for a specified period of time.

##### Transitions from Income Management

* + Existing Income Management participants in the Cape York Region (approximately 150 people), are being compulsorily transitioned to the Cashless Debit Card from 17 March 2021. Centrelink remote servicing teams have been visiting the Cape York area to distribute CDCs.
  + Income Management sunsets in Cape York on 31 December 2021.
  + There is no age cap for the Cape York CDC program, for either compulsory participants or voluntary participants. People transitioning from Income Management to the CDC retain the restricted percentage set out in their notice (they do not default to an 80% restricted payment rate).
  + Once a person has been transitioned to the CDC program from Income Management, they will then need to follow the requirements applicable to the CDC program if they wish to exit or be exempt from income quarantining – i.e., they will need to meet the responsible management of affairs or wellbeing tests.

##### New CDC program participants

* + The Cashless Debit Card does not automatically apply to everyone on a trigger payment in the Cape York Region. The Family Responsibilities Commission will determine new participants and the percentage to be quarantined for their restrictable payments.
  + A person is subject to the Cashless Debit Card under the Cape York measure, if:
    - They or their partner receive a specified Centrelink payment; or
    - They have a payment nominee who is a Cashless Debit Card participant or is subject to Income Management; AND
    - The FRC has given a valid notice to the delegate requiring that the person be subject to Income Management, and the notice has not ended or been revoked or withdrawn.
  + Once a person is on the Cape York CDC program, they will remain on the program, even if they move out of the program area. A person will cease to be a Cashless Debit Card participant in the Cape York Region when their notice expires.

# All CDC Program Areas

### Voluntary participation

* Requests: a person may request, orally or in writing, to participate in the CDC program if they meet all of the following criteria:
  + they are not subject to the Income Management program;
  + they are receiving a “trigger payment” or an age pension (note that unlike for compulsory CDC participants, there is no upper age limit for voluntary CDC program participants);
  + their usual place of residence is, becomes or was within a program area; and
  + their ABSTUDY payments (if any) including living allowance are not being paid to another person.
* Withdrawing from voluntary participation**:** A voluntary participant may withdraw from the CDC program at any time.
* Secretary’s discretion**:** The Secretary may determine that a person who is a voluntary participant is not to be subject to cashless welfare (CDC) arrangements. The person must be notified of the decision, in writing.
* Private income participation: A person may also volunteer for the CDC program with respect to their private income if they are not receiving Centrelink income. As such an arrangement does not involve social security payments, it is not governed by the *Social Security (Administration) Act 1999* (Cth), but DSS indicates that the CDC will operate the same way as it does for all participants.

### Exemptions from compulsory participation

* Wellbeing risk**:** A person must be exempted from compulsory CDC participation if the Secretary is satisfied that participating “would pose a serious risk to the person’s mental, physical or emotional wellbeing”.
  + There is no requirement that a person apply for exemption on these grounds for an exemption to be considered
  + There is no requirement for the Secretary to enquire into whether participation would pose a serious risk to the person’s mental, physical or emotional wellbeing.
* Exemptions may be revoked**:** Where a State or Territory government employee or officer considers that it is necessary for a person to be a program participant for ‘medical or safety reasons’ relating to the person or the person’s dependants, the officer or employee may request the Secretary to reconsider the wellbeing exemption. If the Secretary receives such a referral and is no longer satisfied that participating in the CDC would pose a serious risk to the person’s wellbeing, the Secretary must revoke the exemption.
* Appeal rights**:** a person can seek that a decision to refuse exemption be reviewed by a Centrelink Authorised Review Officer. Authorised Review Officer decisions can be appealed to the Administrative Appeals Tribunal.

### Exit applications

* “Reasonable and responsible management of affairs”**:** A person may apply to the Secretary to exit the cashless welfare arrangements if they can demonstrate reasonable and responsible management of their affairs. Exit applications are determined on a case by case basis.
* Form of application: Exit applications must be made in writing using a form approved by the Secretary (a standard proforma), and should be accompanied by the documents and other information required by the form.
* Ministerial guidelines**:** The recent amendments provide for a new Ministerial power to make a legislative instrument determining decision-making principles for existing exit criteria.
* Exit criteria**:** The Secretary may determine that the person is not a program participant if the Secretary is satisfied that the person meets the following criteria:
  + they can “demonstrate reasonable and responsible management of (their) affairs (including financial affairs), taking into account all of the following:
* the interest of any children for whom they are responsible
* convictions for any offences, or imprisonment for such an offence within in the last 12 months
* risk of homelessness
* the health and safety of the person and the community
* their responsibilities and circumstances
* their engagement in the community, including employment or efforts to obtain work; and
* they satisfy any requirements set out in an instrument.
* Notices**:** The person must be notified in writing of the Secretary’s decision. If the Secretary refuses the exit application, the notice of the decision must set out the reasons for the refusal.
* Deemed approvals**:** If the Secretary has not made a decision on a person’s (valid) application after 60 days, then the Secretary is taken to have approved the exit application.
* Appeal rights**:** a person can seek that a decision to refuse an exit application be reviewed by a Centrelink Authorised Review Officer. Authorised Review Officer decisions can be appealed to the Administrative Appeals Tribunal.

### Reconsideration of exit determinations

* Reversal of exit approvals**:** If a health or community worker considers that an exit decision should be overturned for medical or safety reasons, they may request that the Secretary review the exit approval.
  + If the Secretary receives such a request and the Secretary is no longer satisfied that the person can demonstrate reasonable and responsible management of their affairs, the Secretary must revoke the determination.
  + The Secretary has the power to review and revoke any existing or future exit determinations if no longer satisfied that a person is reasonably and responsibly managing their affairs.
* Person may reapply to exit**:** A decision to revoke an exit determination does not prevent the person from making another application to exit the CDC program.

### Unrestricted access - tech issues, natural disaster, national emergency, financial hardship

* Card use issues**:** A person can be given unrestricted access to their payments for a period if they are unable to use or their CDC card or access their account, as a direct result of:
  + a technological fault or malfunction with that card or account; or
  + a natural disaster; or
  + if a national emergency declaration (within the meaning of the National Emergency Declaration Act 2020) is in force—an emergency to which the declaration relates.
* Financial hardship: A person can also be given unrestricted access to their payments for a period if they are “in severe financial hardship as a result of exceptional and unforeseen circumstances”.

### % adjustments as a result of directions by community body

* Community body directions**:** A “community body” (specified community organisations that provide care, protection, welfare or safety services) may give the Secretary a written direction to vary the restricted portion for a compulsory program participant or a voluntary participant. The written direction:
  + must reflect an agreement between the community body and the person; and
  + may only be changed by the community body with the agreement of the person; and
  + must be revoked by the community body if there is no longer agreement between the body and the person; and
  + ceases to have effect on and after the day that the community body stops being authorised as a community body.
* % range**:** The percentage amounts specified in the written direction may be a percentage in the range of 50% to 80% for the restricted portion.

1. Indue Ltd (ABN 97 087 822 464) is an Authorised Deposit Taking Institution owned by credit unions and has been operating for over 40 years. Indue is licensed and regulated through the Australian Prudential Regulation Authority (APRA). <https://www2.indue.com.au/> [↑](#footnote-ref-1)
2. Parliament of Australia BILLS DIGEST NO. 33, 2020–21. Accessible at <https://parlinfo.aph.gov.au/parlInfo/download/legislation/billsdgs/7669864/upload_binary/7669864.pdf> [↑](#footnote-ref-2)
3. Ibid [↑](#footnote-ref-3)