

Applying For NDIS Funding

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Your Guide to NDIS and Aged Care Applications

Introduction: Navigating the NDIS with Confidence

Applying for funding through the National Disability Insurance Scheme (NDIS) can be a life-changing opportunity, but for many people, the process can feel confusing, overwhelming, and full of red tape. That's why this guide exists.

Whether you're applying for the first time, supporting a family member, or looking to make sense of what the NDIS can offer, this guide will walk you through everything you need to know. It simplifies the process, answers common questions, and explains what to expect each step of the way.

Importantly, this guide is written in plain English. It's designed to be clear and practical—because accessing support should be empowering, not frustrating.

It's also important to understand that the NDIS is currently undergoing significant changes. The rules around funding are becoming stricter, and assessments are more thorough than ever before. While these changes are intended to make the system more sustainable and reduce misuse, they can cause stress and uncertainty for participants—especially those who fear losing access to supports they've come to rely on.

This guide aims to make the complex simple. It's here to provide clarity, ease anxiety, and offer real help. With the right preparation and support, you can submit a strong application that clearly shows your needs and eligibility.

Chapter 1: Major Changes to the NDIS and What They Mean for You

The National Disability Insurance Scheme (NDIS) is evolving. As of 2025, several reforms have been introduced to strengthen the integrity and sustainability of the system. These changes are designed to reduce misuse, ensure fairness, and better target support to those who need it most.

While these reforms aim to make the system more robust, they have also introduced stricter assessment criteria. This means applicants must now provide more detailed evidence and demonstrate the specific ways their disability affects daily life.

Why the Changes? In recent years, the NDIS faced challenges with inconsistent assessments, inflated claims, and unequal access across regions. The new framework addresses these issues through:

- Tighter controls on funding approvals
- Clearer definitions of what is "reasonable and necessary"
- Greater accountability for providers and participants
- Emphasis on functional impact over diagnosis alone

How This Affects You

- More Evidence Required: You'll need to show not just your diagnosis but how your condition affects your ability to function in daily life.
- Stricter Eligibility Decisions: Some participants may no longer qualify under the new criteria.

 Funding Reductions: Some people may receive less support than before unless they provide stronger justification.

These changes can understandably cause concern, particularly for participants who rely on their supports. However, with the right help, you can navigate this process confidently and successfully.

How Can I Help: As a consultant, I stay up to date with the latest NDIS legislation and assessment trends. I help applicants prepare strong, compliant submissions that match the updated framework and ensure nothing is left to chance.

Chapter 2: What is the NDIS and Who is it For?

The National Disability Insurance Scheme (NDIS) is a government initiative designed to support Australians who have a permanent and significant disability. It aims to provide funding for the supports and services people need to improve their quality of life and participate more fully in their communities.

The NDIS is not means-tested. It's based on need, not income. If you meet the eligibility criteria and can demonstrate that your disability impacts your daily functioning, you may qualify for funding.

To be eligible, you must:

- Be aged under 65 at the time of application
- Be an Australian citizen, permanent resident, or hold a Protected Special Category visa
- Have a permanent and significant disability that substantially reduces your ability to participate in everyday activities
- Require support from others or assistive technology to complete daily tasks

NDIS vs. Other Supports The NDIS doesn't duplicate services already available through Medicare or the health or education systems. It provides funding where other supports don't meet the person's needs.

How Funding is Decided Funding is based on what is deemed "reasonable and necessary." This means the support must:

Relate directly to your disability

- Be likely to be effective and beneficial
- Not be more appropriately funded by another service

There is no fixed funding amount such as \$20,000—it varies widely depending on individual needs, circumstances, and evidence. Some participants receive significantly more than that depending on the level of support required.

How I Can Help I help you understand how the NDIS defines eligibility and how to present your case clearly and confidently. Many people have been declined simply because their application didn't clearly show how their condition impacts their day-to-day life. I make sure that doesn't happen to you.

Chapter 3: Preparing to Apply

Before you begin your NDIS application, it's essential to take time to prepare. A well-organised application with the right documentation can make all the difference in whether you're approved and how much support you receive.

Step 1: Understand Your Needs Think about the impact your disability has on your daily life. Make a list of the tasks you struggle with and the areas where you need help. Consider physical, mental, emotional, and social aspects of your life.

Step 2: Gather Key Information Start collecting medical reports, assessments, and personal notes. These should be recent and clearly outline your diagnosis and how it affects your functioning. Don't wait until the last minute to gather this information—it can take time to organise.

Step 3: Decide Who Will Help You Apply You can apply on your own, with the help of a carer, or through a consultant (like me). Having someone who understands the system can save you time and stress—and may increase your chance of success.

Step 4: Know What the NDIS is Looking For The NDIS doesn't just want to know your diagnosis. They want to know how your condition limits your ability to do everyday things. Be ready to provide examples and supporting evidence that show the functional impact of your disability.

Step 5: Be Honest and Specific Avoid vague language like "I sometimes need help." Instead, say things like "I cannot shower without physical assistance due to limited mobility" or "I need supervision to ensure I take my medication safely."

How I Can Help I help you prepare all of this in a structured, clear format that aligns with what NDIS assessors are trained to look for. Together, we'll map out your needs, identify strong evidence, and avoid the common pitfalls that cause delays or rejections.

Chapter 4: The Application Process - Step-by-Step

The NDIS application process may seem overwhelming at first, but when broken down into clear steps, it becomes much easier to follow. Here's how it typically works:

Step 1: Request Access

You'll begin by requesting an **Access Request Form (ARF)**. You can do this by:

- Calling the NDIS directly on 1800 800 110
- Visiting the <u>NDIS website</u>
- Speaking with a Local Area Coordinator (LAC) or Early Childhood Partner

Once you request the form, you have **90 days** to return it with your supporting documentation.

Step 2: Complete the Access Request Form

The ARF asks for:

- Basic personal details
- Information about your disability
- Consent to collect your personal and medical information

You'll need to complete this carefully to avoid delays. Some questions may feel repetitive—this is normal, but accuracy matters.

Step 3: Gather Supporting Evidence

This is a crucial step. The NDIS requires clear, recent documentation to assess your eligibility. This includes:

A diagnosis from a health professional

- Functional impact assessments
- Letters from treating practitioners
- Your own or a carer's statement on how your disability affects you

Step 4: Submit the Application

You can submit your application:

- By email: enquiries@ndis.gov.au
- By post: GPO Box 700, Canberra, ACT 2601
- In person: Through a local NDIA office or partner organisation

Make sure everything is included. Incomplete applications can delay processing or be declined.

Step 5: Wait for a Decision

Once submitted, the NDIS will assess your application. This may take several weeks. You may be contacted for further clarification.

If approved, you'll move into the planning phase where your supports and funding will be discussed.

How I Can Help I assist with every step of the application process—from completing forms to reviewing your documentation before it's submitted. I ensure it's all clear, consistent, and matches what NDIS assessors are looking for.

Chapter 5: What Happens After You're Approved

Congratulations—your application has been approved! But this is just the beginning. Once you're accepted into the NDIS, you'll move on to the planning phase, where you create a personalised plan that outlines your goals and how funding will support them.

Step 1: Meet Your Planner

You'll either speak with an NDIA Planner or a Local Area Coordinator (LAC). They'll ask about:

- Your short- and long-term goals
- The types of supports you currently use
- What you need to improve your daily living, independence, or wellbeing

Step 2: Develop Your NDIS Plan

Based on your discussion, the planner will create an NDIS plan tailored to your needs. This plan will include:

- Your goals (what you want to achieve)
- Funded supports broken into budget categories
- Informal supports (like help from family or friends)
- Community and mainstream supports (local services or health/education supports)

Step 3: Plan Approval and Access

Once approved, you'll receive a copy of your plan (either in writing or through the MyGov portal). At this stage, you can start using your supports.

What If You Disagree with Your Plan? You can request a review within 3 months of receiving your plan if you think something is missing, inaccurate, or doesn't reflect your needs.

How I Can Help I can help you prepare for your planning meeting, making sure you communicate your needs clearly and align them with NDIS expectations. If you disagree with your plan, I can assist with the review process and ensure your voice is heard.

Chapter 6: Understanding Your Plan

Once your NDIS plan is approved, you'll receive a detailed document outlining your supports, funding categories, and personal goals. It's important to understand how to read and use this plan, as it forms the basis for how your support will be delivered

Key Parts of an NDIS Plan

- Your Goals: These are the short- and long-term goals you discussed with your planner. Your supports must link to these goals to be funded.
- Funded Supports: These are the supports the NDIS has agreed to fund. They're broken down into three main budget categories:
 - Core Supports: Everyday help with activities like personal care, transport, or community access.
 - Capital Supports: Funding for equipment, home modifications, or assistive technology.
 - Capacity Building Supports: Help you build skills for independence, like therapy, training, or employment support.

How to Use Your Plan

- **Choose providers**: You can select who delivers your supports (e.g., therapists, carers).
- **Track your budget**: Make sure you're aware of how much you're spending and how much is left.

 Review and update: Your plan can change as your needs do. You can request a review if your situation changes.

Important Tips

- Only use funding for supports that are clearly related to your goals and approved categories.
- Keep receipts and documentation for services and purchases.
- Monitor your funding closely to avoid running out before the end of your plan.

How I Can Help I help clients interpret their plan, choose providers, and ensure they're making the most of their funding. I also support clients in preparing for plan reviews or adjustments if their needs change.

Chapter 7: Plan Management – Choosing the Right Option for You

Once your NDIS plan is approved, you'll need to decide how your funding will be managed. This decision determines who is responsible for paying providers, keeping records, and tracking your budget.

There are three main options:

1. NDIA-Managed (Agency-Managed)

- The NDIA pays providers directly.
- You must use registered NDIS providers.
- The NDIA handles invoices and record-keeping.
- Good if you want minimal admin responsibility and only plan to use registered providers.

2. Plan-Managed

- A third-party Plan Manager is appointed to pay your providers and manage the financial side.
- You can use both registered and unregistered providers.
- They send you regular statements and help with budgeting.
- ✓ Ideal if you want flexibility with providers but don't want to manage payments yourself.

3. Self-Managed

 You handle payments, invoices, record-keeping, and budget tracking.

- You can use any provider that meets NDIS guidelines even if they're not registered.
- You're reimbursed through the NDIS portal.
- Best for people confident with managing money and who want maximum flexibility.

You can also **combine options**, for example, self-managing one budget and having another plan-managed.

How I Can Help Choosing the right plan management option depends on your comfort with admin tasks, your provider preferences, and your goals. I'll talk through each option with you, help you weigh the pros and cons, and assist in setting up your preferred method during your planning meeting.

Chapter 8: Fixed vs Flexible Funding – What's the Difference?

When your NDIS plan is approved, the funding you receive will be broken into categories—but not all funding is the same.

Understanding the difference between **fixed** and **flexible** funding is key to using your plan effectively and avoiding issues when trying to book services.

What is Fixed Funding?

Fixed funding is tied to a specific purpose or provider and **cannot be moved** to other supports or services. It is usually locked for a particular type of support or outcome. For example:

- Plan Management fees
- Support Coordination
- Certain therapies or specialist supports
- Assistive technology

You can only use this funding for what it's allocated for in your plan.

What is Flexible Funding?

Flexible funding gives you more control. You can choose how to spend it within its broader category. This applies especially to:

- Core Supports (e.g., transport, consumables, assistance with daily living)
- Some Capacity Building Supports

You can shift the money within these categories to suit your changing needs (e.g., using more personal care hours and less transport support).

Which is Better?

It's not a matter of one being better than the other—it depends on your needs. Most plans include a mix of both:

- Fixed funding ensures key supports are reserved and not used accidentally for other services.
- Flexible funding empowers you to adjust to real-life needs as they arise.

Who Decides?

The NDIS decides which parts of your budget are fixed and which are flexible based on your goals and functional needs. You can't choose this yourself, but you can request flexibility during your planning meeting if your needs vary often.

How I Can Help I help you understand your funding mix and ensure you're getting the right balance of flexibility and security in your plan. I'll explain what you can and can't move between categories, and how to make the most of what you've been given.

Chapter 9: NDIS and Children Aged 0-9

The NDIS has a separate access and support pathway for children under the age of 9. This is known as the **Early Childhood Approach**. It is designed to get families the help they need earlier and more efficiently, even before a formal diagnosis is in place.

How It Works

- Children aged 0 to 5 can receive early supports without needing an NDIS plan. These supports are designed to improve developmental outcomes and may include therapy, family support, and community programs.
- For children aged 0 to 9 with permanent and significant disability, families can apply to become NDIS participants and receive funded plans similar to adults.

What's Changed Recently

- In 2023–2024, the process was tightened to require stronger evidence of developmental delay or disability.
- Parents and carers now need to demonstrate how the child's condition impacts daily functioning, not just that a diagnosis exists.
- Letters from paediatricians, occupational therapists, speech therapists, or psychologists must be detailed and function-focused.

What Evidence Is Needed?

 Reports showing delays in two or more developmental areas (e.g., communication and motor skills)

- Evidence that the child requires support longer than 12 months
- Functional assessments that explain what the child can and cannot do for their age
- Statements from early educators or therapists on day-today limitations

Tips for Parents and Carers

- Keep a diary of challenges your child faces in areas like social interaction, toileting, or eating
- Request assessments from your child's early childhood intervention team
- Be honest about the impact on your child's and your family's daily life

How I Can Help Navigating the early childhood process can be emotional and confusing. I can assist by:

- Helping you gather the right reports and letters
- Supporting you through conversations with early childhood partners
- Ensuring your child's needs are presented clearly and strongly to the NDIS

My goal is to help you get timely access to the supports your child needs—so you can focus on what matters most.

Chapter 10: What Can NDIS Funding Be Used For?

The NDIS provides funding across a wide range of support areas. These supports are grouped into three budget categories: **Core Supports**, **Capital Supports**, and **Capacity Building Supports**. Each category contains several subtypes — in total, there are **37 funded support categories**.

Below is a simplified explanation of these categories to help you understand what's available and how the NDIS can help you achieve your goals.

Core Supports (Daily living needs)

These supports help with everyday tasks and activities. They are often the most flexible.

- 1. Assistance with daily life
- 2. Transport
- 3. Consumables (e.g. continence products, low-cost assistive tech)
- 4. Assistance with social and community participation

Capital Supports (One-off or assistive purchases)

These are generally for items you need to buy or invest in for long-term use.

- 5. Assistive technology
- 6. Home modifications
- 7. Specialist disability accommodation

Capacity Building Supports (Skill development and long-term progress)

These help build your skills, independence, and involvement in community or work.

- 8. Support coordination
- 9. Improved living arrangements
- 10. Increased social and community participation
- 11. Finding and keeping a job
- 12. Improved relationships
- 13. Improved health and wellbeing
- 14. Improved learning
- 15. Improved life choices (e.g. plan management)
- 16. Improved daily living skills (e.g. therapies)

Other Supports You May Be Eligible For

Some plans may include more tailored supports or add-ons, including:

- 17. Behaviour support plans
- 18. Employment-related assessments
- 19. Specialist transport assistance
- 20. Exercise physiology or personal training for disability
- 21. Nursing care

- 22. Short term accommodation/respite
- 23. Home and yard maintenance (where disability-related)
- 24. Supported independent living (SIL)
- 25. Medium-term accommodation
- 26. Meal preparation and delivery
- 27. Therapy assistants
- 28. Low-cost software and apps
- 29. Travel training
- 30. Peer mentoring
- 31. Support for carers (e.g. respite)
- 32. Allied health early interventions (e.g. for children)
- 33. Vehicle modifications
- 34. Mobility aids
- 35. Communication aids
- 36. Prosthetics and orthotics
- 37. Hearing or vision support equipment

What if You Need Something Not Listed?

Not all supports are pre-listed in a plan. If you need something unique to your situation, you may still be eligible — but you must provide strong justification showing:

It relates directly to your disability

- It's "reasonable and necessary"
- It helps you meet a goal in your plan

NDIS planners won't guess what you need — you must clearly ask for it and explain why it matters.

How I Can Help I help clients identify which supports best suit their goals and daily needs, ensure everything is presented clearly in the application, and assist in requesting items that fall outside the standard categories. If a support is denied, I can also help you appeal or provide additional evidence.

Chapter 11: What the NDIS Looks for in an Application

To assess whether someone is eligible for NDIS funding, the National Disability Insurance Agency (NDIA) focuses on how a disability impacts a person's **functional capacity** — that is, how it affects their ability to perform everyday activities. A diagnosis alone is not enough.

Here's what the NDIS looks for:

1. Permanency of the Condition

The NDIS only funds supports for disabilities that are permanent. This doesn't mean the condition never changes — but that it's likely to be lifelong and not curable.

2. Functional Impact

The key question is: *How does your disability affect what you can and can't do?* The NDIS wants clear evidence that the condition substantially reduces your ability to participate in daily life in areas such as:

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

3. Evidence of Need

You'll need to demonstrate that the supports you're requesting are "reasonable and necessary." This means they must:

- Be related to your disability
- Help you pursue your goals
- Support your social and economic participation
- Be value for money
- Not be more appropriately funded elsewhere (e.g. Medicare, school)

4. Supporting Documentation

Well-written reports and letters from health professionals are vital. They should include:

- Diagnosis and treatment history
- Impact on daily function
- Examples of support needed
- Likely long-term outcome with and without support

The NDIS also values personal statements and carer impact statements that explain day-to-day challenges.

How I Can Help I guide clients through how to present their condition clearly, help them collect the right documents, and make sure the application focuses on what matters most to NDIS decision-makers — your functional needs and how support will help.

Chapter 12: Gathering Reports, Letters and Assessments

This is one of the most important steps in the entire application process. The quality and clarity of your supporting documents can make the difference between being approved or declined.

What the NDIS Wants to See

NDIS assessors are not just looking for a diagnosis. They want detailed, function-focused evidence that shows how your condition impacts daily life. The documents you provide should address:

- Your diagnosis (confirmed by a qualified professional)
- Functional capacity across multiple life domains
- Evidence of permanency
- Recommendations for specific supports

Key Documents to Include

- **GP letter:** This should confirm your diagnosis, medical history, and need for ongoing support.
- Allied health reports: These may include occupational therapy, physiotherapy, psychology, or speech pathology.
 Each report should describe your current abilities, limitations, and goals.
- Functional assessments: These outline what you can and cannot do without support.
- Impact statements: Written by you or your carer, explaining the daily impact of your disability in real-life terms.

What Makes a Strong Report?

- Recent (within 12 months if possible)
- Clear language that avoids jargon
- Specific examples (e.g. "John requires support with showering due to balance issues")
- A conclusion that recommends NDIS support

Common Mistakes to Avoid

- Submitting reports without detail on how your disability affects your life
- Using outdated documents
- Forgetting to include carer or personal impact statements

How I Can Help I review all your documents before submission to ensure they meet NDIS criteria. I can:

- Liaise with your health professionals to request letters or clarify content
- Draft or edit your carer impact and personal statements
- Provide templates and guidance for functional assessments
- Highlight gaps in your evidence so you can address them early

Well-prepared documentation can significantly improve your chances of approval and appropriate funding. I'll make sure your application is backed by strong, persuasive evidence that speaks directly to the decision-makers.

Chapter 13: Submitting Your Application and What Happens Next

Once you've gathered all your documents and completed your Access Request Form, the next step is to submit your application to the NDIS. This is a crucial milestone in your journey toward receiving support.

How to Submit

You can submit your application in any of the following ways:

- **Email:** Send your form and documents to enquiries@ndis.gov.au
- Post: Mail to GPO Box 700, Canberra, ACT 2601
- In person: Deliver to your local NDIA office or partner organisation

Make sure you:

- Include all relevant medical reports, assessments, and personal impact statements
- Double-check that the form is fully completed
- Keep a copy of everything you send

What Happens Next?

After your application is received:

- NDIS reviews your documents: They'll assess your eligibility and the evidence you've provided.
- 2. **You may be contacted:** The NDIA might ask for additional information or clarification.

3. **You'll receive a decision:** If successful, you'll be invited to a planning meeting. If not, you'll be given the reasons in writing.

Processing times can vary, but it's normal to wait several weeks for a decision.

Key Tips

- Keep track of when you submitted your documents
- Be responsive to any NDIS follow-up requests
- Reach out for support if you're unsure what to do next

How I Can Help I will help you ensure your application is complete, properly submitted, and ready to make a strong impression. I can also follow up on your behalf if delays occur or if further evidence is requested. My goal is to take the stress out of this step so that you feel confident and supported.

- Gathering and reviewing your documentation
- Connecting you with appropriate allied health professionals
- Drafting or editing your personal statements
- Completing the application form correctly
- Ensuring everything is packaged and submitted properly

Even if you've answered "Yes" to all, it's still helpful to have a second set of eyes. I make sure your application is as strong and clear as possible—so you don't risk delays or rejection due to missing details.

Chapter 15: Appeals and What to Do If You're Not Approved

If your NDIS application is rejected—or if you're approved but receive less funding than you believe is necessary—you have the right to request a review. However, the appeals process can be confusing, and not all decisions can be appealed. Understanding your rights and the process is essential.

Step 1: Request an Internal Review

If you disagree with the NDIS's decision, you can request an **internal review** within **three months** of receiving your outcome letter

To do this, you must:

- Submit a written request (or call the NDIS) explaining why you believe the decision is incorrect
- Provide any additional evidence that may support your case

An NDIS staff member who was not involved in the original decision will reassess your application.

Step 2: Apply to the Administrative Appeals Tribunal (AAT)

If the internal review still results in a denial or you're not satisfied, you may apply to the **AAT**. This is an independent body that can review decisions made by the NDIA.

Important: Not all decisions are eligible for AAT review. You cannot appeal every outcome—only specific types (e.g. access to the scheme, plan funding amounts).

How Long Does the Process Take?

- Internal reviews may take several weeks to complete
- AAT reviews may take months, depending on complexity and availability

Throughout both processes, you may be asked to provide additional reports, letters, or updated statements.

How I Can Help I assist with:

- Understanding which decisions are appealable
- Drafting appeal letters and responses
- Preparing additional supporting documents
- Liaising with the NDIS or the AAT on your behalf

Many people find the appeals process stressful. I can help take that pressure off and ensure your voice is heard in a professional, well-structured way.

Chapter 16: Professional Application Consultancy Services

Applying for NDIS funding can be complex, time-consuming, and stressful—especially when your daily life is already being affected by disability or caring responsibilities. That's where I come in.

As an experienced consultant, I offer end-to-end support with the NDIS application process. Whether you are applying for the first time, appealing a decision, or preparing for a plan review, I can help make the process easier, clearer, and more effective.

What I Offer:

- Personalised one-on-one consultation
- Help completing the Access Request Form and related documentation
- Assistance gathering, editing, and formatting reports and letters
- Drafting strong personal impact statements
- Coordinating with medical and allied health professionals
- Support preparing for planning meetings and plan reviews
- Appeals and review guidance if you are rejected or underfunded

Why Work With a Consultant? The NDIS has become more rigorous over time. While this is important for ensuring integrity and fairness, it can also be overwhelming for people trying to navigate the system on their own. I provide clarity, structure, and confidence at each stage.

Get in Touch If you'd like help with your NDIS application or plan, feel free to contact me for an initial consultation. Together, we can

build a case that clearly tells your story and gets the support you need to move forward.

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