

Practical Guidance to Operating in the NDIS



A practical guide for organisations supporting NDIS participants.
Including information, tips and frequently asked questions.



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Disclaimer: National Disability Services Limited (NDS) believes that the information contained in this publication is correct at the time of publishing (July 2019). However, NDS reserves the right to vary any of this publication without further notice. The information provided in this publication should not be relied on instead of other legal, medical, financial or professional advice.

HELLO

INTRODUCTION

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The introduction of the National Disability Insurance Scheme (NDIS) has reformed the way people with disability receive supports in Australia. This document provides guidance to NDIS providers as they change and adapt to the new systems and processes introduced by NDIS. Topics included in this resource have been selected in response to feedback from the Sector.

Using this document

This document is a combination of guidance, advice, tools and links to further information and resources. Each section details an area of NDIS operations and illustrates information using sector examples and scenarios.

Other important NDIS resources

This resource is not designed to replace NDIS policy or guidance, and should be considered in conjunction with other important resources including:

NDIS Act 2013

The Act of parliament which governs the NDIS.

NDIS Operational Guidelines

Provides detail and guidance when applying the legislative rules stipulated in the NDIS Act 2013.

NDIS Provider Toolkit

Provides guidance for providers covering a range of registration, payment and record keeping information.

NDIS Website

Contains information targeted at both NDIS participants and service providers, including factsheets and practice guidance.

NDIS Quality and Safeguards Commission

An independent agency which regulates the quality and safety of NDIS supports and services. Its website has a range of information for NDIS participants and providers.

NDIS Pricing

Provides pricing policy guidance and rules and a Support Catalogue that lists all NDIS registration groups, support items and price controls.

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The NDIS funds supports that relate specifically to a person's disability support needs. In an NDIS plan, funding is split into three broad groups: [core](#), [capital](#) and [capacity building](#). A participant will receive funding in these support categories depending on the goals they have identified during their NDIS planning meeting and the NDIS [Reasonable and Necessary](#) funding criteria.

A participant may choose to have their funds managed by a Plan Manager, by the National Disability Insurance Agency (NDIA) or they may request to self-manage these funds. A participant may also choose to use a mixture of these fund management options.

Developing a plan and allocation of funds

A participant will have their plan developed by a planner from either the NDIS Partners in the Community (Local Area Coordinator (LAC) or Early Childhood Early Intervention (ECEI)) or the NDIA. This occurs during a planning conversation, also referred to as a pre-planning or planning meeting. Allocation of funds is the responsibility of an NDIA delegate, regardless of whether the planning meeting occurred with the LAC or the NDIA. The LAC does not set or approve the funding value.

Participants who experience complexity in their lives will have their planning conducted by the NDIA (approximately 20%) and LACs will undertake planning with other participants (80%). Complexity relates to personal and situational factors such as: having no next of kin, complex support needs or interaction with multiple service systems e.g. justice, health, child protection, etc.

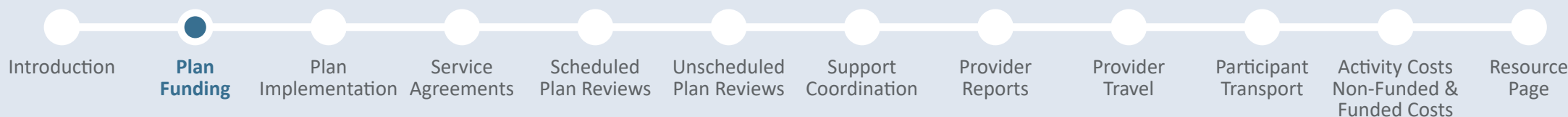
Participant booklets

The NDIA has developed four planning booklets to support participants prepare for their planning meeting. Providers are encouraged to use these booklets to guide discussions with their clients when preparing for their planning meeting and as a support as they implement and review their plan.

- Booklet 1 – [Understanding the NDIS](#)
- Booklet 2 – [Planning](#)
- Booklet 3 – [Using your NDIS plan](#)
- Booklet 4 – [Let's talk about work](#)

A service provider should consider

- Providing participants with documentation of the supports they receive, the frequency of supports and support purpose in relation to outcomes, [NDIS objectives](#) and the participant's goals each time they have a planning meeting or plan review
- Discussing with the participant how their current supports relate to functional impact of their disability and their goals, and not to a specific diagnosis
- Providing the participant with supporting evidence. This might include copies of: incident reports, therapy reports, behaviour support plans, a list of programs undertaken to date.


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New NDIS language

The NDIS has introduced new concepts, such as choice and control, and reasonable and necessary. It has also changed the way supports are described and introduced a number of new words and phrases. Short Term Accommodation (STA) has replaced respite and new phrases like, 'building the participant's capacity to', or 'increasing the participant's social and community participation' are important additions to the sector's vocabulary.

The [NDIS glossary of terms](#) page and the [NDIS acronyms](#) page is a great place to start understanding the new language. More information on key NDIS phrases can be found in the [Report writing Practical Guide](#) in this document.

Functional impact of a disability

To be considered eligible for the NDIS a person needs to provide evidence that they have a disability which is likely to be permanent. They also need to demonstrate the functional impacts the disability has on how they live their life. The functional impact of the disability is used to identify the individual's support requirements and associated NDIS plan funding. A participant's diagnosis does not appear on their plan and will not determine the amount of funding included in a plan. People with the same disability will receive different funding amounts because of their individualised circumstances, and the way in which they experience their disability.

The NDIA considers functional impact of a person's disability to participate in activities in the following broad areas:

- Communication
- Social interaction
- Learning
- Mobility
- Self-care
- Self-management

[NDIS Operational Guideline section 8.3](#), lists further details.

Reasonable and Necessary framework

[Reasonable and necessary supports](#) should:

- Support people with disability to pursue their goals and maximise their independence
- Support people with disability to live independently and to be included in the community as fully participating citizens
- Develop and support the capacity of people with disability to undertake activities that enable them to participate in the community and in employment.

In order for a support to be funded in an NDIS plan, the following criteria must be satisfied. The NDIS funded support:

- [will assist the participant to pursue their goals](#)
- [will assist the participant's social and economic participation](#)
- [represents value for money, relative to both the benefits and the cost of alternative support](#)
- [will be, or is likely to be, effective and beneficial for the participant, having regard to current good practice](#)
- [takes account of what it is reasonable to expect families, carers, informal networks and the community to provide](#)
- [is most appropriately funded or provided through the NDIS, and is not part of mainstream universal service obligation; or part of reasonable adjustments required under anti-discrimination law.](#)



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Plan Funding - management options

Management Option	How will supports be paid	Type of provider the participant can engage and their price limit
Agency Managed (NDIA)	Providers will submit a payment request via myplace provider portal	Registered provider only, with price limit set by the NDIS Price Guide
Self-Managed	Providers will invoice the participant directly for supports delivered	Registered provider with price limits set by the NDIS Price Guide and/or unregistered providers with no price restrictions
Plan-Managed	Providers prepare an invoice to be sent to the Plan Manager. The Plan Manager claims from the NDIA and then pays the provider	A participant who is plan-managed can purchase supports from both registered and unregistered providers. Because plan-managers are registered providers they can only claim up to price limits set by the NDIS Price Guide.

Misuse of participant funds

It is against the NDIS Terms of Business for a provider to deliver supports and then submit a claim against an NDIS line item that does not align with the support items description and purpose.

Misuse of funds example: A provider claims community participation funding for additional support coordination hours.

Type of NDIS supports and flexibility of funding

Support Budget	Example activities	Flexibility of funds
Core	Personal care, community activities, consumables and transport	Flexible across all the areas where funding is allocated
Capital	Equipment, technology, modifications	Not flexible and generally require a quote
Capacity Building	Skills building, training, employment, support coordination, therapies	Generally flexible within each sub category

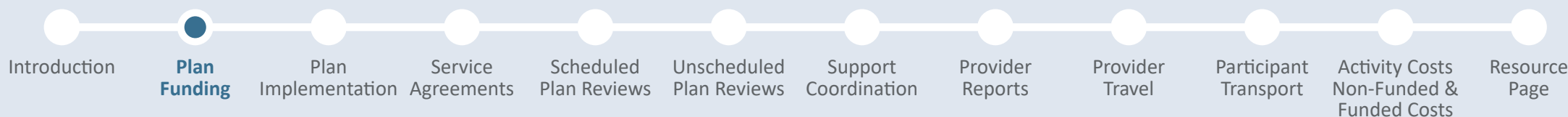
Who can view and monitor plan expenditure?

- The NDIS participant: each participant is issued with a monthly payment statement online in their myplace portal. The statement will include information about supports provided in the month, the available remaining budget, committed budget and spent budget.
- The NDIA
- A Support Coordinator (with permission from the participant)
- A Plan Manager (with permission from the participant)
- A provider can monitor plan spend against a service booking.



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Tips for Service Bookings (Agency Managed Funds Only)

- A service booking will quarantine the amount of funds required to deliver a support over the agreed period
- A service booking may contain all, or a portion, of the allocated funds attributed to the support category
- For core supports, make the service booking at the highest level to allow for flexible use of funds across the budget, inclusive of daily supports, transport, consumables and, community and social activities
- The system will reject a service booking if there are inadequate funds remaining to cover the booking.

Frequently Asked Questions

Why aren't plans more specific?

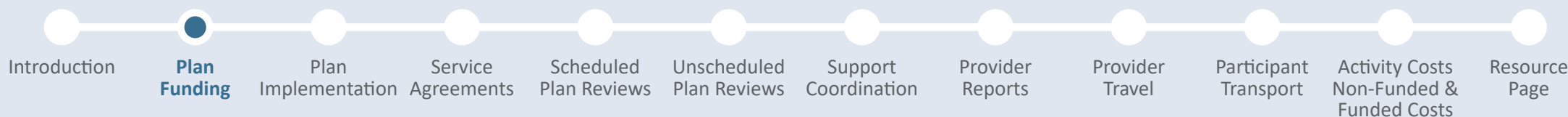
NDIS plans are mostly written to have open ended goals. This encourages the participant and the provider to have a conversation about how best to use funding to meet these goals. The NDIA does not decide how a participant should use their funding but rather gives the participant the **choice and control** over how they spend their funds.

Why aren't plans the same for people with the same disability?

Plans are based on the individual's experience of their disability, their associated needs and their goals. Plan funding takes into consideration the individuals informal supports, connection with community and mainstream and other factors. As such, no two plans are the same and will change overtime as needs change.

ADDITIONAL RESOURCES

-  **Website:** NDIS website: Supports funded by the NDIS
-  **Document:** Council of Australian Governments (COAG): Principles to Determine the Responsibility of the NDIS and Other Service Systems
-  **Podcast:** NDS podcast: Getting it right - NDIS Participant Planning


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When a participant receives their NDIS plan they can obtain support to understand its inclusions and connect with services by engaging with a:

- [Local Area Coordinator \(LAC\)](#)
(NDIA partner in the community)
- [Early Childhood Early Intervention \(ECEI\)](#)
(NDIA partner in the community)
- [Support Coordinator or Specialist Support Coordinator](#)

The role of the provider

It is the responsibility of the service provider to discuss the supports they have on offer and how these supports will assist the participant to achieve their goals. Support Coordinators and the NDIS partners in the community have been funded to help participants to understand and implement their plan, including connecting with NDIS funded supports, community and mainstream services. A participant who does not have funded Support Coordination included in their plan is able to access support through the LAC. The LAC will also assist people who are not eligible for the NDIS to connect with mainstream services.

The role of the LAC in plan implementation

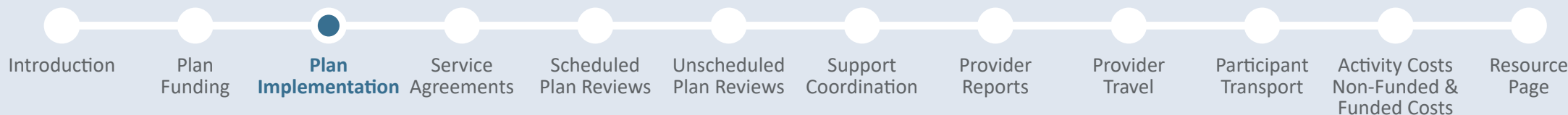
- Once the plan is approved the LAC should conduct a 1:1 plan implementation meeting to discuss its inclusions and how to implement the plan
- The LAC should be contactable for ongoing plan implementation support
- The LAC may run group capacity building workshops on topics such as using the portal, making service bookings, self-managing plan funds
- The LAC should check in with participants to ensure their support arrangements are satisfactory

The role of a Support Coordination in plan implementation

- To support participants engage in the community, and build participant capacity to coordinate their own supports.

Common tasks undertaken:

- Assist the participant to understand the supports in their plan
- Ensure the participant is aware of complaints mechanisms
- Assist the participant to navigate NDIS processes
- Link participant to funded supports
- Make referrals for any assessments in plans
- Ensure equipment supports are managed
- Ensure service bookings are complete
- Explore mainstream and community supports
- Assist the participant to resolve points of crisis
- [Further information in the Support Coordination Practical Guide](#)


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Frequently Asked Questions

What if I can't see the plan?

A participant does not have to show anyone their plan, including their Support Coordinator.

Strategies need to be developed to efficiently and effectively collect relevant information if the participant does not share their plan and/or the Support Coordinator hasn't received a request for service.

This process will include:

1. Asking about plan goals and which categories funds have been allocated to
2. Identifying any previous supports – pros and cons of these, what the participant wants to change
3. Identify opportunities for goals achievement highlighting responsibilities of mainstream services, options in the community, role of informal supports and possibilities available depending on where funds are in the plan – core, capital and/or capacity building
4. Explore alternatives, assisting the participant to understand plan budgets and flexibility within support categories.

Try not to focus on what you do not know but rather on what can be achieved.

What does the term 'plan activation' mean?

Plan activation refers to when a participant begins using their plan, and a provider claims for supports delivered.

What does the word 'stated' mean in the details section of the plan?

Stated supports can only be used to purchase supports specifically identified in the plan. Supports can be made Stated if the NDIA identifies it is essential in ensuring that a participant achieves a specific outcome, for example where an item of equipment or an assessment may be vital to the achievement of the participant's goals.

What does 'in-kind' mean in the details section of the plan?

Some supports have been paid for in advance to providers. If participants are receiving service classified as in-kind, funds will not be allocated in a plan for these supports. The plan and/or a Support Coordinator's Request for Service should identify the in-kind provider.

Additional Resources

 **Website:** Get in touch with your regions LAC, ECEI or NDIS office



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A Service Agreement is a consumer contract between an NDIS provider and participant which details what supports will be delivered and how they will be delivered.

The [NDIS Terms of Business](#) stipulates that a Service Agreement is required for the provision of NDIS services for GST, record keeping and payment assurance purposes. The [NDIS Quality and Safeguards Commission's Practice Standards and Quality Indicators Guidelines](#) require that a Service Agreement exist, preferably in writing – except for providers of Specialist Disability Accommodation for whom written Service Agreements are mandatory.

It is highly recommended that an organisation develop an individual Service Agreement with each participant.

Benefits of having a Service Agreement

A Service Agreement safeguards both the provider and the participant throughout the course of their engagement. In the event that something goes wrong, the agreement will act as a point of reference and outline the obligations and expectations of each party. The agreement should detail the scope of support, and account for any individual or organisational requirements and risks. From a provider perspective, a Service Agreement is the principal mechanism for managing risks arising from the business relationship with the participant.

The Service Agreement is an opportunity to document how services provided will align with the participant's goals and detail expected outcomes.

Signing a Service Agreement

The NDIS Quality and Safeguards Commission and the NDIA acknowledge that in some circumstances a written agreement may not be achievable.

An organisation should make every attempt to ensure the Service Agreement is understood and agreed to by the participant. Where possible, NDS strongly advises that all providers have a written and signed Service Agreement in place with each of the participants they support as a matter of good practice.

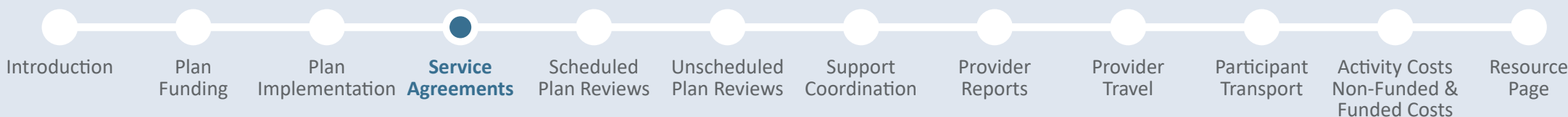
Unsigned Service Agreement

Where a Service Agreement remains unsigned, providers should document the steps they have taken to facilitate the participant's understanding of the Service Agreement, the supports they are receiving and the costs.

The provider should document any actions that indicate an agreement has been reached between the participant and the service provider e.g. discussions, verbal agreements and process. When determining how to approach a circumstance where a participant is unable or unwilling to sign a Service Agreement, service providers should assess risk and make a business decision accordingly. Each participant should be issued with a copy of their negotiated service agreement, regardless of whether it has been signed.

Who can sign a Service Agreement?

A participant, their nominee or guardian can provide consent and sign a Service Agreement. Consent can be made in a number of ways, these include and are not limited to; verbal consent, written consent or via communication aid. An NDIS provider or Support Coordinator cannot sign a Service Agreement.


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Format of a Service Agreement

Changing and updating a Service Agreement

Schedule of Supports

[illegible]



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Interim Service Agreement

An interim Service Agreement will allow providers to bill against the plan before the full Service Agreement is in place.

A Self Managing participant received services from us for two weeks while we were developing the Service Agreement and has now decided to change providers, can we claim for services delivered?

To protect the provider an Interim Agreement would enable them to claim for services delivered whilst Service Agreement negotiations are completed. An Interim Agreement is likely to be for a shorter term and designed to cover only the most significant matters: an agreement on the provider's part to deliver the service and agreement on the participant's to pay for it.

Providing supports or activities that are not detailed in the Service Agreement

If a provider has not detailed [charges for supports or additional non-funded activity related costs](#), these items cannot be charged. A provider is bound by the signed Service Agreement and unable to charge additional costs until a time that the Service Agreement is amended to include these items.

If a service provider charged a participant for hidden costs, this would be considered fraudulent activity.

Inclusions to consider:

Where applicable, each participant's Service Agreement should include terms and conditions relative to:

- Participant transport
- Provider travel
- Billing for non-face-to-face supportst
- Billing for report writing
- Cancellations
- Ability to renegotiate prices if changes occur to NDIS price limits within the agreements period
- Ability to renegotiate or terminate agreements if incomplete information about the participant's needs disclosed
- Payment method and frequency, depending on funds management
- Provision of supports when there is a gap between plans at the point of scheduled review
- Any matter requiring participant consent e.g. Sharing information with providers of other NDIS supports
- Disclosure of information regarding real or perceived risks to the organisation due to the participants support requirements

A provider may choose to cease services if a participant does not disclose behaviours of concern which may impact appropriate levels of support and/or the health and safety of staff.


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Frequently Asked Questions

Can we have a clause to say that if a participant runs out of money in their plan, they must pay for supports delivered as an out of pocket cost expense?

Yes. Participants, Plan Managers, Support Coordinators and the LAC can track and monitor use of funding. A provider can track spending against active service bookings which quarantine or lock plan funds. While it would be reasonable for a provider to stipulate that a participant pay for supports delivered where plan funds are not available, the provider should ensure they are providing supports in line with their Service Agreement and monitor the rate at which funds are used. Providers need to be transparent about debt recovery processes, clearly stipulating this in the Service Agreement.

Can we charge higher prices when a new Price Guide is released?

The NDIA generally releases a new price guide at the beginning of the financial year. If it contains price changes for the supports you deliver, you are able to charge up to the maximum price if;

1. The active Service Agreement contains a clause to this effect and the participant has agreed to its terms
2. This is discussed with the participant prior to price changes taking effect. All amendments to the Service Agreement must be agreed to by the participant and the provider






Can I make a service booking if the plan is plan managed?

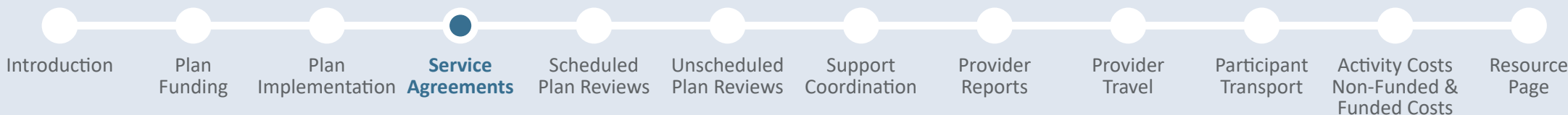
No, where funds are plan managed, only the Plan Manager can create a service booking. Providers should consider receiving consent from the participant to share their Service Agreement and schedule of supports with the participant's Plan Manager to ensure the service booking is accurate and to confirm the billing cycles of both parties.

What are billable non-face-to-face supports?

Non-face-to-face supports are activities which might occur before or after the delivery of a funded support. This might include time spent coordinating and organising an activity or writing a progress or incident report. Not all supports can claim for this time, the NDIS Support Catalogue indicates when this time can be claimed. This does not include back of house administrative costs, such as, intake, rostering or submitting claims, and does not apply to groups. Further information found in the [NDIS Price Guide 2019/20](#).

Additional Resources

-  **Toolkit:** [NDIS Provider Toolkit: 5.1 Service Agreements](#)
-  **Website:** [Making a Service Agreement – Information for participants](#)
-  **Website:** [NDIS Nominees Operational Guideline](#)
-  **Document:** [NDIS Practice Standards and Quality Indicators](#)
-  **Document:** [NDIS Service Agreements: Making Choice and Control More Real, Office of the Public Advocate](#)


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SCHEDULED PLAN REVIEWS

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Each NDIS plan has a defined start and end date. A new plan is required for ongoing funding. The process for developing a new plan is called a scheduled plan review.

NDIS scheduled plan reviews are cyclic and may be referred to as a 'periodic review' or an 'anniversary review'. They will occur towards the end date of the plan and generally be undertaken face-to-face by either the NDIA or the Partners in the Community (LAC or ECEI).

Timeframe for a scheduled plan review

An NDIS plan is made for a set time period, generally anywhere between 3 – 36 months in length. The plan start and end date is listed on each plan as a specific timeframe. The planner will be alerted to 6-8 weeks before a plan is due to expire and will contact the participant to develop a new plan.

The NDIA can specify the review date as a date (i.e. 1 May 2020), or as a circumstance (i.e. when a child commences school), or as both such as "Within four weeks of the participant commencing employment, or the period of one year, whichever occurs sooner"

Tip: Providers should consider documenting each participant's review date in their Client Management System. A reminder 6 – 8 weeks prior will allow time to prepare SIL quotes, discuss next plan requirements and provide reports to the participant's Support Coordinator and/or Local Area Coordinator.

[NDIS Planning Operational Guideline – setting the plan review date](#)

Purpose of a scheduled plan review

The purpose of a scheduled plan review is to develop a new plan. The planner will review how the participant has used their existing plan, including but not limited to; progress towards goals, and outcomes of capacity building support. It is an opportunity for the participant to identify any previous or potential changes in their life, reassess their goals and discuss inclusions in the next plan.

Preparing for the scheduled plan review

Utilise the [NDIS participant booklets](#) when preparing for a scheduled plan review.

The providers role in the scheduled plan review process

Ensure case notes are kept and robust reports are submitted on time to the Support Coordinator and/or Local Area Coordinator as required.

Why the new plan might be different

- A participant's support needs may have changed
- A participant has achieved or changed their goals
- New evidence or assessments are provided to NDIA
- Provider reports do not include sufficient detail about how supports were used and outcomes achieved to justify further funding

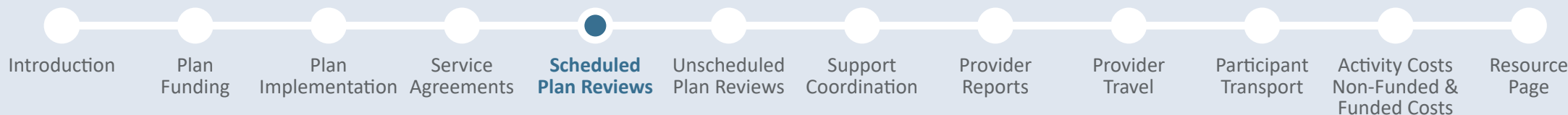
Participants who entered the scheme under early intervention requirements

The child's eligibility status will be reviewed once the child turns seven and during the following scheduled plan review.



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Frequently asked questions

What if a plan runs out of funds before the scheduled plan review, do we continue to provide services?

No. If a support budget runs out of funds prior to the scheduled review, an unscheduled review should be completed at the request of the participant. A provider should consider ceasing service with the participant and encourage them to discuss their funding with their Support Coordinator and/or the Local Area Coordinator. If there are no funds available there are no clear mechanisms for providers to be paid for service provision.

What if a plan runs out of funds while there is a gap between the first plan and the issue of the next plan?

A participant may have a gap between their new plan's start date and the previous plan's end date. The expired plan's end date will be extended to the day before the new plan starts. Once this occurs, providers will be able to claim for supports delivered during the gap period. Providers should continue to deliver any supports which are received regularly, as core and capacity building budgets should be increased in line with the extra days in the expired plan. Capital budgets will not be extended as they are generally a one-off support. The provider would keep records of the support provided in this period, keeping note of how these supports are consistent with those previously provided. Participants can check if their previous plan has been extended through the myplace participant portal and are encouraged to communicate this to their support providers. Further information found in the ['Paying providers when there is a gap in-between plans'](#) fact sheet.

What if a participant chooses not to participate in a plan review meeting?

If a participant chooses not to have a plan review meeting their funding will cease.

Once a plan is in effect, how long can a participant expect to wait to receive a copy of that plan?

7 days after the plan's activation, as stipulated in the [NDIS Act 2013 Sect 38 Copy of plan to be provided](#).

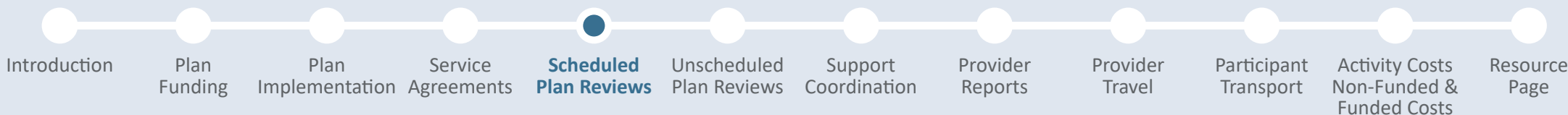
If a participant has underspend on their plan, will they receive less funds in the next plan?

If there has been underutilisation of funds this does not automatically mean less funds will be allocated in the next plan. The participant should provide reasons for funding underspend such as difficulty getting supports in place, or extended period of time spent in hospital.



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A participant has the right to ask for a review of decisions made by the NDIA at any time. The type of review conducted will depend on the reasons for review and the circumstance in which the review is undertaken. The [Review of Decisions Operational Guideline](#), lists which decisions can be reviewed. When the participant's plan is reviewed, it is reviewed in its entirety and the participant is issued with a new plan.

The role of the provider

An unscheduled plan review should be conducted on the initiative of the participant. A provider can support the participant to understand the process and to gather evidence for a review but should not initiate the application for review or submit the review on a participant's behalf.

Providers should not advocate for a participant or tell them to submit a review. Managing expectations is critical. If a provider is concerned that the funding allocations will not meet the needs of a participant they should encourage the participant to visit their local LAC office or discuss with their Support Coordinator.

The role of the Local Area Coordinator

A participant may seek support from the Local Area Coordinator or the Early Childhood Early Intervention partner in the community to submit an unscheduled plan review. The LAC and ECEI can advise on NDIS process and requirement, but cannot write or submit a review on the participant's behalf.

Changing the statement of goals, objectives and aspirations

A participant may change their statement of goals, objectives and aspirations at any time. Although a new plan will be created reflecting these new goals, the existing supports will remain the same.

Key points:

- Changing the statement of goals and aspirations may or may not trigger a plan review
- The NDIA can instigate a plan review at any time and will do so if the change of goals substantially impacts the supports required to achieve these goals
- "The Agency must provide a copy of the new plan to the participant within 7 days of receiving the changed version of the participant's statement of goals and aspirations" [NDIS Act 2013, SECT 47](#)

Initially Jane's goal was to meet a boyfriend and start a relationship. Jane has decided that she doesn't want a boyfriend anymore and would like to meet some new friends instead.

Jane may wish to change her goals and aspirations for greater flexibility in the use of her plan funding and associated activities.

A participant might consider the flexibility of their goals prior to requesting a plan review.

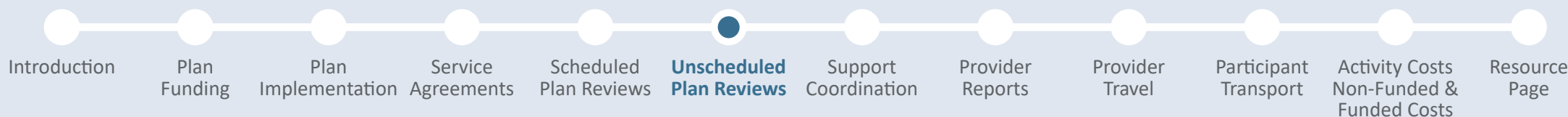
Administrative Appeals Tribunal (AAT)

A participant can lodge a review with the AAT once they have satisfied the NDIA's internal review process. AAT decisions do not set legal precedent, with decisions made on the basis of evidence and individual circumstances. [The Administrative Appeals Tribunal website](#) provides further information.



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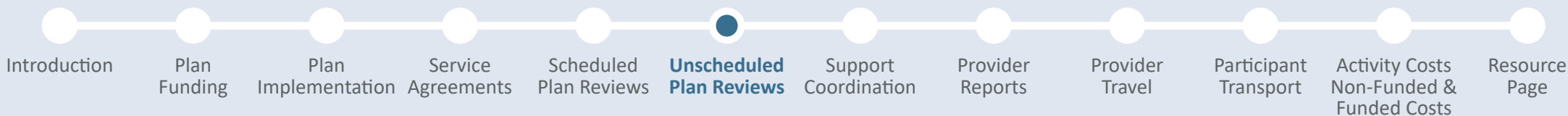
Type	Why might this occur?	When can this occur?	How might this occur?	If the participant is dissatisfied with the outcome, can they engage the AAT?	Important to note	Example	Further information
Section 100 Internal Review	A participant is dissatisfied with a decision made by the NDIA. The NDIS Act 2013, Section 99, Reviewable decisions and decision-makers lists those decisions which are reviewable.	Within 3 months of receiving notice of the decision	The How to Review a Planning Decision page on the NDIS website outlines these options	Yes. Because this is a review of a reviewable decision	The participant should provide new evidence and use NDIS language to justify why evidence provided in the original decision was not considered appropriately	A participant is denied a piece of assistive technology in their NDIS plan and seeks to review this decision within the 3 month period	NDIS Website: How to review a planning decision PART 6--REVIEW OF DECISIONS, SECT 99 - 103 Review of Decisions Operational Guidelines
Section 48 Change of Circumstance / request for review	Something has changed in the participant's life and they need to notify the NDIA and/or request for their plan to be reviewed as it no longer meets their needs. A list of circumstance changes which are reportable to the NDIA can be found on the Change in Circumstance page of the NDIS website	Anytime	Change in Circumstance page of the NDIS website lists how to submit this type of review	No. If a participant is dissatisfied with a decision made by the NDIA as a result of a change of circumstance and/or request for review, the participant must submit a Section 100 internal review within 3 months of receiving notice of that decision. If the participant remains dissatisfied after the notice of Section 100 internal review, they can then engage the AAT.	A change of circumstance may trigger an NDIA instigated review of the entire plan. The NDIS website states, "If you [the participant] fail to notify the NDIA of a change of circumstance and you continue to receive supports that you are not entitled too, you may be asked to repay an amount in respect of the funded support services"	Change of circumstance which may not trigger a plan review: <i>A participant moves interstate</i> Change of circumstance which may trigger a plan review: <i>An informal carer passes away and the participants support needs change, their current plan no longer meets their needs</i>	NDIS Website: Change in circumstance
External review: Administrative Appeals Tribunal (AAT)	A participant is unsatisfied with the outcome of an internal review (section 100). A list of decisions reviewable by the AAT are found on the AAT website	Within 28 days of receiving an unsatisfactory internal review outcome	Information is listed on the AAT website under – How to apply	The participant can take their matter to the Federal Court	A participant can receive support throughout the review process from an independent agency free of charge through the Department of Social Service Disability Advocacy Finder .	Participants should consider reviewing the AAT decision summaries prior to submitting their review	Administrative Appeals Tribunal and the NDIS NDIS Act 2013 Sect 103 Applications to the Administrative Appeals Tribunal

The NDIA may instigate a review of a participant's plan at any time
(Further information found in [The NDIS Act, Section 48 Review of participant's plan](#) and section 5.4 Automatic Internal Review of certain decisions, NDIS Operational Guideline)



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UNSCHEDULED PLAN REVIEWS

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Frequently Asked Questions

If a participant has requested an unscheduled plan review, can they make changes to that request?

According to the [NDIS Act 2013, SECT 101](#), a participant can vary their request for review at any time before the decision on the review is made.

A participant has submitted an unscheduled review of their plan, do we continue to deliver services?

Yes. The plan is active throughout the review process and if there are plan funds available a provider should continue to deliver services. A provider would cease services if the plan funds are exhausted prior to, or during, the review process.

A participant requested an unscheduled plan review and their new plan has less funding it in. Why is that?

When an unscheduled plan is conducted, the entire plan is reviewed and assessed again through the reasonable and necessary criteria. Firstly, there may be instances when the reviewer cannot meet the reasonable and necessary criteria and funding is not allocated, or possibly a goal has been reached in the time frame prior to the unscheduled review and no longer requires funded supports.





Secondly, the plan length may differ. If the new plan is for 6 months as opposed to the reviewed plan of 12 months, the funding amounts will reflect the new time period of 6 months.

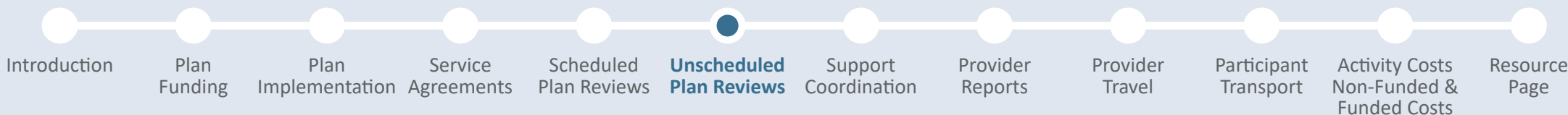
How does the NDIS prioritise unscheduled plan reviews?

The NDIA uses the following list when prioritising reviews

- Risk of harm to the health or well-being of a person
- Instability in the accommodation arrangements of a person, including the risk of homelessness
- Instability in the care arrangements of a person, including the risk of a primary carer not being able to provide care
- Risk associated with the nature of the person's disability
- This list is found on the [NDIS Website 5.7.1 Prioritising requests for review](#)

Additional Resources

-  **Podcast:** [NDIS reviews and the role of the Administrative Appels Tribunal \(AAT\)](#)
-  **Website:** [La Trobe University AAT NDIS Decision Digest](#)
-  **Website:** [NDIS website: 15.1 Planning Operational Guideline](#)
-  **Website:** [DSS Advocacy Finder and support to access the Administrative Appeals Tribunal](#)


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SUPPORT COORDINATION

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Support Coordination is a new role funded by the NDIS. The role of a Support Coordinator is to assist with and strengthen a participant's ability to implement and coordinate the supports they require in their everyday life. These supports include informal, mainstream and community supports as well as their NDIS funded supports. It is time-limited, and aims to support an NDIS participant to participate more fully in the community.

Under the capacity building group of Support Coordination there are two registration groups for providers and three separate line items. Providers registered for Assistance in Coordinating or Managing Life Stages, Transition and Supports can deliver Support Connection and Coordination of Supports which is commonly referred to as Support Coordination.

The registration group Support Coordination enables providers to deliver Specialist Support Coordination and requires relevant qualifications and experience.

Registering to deliver Support Coordination

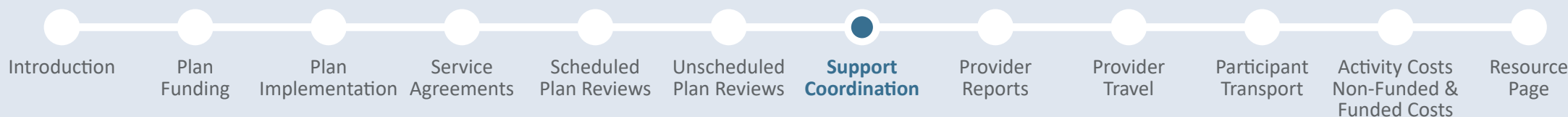
Registration Category	Line item	Professions and Additional Guidance
0106 : Assistance In Coordinating Or Managing Life Stages, Transitions And Supports	07_001_0106_8_3 Support Connection: basic level of support for building a participant's ability to connect with informal, community and funded supports, enabling them to get the most out of their plan and achieve their goals. *this support is generally provided by the regions NDIS Partner in the Community (LAC or ECEI)	A worker may be employed to deliver this support with either relevant industry experience and/or qualification. <ul style="list-style-type: none"> Disability Support Worker (includes Mental Health or Peer Worker) Welfare Worker Developmental Educator Social Worker Aboriginal Health Worker
0106 : Assistance In Coordinating Or Managing Life Stages, Transitions And Supports	07_002_0106_8_3 Coordination of Supports: aims to ensure a mix of supports are used to increase the participant's capacity to maintain relationships, manage their service delivery tasks, live more independently and be included in the community.	
0132 : Support Coordination	07_004_0132_8_3 Specialist Support Coordination: assist a participant to manage challenges in their own support environment and ensure consistent delivery of service. This is a professional registration group.	Specialist Support Coordination is classified within the Professional Registration Groups category in the NDIS Provider Toolkit and requires relevant professional qualifications and experience in supporting coordination for people with complex needs. Qualifications include: <ul style="list-style-type: none"> Psychologist Occupational Therapist Social Worker Other allied health, developmental educator, social or health science professional

Taken from NDIS Guide to Suitability



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Support Coordination versus Case Management

It is important for Support Coordinators, providers of other supports, NDIS participants, their families and carers, to understand that Support Coordination is not the same as the historically funded Case Management. It is recommended that Support Coordinators establish a clear framework of supports and identify those supports which are both in scope, and those which are out of scope of Support Coordination.

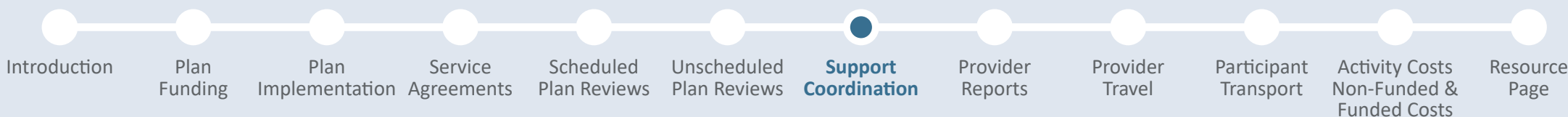
In Scope vs Out of Scope Activities

In Scope Activities		Out of Scope Activities
Support a participant to:	Other activities undertaken:	A support coordinator shouldn't:
<ul style="list-style-type: none"> Understand their plan, the price guide and how budgets can be used Keep up to date with NDIS information, policy changes and ways of working Use the myGov and myplace participant portal Consider and find community and mainstream supports Make decisions about their services and activities Identify and connect with service providers Liaise with providers, explaining their unique goals, needs and preferences Understand and consider Service Agreements Understand and complete service bookings and check service bookings are correct Resolve points of crisis Connect with advocacy services if required Work to build the capacity of the individual to independently action the above points 	<ul style="list-style-type: none"> Submitting timely reports to the NDIA and support the participant to prepare for review Constantly monitor, manage and demonstrate conflicts of interest Support the participant's informal supports to be involved in helping the participant connect with services Ensure required recommendations and quotes are complete Ensure the participant is receiving adequate quality service Monitor budgets and use of funds Report on how receiving funded Support Coordination has built the participant's capacity, however incrementally, and provide justification of support delivered and/or support required going forward 	<ul style="list-style-type: none"> Transport the participant Manage paperwork associated with their supports Choose services on behalf of the participant Roster support staff Collect or pay invoices Provide personal care, community access or other supports Accompany the participant to funded or unfunded services Barter with providers to get the best deal Sign Service Agreements on behalf of the participant Analyse whether the participant should be receiving more money in their NDIS plan Submit review requests without agreement from/ reference to the participant Advocate for the participant Provide an on call 24/7 service



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Some important skills and attributes of a Support Coordinator

- Ability to read, understand and apply complex information
- Ability to think innovatively when using the best fit approach and exploring support options
- Understanding of the important role informal carers play in a person's life
- Knowledge of community and mainstream services. These services should be considered prior to engaging NDIS funded supports
- Strong communication skills

Reporting

Support Coordinators are required to submit a report/s to the NDIA. The time frames for these reports are generally stated on the Request for Service (RFS) which should be received by the Support Coordination organisation from the Local Area Coordinator or the NDIA planner prior to delivering Support Coordination services.

Implementation report

An implementation report is generally submitted two months after engaging with the participant and details the steps taken to implement the plan.

Progress report

The progress report will detail what is and what isn't working well in the plan, address any barriers, provide possible solutions, detail milestones and list outcomes achieved/outcomes progressed. These reports will require the collection of information from other providers, such as case notes and reports as appropriate.

Tip: Don't forget to report on how Support Coordination hours have been used to build the participant's capacity. This documentation is needed to establish the capacity built through Support Coordination and whether there is a need for it in the next plan.

Managing conflict of interest

All NDIS providers must manage conflicts of interest. There are additional requirements for Support Coordinators, especially when the organisation also provides other funded supports. These providers must have documentation that:

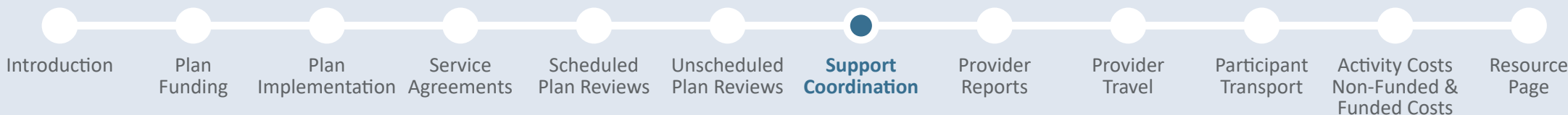
- Details the organisational arrangements in place which keep information separate between teams
- Demonstrates transparency in regards to the participant's options for their coordination of supports
- There is no remuneration provided to staff for participant volume
- Confirms that there are no trailing commissions or percentages on funds managed
- Confirms that the conflict of interest and the above information was disclosed to the participant.

Tip: To be transparent when supporting a participant to choose a provider offer a minimum of three choices (if available) and keep documentation to show this has occurred.



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Frequently Asked Questions

Can a Support Coordinator claim for provider travel?

Yes. Support Coordinators can claim for provide travel in line with the travel policy found in the [NDIS Price Guide 19/20](#).





Can a Support Coordinator provide Specialist Support Coordination under supervision of a Specialist Support Coordinator?

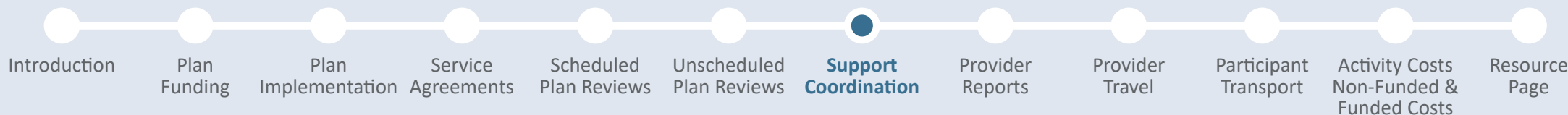
No. The worker who is directly delivering the support must hold qualifications and experience in accordance with the [NDIS Quality and Safeguards Practice Standards and Quality Indicators](#). This would be considered a breach of the [NDIS Terms of Business](#) and [NDIS Code of Conduct](#).

Can a participant ask me to provide monthly updates on how many hours I have used, even though this information is available in the portal?

Yes. Providers must abide by relevant consumer laws regards the provision of receipts and itemised bills. Support Coordinators are also responsible for tracking hours.

Additional Resources

-  **Video:** NDS video: The Skills and attributes of a Support Coordinator
-  **Podcast:** NDS podcast: Capacity building under the NDIS
-  **Podcast:** The COAG Principles and the responsibilities of the NDIS and the other service systems
-  **Website:** Office of the Public Advocate: NDIS Guide to Decision Making


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PROVIDER REPORTS

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The NDIA uses evidence to inform decisions when allocating funding based on the reasonable and necessary criteria. Reports from providers are an important part of this evidence. These reports may be used to inform: capital equipment purchases, document progress towards goals, make recommendations about future supports or inform inclusions in a supported independent living (SIL) quotation.

If report writing is included within the scope of a funded support, this should be clearly stipulated in the Service Agreement and be claimed using the report writing claim type code REPW. If the NDIA requests a provider write a report, funding for this needs to be negotiated with the participant for time to be claimed.

When is report writing included in the scope of a funded support?

It is a reasonable expectation that providers of most capacity building supports report on supports delivered, progression towards or achievement of the participant's goals as well as future recommendations. The [Support Catalogue 19/20](#) provides an indication of which supports are in scope for NDIA reporting. Support Coordinators are required to write reports and may request case notes from providers of core supports and other information such as critical incident reports. Level 3 and 4 assistive technology and home modifications are required to write reports. The NDIS Support Catalogue indicates when report writing is in and out of scope.

Why are provider reports important?

The structure of the report and its inclusions will impact funding decisions during the scheduled and unscheduled review process.

Reports should:

- Articulate the link between the participant's goals, the support delivered, barriers and outcomes
- Clearly identify recommendations for ongoing needs, including both risks and benefits for the participant. Recommendations should consider informal, community, mainstream services and NDIS funded supports
- Be written in NDIS language
- Relate to the [Objects of the NDIS Act](#) and the [Reasonable and Necessary criteria](#)

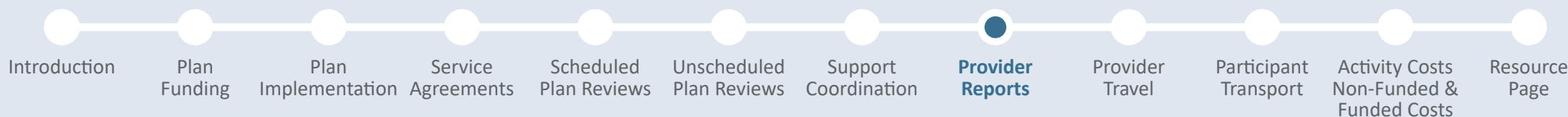
Support Coordinators collect reports from providers to inform a participant's plan review. They are also required to report on how Support Coordination has increased the participant's capacity to understand and use their NDIS plan, connect to community and mainstream services, and to inform the need for Support Coordination in the future plan.

[Support Coordination Practical Guide](#)



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Outputs versus Outcomes

The NDIS requires that providers think about and document instances of support in terms of outcomes, not outputs.

Outputs Details an instance of a support	Outcomes Details the result of an activity and its impact
John went to the city and had a coffee.	<p>Community participation John went out into the city today. He ordered his own coffee at the local coffee shop and paid for the drink himself. He needed prompting to wait to receive his change.</p> <p>Outcomes include: increasing money handling skills and the opportunity to develop social skills in his community.</p>

What systems and methods does your organisation use to document outcomes and show progress towards the participant's goals?

Things to consider when collecting evidence and documenting outcomes

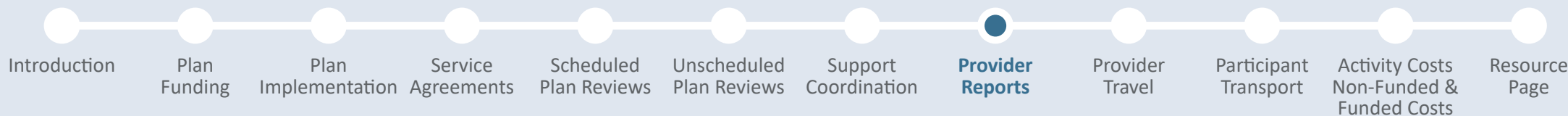
- Do your organisation's systems and methods document outcomes and show progress towards participant goals?
- Are these documented in a systematic and objective way?
- Use objective language and detail observations, subjective information does not constitute an outcome

Subjective Personal feelings and opinions	Objective Factual and impartial
<p>Claire felt that she had progressed towards her goals. As Claire's support worker, I think she is more social. Claire had a good day and enjoyed the cooking class.</p>	<p>Claire independently caught public transport and met her support worker at the coffee shop. Claire approached the café assistant on her own and ordered her own coffee. She did not require assistance from the support worker to complete her order. Claire followed instructions in cooking class and cooked her own meal.</p>



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The importance of language

Key NDIS phases relate to the language used in the [Objects of the NDIS Act](#), [NDIS Insurance Principles](#) and the reasonable and necessary criteria.

Key phrases include:

- Increase social and community participation
- Sustain informal supports/strengthen sustainability of informal supports
- Increase choice and control/self-determination
- Improve health and wellbeing/support and maintain well being
- Live as autonomously as possible
- Increase economic participation
- Independent living skills (e.g. cooking, cleaning, money management)
- Live as autonomously as possible
- Increase independence to...
- Build capacity to...

Do not assume the NDIA or LAC planners will have specialist backgrounds. Reports need to describe the positive or negative impact of service/support/equipment on the person's ability to live an ordinary life in language which is understandable to anyone.

Things to consider when writing a report

- Is the report written in plain English using NDIS language/key phrases, and does it focus on functional impact of the support on the participant's life?
- Do you have evidence to support your report (case notes, rosters, assessments, etc.)?
- Does your report justify how funds have been spent, mapping incremental targets and achievements with each instance of support?
- If progress towards the participant's goals has been slow or difficult to achieve, you should describe why. For example: difficulty securing housing, incarceration, time spent in hospital etc.
- Are the report recommendations at the forefront of the document?
- Does the report use [NDIS insurance principles](#), listed in section 4.3 of the [NDIS Operational Guidelines](#) to address reasonable and necessary and takes a lifetime approach to minimise support costs over a participant's lifetime through an early intervention approach?

Additional Resources

-  **Website:** 10 Steps to excellent NDIS Therapy Reports: VALID's guide to NDIS therapist reports for allied health professionals
-  **Podcast:** NDS podcast: Reporting on outcomes under the NDIS – Transforming Lives
-  **Document:** Getting the Language Right: A Health Practitioners' Guide to Writing Reports,


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PROVIDER TRAVEL

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Provider travel can be claimed for some supports when a worker is travelling to deliver a service in a person's home or in the community and refers to the cost of worker time and does not include other related costs of travel. The [NDIS Support Catalogue](#) indicates which support line items provider travel can be claimed against. Provider travel will not appear in a participant's plan as a claimable item and does not have its own budget. Money is deducted from the total budget allocated to a particular support category.

Provider travel and participant transport are two different things:

Provider travel: This is the time spent travelling by a worker to deliver a service

Participant transport: This is where a participant is travelling with a service provider. [Further information in the Transport Practical Guide](#)

A worker travelling to deliver a core support activity:

- Can claim travel time from the participant they are travelling towards, up to the maximum time limit according to the relevant Modified Monash Model (MMM) region
- Cannot claim travel time when returning to the office
- Can negotiate to divide total travel time when supporting multiple participants on the same trip, excluding return travel time



A worker travelling to deliver a capacity building support activity:

- Can claim travel time from the participant they are travelling towards, up to the maximum time limit according to the relevant MMM region
- Can additionally claim travel time from the last appointment of the day, up to the maximum time limit according to the relevant MMM region
- Can negotiate to divide total travel time when supporting multiple participants on the same trip, including return travel time
- Can enter specific arrangements with participants when delivering supports in remote and very remote locations

Example: Dividing the cost of travel between multiple participants when delivering capacity building supports

In the MMM 1-3 region, a Support Coordinator travels 40 minutes to participant A, 10 minutes to participant B and 30 minutes to return to the office.

The provider might claim 30 minutes travel time from participant A's plan and 40 minutes from participant B's plan. Alternatively the provider might negotiate with both participants and claim 35 minutes from both participants.



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Other rules (core and capacity building)

- A provider should claim for actual travel time up to the maximum limit according to the relevant MMM region
- The cost of travel time is informed by the cost of the support line item the worker is travelling to provide, or as a negotiated lower hourly rate
- The NDIS Support Catalogue indicates when a provider can and cannot claim provider travel
- In accordance with Australian Taxation Office, provider travel cannot be claimed when a worker is travelling between home and work, unless home is the registered business address
- Modified Monash Model (MMM) classification area is applicable to where the support is being delivered
- If a participant requires two support workers the total travel time can be claimed for each eligible worker
- All travel arrangements and charges must be negotiated with the participant and included in their individual Service Agreement prior to delivering the service.

Modified Monash Model (MMM)

The [Modified Monash Model](#) is a geographical classification system used by the NDIA to determine regional, remote and very remote areas. The system uses population density informed by the Bureau of Statistics to determine the classification areas, rather than geographical distance.

MMM Region	Classification	NDIS Provider Travel Policy	Charge \$
MMM1 MMM2 MMM3	Metropolitan	Core and capacity building providers can claim up to 30 minutes from each participant the worker is travelling towards. Capacity building providers can claim up to 30 minutes additional time when returning from the last appointment.	Price negotiated up to the cost of the support line item relevant to the support being delivered.
MMM4 MMM5	Regional	Core and capacity building providers can claim up to 60 minutes from each participant the worker is travelling towards. Capacity building providers can claim up to 60 minutes additional time when returning from the last appointment.	Price negotiated up to the cost of the support line item relevant to the support being delivered.
MMM6	Remote	In remote areas, capacity building providers may enter specific arrangements with participants to cover travel costs.	
MMM7	Very Remote	In very remote areas, capacity building providers may enter specific arrangements with participants to cover travel costs	



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Claim example: Direct support and travel

Departing from the office, a worker travels 30 minutes to deliver 3 hrs of capacity building supports and 30 minutes to return to the office. The cost of travel is informed by the support the provider is travelling to deliver.

Support Item	Support Item Ref No.	Description	\$/hr	Claim Type	Time (min)	Claim
Development of Daily Living and Life Skills	09_009_0117_6_3	Delivery of Support	\$58.52		180	\$175.86
Travel to deliver above	09_009_0117_6_3	Travel	\$58.52	Provider Travel	60	\$58.52
Total Claimed = \$234.38						

Example: Dividing travel costs between multiple participants when delivering capacity building supports

A provider travels two hours during a round trip and provides capacity building supports to four participants living in MMM 1-3 areas. If negotiated in advance and agreed to by all, each participant could be charged 30 minutes of worker travel time, regardless of the actual travel time between participants. The provider would claim 30 minutes against each plan with the cost informed by the line item relevant to the support delivered to each participant.

Frequently Asked Questions

I deliver core supports, can I charge for return travel?

No. Core supports cannot claim for return travel.

If the total travel time is 20 minutes, can I claim the 30 minute maximum travel time?

No. The claim must reflect the actual travel time.

I operate my business from home, can I charge from home to the first participant?

Yes. If your home is the registered business address.

Additional Resources

- Document:** The NDIS travel policy is found in the NDIS Price Guide 19/20
- Website:** The Department of Health Modified Monash Model
- Website:** Modified Monash Model searchable map

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PARTICIPANT TRANSPORT

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Participant transport may be funded by the NDIS if the participant can demonstrate that they are unable to use public transport without substantial difficulty due to their disability. This funding can be used by the participant to make a reasonable contribution towards the costs of transport itself, for example, taxi fares, road tolls, running costs of a vehicle etc. Participant transport negotiations would always be included in the participant's [Service Agreement](#).

Participant transport and provider travel are two different things:

Participant transport: This is where a participant is travelling with a service provider

Provider travel: This is the time spent travelling by a worker to deliver a service
[Further information in the Provider Travel Guide.](#)

Key points

- Not all participants will receive funding for transport in their NDIS plan; this decision is based on the [reasonable and necessary criteria](#)
- When transporting a participant the provider would always claim for the worker time at the relevant support line item, plus any additional and negotiated transport related costs through the transport line item or this may be charged directly to the participant
- In order to claim against the transport budget in a participant's plan, the provider must be registered to deliver Transport 02_051_0108_1_1
- The NDIS is not responsible for the shortfalls of the public transport system

Mainstream government services are responsible for providing related transport services such as accessible public transport, concessions to facilitate use of public transport, community transport services and modifications to public transport and taxis.

Participant transport support levels

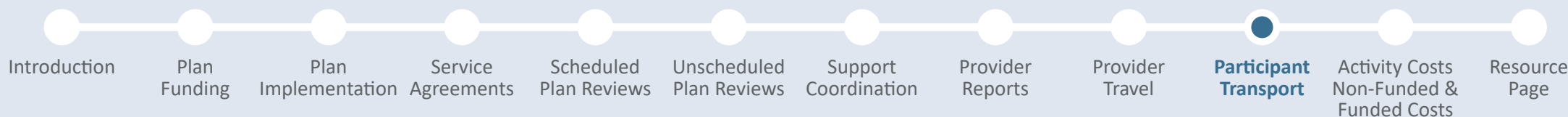
The NDIA's [Transport Funding webpage](#), lists three transport funding benchmarks. The benchmarks guide a participant's expectations when requesting transport be included in their plan. These figures are not caps and funding may be based on individual need and evidence provided as assessed against [reasonable and necessary criteria](#).

A participant should be equipped with evidence of transport requirements during the planning meeting, as each plan will be developed in response to individual need.



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Transport Funding Options

Transport Funding Options	Description	How does the provider get paid?	Can the participant use their other Core funds flexibly to 'top-up' the transport budget?
Self-managed and received as a Periodic Payment	This is where the participant is allocated funding from the NDIA into their transport budget and the participant has, during the planning conversation, opted to have their transport funding paid directly into their nominated bank account as fortnightly payments. A participant can opt to receive periodic payments regardless of how they manage their NDIS plan.	The provider would invoice the participant directly to recover transport related costs. The participant is not required to keep any records of how this budget is spent.	No, because this is a stated support
Funded through the NDIS plan in the core budget	The participant receives funds for transport the same way as they would any other NDIS support. The way they manage this transport budget is the same as the rest of their core budget.	The provider would claim for these charges depending on how the plan funds are managed. Agency managed: claimed through the portal Plan managed: claimed through the Plan Manager Self-managed: The provider would invoice the participant directly to recover Transport related costs and the participant would submit a payment request to the NDIA.	Yes
Participant funds own transport expenses as an out of pocket expense	This might occur when transport has not been allocated in a plan or as a periodic payment, or when the transport budget is exhausted. There have been instances where the word transport or a phase relating to transport has been included on a plan, but no dollar figure allocated. In this circumstance, no funding for transport has been provided. Contact the planner for confirmation if required.	This transaction might occur as a cash on the day scenario, or by invoice. Payment options would be negotiated and agreed with the participant prior to delivering the support.	If the participant has not received funding for transport in their plan, they cannot use their funds flexibly.

Transport is a negotiated charge

The transport line item does not have a set price. The dollar amount a provider claims is negotiated with the participant and included in the Service Agreement. This charge must be a reasonable and realistic amount.

The cost of transport is a business decision for the provider and may differ between organisations.

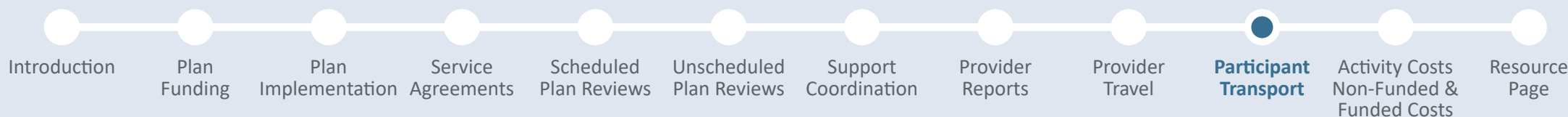
The following might be considerations when determining the charge

- What type of transport is being delivered?
- Will the participant cover the entire cost or make a reasonable contribution?
- Will car related costs be worked out as a km reimbursement or lump sum, for example: \$5.00 per trip?
- Will there be more than one participant travelling at the one time and should costs be shared?
- Are there requirements under employer awards that need to be considered?



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Flexibility of funding

If transport appears in a participant's plan they may choose to use their other core funds flexibly to 'top up' their transport 02_051_0108_1_1 budget. This would come at the expense of their other funded core supports. This function should be used cautiously and be well documented for scheduled plan review purposes. A participant may choose to pay for some of their transport costs through their plan and others as an out of pocket expense. Participants who self-manage their transport budget as a stated support and have chosen to receive their funding as a periodic payment cannot use core funds flexibly to top up their transport budget. Participants who self-manage their transport funds and make payment requests to the NDIA after the support is delivered can use core funds flexibly.

Transport and children (participants under 18 years of age)

The NDIS does not fund supports which are the reasonable expectation of informal or community supports. As such, unless the child requires additional assistance due to their disability and cannot use public transport or a modified vehicle the NDIS will not fund transport related costs. Further information provided in [12.1 Transport and considerations relating to children](#) found in the [Including Specific Types of Supports in Plans – Transport Operational Guideline](#)

Frequently Asked Questions

Will everyone receive transport funding?

No. The allocation of transport funding is based on the [reasonable and necessary criteria](#) and will generally be given to participant's who experience substantial difficulty accessing public transport due to their disability.

What happens to the participant's mobility allowance?

A participant becomes ineligible for the mobility allowance once they have an NDIS plan. A participant's NDIS transport budget will replace the mobility allowance. The amount of NDIS transport funding a participant receives may be different to their mobility allowance. A participant should discuss their allowance during the planning conversation and be prepared with evidence detailing their mobility allowance levels.

Are the participant transport support levels caps on funding amounts?

No. The funding levels found on the NDIS website are benchmark prices. They can be considered as a guide to how much transport funding a participant might expect in their plan as they meet certain criteria. Higher levels of transport funding may be allocated in line with the reasonable and necessary criteria. Participants should be prepared to discuss their travel requirements at their planning meeting and submit comprehensive supporting documentation.

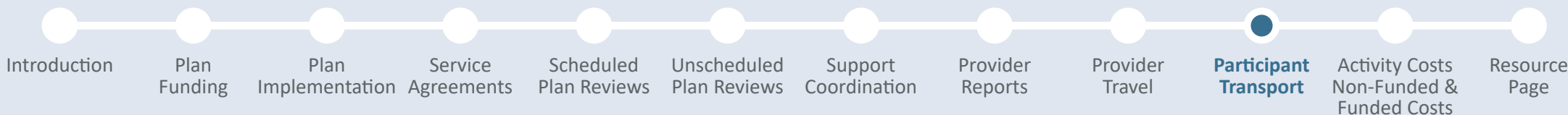
Will a participant receive transport through the NDIS if there isn't any public transport available?

The availability of public transport is the responsibility of the public transport sector. The NDIS will not fund supports that are funded by [another service system](#) regardless of a lack of infrastructure.



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Frequently Asked Questions (continued)

Can a provider claim for transport related costs which are beyond those of the workers time by using additional support hours?

If a provider was delivering 1 hour of direct support but claiming for 1.5 hours to cover transport related costs, this would be a misuse of participant funds and against the [Terms of Business](#). For payment, assurance and reporting purposes at time of audit, a provider would be required to produce accurate and transparent records demonstrating how funds were used in relation to the scope of support that defines the relevant support line item.







Can we use the line item 04_050_0108_1_1 Temporary Transport?

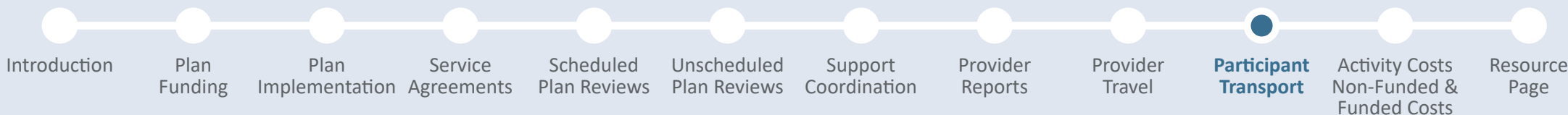
No. The line item 04_050_0108_1_1 has been removed from the [NDIS Support Catalogue](#) and is no longer available to use. The line item was created as a temporary back of house administrative function available for use by the NDIA. Always refer to the online [NDIS Support Catalogue](#) for current support line items.

A participant requires direct support while in transit, how might we claim for this?

If the participant was being transported in a car, it would be unreasonable for one worker to simultaneously drive and deliver direct support to a participant. Two workers would be required, one to drive and one to deliver direct support. A provider would claim as like any other 2 staff to 1 participant circumstance, with two line items for worker time at the relevant support line item and one line item for the additional transport related costs.

Additional Resources

-  **Website:** [NDIS Operational Guidelines: Transport](#)
-  **Podcast:** [NDS podcast: Transport under the NDIS: Together we can get somewhere](#)
-  **Website:** [Principles to Determine Responsibilities of the NDIS and Other Services](#)
-  **Website:** [NDIS Website: Transport funding](#)
-  **Article:** [NDS news article: The myth about participant transport](#)
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ACTIVITY COSTS: NON-FUNDED & FUNDED COSTS

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The NDIS will pay for costs which directly relate to a person's disability support requirements, and their NDIS plan goals. The NDIS does not cover costs of daily living or general activity costs as these costs are seen as ordinary expenses that are payable by everyone. The term activity cost refers to costs which are beyond a participant's NDIS supports and incurred because the participant has chosen to participate in a particular activity. These costs might include things like materials, specialist expertise or entrance fees, and are generally paid for by the participant as an out of pocket expense.

Agreements regarding the payment of NDIS funded and non-funded (out of pocket) activity costs should be documented in each participant's [Service Agreement](#)

Non-funded Activity Costs

Most commonly a provider will recover activity related costs from the participant as an out of pocket expense or absorb this cost into the cost of doing business. These costs would be clearly stipulated in the Service Agreement.

Activity costs which are generally not funded by the NDIS may include things like:

Non-funded Activity Cost	Example
Entrance fees	Movie ticket Theatre production Swimming pool
Activity-specific equipment and resources	Road bike hire Art supplies Food and consumables for a cooking session
Activity-specific expertise	Qualified personal trainer Qualified artist

Invoicing the participant for non-funded activity costs

The provider can negotiate for the participant to recover these costs in a number of ways

- The participant comes prepared with money to pay the entrance and class fees
- The provider covers the cost and invoices the participant after the support is delivered
- The provider may choose to absorb some or all of the cost of the activity into the cost of doing business

Example

The NDIS will fund supports to enable a participant to go swimming (e.g. the support worker), but not the additional cost of the entrance fees to the swimming pool. Before delivering this support, the provider has developed a Service Agreement which stipulates that the participant will bring cash money to cover the activity cost. The participant may need to have a companion card to ensure the support worker's entrance fee is covered.

Tip: Depending on the participant's goals, this approach may also meet other goals; such as, money handling.

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Costing a program that includes non-funded activity cost

Activity costs must reflect the actual cost associated with delivering the activity and cannot include back-of-house costs to supplement the price of NDIS supports. A provider should ensure the viability of the activity prior to delivering, with consideration of no shows and cancellations.

Costing example: Life skills program

A provider is planning to run a life skills program focusing on building independent living skills through the activities of cooking and money management.

The provider has 18 participants who would like to participate in the 10 week program with an overall cost of \$958 for food and other supplies to run the program (excluding direct disability support costs – these will be billed against the participant's plan).

If all participants attend each week the cost per person per week would be \$5.30. However, when considering cancellation rates and examining past experience the provider calculates an average attendance of 16 people per week and charges \$6 per person per week.

Each individual participant's Service Agreement would include a statement which stipulates how the activity costs will be paid by the participant e.g. \$6 cash would be need paid at the commencement of each class, invoices would be sent fortnightly, or as agreed.

$$\frac{\text{Overall Cost} = \$958}{\text{Over 10 weeks}} = \$95.80/\text{week} \rightarrow \frac{\$95.80}{18 \text{ people}} = \$5.32/\text{week per person}$$

Considering cancellations and other factors, provider charges \$6/week per person

Marketing activity costs

Transparency and simplicity are essential when marketing your activity cost.

Example:

Activity	Cost	What to bring
10-week life skills cooking class	\$6	<ul style="list-style-type: none"> \$6 cash
National art gallery trip	\$20	<ul style="list-style-type: none"> \$20 cash Public transport card with a minimum of \$10 available (Myki, Opal card) Companion card Your lunch
Visiting the zoo	\$20	<ul style="list-style-type: none"> \$20 cash Public transport card with a minimum of \$10 available (Myki, Opal card) Companion card Money for your lunch minimum of \$10
Make your own soy candle	\$5	<ul style="list-style-type: none"> \$5 cash



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NDIS Funded Activity Costs

The NDIS has two support line items related to NDIS funded activity costs. These relate specifically to recreation/community participation supports in core and capacity building. They have specific uses and are not intended to be used to cover general costs which are payable by anyone.

- Core: 04_115_0125_6_1 Community, Social And Recreational Activities
- Capacity building: 09_010_0125_6_3 Community Participation Activities

Recreation Supports

In some circumstances an NDIS participant may, due to their disability requirements, experience barriers in the pursuit of their goals. In these circumstances the NDIS may provide recreation support to cover some or all costs which allow the participant to engage in a community and social activity.

Recreation support may include, for example:

- Specialised sporting equipment or modifications of equipment
- Assistance to travel
- Assistance for organisations to adjust to the specific needs of the participant which are beyond the universal obligations of the organisation.

These costs would be claimed by using the line item 04_115_0125_6_1 Community, Social And Recreational Activities

Recreation Supports	Explanation	Example
Specialised sporting equipment or modifications of equipment	The NDIS may cover the cost of modification, but not the equipment itself	Mike wants to play golf but his physical disability does not allow him to carry his clubs. He has purchased a buggy which requires a modification for him to use it. The NDIS may fund the modification but not the buggy.
Personal assistance	The NDIS may cover the cost of a support worker to accompany the participant and support them to undertake the activity	Alex goes to a yoga class once per fortnight and requires support when changing positions. The NDIS may fund a support worker to support Alex when changing positions during the class. The NDIS will fund the cost of the support worker and not the cost of the yoga class.
Assistance to travel	Assistance to travel when it is not a reasonable expectation of informal supports and where the participant is not able to travel independently	Nick is a Richmond Tigers AFL supporter and likes to go and watch to football. Nick receives funding from the NDIS for a support worker to assist him travel on public transport because his anxiety is triggered when in large crowds.
Assistance for an organisation to adjust to the specific needs of the participant which are beyond the universal obligations of the organisation	The NDIS may fund an organisation to train staff	Joanne has an intellectual disability and would like to join the surf lifesaving club. The NDIS may fund the club to train their team leaders in accommodating to Joanne's needs.



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Claiming for an activity cost using capacity building 09_010_0125_6_3

The NDIS may cover costs of an activity under this line item, if the support has a capacity building element which is relevant to the participant's goals and aspirations.

- Universal recreational activities: A limited number of lessons could be funded to enable a participant to try out an activity and test their capability and interest in pursuing this activity further – such as horse riding, art, dance or singing classes
- Funding to attend a “camp” or groups that build a person's relationship skills and offer a range of activities and opportunities to explore wider interests.
- Information found in the [NDIS Price Guide](#)

Example: Trying out the use of a mainstream gym – NDIS funded activity cost

A new gym has opened near Jenny's house. Her NDIS goals include improving her health and wellbeing. Jenny is unsure if the gym will have the required supports for her to attend regularly. The NDIS may pay for Jenny to visit the gym a limited number of times to assess if she wishes to pursue this activity further. This would be claimed under the capacity building support 09_010_0125_6_3.

Bundling NDIS funded supports

The core category support line item 04_115_0125_6_1 - Community, Social and Recreational Activities and the capacity building category support line item 09_010_0125_6_3 Community Participation Activities may be used when multiple supports are combined to deliver a single activity such as after hours school care, a camp or weekend away.

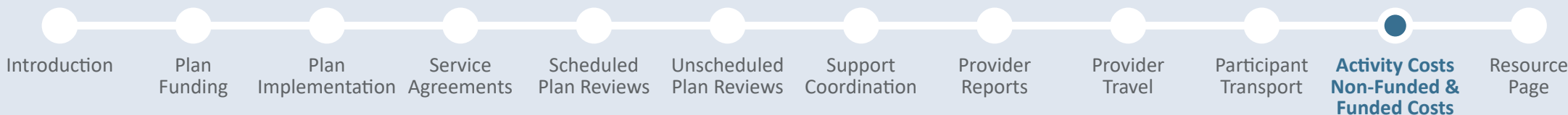
A program of supports can be converted into one fee:

- Using individual support line items stipulated in the Support Catalogue to inform costs Price Guide
- Determine whether or not it is a Core or Capacity Building support, considering their goals and the availability of participant funds
- Costing must be reflective of staff to participant ratio
- Will allow providers to submit one payment request, for a support delivered over several hours or days



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Example: Bundling NDIS support costs of an overnight camp using the core NDIS activity cost line item

A provider organises an overnight camp which includes a 3hr afternoon boat cruise on the first day, a trip to the swimming pool the following morning with lunch at a farm prior to heading home. The total cost of the camp is \$2,671.45 where the NDIS pays \$2,439.95 and the participant pays \$231.50 as an out of pocket expense.

The tables on the right illustrate how a provider might bill for a camp by bundling the relevant support line items and claim once for the delivery of multiple core supports using the 04_115_0125_6_1 line item (Table 1). The non-funded activity costs in this scenario are separated and billed directly to the participant (Table 2). These charges would be agreed to by the participant prior to attending the camp and clearly stipulated in their Service Agreement.

Table 1: Disability supports charged against the NDIS plan
(these costs will vary depending on each individuals support requirements)

1 night camp - High intensity (NDIS Billable)	Line Item	UOM	Price	#Hrs	Cost
assistance with self-care activities on Saturdays or assistance to access community, social and rec activities - individual -Saturday	01_013_0107_1_1 or 04_105_0125_6_1	Hour	\$72.69	15	\$1,090.35
assistance with self-care activities on Sundays or assistance to access community, social and rec activities - individual -Sundays	01_014_0107_1_1 or 04_106_0125_6_1	Hour	\$94.52	10	\$945.20
assistance with self-care - active overnight	01_002_0107_1_1	Hour	\$59.40	6	\$356.40
assistance with the cost of preparation and delivery of meals	01_022_0120_1_1	Each	\$12.00	4	\$48.00
NDIS Funds = \$2,439.95					

The provider would claim \$2,439.95 using the 04_115_0125_6_1 line item.

Table 2: Non-funded NDIS Activity Costs billed to the participant
(these costs will most likely be the same for each participant)

Activity Costs (Billed directly to the participant)	Price	#Hrs	Cost
3hr boat cruise with dinner	\$48.00	1	\$48.99
Entrance to swimming pool	\$3.50	1	\$3.50
Visit to farm with lunch	\$30.00	1	\$30.00
Meals – 1 x breakfast, 1x lunch, 3 x snacks	\$8.00	1	\$40.00
Accommodation	\$110.00	1	\$110.00
Payable by Participant = \$231.50			

The provider would charge \$231.50 directly to the participant in accordance with in their Service Agreement.



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