

How to claim from my plan

You have three options for who manages the funding in your plan.

1. [Self-managed](#): You, or your plan nominee or child representative, manage the funding and pay your providers.
2. [Agency-managed](#): We manage the funding and pay your providers.
3. Using a [registered plan manager](#) to manage the funding and pay your providers.

You can also choose a mix of these types of plan management. For example, you might like to manage some of the funding yourself, and we'll manage the rest.

Learn more in section 'How do we decide who manages your funding?' in [Our Guideline – Creating your plan](#).

When we say claim, we mean asking for payment from the funding in your plan after you receive a support. Who claims and how claims are made depends on how your NDIS funding is managed.

When we say supports, we mean [NDIS supports](#). NDIS laws determine what we can and can't fund. Things we can fund are called NDIS supports. You can only use the funding in your plan to buy NDIS supports if they're related to your disability, and are in line with your plan.

Spending in line with your plan means only spending your funding on the supports included in your plan. To spend in line with your plan, you need to:

- spend your funding in the way we describe. This includes any stated supports, where we describe the supports you can buy more specifically
- make sure your funding will last for the whole length of your plan

- make sure your funding will last for the length of each funding period, if your plan includes funding periods and funding component amounts.

When you buy supports in line with your plan, you need to make sure they are [NDIS supports](#) or an agreed replacement support that relate to your disability.

You can't buy supports that other government services are responsible for funding. For example, you can't use your NDIS funding on general health supports like your general practitioner (GP), because the health system is responsible for these services.

Before you make a claim, there are some things that need to be checked. This is to make sure the claim is valid and payment can be processed.

This includes checking:

- you received the supports being claimed, and you have an invoice or receipt
- you and your provider agreed on a price and the type of support
- the supports are NDIS supports for you
- the supports being claimed are in line with your plan
- your plan has enough funding for the amount being claimed
- you received the supports within the dates of your plan
- you have the Australian Business Number (ABN) of the provider delivering the supports, or you tell us the reason why they don't have one.

New NDIS laws came into effect on 3 October 2024. All claims need to be made within 2 years of providing a support. For the first 12 months, we'll honour all claims made for supports provided before the law came into effect.

You or the person managing your plan needs to make sure there's enough funds in your plan to claim for the support. If your plan includes funding periods and funding component amounts, you need to have enough funding in your current funding period and the relevant funding component amount for your claim.

Whoever manages your plan will need to make sure you're getting the support you need. They also need to check you're not spending your funds too fast and make sure claim details are correct. Your funding needs to last so you can get the support you need during each funding period in your plan, as well as across the full length of your plan.

If you're a nominee, you need to tell us about any conflict of interest you have in relation to the participant, and how you'll manage this. For example, if you provide the participant with services you get paid for.

We also check the supports you're claiming are in line with your plan and there's enough funds.

How you pay providers

How you pay providers depends on how funding in your NDIS plan is managed:

- Self-managed
- Agency-managed
- Using a registered plan manager

Self-managed funding

We'll explain:

- Who claims for your supports
- What you need to check before you make a claim
- How you claim supports
- What records you need to keep
- Your rights and responsibilities

Find out more about self-management on the [Self-management](#) page on our website.

Who claims for your supports

You will pay providers, after they provide you with the support and invoice you.

When we say 'you', we mean you or the person appointed to self-manage for you. This might be your plan nominee or your child representative. Learn more about [guardians and nominees](#) on our website.

There are two options:

- Make a claim and then pay your provider after the money has been paid to your bank account.

- Pay your provider with your own money and then make a claim to be reimbursed.

What you need to check before you make a claim

- You need to have **evidence** that shows you received the NDIS support, who provided you with the support and on what dates. You need this for all supports, including your local handyman attaching handrails in your bathroom, or a worker you directly employ.

Evidence can be either:

- a receipt or tax invoice from your provider
- a bank statement or payroll record for any worker you employ.

You need to keep evidence that confirms the details in your claim. We may ask you to upload your evidence at the time you make your claim. Even if we don't ask you to upload evidence to submit your claim, we recommend that you do. We may contact you to discuss the evidence you have to support your claim.

- Use the evidence to check the **details match** your claim. You need to check the:
 - support dates (start and end). **Tip:** Use the dates you received the support, not the date you make the claim. This will be on the receipt or invoice
 - provider ABN. **Tip:** You must provide an ABN, or select a reason why you can't make your claim. You can review these reasons in the drop-down on the portal
 - amount of support provided (hours or quantity)
 - description of the support. **Tip:** You'll need to provide a description when you claim to help us understand what support or service was delivered
 - unit price
 - total amount.
- Check your claim is from the **correct support category**. You only need to tell us the support category you're claiming from, not the individual support item. Find out more about support categories on the [Support budgets in your plan](#) page of our website.

- Make sure there are **enough funds in your plan** for the amount you're claiming. This means there needs to be enough funds during your current **funding period** for the **funding component amount** the support category is listed under in your plan.

Example

Michael meets access for Motor Neuron Disease (MND), which impacts his mobility. He needs help looking after his home and yard because of his disability. Michael self-manages his funding for daily supports and he chooses both registered NDIS providers and unregistered providers. This includes paying a lawn mowing service from his plan to mow his grass. Michael's other supports are Agency-managed.

The handrail in Michael's bathroom is loose and needs fixing. Michael needs the handrail to support his mobility and independence, and it's been identified as reasonable and necessary for his impairments that meet the disability or early intervention requirements. He checks his plan and works out how much funding he has available in the current funding period for his daily supports.

Michael contacts a handyman that might be able to do the work. They agree what work will be done and how much it will cost. Michael also checks the handyman will give him a tax invoice and asks for a written quote.

When the work is done the handyman gives Michael a tax invoice that includes their ABN. Michael uses the my NDIS app to make a claim from his plan. He adds the handyman's ABN and uploads the tax invoice as evidence with his claim on the app. He knows he can also use the my NDIS portal or fill in a MyPlan purchase payment request form and send it to us.

Michael checks his bank account. He receives payment from his claim within 2 business days and pays the handyman. The handyman sends Michael a receipt for the payment. Michael keeps the tax invoice and the receipt. Michael knows if he hadn't uploaded the invoice when he made his claim, we may have asked for it later.

How you claim supports

You'll use the [my NDIS portal or app](#) to make a claim. If you don't have a plan in our new computer system, you'll continue to use the [myplace portal](#) instead of the my NDIS portal.

If you can't make a claim using the portal or the my NDIS app, you'll need to use the [MyPlan purchase payment request form \(DOCX 85KB\)](#). You can return your form in

person, by post or email. **Tip:** You, your payment nominee or child representative must sign this form. You need to submit your claim evidence with the form.

It's important you claim after the support is provided. You'll need evidence you received the support, and sometimes you'll need to upload it to be able to make your claim. Even if we don't ask you to upload evidence to submit your claim, we recommend that you do.

Use the information on the invoice or receipt to make your claim. Make sure your evidence matches the details on your claim. This will help you claim the correct amount and type of support.

After you make a claim, we generally make a payment to your nominated bank account within 2 business days. It can take us longer to process your payment if you use the MyPlan purchase payment request form. Sometimes we might ask you for more information before we make the payment. In this case we'll contact you by your preferred method. When you get your payment you should pay your provider as soon as possible.

What records you need to keep

You need to keep any information you used to make your claim, such as invoices, receipts, payroll records, and bank statements. You need to keep them for 5 years.

For each claim you make, you need to have:

- the provider's name
- their ABN, or the reason why you don't:
 - The ABN was not provided in an accessible way.
 - I bought this item or NDIS support overseas.
 - I bought this item or NDIS support online.
 - I directly engage my own staff.
 - The business does not have an ABN.
- the support dates
- a short description of the support provided
- the support category the support relates to
- the amount of support provided (hours or quantity)
- the support price (per hour or unit)
- the total amount paid.

We regularly do audits to make sure you've made the necessary checks and kept the information we've asked you to. When we do an audit, we'll ask you to give us the information you used to make a claim.

Example

Margaret has goals in her plan to improve her cooking and to get a job in fitness or hospitality. We consider the NDIS funding criteria and include funding in her plan for health and wellbeing and finding and keeping a job.

Margaret's plan nominee, Sally, helps her manage her funding. Margaret and Sally decide to self-manage Margaret's funding to give the most flexibility and to employ people directly.

Margaret and Sally build a flexible team to best suit Margaret's needs. They employ a trainee chef to help with basic nutrition and preparing meals. They also employ an exercise science student, who helps Margaret be active in her community and get work at the local sports centre.

Sally sets up a bank account for Margaret's claims. Margaret and Sally are employing staff, so they set up a roster and payroll system. This makes sure her staff are paid correctly for their time, the right tax is withheld, and staff receive correct benefits or entitlements. Margaret and Sally check the timesheets that staff submit each fortnight and use this information to claim employee payment amounts using the my NDIS app. When Margaret and Sally make these claims, they won't have an ABN to give us. They'll select **I directly engage my own staff** from the drop-down on the portal instead. When the money reaches their bank account within 2 business days, they pay their employees.

Margaret and Sally keep their payroll records up to date. They keep copies of all receipts for tax, insurance, and any other payments they need to make to meet their responsibilities as an employer. Margaret and Sally can use any savings in Margaret's plan to help with the cost of employing her support people or to pay for more supports to help her pursue her goals.

Your rights and responsibilities

When you claim for your supports you need to make sure:

- the supports are NDIS supports for you, related to your disability and are in line with your plan
- you pay your providers promptly for the supports you agree for them to provide, once they have provided them

- you keep evidence of the supports you claim. For example, invoices, receipts, pay slips, and bank statements
- you don't mislead anyone to gain financial or other benefits
- you tell us if your situation changes
- you give us information about your claims when we ask you.

You have the right to:

- choose who delivers your supports and agree how your supports are delivered
- not feel pressured to buy supports or use a provider you don't want or need
- negotiate how much you want to pay for your supports to get the most out of the total funding amount and each funding period in your plan
- pay for supports at a fair and reasonable rate. Check out the [NDIS Pricing Arrangements and Price Limits](#) to make sure you get value for money
- decide what personal information you give your providers
- know and ask questions about any conflict of interest your provider might have.

Find out more about your rights and responsibilities on the [Self-Management](#) page of our website.

Agency-managed funding

We'll explain:

- Who claims for your supports
- What your provider needs to check before they make a claim
- How your provider claims for your supports
- What records your provider needs to keep

Who claims for your supports

Only registered NDIS providers can make claims from your funding. They do this after they've provided the support. We generally don't allow prepayment for supports.

What your provider needs to check before they make a claim

Before providing supports and making claims, your provider will work with you to:

- agree on the price and type of supports they provide to you
- make a service agreement if you want one. We recommend you have a written service agreement
- check if they are a **my provider** for you.

A **my provider** is a provider you've chosen to claim Agency-managed funding from your plan. When you record a my provider, you don't need to approve the claim every time.

You can update or change your my providers at any time by talking to your my NDIS contact or calling our National Contact Centre on 1800 800 110. To learn more, read our factsheet [Recording my providers](#).

- When they claim, your provider will need **evidence** you received the support, who provided the support, on what date and where.
- They check their claim **details match** the evidence for the support you received, including:
 - your name and NDIS number
 - support dates (start and end)
 - support item reference number
 - support hours or quantity
 - support item price
 - total amount.
- They check the claim is against the **correct support category** for the support they provide. You can learn more about [Support budgets in your plan](#) on our website.

How your provider claims for your supports

Registered providers use the [myplace provider portal](#) to make claims or other options available from the National Disability Insurance Agency (NDIA). Find out more about other options available on the [Connecting with NDIA systems](#) page on our website.

Your provider can use a bulk payment request in the myplace provider portal to make multiple claims together. For example, if you get support every week, your

provider may make a claim at the end of the month for 4 weeks of support. Find out about bulk payment requests on the [Bulk payments](#) page of our website.

New NDIS laws came into effect on 3 October 2024. Your provider needs to make a claim within 2 years of providing a support. For the first 12 months, we'll honour all claims for supports provided before the law came into effect.

You can check what your provider has claimed using the [my NDIS portal](#), [myplace portal](#) or the [my NDIS app](#).

After a my provider makes a valid claim, we make a payment to their bank account within 2 business days. You don't need to do anything.

If the provider is not a my provider, we'll send you an SMS to make sure it's a support you received before we pay the claim. We'll make a payment to their bank account after you approve the claim. If you don't respond to the SMS, we'll process the claim after 6 days.

What records your provider needs to keep

For each claim, your provider needs to keep records showing:

- your name and NDIS number
- the support dates (start and end)
- the support type and item number from the [NDIS Pricing Arrangements and Price Limits](#)
- the amount of support provided (hours or quantity)
- the support price (per hour or unit)
- the total amount claimed.

Your providers must comply with the [NDIS Code of Conduct](#). They must make sure claims are complete, truthful and correct.

We do audits to make sure your providers make the necessary checks. We might ask your provider for the information they used to make the claim.

Example

Jacob wants to focus on being independent and prefers that the Agency manages his funding.

Jacob chooses his providers from a range of registered NDIS providers using the NDIS provider finder. Jacob's support coordinator also helps him find registered providers that suit him.

Jacob talks to his providers about the supports he needs. Jacob and his providers agree how much funding Jacob needs for the supports he wants. They make a service agreement so Jacob knows what supports he'll get and what happens if he needs to cancel a support. Jacob also talks to his my NDIS contact to record the providers as my providers, so he doesn't need to approve their claims every time.

Jacob knows his providers can't charge more than the NDIS Pricing Arrangements and Price Limits. Sometimes he and his providers agree to claim less than the NDIS price limit. This means Jacob can get good value for money for his supports.

Jacob's providers use the myplace provider portal to make claims. They keep records of the supports Jacob receives, who provided the support, the item number for the support, and when and where he received the support. We will manage Jacob's plan and pay his providers.

Jacob uses the my NDIS portal to check what claims his providers make from his plan. Jacob can also keep track of his budget on the portal. Jacob's support coordinator also helps him keep track of his plan.

Using a registered plan manager

We'll explain:

- [Who claims for your supports](#)
- [What your registered plan manager needs to check before they make a claim](#)
- [How your registered plan manager claims for your supports](#)
- [What records your registered plan manager needs to keep.](#)

Find out more about using a registered plan manager on the [Plan management](#) page of our website.

Who claims for your supports

A registered plan management provider claims from your funding. They'll pay your providers for you. Your registered plan manager can pay registered NDIS providers or unregistered providers from your funding. Your registered plan manager will reimburse you if you've paid for a support with your own money.

What your registered plan manager needs to check before they make a claim

Your registered plan manager needs to check:

- they have **evidence** you received the support, who provided the support, and on what date. They need the same evidence to reimburse you, where you've paid for a support with your own money, or to pay your provider. The evidence can be a receipt or tax invoice. It must have a **valid Australian Business Number (ABN)**
- the **details match** the claim and the tax invoice or receipt, including:
 - support dates (start and end)
 - amount of support provided (hours or quantity)
 - unit price
 - total amount.
- the **support being claimed is included in your plan**
- the claim is against the **correct support category**. You can learn more about [Support budgets in your plan](#) on our website
- there are enough funds in your plan for the amount they claim. They need to consider the funding available to you in the relevant funding period and funding component amount. They also need to consider how much is spent on a weekly or monthly basis. This is so you have enough funds for your entire plan period.

How your registered plan manager claims supports

To make claims, your registered plan manager will either use the [myplace provider portal](#) or other options available from the NDIA. Find out more about this on the [Connecting with NDIA systems](#) page on our website.

They should make claims as soon as possible after they receive the valid tax invoice or receipt and check the claim is correct. Find out about bulk payment requests on the [Bulk payments](#) page of our website.

You can check what your registered plan manager has claimed using the [myplace portal](#), [my NDIS portal](#) or [my NDIS app](#).

After they make a valid claim, we make a payment to their bank account within 2 business days. They should then pay your provider or reimburse you.

What records your registered plan manager needs to keep

Your registered plan manager needs to keep any information they used to make the claim, such as invoices and receipts. They need to keep them for 5 years. Your registered plan manager won't be able to claim supports for you if they don't have the evidence they need.

For each claim, your plan manager needs to keep records showing:

- your name and NDIS number
- the provider's name
- the provider's ABN
- the support date
- a short description of the support provided
- the support category the support relates to
- the amount of support provided (hours or quantity)
- the support price (per hour or unit)
- the total amount paid.

We regularly do audits to make sure your registered plan manager makes the necessary checks. When we do an audit, we'll ask your plan manager for the information they used to make the claim.

Example

Malech asks for a registered plan manager to manage his funding. Malech uses the NDIS provider finder to find a registered plan manager and talks to them about the services they offer. The registered plan manager explains part of their role is to help Malech understand how NDIS pricing arrangements and price limits work. They talk about the price limits for the supports Malech wants to claim.

Malech chooses the registered plan manager and gives them details of his plan. He tells them about the supports he gets, who he gets his supports from and how often. The registered plan manager allocates the funds for Malech's supports. They also check there are enough funds for the supports Malech would like. They consider the way Malech's funding is organised by funding component amounts and funding periods. This is to check he'll be able to access the right amount of funding for his supports for the full length of his plan.

Malech asks his providers to send invoices directly to his registered plan manager. His registered plan manager makes sure the invoices have the provider's ABN, the

support date, the amount of support, the support price and the total cost. Malech knows his registered plan manager is responsible for making claims and keeping the right records. His registered plan manager uses the myplace provider portal to make Malech's claims and receives payment in their bank account within 2 business days. The plan manager pays Malech's providers.

Malech checks the myplace portal every few weeks. He looks at his funding and the claims the registered plan manager has made from his plan. He knows his registered plan manager will let him know if he is spending his funds too fast.

Check out how to use the [NDIS provider finder](#) to find a registered plan manager.

What if something's not right?

Sometimes things can go wrong, or you find something's not right. This can include things like not getting the support you agreed to or providers claiming more than you agreed to.

We understand most people try to do the right thing, but sometimes make mistakes. We want to help you to do the right thing with claims.

If you think your registered plan manager or provider has made a mistake with a claim, contact them as soon as you can.

If you don't feel okay talking to your registered plan manager or provider, talk to someone you trust. They may be able to support you to resolve your concern. If you can't resolve the issue, you can contact us on 1800 800 110.

Who do I talk to if I make a mistake?

If you make a mistake making a claim, you should talk to your my NDIS contact, support coordinator or psychosocial recovery coach as soon as you can. Or you can contact us on 1800 800 110.

We'll work with you to explain what you need to do. We can help you get it right next time. We can also talk to you about capacity building supports to build your skills to manage your plan and make sure your claims are right. This might include follow-up monitoring with you or your nominee.

It's important that you or the person managing your funding spend your money in the way it's described in your plan, and only on NDIS supports. You can spend up to the available funds you can access during your current funding period. You also need to spend within the amount specified for the funding component amount, and the total

funding amount in your plan. We'll call the total funding amount a 'total budget amount' in your plan.

Funding won't be included in your plan to pay for supports that aren't NDIS supports, except for [replacement supports](#).

If you or the person managing your plan does not spend your funding on NDIS supports and in the way it's described in your plan, we'll take steps to protect your funding. This includes if you deliberately do the wrong thing. For example, we may review who can manage the funding in your plan. Or we may vary your funding periods to reduce the amount of funding you can access at one time.

What if I think someone is doing the wrong thing with NDIS funds?

If you think someone might be doing the wrong thing or committing fraud, you should report it. Fraud might include:

- charging for supports you didn't get
- charging for more support than you get.

The best way to report suspected fraud is to call the NDIS Fraud Reporting Hotline on 1800 650 717.

You can find out more about [fraud](#) on our website.

If you buy supports that aren't NDIS supports in your plan, or that aren't a [replacement support](#), you may need to pay this money back to the NDIS. Find out more in section 'What happens if you buy supports that aren't in your plan?' in [Our Guideline – Your plan](#).