

Delivered by the
National Disability
Insurance Agency

Quarterly Report Q4 2024-25

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Acknowledgement of Country

The NDIA acknowledges the Aboriginal and Torres Strait Islander peoples of this nation and the Traditional Custodians of the lands across which our Agency conducts our business. We pay our respects to the custodians of the land on which we work as well as their ancestors and Elders, past and present.

The NDIA is committed to honouring Aboriginal and Torres Strait Islander peoples' unique cultural and spiritual relationships to the land, waters, seas and their rich contribution to society.

Artwork 'Belonging' by Charmaine Mumbulla.

Contents

This report	6
Introduction	7
Section 1 Participants and their plans	17
1.1 Number of participants in the NDIS	19
1.2 Participation rates	20
1.3 Participant characteristics	21
1.4 Specialised service delivery	26
1.5 Children in the NDIS	28
Section 2 Participants and family and carer outcomes	29
2.1 Participation in work and community and social activities	30
2.2 Perceptions of whether the NDIS has helped	34
Section 3 Participant experience	38
3.1 Participant Service Charter engagement principles	40
3.2 Participant Service Guarantee	41
3.3 Home and living decisions	43
3.4 Complaints and participant critical incidents	45
3.5 Review requests and Administrative Review Tribunal cases	48
3.6 Participant satisfaction	54
3.7 The NDIA National Contact Centre	58

Section 4	Providers and the growing market	61
4.1	Support categories	62
4.2	Funding management types	63
4.3	Plan managers	64
4.4	Supported independent living	66
4.5	Specialist disability accommodation	68
4.6	Market stewardship activities	69
4.7	NDIS pricing	72
Section 5	Financial sustainability	73
5.1	Total payments	75
5.2	Average and median payment trends	76
5.3	Average plan budget trends	77
5.4	Operating expenses	81
Section 6	Staff and the NDIS community	82
6.1	Workforce diversity, inclusion and engagement	83
6.2	Public data sharing and the latest release of information	83
6.3	Integrity of the NDIS	84
	Appendices	
	Appendix A: Key definitions	90
	Appendix B: Outcomes Framework Questionnaires	94
	Appendix C: Approved plans and children accessing early connections	95
	Appendix D: State/Territory – comparison of key metrics	96

This report

This report is an overview of the performance and operations of the National Disability Insurance Agency (NDIA) for the 3 months from 1 April 2025 to 30 June 2025.

The NDIA is committed to ensuring all data around NDIA performance and participant outcomes remains accessible and easy for different audiences to understand.

This report presents analysis and key insights. Key figures and comparisons of state and territory statistics can be found in the appendices.

As part of streamlining the report, some appendices are available as supplements on the [NDIS website](#):

- national, state and territory statistics
- participants by service district and support type, and committed supports and payments by service district
- specialist disability accommodation (SDA).

Key highlights for quarter 4, 2024–25

Sustained improvement in participant outcomes

The National Disability Insurance Scheme (NDIS) exists to help Australians with disability live full, inclusive lives in the community.

The NDIS supports people with disability to have independence, choice and control, whether when working, studying, volunteering or engaging with their community in some other way.

The latest National Disability Insurance Agency (NDIA) longitudinal data shows sustained achievement in key areas of participants' experience with the NDIS, including:

- Participants aged 15 years and older report an increase in participation in community and social activities, from 34% at baseline to 41% at latest reassessment – a relative increase of 21%.
- There has been a 6-percentage point increase in families and carers reporting paid employment, from 47% at baseline to 53% at latest reassessment.
- Young children aged from birth to starting school had improvements of 4 or more percentage points across all domains. Parents and carers reported the largest improvements, at 6 or more percentage points, for choice and control, fitting into family life and fitting into community life.
- Children between starting school and age 14 had improvements of more than 10 percentage points across all domains. Daily living had the strongest improvement at 15 percentage points.
- Participants aged 15 years and older also reported improvements across all domains. The largest improvements, at more than 10 percentage points, were reported for choice and control, daily living, health and wellbeing, and social, community and civic participation.
- Eighty-one per cent of participants aged 15 and over who have been in the NDIS for over 2 years report having greater choice and control in their lives, up from 67% at first reassessment or check-in point.
- Participation in work has more than doubled, growing from 10% to 23% for participants aged 15 to 24 years who have been in the NDIS for over 2 years.

Reforms are making the NDIS stronger

The NDIS is transforming the lives of many Australians - creating social and economic benefits not just for participants but for all Australians. It now provides opportunity and choice for more than **739,000** Australian and their families.

Actions being taken today are making the NDIS stronger and are helping to ensure current and future Australians with disability continue to receive the supports they need.

Reforms enabled by the changes to legislation in 2024 are addressing concerns that not everyone was experiencing benefits equally. These reforms are essential in facilitating better outcomes for people with disability. Significant Government investment in the NDIA's workforce emphasises the importance and collective focus on improvement.

To ensure the NDIS is here for generations to come, the National cabinet set a target to reduce annual cost growth to 8% by 1 July 2026.

At 30 June 2025, the annual rate of growth in NDIS costs had fallen to 10.8%, lower than the growth rate of 12% projected in the NDIA's Annual Financial Sustainability Report (AFSR) in June 2024.

The reduction in the growth of the costs has been achieved even as 26,500 new participants entered the NDIS in the June 2025 quarter.

The AFSR estimates the reforms will reduce NDIS expenses over the 4 years to 2028 by \$19.3 billion. The reforms are helping participants spend within their plans, through the introduction of NDIS support lists and funding periods. This helps to reduce overspending of plans and supports sustainability of the NDIS.

Data in this quarterly report show intra-plan inflation, including overspending of plan budgets has fallen from 7.6% 12 months ago to 5.0% to 30 June 2025.

Investment and achievement in integrity and anti-fraud activity is also increasingly contributing to better safeguarding for participants as well as the sustainability of the NDIS.

Welcoming new NDIS ministers

Following the 3 May 2025 federal election, the NDIA farewelled the Hon Amanda Rishworth MP as Minister for the NDIS and Assistant Minister the Hon Dr Anne Aly MP and welcomed two successors. The Hon Mark Butler MP has been appointed Minister for Health and Ageing and Minister for Disability and the National Disability Insurance Scheme. Joining him is Senator the Hon Jenny McAllister as Minister for the NDIS.

Minister Butler serves in Cabinet as Minister for Health and Ageing and Minister for Disability and the National Disability Insurance Scheme. Minister McAllister holds the portfolio of Minister for the National Disability Insurance Scheme.

Minister McAllister visited the NDIA's Geelong national headquarters days after she was sworn into the new ministry by the Governor-General, addressing staff then meeting with service delivery and co-design team members.

The Government announced an important administrative change for the NDIA following the election, with the Department of Health, Disability and Ageing replacing the Department of Social Services as the NDIA's portfolio department.

The NDIA has worked with Department of Social Services and Department of Health, Disability and Ageing to ensure the machinery of government transition is seamless and will be a positive development for participants.

Working with the disability community

The NDIA has an extensive co-design and engagement program underway to amplify the voices of people with disability in NDIS reforms.

Co-design groups help the NDIA to design new navigator functions, participant pathways, and approaches to safeguarding, assessments and budgeting.

An independent evaluation of previous co-design projects undertaken by the NDIA was published during the quarter, which will help to refine our co-design practices and strengthen co-design and engagement activities. In addition, 2 new advisory groups have been established to focus on supported decision-making and matters affecting people with disability in rural and remote areas.

The NDIA's LGBTIQ+ Strategy, first developed in 2020, is being updated and is expected to be released later this year. It includes new priority actions that are aligned with feedback collected from stakeholders over the past year.

The Culturally and Linguistically Diverse (CALD) Strategy 2024–2028 and its action plan are being implemented. The NDIA is working to improve outcomes for people with disability from CALD backgrounds in 6 priority areas – infrastructure, staff capability, accessible communications, markets, data and outreach.

To ensure information about the NDIS reforms is available and accessible to all participants, their families, carers and supporters, information sessions are being held to enable them to learn and ask questions about the reforms.

A new webinar series, 'Understanding the NDIS', was launched this quarter and has attracted 1,218 attendees over 11 sessions to date. You can register for these sessions at the [latest events](#) page on the NDIS website.

Supported decision making hub

The [Supported decision making hub](#) was launched on the Disability Gateway website on 21 March 2025.

The NDIA developed the hub with the Department of Social Services, the Department of Health, Disability and Ageing, and Inclusion Australia.

The development of the hub was a key action of the NDIS Supported Decision Making Policy and the associated implementation plan, released on 4 May 2023 by the Minister for the NDIS. The policy and implementation plan aim to improve the way people with disability are supported to make decisions in the NDIS.

The hub is a central home for resources about supported decision-making for people with disability and their decision supporters. It promotes over 200 quality resources on 12 key themes, including NDIS decisions, employment, health and accommodation.

Between 21 March and 30 June 2025, the hub had 6,059 users. The topics with the most engagement were:

- NDIS/disability supports (1,267 users)
- resources for people with disability: NDIS/disability supports (738 users)
- general information (633 users).

New NDIS early intervention pathway for children younger than 9

The NDIA is continuing work commenced in quarter 3 to design a new NDIS early intervention pathway for children younger than 9 with developmental delay or disability.

A high-level concept has been developed that covers major stages of the pathway experience, including:

- connecting with the NDIS
- applying for access
- assessment of support needs
- the budget setting and planning process
- implementing a plan and engaging services
- better monitoring of progress toward early intervention outcomes
- transition from the NDIS (for those children who will not need long-term NDIS support).

In quarter 4 we focused on testing the pathway concept to inform the development of design options. We conducted the following activities.

- Co-design with parents and carers with lived experience of having a child younger than 9 in the NDIS. Parents and carers shared their experiences of the current pathway and their suggestions for how the new pathway could ideally be experienced in the future. We have also sought feedback from parents and carers on early design concepts via workshops, individual interviews and surveys. This co-design work is continuing.
- Engagement with the NDIA Children's Expert Advisory Group on a range of design topics, including advice on developmental delay, valid assessment approaches for children, and best practice in early intervention for children with disability or developmental delay. The advisory group members have diverse knowledge and experience, and they include academics and experts in early childhood intervention, groups representing the interests of children with a disability and their families, and people with lived experience.
- Developing design principles in collaboration with parents and carers and the Children's Expert Advisory Group to guide us in designing the new pathway.
- Planning future engagement and consultation with stakeholders to guide us in designing the new pathway.

Last quarter, the NDIA released an approach to market for support needs assessment tools for children. This quarter, we have been reviewing submissions to determine their suitability. We will continue to examine potential assessment tools and approaches to inform the development of a support needs assessment tailored for children.

Improving outcomes for First Nations peoples with disability

In line with the NDIS First Nations Strategy 2025–30, the NDIA continues to focus on ensuring the NDIS and the culture and operations of the NDIA meet the needs of First Nations peoples.

We are working to strengthen the First Nations disability market and sector.

This will grow First Nations-owned and operated disability services across Australia, ensuring services reach people where they live. We also want all service providers to be supported to deliver services that remote communities and First Nations participants can access with confidence.

Known First Nations disability services are less than 1% of providers, despite 8% of NDIS participants being First Nations peoples.

We are also prioritising the design and provision of return-to-Country supports and the funding of family supports. These were recommendations of the Disability Royal Commission.

To strengthen First Nations peoples' voices in co-design in the NDIA, we are establishing a First Nations Consultation Group to work across the reform agenda, including collaborating with other co-design working groups.

The organisational cultural safety change initiative is underway to strengthen cultural safety across the NDIA.

This will focus on how cultural safety is embedded in areas such as governance, evidence and data, our ways of working, participant journeys, policy and program development, as well as workforce transformation and capability.

As part of this initiative, the NDIA hosted a workshop in June, 'What is cultural safety for First Nations staff?' In a post-workshop survey, 93% of respondents agreed or strongly agreed the NDIA is taking meaningful steps towards improving cultural safety.

Quality supports pilot programs underway

The Independent Pricing Committee (IPC) was established in September 2024 to review the NDIA's approach to pricing and create better outcomes for NDIS participants and providers. The role of the IPC is to recommend changes designed to lead to a higher quality and sustainable disability provider market.

The quality supports pilot programs follow the IPC's vision for a differentiated pricing model that is based on the benefits derived by participants, as well as the costs incurred by providers.

Two 12-month pilot programs have begun examining the features of high-quality supports for NDIS participants, particularly those with complex needs, which will then inform future pricing approaches.

The supported independent living (SIL) pilot program involves participants requiring 24/7 support, while the support coordination pilot involves experienced Level 2 and 3 support coordinators. Up to \$26 million in grant funding has been distributed across participating SIL providers, and a further \$2 million across participating support coordination providers.

A further quality supports pilot program will be launched later this year and will focus on smaller SIL providers, including those supporting regional and remote communities and those providing services in First Nations and CALD communities.

Additionally the program will be extended later in 2025 with a new pilot for Therapy providers and other initiatives to gather further information.

Pricing reforms

The IPC has delivered its final report, outlining a series of pricing reforms that will lay the foundations for a mature and thriving NDIS marketplace.

At the heart of these reforms is a new, differentiated approach to pricing, where supports and services may attract different price caps, based on a range of factors, including how they deliver benefits to participants.

The NDIA is developing a staged implementation plan for pricing reforms, based on ongoing market monitoring, targeted analysis and consultation with stakeholders. The NDIA is committed to publishing this 3-year pricing workplan before the end of this year.

Other actions arising from the IPC report include a full review of therapy pricing, with outcomes expected by the end of next year, and resetting the Annual Pricing Review cycle to improve planning for the 2026–27 pricing arrangements and price limits.

Annual Pricing Review

In June, the NDIA published the 2024–25 Annual Pricing Review, outlining 17 changes to the NDIS pricing arrangements and price limits for the year ahead.

Notably, changes to some therapy prices and travel payments focus on providing fair value for participants and reflect a maturing provider market.

Pricing is an important tool for ensuring value for money and more equitable outcomes for all NDIS participants.

This year's review was informed by the largest and most comprehensive collection of data to support therapy pricing recommendations – covering more than 10 million additional transactions across 13 comparable government schemes, including Medicare.

This improved data showed many of the NDIS therapy pricing limits were significantly out of step with broader market rates.

The adjustments, which took effect from 1 July 2025, are a big step towards further safeguarding participants to ensure they are charged the same as anyone else.

We will continue to monitor markets to ensure participants have access to quality supports and continue to receive the supports they need, and that the market remains sustainable.

NDIS data shows the NDIS provider market continues to grow – at 30 June, there are more than 269,000 providers supporting 739,000 NDIS participants.

Since June 2024, the number of providers supporting plan-managed participants has increased by 7,000, while the number of providers supporting NDIA-managed participants has increased by 700.

The NDIA began collecting data on the number of providers supporting self-managed participants in the second half of 2024.

Quarter 4 updates

1. Scheme financial experience
2. Key areas of improvement
 - supporting participants to spend within their plans
 - improved NDIA performance
 - early action driving quicker review outcomes
 - combatting fraud and strengthening integrity

Scheme financial experience

Total Scheme expenses for the 12 months to June 2025 were \$46.3 billion (on an accrual basis), which is \$520 million below the June 2024 AFSR projections. The June 2025 AFSR projections are currently being developed, and will include data to June 2025.

Data as at June 2025 has the year-on-year growth rate at 10.8%, lower than the growth rate of 12% in the June 2024 AFSR projections.

As of June 2025, data shows that for participants who joined the NDIS before June 2020, both total annualised budgets and overall payments have increased year on year over the last 3 years by between 9% and 19% per annum.

Total plan inflation in the June 2025 quarter is 9.7%, of which 5.0% is intra-plan inflation and 4.7% is inter-plan inflation. This is lower than the total figure in the June 2024 quarter of 10.1%, of which 7.6% was intra-plan inflation and 2.5% was inter-plan inflation.

Key areas of improvement

Supporting participants to spend within their plans

Participant support and partnership are vital to the success of the NDIS.

In the June 2025 quarter, the NDIA embarked on an extensive education campaign to help participants spend within their plans and avoid prematurely exhausting their plan budgets.

We emailed participants, nominees and providers, setting out practical information, guidance and support about funding periods and NDIS supports lists.

The aim was to provide participants with the information they need to make decisions about how to use their budgets to access supports.

In June, we published the first of a series of evaluation reports, 'Early observations on the implementation of NDIS supports (s10) and funding periods (s33)'.

The report drew on input from disability representative and carer organisations, including Disability Advocacy Network Australia.

We are continually assessing how the reforms are being introduced, keeping participant experience and outcomes as our focus.

We are committed to supporting participants and the disability community through these changes, and to learning and improving so we can deliver the best possible experience for participants.

Improved NDIA performance

The NDIA continues to improve its processes and performance to optimise the NDIS experience for participants.

Improvements this quarter include:

- Continued improvement in timeframes for approving first plans and a continued focus on reducing the outstanding items for unscheduled reassessments.
- Continued improvement in the timeframes for completing an internal review of a reviewable decision.
- Continued improvement in the timeframes for closing complaints, with 90% closed within 21 days this quarter.
- Continued collaboration with state and territory governments to improve hospital discharge processes. The average number of days between an NDIS participant being medically ready for discharge and being discharged was 16 days in the quarter. This has remained steady since the March 2025 quarter and is down from a peak of 30 days in the March 2023 quarter.
- Onboarding and lifting the capability of frontline staff over the past year to help reduce waiting times and improve service access to improve the experience for participants.

- The number of participants younger than 65 in aged care reduced from 734 to 670, excluding First Nations peoples aged 50 to 64 years who meet the exceptional circumstances criteria.
- The NCC customer satisfaction rate was 91%, exceeding the target (80%).
- The NCC achieved a significant milestone, launching a new enquiry specialisation model and a new phone line for providers. These enhancements will help staff develop expertise in key service areas, improve first-call resolution rates and enhance the quality of advice given to participants and providers.

Early action is leading to quicker review outcomes

A focus on dispute resolution, early assessment and case management – and a significant investment in specialist staff – is producing quicker review outcomes for NDIS participants.

Progress continued this quarter in making NDIA processes as fair and timely as possible.

Over the 12 months to 30 June 2025, 96% of Administrative Review Tribunal (ART) matters were resolved prior to a substantive hearing in the tribunal.

Of matters resolved pre-hearing:

- 73% were resolved by agreement between the NDIA and the participant/applicant
- 27% were withdrawn by the participant/applicant or dismissed.

The main reason for the NDIA changing its position before a substantive hearing was participants providing new information due to early engagement.

Most substantive ART decisions in 2024–25 affirmed the decisions of the NDIA (55%) while 11% of decisions were varied and 34% set aside.

The NDIA has recruited 1,300 additional frontline staff in 12 months and is making more decisions than ever before. More decisions naturally lead to more reviews.

This is why the NDIA is investing in new approaches to dispute resolution, to provide earlier, quicker and fair outcomes for all participants. These approaches include:

- proactive calls to participants before internal reviews to achieve earlier resolution of issues
- early assessment teams working with participants to better understand their circumstances and discussing options before an ART hearing
- case managers working directly with participants and prospective participants to understand their issues earlier in ART proceedings.

Combatting fraud, strengthening integrity

The Fraud Fusion Taskforce and Crack Down on Fraud (CDoF) program are making the NDIS stronger and more sustainable.

The Australian Government created the Fraud Fusion Taskforce in November 2022 to detect, disrupt and prevent serious crimes, including organised crime, committed against the NDIS and other payment programs.

The taskforce has grown to include 23 agencies sharing data and working together to identify and prosecute unscrupulous individuals who seek to exploit the NDIS.

The Fraud Fusion Taskforce has now disrupted over 1,900 problematic providers claiming from the NDIS.

The success of the taskforce demonstrates the sophistication of the NDIA's capabilities and methods and the NDIA's commitment to ensuring every NDIS dollar goes where it is intended – to help participants live full lives in their communities.

At 30 June, there were 100 Fraud Fusion Taskforce specialists employed at the NDIA, with 50 taskforce personnel in other agencies directly working on NDIS cases.

Complementing the work of the taskforce, the CDoF program has a 450-strong workforce focused on delivering systems to detect fraud, and an additional 140 staff dedicated to payment integrity reviews.

Reinforcing the success of the Fraud Fusion Taskforce, results as at 30 June included:

- Significant growth in warrant executions on suspected criminals, from a total of 30 in the 4 years from 2018–2021 to more than 35 in the first 4 months of 2025.
- Tip-offs from the public had more than doubled to about 2,500 a month, from an average of about 1,000 a month before the taskforce was established late in 2022.
- More than 630 active taskforce investigations across the 23 member agencies.

The CDoF program focuses on improving the NDIA's strategic capability by enabling information and communications technology systems and business processes to detect and prevent fraud.

Achievements in the June 2025 quarter included:

- Consumer identity and access management (CIAM) – in May, the first tranche of this system was released, which will allow easier and more secure access to the NDIA's digital channels for participants and providers.
- Continued improvements and enhancements to algorithms that can detect indicators of non-compliant behaviour and flag them for human review and potential intervention.
- Integrity management system (IMS) – the first group of NDIA investigators began to access and test the IMS in April. This new capability transforms integrity case work and the NDIA's ability to work with other government bodies to identify non-compliance and fraudulent providers.
- Enhanced myGov linking – since May, online NDIS portal users receive a linking code via SMS when linking their NDIS and myGov accounts, rather than having to call the NDIS National Contact Centre. This is easier for participants and better safeguards their personal information.

The advancements enabled by the CDoF program continue to bolster the capabilities of the Fraud Fusion Taskforce.



Section 1

Participants and their plans



Richie gets support to build a 'new normal' life after his stroke



When Moree local Richie, 49, joined the NDIS in May 2024, he was set on rebuilding his life after a stroke at 46 left him with little speech and limited mobility.

Once a self-employed fencer and active community member, Richie spent 18 months in hospital undergoing intensive therapy.

Life began to improve when he joined the NDIS and was funded for daily living support, transport, assistive technology and home modifications.

Eager to leave hospital, Richie connected with a local disability support service provider.

Support workers Kylie and Jimmy began visiting him regularly. 'We'd say, "We're going to bust you out for a couple of hours,"' Kylie laughed. 'Then, in January this year, we busted him out full-time!'

Before Richie could return home, Kylie worked with an occupational therapist (OT) to assess his house. He needed a ramp and bathroom modifications.

"We offered our hub's accessible bathroom until Richie's home was ready,' Kylie said. 'The OT agreed, and he was discharged.'

Since then, Richie's days have been filled with recovery activities and community outings.

He's gone grocery shopping for the first time in years, watches junior footy and enjoys trips into and around town.

Richie is now a wheelchair user with limited mobility on his right side, but he continues to push himself. 'Jimmy encourages me to stand and take a few steps,' he said.

Now living on his own, with support, Richie is looking ahead. He hopes to improve his speech and mobility, drive again and return to work.

'The NDIS has been amazing. I wouldn't be where I am today without it.'

'And Kylie, Jimmy and the rest of the team – they're a great mob to be with. They're like family to me,' he said.

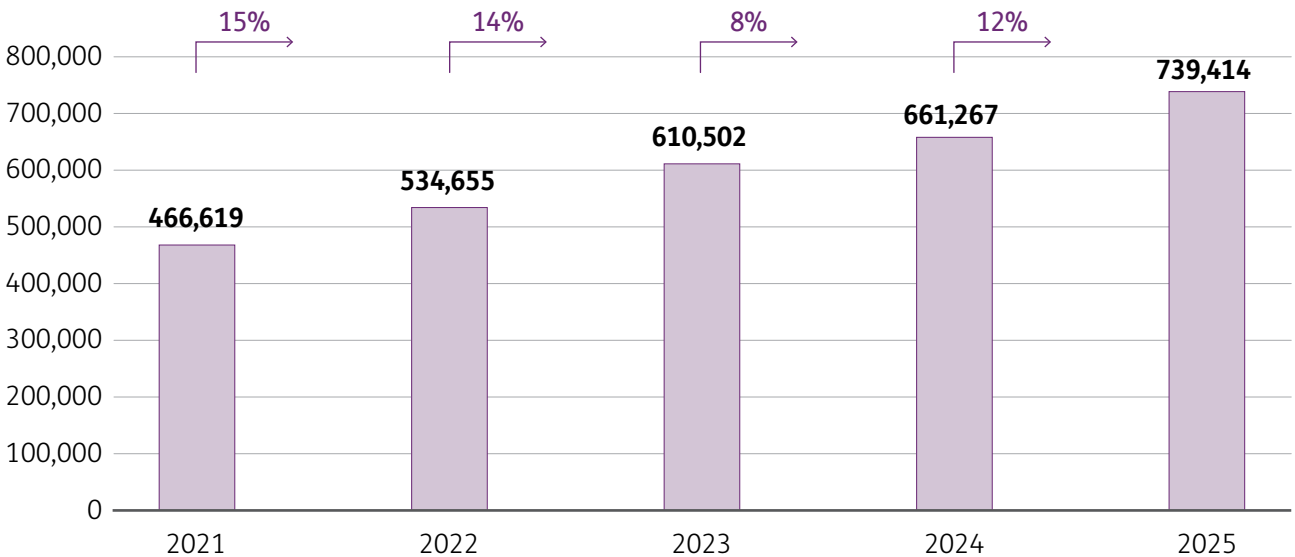
[Read more participant stories on our website.](#)

More than 739,000 participants are receiving support from the NDIS, and more than 26,500 participants entered the NDIS during this quarter.

1.1 Number of participants in the NDIS

As at 30 June 2025, 739,414 participants had approved NDIS plans. This represents a net increase of 22,413 participants since March 2025 (a 3.1% increase).

Figure 1: Active participants with approved plans and percentage increase over time for years ending 30 June¹



¹ This is the net increase in the number of active participants in the NDIS each period, noting some participants have left the NDIS.

1.2 Participation rates

The number of NDIS participants as a proportion of the Australian population peaks between the ages of 5 and 7, with approximately 11% of children aged 5 to 7 years being NDIS participants.

Participation rate refers to the proportion of the Australian population who are NDIS participants. The rate varies by age and gender (Figure 2), reflecting the prevalence of different disability types.

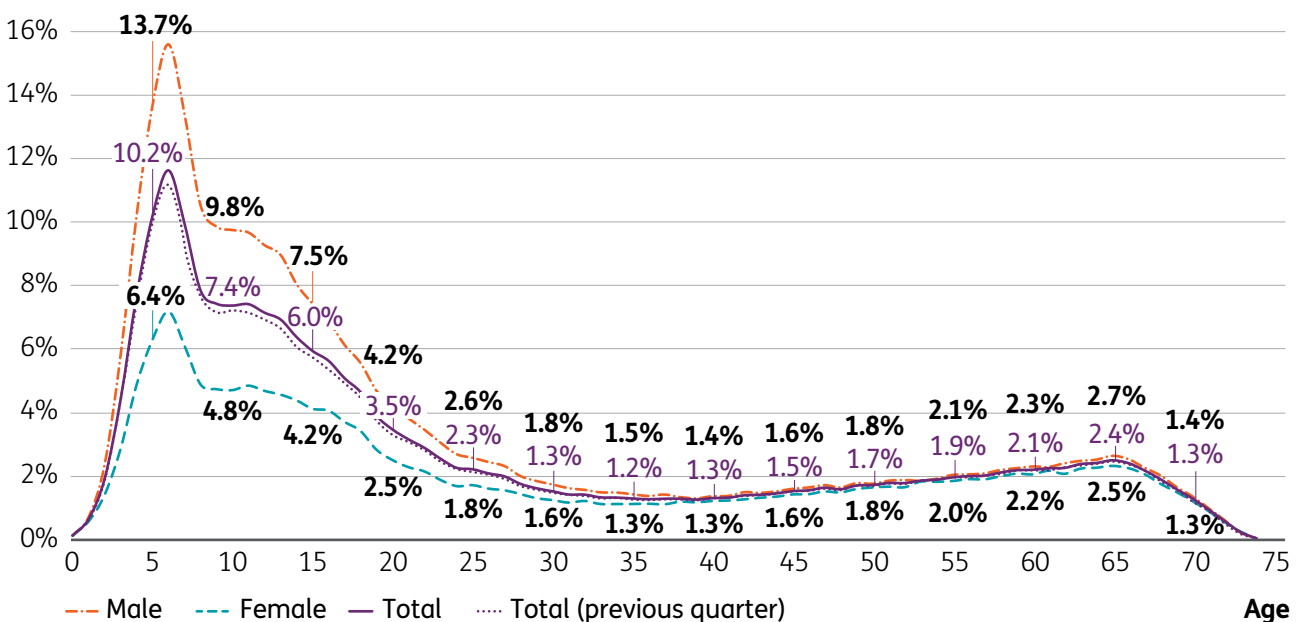
Overall, the rate of participation in the NDIS rises steeply from birth, peaking at approximately 12% at age 6. The rate then declines steadily to around 1% in the age band 35 to 40, before rising gradually to 2.5% by age 65. Beyond age 65, participants may choose to remain in the NDIS until receiving support from the Commonwealth aged care system, and participation rates decline steadily to around 0.1% by age 74. Participation rates for males and females differ considerably at younger ages. At the peak, at age 6, the participation rate for males (16%) is more than double that of females (7%).

Much of the difference in participation rates by gender can be explained by differences in diagnosis by disability type. For NDIS participants younger than 18, the most prevalent disability types are autism and developmental delay. Both disability types have higher diagnosis rates in males.

In 2025, the NDIA will continue to explore gender inequality in the NDIS. This involves considering how we understand and respond to the support needs of women, girls and female-identifying and non-binary people with disability across different life stages. We will also consider what positive outcomes might be and how to measure success.

Psychosocial disability and intellectual disability are a high proportion of the remaining disability types. The participation rates by age and gender in each service district are shown in the supplements to this report.

Figure 2: Participation rates²



² There were 8,436 participants aged 0 to 74 years with a gender of 'Other'. The participants for this group are included within the total rates, but not the gender-specific participation rates.

1.3 Participant characteristics

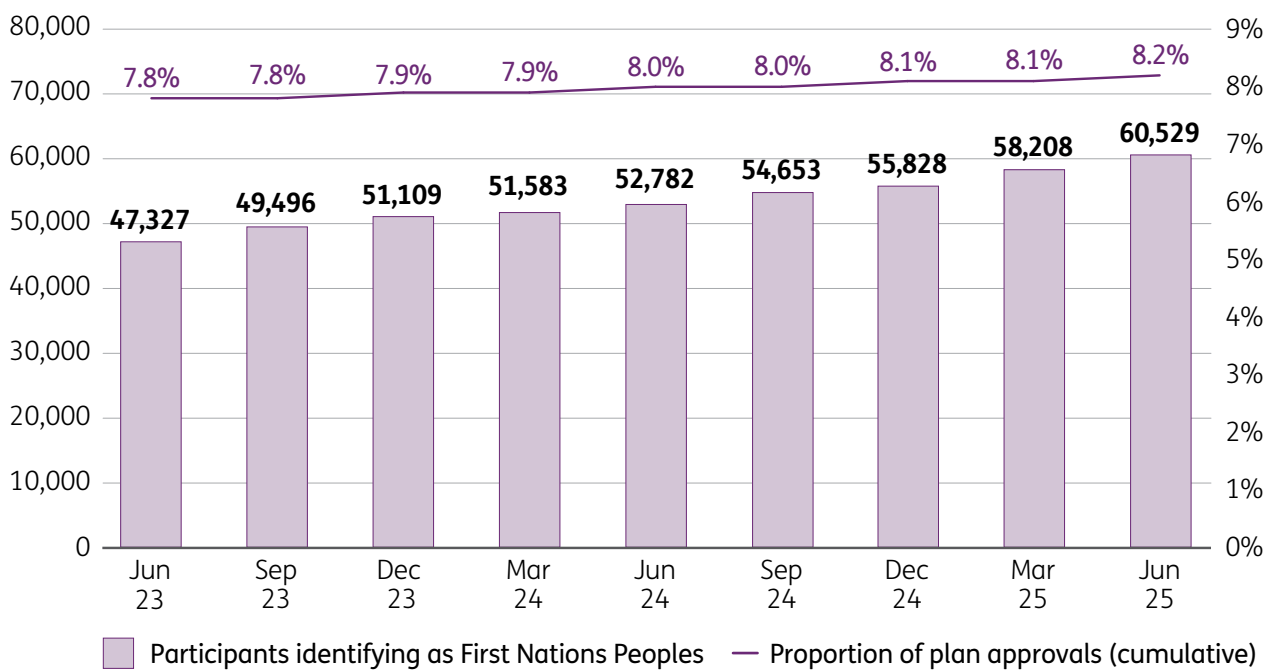
The NDIA monitors the number of participants entering the NDIS who identify as First Nations Peoples or as culturally and linguistically diverse (CALD), and those from remote and very remote areas.³

Of the 26,536 participants entering the NDIS and receiving a plan in the quarter:

- **10.2%** were First Nations Peoples⁴
- **7.7%** were CALD⁵
- **1.4%** were from remote and very remote areas.⁶

The total proportion of First Nations participants in the NDIS is 8.2% at the end of the June quarter and this is slightly higher compared to last quarter at 8.1% (Figure 3). The proportions of CALD and remote participants are similar to previous reports.

Figure 3: Cumulative number and proportion of First Nations participants⁷



3 For some participants, the identification as First Nations or CALD is not known.
 4 This compares to 8% of the Australian population identifying as First Nations Peoples who have a need for assistance. Source: Census of Population and Housing 2021 ('Need for Assistance' variable), Persons Place of Usual Residence, by Indigenous Status.
 5 The percentage of CALD participants excludes participants who identify as First Nations Peoples.
 6 This compares to 2% of the Australian population living in remote or very remote areas. Source: Census of Population and Housing 2021, Persons Place of Usual Residence, by Remoteness Area.
 7 The Explore data webpage (<https://dataresearch.ndis.gov.au/explore-data>) has detail on the numbers of CALD participants and remote and very remote participants.

First Nations Strategy and Closing the Gap commitments

Statement of Commitment to Closing the Gap

The NDIA is developing a Statement of Commitment to Closing the Gap. Once completed, this document will outline the commitments in the National Agreement on Closing the Gap within the NDIA context.

It will also detail the actions staff will take to fulfil these commitments for participants and their families and communities.

The Statement of Commitment is being co-designed with and endorsed by the NDIA Board, the Independent Advisory Council (IAC) to the NDIS, and the IAC First Nations Reference Group.

NDIS 'our way' – transformation for power-sharing

The second priority area of the First Nations Strategy calls for “NDIS 'our way' – transformation for power-sharing”, which aims to integrate First Nations governance into the NDIA's decision-making, co-design and operations.

The IAC First Nations Reference Group held their second formal meeting in Gimuy, Cairns and online on June 11–12, 2025. Members discussed what they have heard in their communities, including during a visit to Yarrabah Community. They also received a briefing on the work of the NDIA's First Nations Group and the NDIA's Rural and Remote Strategy.

The reference group offers advice to the IAC and the Board on issues and solutions for First Nations Peoples with disability, including developing the implementation plan for the First Nations Strategy.

To strengthen First Nations Peoples' voices in co-design in the NDIA, a First Nations Consultation Group is being established. The expression of interest process commenced in June 2025 and selection will be guided by lived experience of disability, strong connections to First Nations communities, specialist knowledge and expertise, and a commitment to diversity, including geography, gender and disability.

First Nations co-design framework and toolkit

To advance the NDIA's commitment to inclusive decision-making and co-design, a First Nations co-design framework and toolkit are being developed. Draft versions were completed in June, along with an accompanying commitment statement. These will be piloted in the co-design of the First Nations Strategy Implementation Plan. The framework and toolkit will be finalised later in 2025, and will help business areas implement First Nations co-design, enhance the NDIA's co-design practices, and ensure cultural safety and respect when engaging with First Nations peoples with disability.

Cultural safety initiatives

The First Nations Strategy emphasises that cultural safety is essential for a successful relationship between the NDIA and First Nations peoples with disability. To improve access to the NDIS and achieve equitable outcomes, a cultural safety working group will oversee the development and implementation of an organisational cultural safety initiative.

As part of this initiative, NDIA-specific audit and review tools have been developed.

Section 1: Participants and their plans

The outcome will be a baseline cultural safety audit report with recommendations, leading to the development of an organisational cultural safety plan, expected to be completed by December 2025.

This work aligns with the NDIA's commitments to Closing the Gap Priority Reform Three – Transforming Government Organisations. This initiative aims to improve mainstream institutions, making them accountable for Closing the Gap. It also seeks to ensure they are culturally safe and responsive to the needs of Aboriginal and Torres Strait Islander peoples.

First Nations pathway initiatives

The NDIA is increasing opportunities for First Nations peoples with disability to access the NDIS by creating culturally safe access pathways. Guided by the First Nations Strategy, this work responds to Closing the Gap and key reform priorities, including the Disability Royal Commission and NDIS Review.

This year, the NDIA will develop a First Nations Market and Sector Development Strategy. Through co-design with First Nations stakeholders, the strategy aims to build a more culturally safe and sustainable disability service ecosystem. A national scoping study found that known First Nations disability services are less than one per cent of providers supporting First Nations participants, despite 8 per cent of NDIS participants being First Nations peoples. This substantial underrepresentation of First Nations disability services reflects several market challenges. We expect these issues to feature prominently when co-design commences, and we're preparing to ensure First Nations participants, service providers and community voices are central to developing solutions that work for communities across Australia.

Collaboration with NACCHO and affiliates

The First Nations Group has contracted the National Aboriginal Community Controlled Health Organisation (NACCHO) and their affiliates to work in partnership with the NDIA to develop policy analysis, advocacy and advice. The organisations have been recruiting staff and working with the NDIA to establish a baseline data set.

This work is one example of how the NDIA is actioning its commitment to Closing the Gap Priority Reform One – Formal Partnerships and Shared Decision Making. Work is being done to identify First Nations data assets and data needs to support organisational objectives, particularly the work of the First Nations Strategy.

Data assets are also being reviewed for how they can contribute to Closing the Gap Priority Reform Four – Shared Access to Data and Information at a Regional Level, in a way that respects privacy and Indigenous data sovereignty principles.

Section 1: Participants and their plans

First Nations Peoples and participants in remote and very remote areas

First Nations Peoples and remote participants continue to be supported by the NDIA to understand, access, navigate and use the NDIS.

Remote service delivery model

The NDIA has implemented a strengthened service model for participants in remote, very remote and all non-partnered areas, including:

- providing face-to-face services through remote community connectors and geographically tied NDIA staff. These personnel regularly visit communities to support participants throughout their NDIS journey
- a dedicated sector engagement and market development team. This team will work with communities on local priorities and use alternative commissioning approaches to secure services where they have not been previously available
- working with other government agencies to provide joint services where possible, recognising that NDIS participants need seamless access to supports beyond the NDIS.

The service model is supported by a national program of access and planning clinics to enable people to access the NDIS and supports more quickly. Several access clinics have been delivered in remote locations, including:

- Bathurst Island, Northern Territory
- Big Rivers, Northern Territory
- Lajamanu, Northern Territory.
- Maningrida, Northern Territory
- Melville Island, Northern Territory
- Anangu Pitjantjatjara Yankunytjatjara Lands, South Australia
- Fitzroy Crossing, Western Australia
- Katanning, Western Australia
- Tambellup, Western Australia.

Future access clinics will include:

- Cocos (Keeling) Islands, Indian Ocean Territories
- Milingimbi, Northern Territory
- Papunya, Northern Territory
- Ramingining, Northern Territory
- Yuendumu, Northern Territory
- Lockhart River, Queensland
- Yalata, South Australia.

Section 1: Participants and their plans

Local workforce development

The NDIA continues to work across government to find ways to use local workforces to support NDIS participants, in particular:

- National Indigenous Australians Agency – Remote Jobs and Economic Development Program
- Department of Health, Disability and Ageing – Integrated Care and Commissioning project.

Remote community connector program expansion

The NDIA is undertaking a tender process to expand the remote community connector program to provide coverage to all remote First Nations communities, so more participants will have access to local NDIS experts. We expect to expand from the current 38 contracts to 50, covering approximately 575 communities.

Alternative commissioning pilot

The 2023–24 federal Budget committed \$7.6 million over 2 years to pilot alternative commissioning approaches to improve access to supports in remote and First Nations communities:

- Maningrida, NT, announced in August 2023, trialled direct commissioning of therapy services to address significant service delivery gaps with community and stakeholder input shaping all procurements to reflect local needs.
- Katanning, WA, announced in July 2024, focused on market facilitation and enhancing cultural safety in service delivery.

The pilot program concluded on 30 June 2025. The NDIA will prepare a final report to document the goals, activities, expenditure and impacts at each of the funded pilot sites. This is in addition to the project evaluation undertaken by the Australian National University.

NDIA Rural and Remote Advisory Group

The NDIA has established a Rural and Remote Advisory Group to ensure participants and stakeholders who understand the unique environments outside cities have a voice in NDIS reforms and NDIA programs.

The advisory group will not resolve specific participant issues, but rather provide broad strategic advice that can inform policy and operational decisions by the NDIA.

Culturally and linguistically diverse participants

The NDIA continues to implement the NDIS CALD Strategy, released in April 2024. The first annual report will be published next quarter.

During this quarter we continued to work with community organisations and mainstream services to improve how people with disability from CALD backgrounds access and use the NDIS. We held 66 engagement activities with approximately 900 stakeholders to discuss the CALD community's experience with the NDIS.

Section 1: Participants and their plans

We also continued to improve NDIA policies and inclusive practices to support CALD staff.

We will ensure the priorities of the CALD Strategy are considered throughout implementation of the NDIS reform initiatives.

The CALD Expert Advisory Group continues to support the NDIA in implementing and monitoring the progress of the strategy.

1.4 Specialised service delivery

The NDIA is committed to improving access, outcomes and experience for participants who require specialised planning pathways and liaison.

The NDIA delivers targeted support through specialised pathways for participants with complex support needs, including participants involved in the justice system and participants transitioning from aged care or hospital settings.

Participants involved in the justice system

The NDIA is committed to supporting participants involved in the justice system to access the NDIS for reasonable and necessary disability supports. Every Australian, regardless of interaction with the justice system or criminal conviction, is entitled to access support systems offered by governments to help them live their life.

The NDIA's Justice Liaison Officer (JLO) role is the primary point of contact for stakeholders in the justice system, including people eligible for the NDIS. JLOs work alongside state and territory government justice services and the NDIA Justice Planning team to support current and prospective participants in correctional and forensic settings.

The Justice Planning team provides specialised support to participants involved in the justice system to ensure they can access the disability supports they need while in custody and when transitioning into the community.

Justice Advisory Panel

The NDIA Justice Advisory Panel held its second meeting for 2025 in April. Chairperson Ken Lay AO and panel members Jennifer Cullen AM and the Honourable David Harper AM joined NDIA executives to examine policy and systemic issues between state and territory governments at the justice interface. For current or potential participants leaving custody, these issues can impact their transition into the community.

By exploring deidentified case studies, the panel gives advice to the NDIA on how NDIS supports can work together with supports from other systems to improve participant outcomes.

While the panel does not have decision-making powers, the case studies provide information about the participant experience and demonstrate risks, issues, and policy and systemic challenges in this area.

Section 1: Participants and their plans

Information sharing

The NDIA is continuing to collaborate with state and territory governments about NDIS participants with a history of high-risk offences to ensure all NDIS participants receive the right supports from the right service systems.

Younger people in residential aged care (YPIRAC)

The Australian Government is working to reduce the number of younger people living in and entering residential aged care. The aim, unless there are exceptional circumstances, is to help them move into age-appropriate accommodation with the supports they need. The NDIA is supporting this commitment with a team of dedicated YPIRAC planners and accommodation officers.

Since 1 July 2016, 1,117 participants have left residential aged care and moved into more appropriate accommodation settings.⁸

The number of participants younger than 65 in residential aged care reduced from 734 in March 2025 to 670 as at the end of the fourth quarter of 2024–25.⁹ Of these 670 participants, 140 have an identified goal to move out of residential aged care.

Hospital discharge

The NDIA continues to focus on the safe and timely discharge of NDIS participants from hospital.

In the June 2025 quarter:

- the target of contacting NDIS participants within 4 days of the NDIA being notified of their hospital admission was achieved for **82%** of participants, a slight decrease from 87% last quarter
- the average number of days between an NDIS participant being medically ready for discharge and being discharged was **16 days**. This has remained steady since the March 2025 quarter and is down from a peak of 30 days in the March 2023 quarter.

Improving hospital discharge performance requires close collaboration with health systems and hospitals. This includes ensuring the NDIA is notified promptly of admission and receives the necessary health information to support discharge and inform planning.

The NDIA works closely with Commonwealth, state and territory health systems to support the safe and timely discharge of NDIS participants from hospital, including by:

- refining reporting methods to better understand challenges to discharge
- streamlining access to the NDIS for prospective participants in hospital
- working with health services to obtain necessary information to inform NDIS planning and allow plans to be approved quickly
- sharing educational resources and hosting information sessions for health systems staff to enable effective collaboration and the timely hospital discharge of NDIS participants
- working with health teams to improve early notification of discharge and to improve the pathway after discharge for children and those with psychosocial disability.

⁸ This includes all people who were under 65 at the time of leaving. It excludes participants who are deceased or have left the NDIS. Excludes First Nations peoples aged 50 to 64 years who meet the exceptional circumstances criteria for residential aged care.

⁹ This excludes 87 First Nations participants aged 50 to 64 years who meet the exceptional circumstances criteria for residential aged care.

1.5 Children in the NDIS

As at 30 June 2025, there were 173,466 children younger than 9 with an NDIS plan, and a further 23,402 children accessed early connections throughout the quarter.

Children younger than 9

From 1 July 2023, the NDIA extended access to early childhood arrangements, through its early childhood partners in the community, to children younger than 9. These arrangements had previously been available to children younger than 7. This change ensures children and their families are supported by an early childhood partner during and after their transition to primary school.

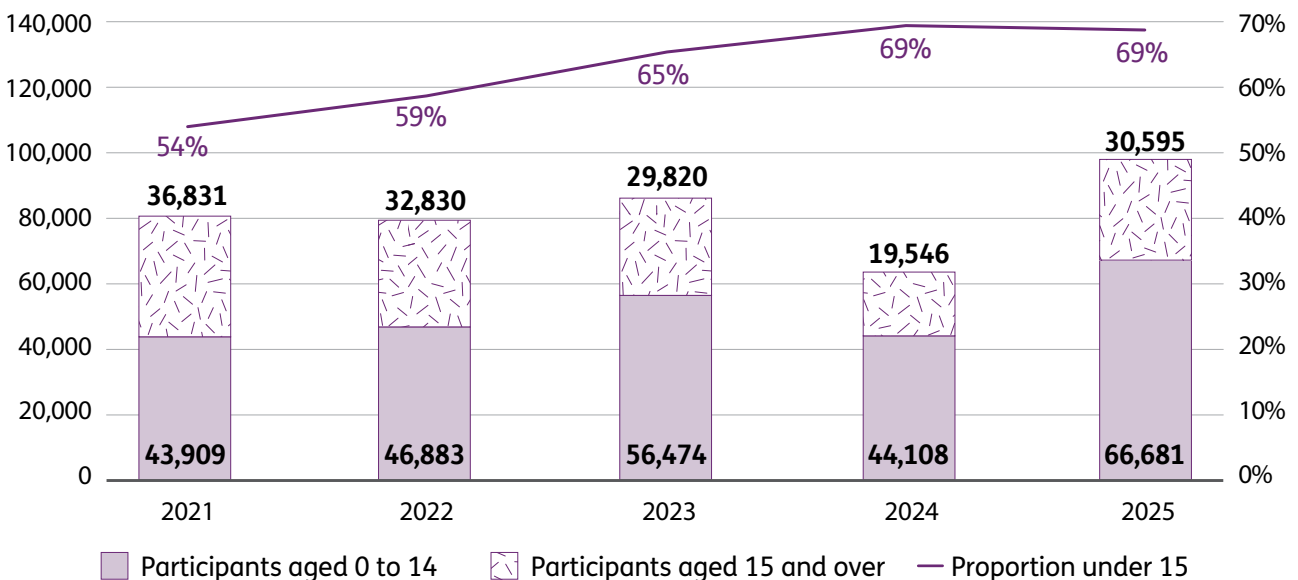
Throughout the June 2025 quarter, **23,402** children accessed early connections. Early connections gives quick access to supports that meet the needs of the child and their family, regardless of whether the child is an NDIS participant.


This quarter, the NDIA continued to focus on improving access to supports for children and families in remote and very remote areas. This effort contributed to 209 children meeting access criteria to participate in the NDIS, of which 97 identified as First Nations Peoples. Of the 173,466 children younger than 9 with an approved plan at 30 June 2025, there were 2,586 living in remote and very remote areas.

Children younger than 15

The number of children entering the NDIS continues to grow at a faster rate than older participants. Of the 97,276 participants entering and receiving a plan in the 2024–25 financial year, **69%** were children younger than 15. This continues the trend of the previous financial year (Figure 4).

Figure 4: Number and proportion of participants by age band entering the NDIS by financial year ending 30 June





“I want to walk again, and when we are out Jimmy will encourage me to stand and take a few steps.”

Section 2

Participant and family and carer outcomes

The NDIS is having a positive impact on the lives of participants and their families and carers.

2.1 Participation in work and community and social activities

Participation rates in community and social activities have increased, while the overall rate of participation in work is stable.¹⁰

Participation in community and social activities

Participants who have been in the NDIS for at least 2 years have experienced an increase in their community and social participation since they first entered.^{11,12,13}

Specifically, comparing responses at the most recent plan reassessment or check-in (between 2 and 8 years after entry) with responses at entry to the NDIS, the changes were:

- **Six** percentage point increase from **33%** to **39%** for participants aged 15 to 24 years
- **Ten** percentage point increase from **34%** to **44%** for participants aged 25 to 34 years
- **Eight** percentage point increase from **34%** to **42%** for participants aged 35 to 44 years
- **Seven** percentage point increase from **34%** to **41%** for participants aged 45 to 54 years
- **Six** percentage point increase from **34%** to **40%** for participants aged 55 to 64 years
- **Six** percentage point increase from **36%** to **43%** for participants aged 65 years and older
- **Seven** percentage point increase from **34%** to **41%** for participants aged 15 years and older.

The overall result of 41% compares to a 2024–25 target of 46%.

In general, participation in community and social activities has increased the longer participants have been in the NDIS.

Combining all age groups (Figure 5), the increase for participants who have been in the NDIS for 2 years was 5 percentage points (up from 32% to 37%). For participants who have been in the NDIS for 6 or more years, participation in social and community activities increased by 10 percentage points, from 37% to 47%.

10 Figures in this section have been rounded to the nearest whole percentage; differences are calculated from unrounded metrics.

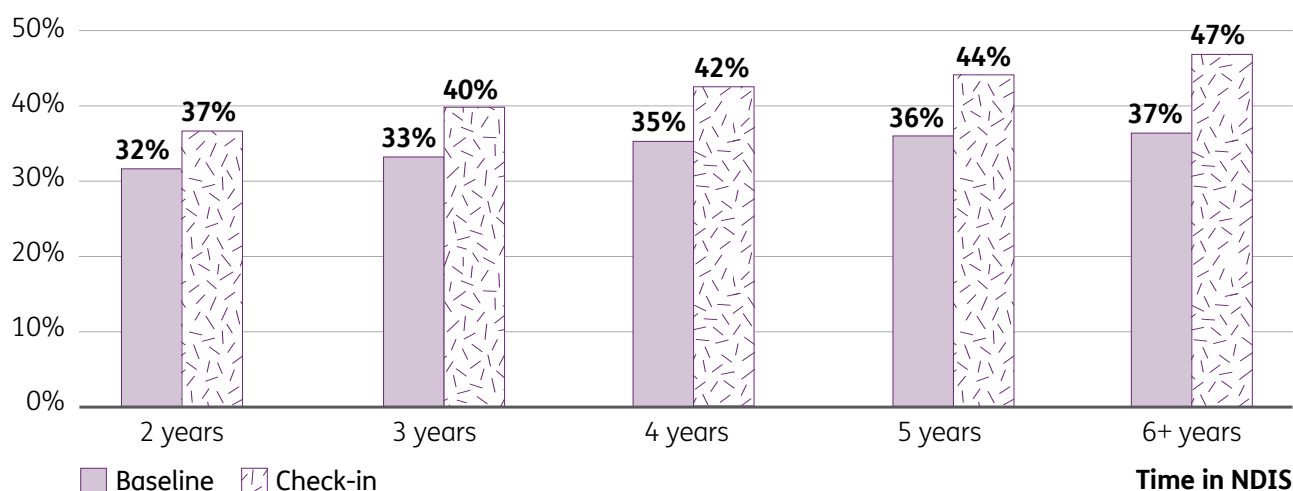
11 The results are based on responses provided to the outcomes framework questionnaires. Responses are collected at entry to the NDIS (baseline) and at subsequent plan reassessment or check-in. For the June 2025 quarter, valid responses that were previously marked as missing are now included in the results.

12 This section compares baseline indicator results when participants entered the NDIS, with results measured at the most recent participant plan reassessment or check-in for each respondent. Trial participants are excluded.

13 The participant age reported in this section is as per their latest plan reassessment or check-in.

Figure 5: Percentage change in the participation rate in social activities

Participants aged 15 years and over



Participation in work

The percentage of participants in a paid job, for those in the NDIS for at least 2 years, continues to be relatively stable. However, the percentage in a paid job and the change by number of years in the NDIS differs by age group. For instance, the largest percentage increase was for participants in the 15 to 24 age group, consistent with participants entering the workforce for the first time.

The percentage in a paid job remains stable or declines for all other age bands.

Specifically, comparing responses at the most recent plan reassessment or check-in (between 2 to 8 years after entry) with responses at entry to the NDIS, the changes were:

- **Thirteen** percentage point increase from **10%** to **23%** for participants aged 15 to 24 years¹⁴
- **Three** percentage point increase from **26%** to **29%** for participants aged 25 to 34 years
- **One** percentage point decrease from **28%** to **27%** for participants aged 35 to 44 years
- **Two** percentage point decrease from **25%** to **23%** for participants aged 45 to 54 years
- **Four** percentage point decrease from **20%** to **16%** for participants aged 55 to 64 years¹⁵
- **Six** percentage point decrease from **14%** to **8%** for participants aged 65 years and older¹⁶
- **Two** percentage point increase from **21%** to **23%** for participants aged 15 to 64 years.

The overall result of 23% of participants aged 15 to 64 years in paid work compares to a 2024–25 target of 26%.

The percentage of working age (15 to 64 years) participants who have been in the NDIS for 2 to 5 years who are in a paid job increased by 2 to 3 percentage points. For participants who have been in the NDIS for 6 or more years, the percentage in work increased slightly from 25% to 26% (Figure 6).

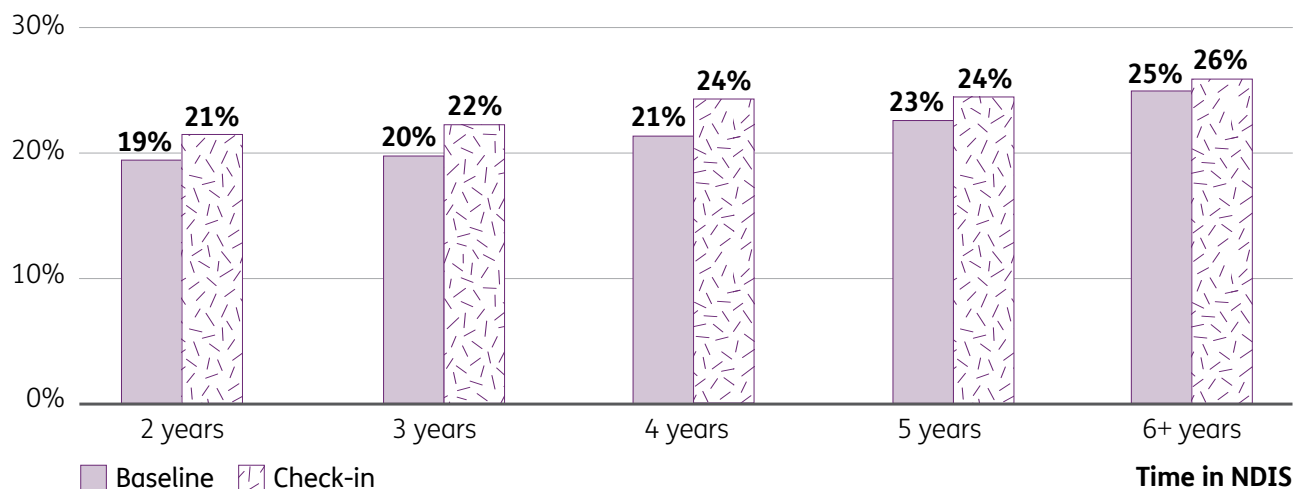
14 Some of the increase is due to participants leaving school and starting work. As the NDIS matures it will be possible to analyse the extent to which the percentage gap increases.

15 Some of the decrease for older age groups is due to participants retiring from the workforce.

16 Some of the decrease for older age groups is due to participants retiring from the workforce.

Figure 6: Change in the percentage of participants in work

Participants aged 15 to 64 years



Reforms to supported employment

Most NDIS participants, with the assistance of mainstream employment services or reasonable workplace adjustments, will successfully maintain work. Others will need higher intensity support delivered in the workplace. This can be funded through their NDIS plan.

Many NDIS participants use their funding to maintain employment in a supported employment service. In this setting, participants share NDIS supports in the workplace.

In 2022, the Australian Government and all state and territory disability ministers agreed on a set of [guiding principles](#) for the future of supported employment for people with disability with high employment support needs.

The NDIA is working with the Department of Social Services on initiatives to enact the guiding principles, which are outlined in the [Commonwealth, state and territory supported employment plan](#). As part of this work, we are exploring ways to help providers prepare for changes to supported employment and increase work opportunities for participants.

In 2024, the NDIA invited 145 registered supported employment services to participate in a survey to gather information on the supported employment sector. We published [the results of the survey](#) in March this year.

We will continue consulting with services to gather further qualitative data on their operations and approach to helping their employees consider alternative employment opportunities.

The NDIA is also working with the Department of Social Services to encourage responses to the discussion paper, '[Next Steps in Supported Employment: Consultation on the way forward](#)', released in March 2025.

Expanded employment supports

The NDIA educates stakeholders about employment assistance available to build a participant's capacity for work and support their employment outcomes.

The Provider quarterly report – school leaver employment for July 2023 to June 2024 shares information on the employment assistance delivered to school-leaving participants, the outcomes they achieved, and the factors that increase the likelihood of gaining paid work. The next edition, covering the 2024 calendar year, will be published in August 2025.

From 1 July 2025, our reporting of provider outcomes will include data on assistance delivered to younger participants still at school and those transitioning to tertiary education or training. This quarter, we held information sessions about the expanded reporting for more than 230 provider representatives.

We are also continuing to deliver training to NDIS planners and local area coordination partners about the implementation of expanded employment assistance supports, which commenced on 1 July 2024.

Since the expansion of employment assistance supports to May 2025, NDIA data indicates a 33% increase in the number of participants receiving capacity building employment supports in their plans. There have been increases across all age groups, including:

- 34% increase in participants aged 15 to 17
- 18% increase for those aged 18 to 21
- 56% increase for those aged 22 to 24
- 50% increase for those aged over 25.

Family and carer employment rate

The percentage of families and carers in a paid job, for participants who have been in the NDIS for at least 2 years, has improved over time.

Specifically, comparing responses at the most recent plan reassessment or check-in (between 2 and 8 years after entry) with responses at entry to the NDIS, the changes were:

- **Eight** percentage point increase from **46%** to **54%** for families and carers of participants aged 0 to 14 years
- **Two** percentage point increase from **48%** to **50%** for families and carers of participants aged 15 years and over.

Overall, for families and carers of all participants, there has been a 6-percentage point increase, from 47% to 53%.

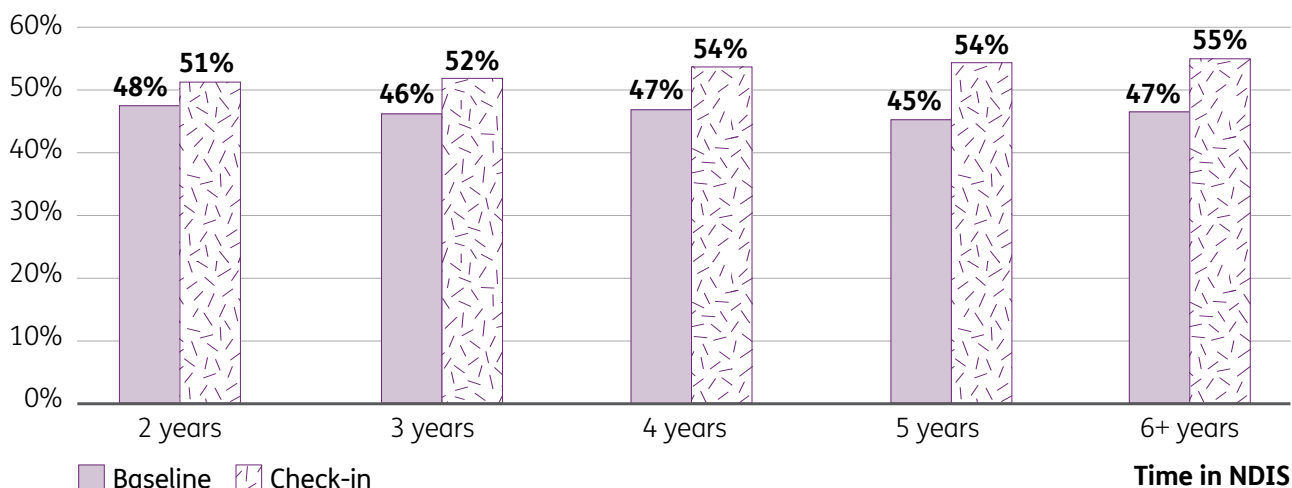
Considering participants of all ages who have been in the NDIS for at least 2 years, improvements in the percentage of families and carers in work are greater where the participant has been in the NDIS for longer. For instance, 51% of the families and carers of participants who have been in the NDIS for 2 years were in work at second reassessment or check-in, compared to 48% at baseline.

Section 2: Participant and family and carer outcomes

Those families and carers of participants in the NDIS for 6 or more years improved their employment rate by 8 percentage points, from 47% to 55% (Figure 7).

Figure 7: Change in the percentage of families and carers of participants in work

Families and carers of participants of all ages



2.2 Perceptions of whether the NDIS has helped

Participants have positive perceptions across all domains and different age groups. However, the percentage of positive responses varies by life domains and age groups.¹⁷

At each plan reassessment or check-in, participants may be asked whether the NDIS has helped with areas related to each of the various aspects and areas of functioning included in the life domain measures. For these questions, longitudinal change is measured from first plan reassessment or check-in, since the NDIS has not had an opportunity to help at baseline. Results shown in this section compare responses provided at the first plan reassessment or check-in with those from later reassessments or check-ins, for participants entering the NDIS since 1 July 2016 and who have been in the NDIS for at least 2 years.

¹⁷ Figures in this section have been rounded to the nearest whole percentage; differences are calculated from unrounded metrics.

Participant choice and control

The choice and control metric for participants aged 15 and over is based on the question ‘Has the NDIS helped you have more choices and more control over your life?’

Positive perceptions of whether the NDIS has helped with choice and control have increased for the latest reassessment or check-in compared to the first reassessment or check-in across all age bands. Older participants tend to have higher levels of satisfaction than the 15 to 24 age group.

Specifically, the percentage increases of those who think that the NDIS has helped them to have more choices and more control over their life were:

- **Thirteen** percentage point increase from **61%** to **74%** for participants aged 15 to 24 years
- **Fourteen** percentage point increase from **67%** to **81%** for participants aged 25 to 34 years
- **Twelve** percentage point increase from **70%** to **82%** for participants aged 35 to 44 years
- **Thirteen** percentage point increase from **70%** to **83%** for participants aged 45 to 54 years
- **Thirteen** percentage point increase from **72%** to **85%** for participants aged 55 to 64 years
- **Sixteen** percentage point increase from **72%** to **88%** for participants aged 65 years and older
- **Thirteen** percentage point increase from **67%** to **81%** for participants aged 15 years and older.

Other ‘Has the NDIS helped?’ questions

For children aged from birth to starting school, results have improved across all life domain measures.

Table 1 shows the percentages responding positively at first assessment and at latest reassessment or check-in, as well as the change between the 2 time points.

Table 1: ‘Has the NDIS helped?’ – participants aged from birth to before starting school

Domain	First assessment (%)	Latest reassessment (%)	Percentage point change
Daily living: child’s development	91	95	+4
Daily living: access to specialist services	92	96	+4
Choice and control (child’s ability to communicate what they want)	82	89	+6
Relationships (fitting into family life)	78	85	+8
Social, community and civic participation (fitting into community life)	64	72	+9

Improvements were slightly stronger for fitting into family and community life (although results for these life domain measures started off at a lower level and hence had more scope to improve).

For participants from starting school to age 14, Table 2 shows the percentages responding positively at first assessment and at latest reassessment or check-in, as well as the change between the 2 time points.

Section 2: Participant and family and carer outcomes

Table 2: ‘Has the NDIS helped?’ – participants from starting school to age 14

Domain	First assessment (%)	Latest reassessment (%)	Percentage point change
Daily living (independence)	62	77	+15
Lifelong learning (access to education)	42	55	+13
Relationships (with family and friends)	51	64	+14
Social, community and civic participation (social and recreational life)	46	57	+12

In Table 2, the results are generally less positive than for the younger age group, but show stronger improvement over time.

For young adults aged 15 to 24 years, Table 3 shows the percentages responding positively at first reassessment or check-in and at latest reassessment or check-in, as well as the change between the 2 time points.

Table 3: ‘Has the NDIS helped?’ – participants aged 15 to 24

Domain	First assessment (%)	Latest reassessment (%)	Percentage point change
Choice and control	61	74	+13
Daily living	61	76	+14
Relationships	50	59	+9
Home	23	25	+2
Health and wellbeing	44	57	+13
Lifelong learning	36	42	+6
Work	18	22	+3
Social, community and civic participation	55	66	+11

From Table 3, the largest improvement over time in the NDIS is for the daily living domain (14-percentage point increase). There are also strong improvements for choice and control and health and wellbeing (13-percentage point increases), social, community and civic participation (11-percentage point increase), relationships (9-percentage point increase), and lifelong learning (6-percentage point increase). Home and work increased marginally (2- and 3-percentage point increases, respectively).

Section 2: Participant and family and carer outcomes

For participants aged 25 and over, Table 4 shows the percentages responding positively at first assessment and latest reassessment or check-in, as well as the change between the 2 time points.

Table 4: 'Has the NDIS helped?' – participants aged 25 and over

Domain	First assessment (%)	Latest reassessment (%)	Percentage point change
Choice and control	70	83	+13
Daily living	73	86	+13
Relationships	53	67	+14
Home	31	39	+9
Health and wellbeing	53	67	+15
Lifelong learning	30	37	+7
Work	19	23	+4
Social, community and civic participation	60	74	+15

From Table 4, perceptions are more positive than for those aged 15 to 24, and the older adult group also shows a stronger improvement over time.

For participants aged 25 and over, the largest improvements over time in the NDIS are for health and wellbeing, and social, community and civic participation (15-percentage point increases). There are also strong improvements for relationships (14-percentage point increase), and choice and control and daily living (13-percentage point increases in both life domain measures).

Similar to the younger adult group, lifelong learning and work showed smaller increases (7- and 4-percentage point increases, respectively). However, there was a larger improvement for the home domain (9-percentage point increase) in the older adult group compared to the younger adult group.¹⁸

Results continue to improve with time in the NDIS

Responses tend to become more positive the longer a participant has been in the NDIS.

While these results are encouraging, the analysis also indicates there are areas where outcomes could be improved. For example, for participants aged 25 and over, after at least 2 years in the NDIS, only 23% agreed that being in the NDIS had helped them find a suitable job, which is a 4-percentage point increase from their first plan assessment.

18 Noting that the education and housing systems have a major role to play in the lifelong learning and home domains.



Section 3

Participant experience



Teresa's experience gives her work great meaning



For Teresa, working as a Senior First Nations Liaison Officer for the NDIA on Kabi Kabi/ Gubbi Gubbi lands is more than just a job, it's her dream.

'Making a difference in people's lives, however big or small, means everything,' she said.

As a mum of 3 with lived experience of disability, Teresa brings empathy and compassion to her role.

'I'm part of a team who support all of our First Nations staff, including apprentices on the Indigenous Apprenticeship Program and their team leaders, with any questions or concerns they might have,' Teresa said.

'We also support the NDIA First Nations Employee Network with admin tasks, including putting together its annual conference.

'But first and foremost, my role is about supporting First Nations people with whatever they need and connecting them to teams who can provide the support or resources they need.'

Teresa's personal journey fuels her passion. Her son Jamie was born with a degenerative disability and passed away at 23, before the NDIS was rolled out on the Sunshine Coast.

Her experiences, as a mum and First Nations woman, give her a unique perspective. Teresa's family history also shapes her work. Her father, part of the Stolen Generations, only acknowledged his Indigenous heritage 6 months before he passed away at 82.

In 2021, Teresa joined the NDIS through the Indigenous Apprenticeship Program and has since worked as a planner, participant support officer, team leader, and now, as Senior First Nations Liaison Officer.

'For me, being able to recognise I am a First Nations woman and champion for others in the NDIS is so important.'

'The Indigenous Apprenticeship Program is a great pathway for First Nations people to start their APS career. Each apprentice's success is helping to build stronger community connections and better participant outcomes'

[Read more participant stories on our website.](#)

The NDIS is committed to delivering a high-quality experience for all participants.

3.1 Participant Service Charter engagement principles

The Participant Service Charter (PSC) is based on 5 engagement principles that outline how the NDIA and partner organisations should engage with participants.

The PSC sets out the level of service participants can expect from the NDIA and partners in the community. It outlines in plain English how staff and partners should engage with participants and how the NDIA will be held to account.

The Participant Service Improvement Plan sets out what the NDIA and partners are going to do to meet the promises in the PSC and deliver an NDIS that meets expectations. In the Participant Service Improvement Plan, the NDIA committed to ‘ensuring we adhere to the PSC engagement principles in our interactions with you’.

We measured performance for the 5 PSC engagement principles (Table 5). The results are drawn from the participant satisfaction survey.¹⁹

Table 5: Performance against the PSC engagement principles

Engagement principles		Performance
Transparent	We will make it easy to access and understand our information and decisions	78%
Responsive	We will respond to your individual needs and circumstances	66%
Respectful	We will recognise your individual experience and acknowledge you are an expert in your own life	69%
Empowering	We will make it easy to access and use information and be supported by the NDIS to lead your life	68%
Connected	We will support you to access the services and supports you need	77%

¹⁹ Respondents include NDIS participants, prospective participants, and people with disability engaging with the NDIS through community connections and early supports.

Transparent – overall, 78% of respondents experienced interactions that were transparent, with 89% indicating that communication was in their preferred format.

Responsive – 66% of respondents reported an experience that was responsive, with 68% saying that their circumstances and needs were considered.

Respectful – 69% of respondents experienced a respectful service, with 90% of participants and other people with disability engaging with the NDIS noting they were treated with respect.

Empowering – overall, 68% of respondents experienced interactions that were empowering, with 64% of participants feeling prepared for their plan-related meetings, 68% feeling confident in using their plan, and 86% knowing where to go for more help with using their plan.

Connected – finally, 77% of participants and other people with disability engaging with the NDIS experienced interactions that enabled them to be connected, with 88% reporting they were able to connect with the NDIS in their preferred way and 68% feeling confident in accessing supports.

3.2 Participant Service Guarantee

| The Participant Service Guarantee (PSG) sets clear timeframes for key NDIS processes.

Performance against the service guarantee has improved this quarter for 6 of the 10 PSG measures, with significant improvement for PSGs 2, 4 and 17 at over twenty-five percentage points. The improved performance has been achieved whilst workload continues at the high level achieved during the March 2025 quarter. Of the 10 measures, one is meeting PSG timeframes (PSG 7) and a further 3 have results over 80% (PSGs 6, 8 and 13).

We have taken considerable steps to improve both the participant experience and performance against the PSG measures. A key focus has been on reducing waiting times for participants awaiting their first plans or requesting a plan change. These improvements aim to align with community expectations and recent changes in legislation and policy.

We expect further improvements in timeframes in the upcoming quarter. The focus will remain on access decisions, noting there is evidence of results for PSGs 2 and 4 improving.

Section 3: Participant experience

Table 6: Performance against the Participant Service Guarantee²⁰

PSG	Service type	Description of the service being guaranteed	Service guarantee	Performance in the June 2025 quarter	Change from last quarter*
2	Access	Make an access decision, or request for more information, after an access request has been received.	21 days	47%	↑
4	Access	Make an access decision, or request for additional information, after more information has been provided.	14 days	46%	↑
6	Planning	Approve a participant's plan, after an access decision has been made (excludes those supported by the early childhood approach [ECA] who have received initial supports).	56 days	94%	↑
7	Planning	Approve a plan for ECA participants, after an access decision has been made.	56 days	99%	↔
8	Implementation	Offer to hold a plan implementation meeting, after the plan is approved.	7 days	83%	↔
11	Plan reassessment	Commence facilitating a scheduled plan reassessment, prior to the scheduled reassessment date.	56 days	62%	↔
12	Plan reassessment	Decide whether to undertake a participant-initiated plan reassessment, after the request is received.	21 days	26%	↑
13	Plan reassessment	Complete a reassessment, after the decision to accept the request was made.	28 days	81%	↔
14	Plan variations	Amend a plan, after the receipt of information that triggers the plan amendment process.	28 days	45%	↑
17	Reviewable decisions	Complete an internal review of a reviewable decision, after a request is received.	60 days	75%	↑

Note: The NDIA's participant check-in process ensures that every scheduled reassessment begins with a contact from the planner or partner to discuss reassessment options well before any scheduled reassessment date. Plans are extended automatically if they have not been reassessed before expiry, so participants have continuity of support. That is, participants do not stop receiving supports.

* **Change from last quarter** ↑ More than 3 percentage points higher ↔ Within 3 percentage points ↓ More than 3 percentage points lower

²⁰ For the June 2025 quarter, performance is measured from available data on processes and dates in the new computer system. Milestones being built into the new computer system will improve the capture of performance data.

3.3 Home and living decisions

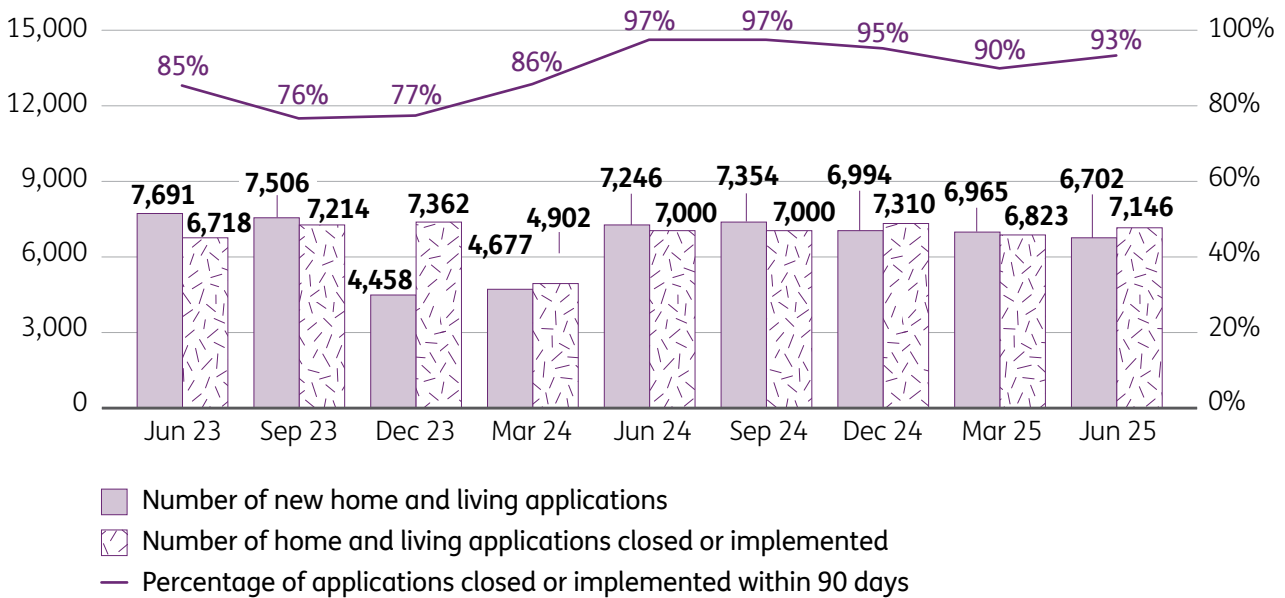
The NDIA is supporting participants and their families to access information and capacity building to explore alternative living options.

The end-to-end process for home and living applications starts when a home and living application form is received and ends when home and living supports are included in the approved plan (plan implementation).²¹

Where required, home and living applications are prioritised based on an escalation and prioritisation matrix. This manages risks associated with safety, quality and outcomes to serve the best interests of participants.

During the June 2025 quarter, 6,702 new home and living applications were received (Figure 8). There were 7,146 applications either closed or implemented, and 93% (5,497) were finalised within 90 days.^{22,23} The number of new applications is similar to that for the March 2025 quarter (6,965), while the proportion of closed or implemented applications finalised within 90 days is slightly higher than the March 2025 quarter (90%).

Figure 8: Home and living applications – new, closed and percentage closed within 90 days²⁴



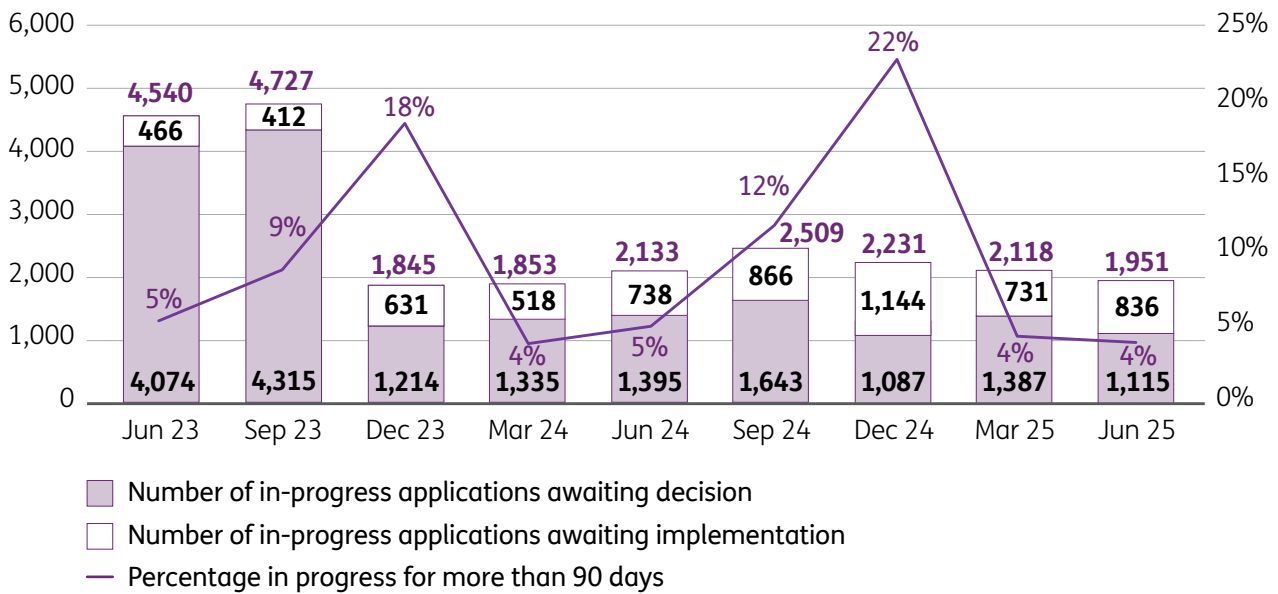
21 The time taken for participants to respond to requests for further information is not included.
 22 An application is considered closed if it is cancelled or rejected, a participant is declined all home and living supports, or the application won't progress to implementation (e.g. participant deceased, participant chooses not to proceed). An application is considered implemented once a participant has a new approved plan.
 23 For the June 2025 quarter, 1,249 of the 7,146 applications that were closed or implemented had no data on the closure date and were excluded from the percentage of applications closed or implemented within 90 days.
 24 Applications that have been closed or implemented with no data on the closure date have been excluded from the percentage of applications closed or implemented within 90 days.

Section 3: Participant experience

As at 30 June 2025, there were 1,951 home and living applications in progress (Figure 9). Of these, 1,115 were awaiting a decision,²⁵ while a further 836 were waiting for supports to be implemented in a plan. There were 1,404 (72%) in-progress applications flagged as relating to a plan reassessment request due to a change in circumstances.

As at 30 June 2025, the proportion of applications in progress for more than 90 days was unchanged from the previous quarter at 4% (74 applications).

Figure 9: Home and living applications – in progress awaiting decision or implementation, percentage in progress for more than 90 days²⁶



The NDIA continued to implement the independent living initiative as part of the 2023–24 Budget’s Scheme reforms initiatives. This participant-centric initiative aims to support consistent, equitable and quality home and living decisions that are aligned with the best interests of participants and their families. A significant proportion of home and living decisions relate to in-home support funding decisions equivalent in value to supported independent living (SIL) packages.

As at 30 June 2025, almost one in 5 SIL participants are funded for supports on a participant-to-support worker ratio of 1:1 (or greater). Most home and living applications are now reviewed and endorsed prior to approval. The endorsement process can involve a complex assessment meeting that incorporates a specialist home and living delegate, and a subject matter expert in an area such as the justice or hospital systems.

25 The NDIA is waiting on additional information from participants for 192 of the 1,115 applications awaiting a decision.

26 Applications on hold are excluded from the in-progress applications.

3.4 Complaints and participant critical incidents

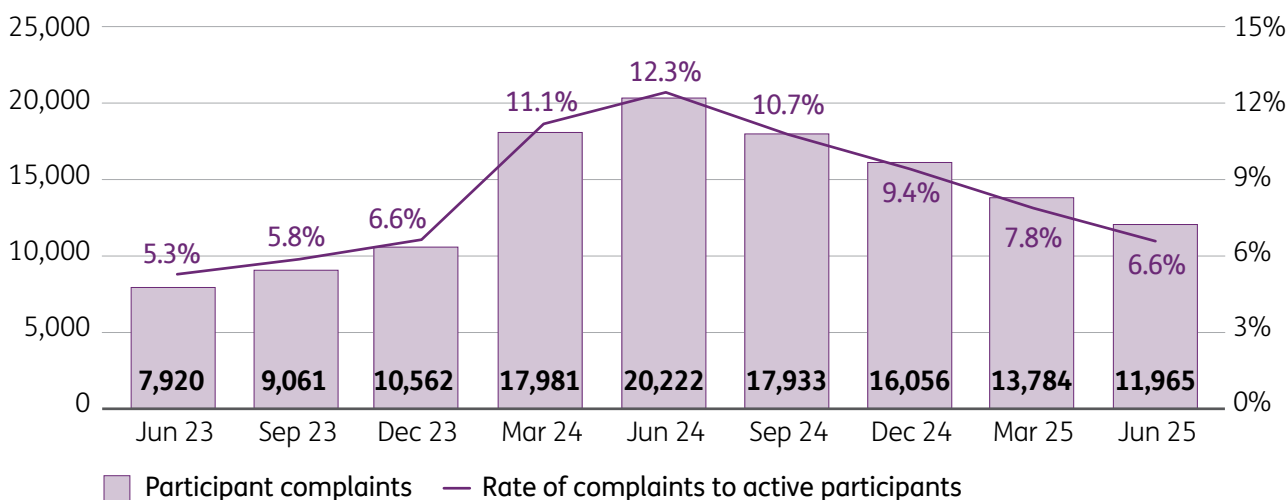
The volume of complaints is continuing to reduce due to improvement initiatives.

Complaints

The NDIA receives complaints from participants and their representatives, as well as others, including members of the public, referrals from parliamentarians, other government agencies and community organisations.^{27,28,29}

The volume of complaints from participants during the June 2025 quarter was lower than the previous quarter. The consistent downward trend since June 2024 indicates that the NDIA’s improvement initiatives are having a positive effect. The participant complaint rate also decreased from 7.8% of all active participants in the March 2025 quarter to 6.6% this quarter (Figure 10).

Figure 10: Number and proportion of participant complaints over time



During the June 2025 quarter, the NDIA received 986 complaints from NDIS providers and 309 complaints from other sources.

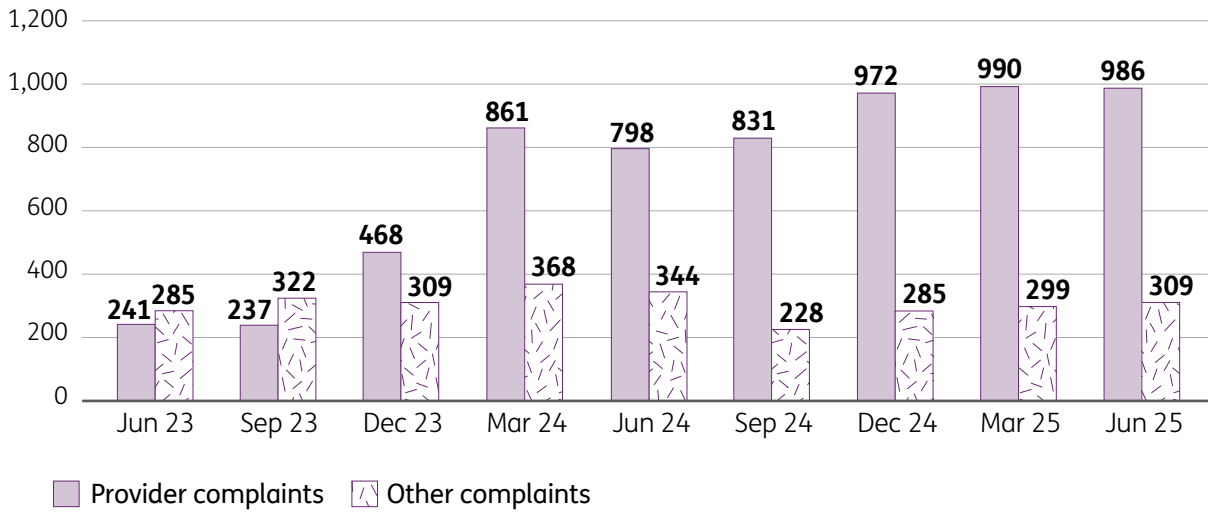
27 It is possible to record multiple related parties as the source of a complaint. In some cases, different complainant types (participants, providers or other parties) are linked to a single complaint. As a result, the sum of participant complaints, provider complaints and other complaints is higher than the total number of complaints.

28 Numbers of complaints reported for the most recent quarter may still vary to the extent there is a lag in data collection.

29 Numbers may change as reporting of complaints in the new computer system is refined, including identifying complaints lodged via multiple channels.

Section 3: Participant experience

Figure 11: Number of provider and other complaint types



Participant plans are the most common focus of complaints, in particular, the type and amount of funding approved, and the time taken to make decisions. Complaints related to timeliness of decisions, as a proportion of all complaints, have reduced significantly over the last 12 months.

During 2024–25, we implemented a whole-of-agency strategy to address common causes of complaints, including supporting staff to resolve participant concerns at first contact where possible.

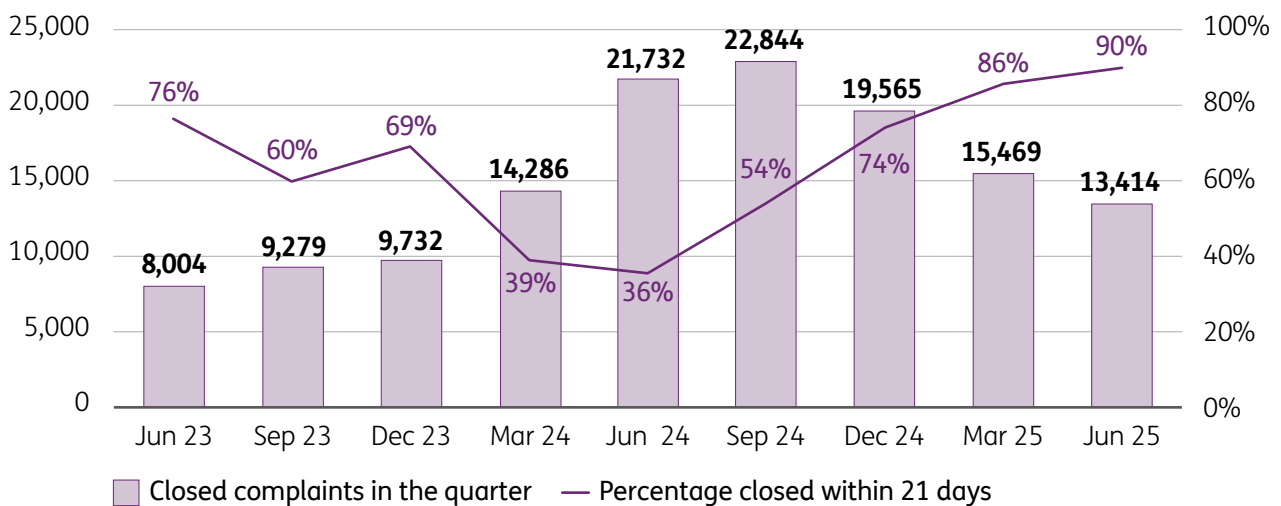
The NDIA is committed to improving participants' experience by:

- reinforcing the capability of National Contact Centre and other front-line staff to address feedback and complaints
- identifying ways to improve how we receive and address complaints.

The success of this strategy is demonstrated by the continued improvement in recent quarters in both the volume of complaints and the time taken to resolve them. These initiatives will continue.

The proportion of complaints closed within 21 days also continues to improve, increasing from 86% in the March 2025 quarter to 90% in the June 2025 quarter (Figure 12).

Figure 12: Closed complaints and percentage completed within 21-day timeframe



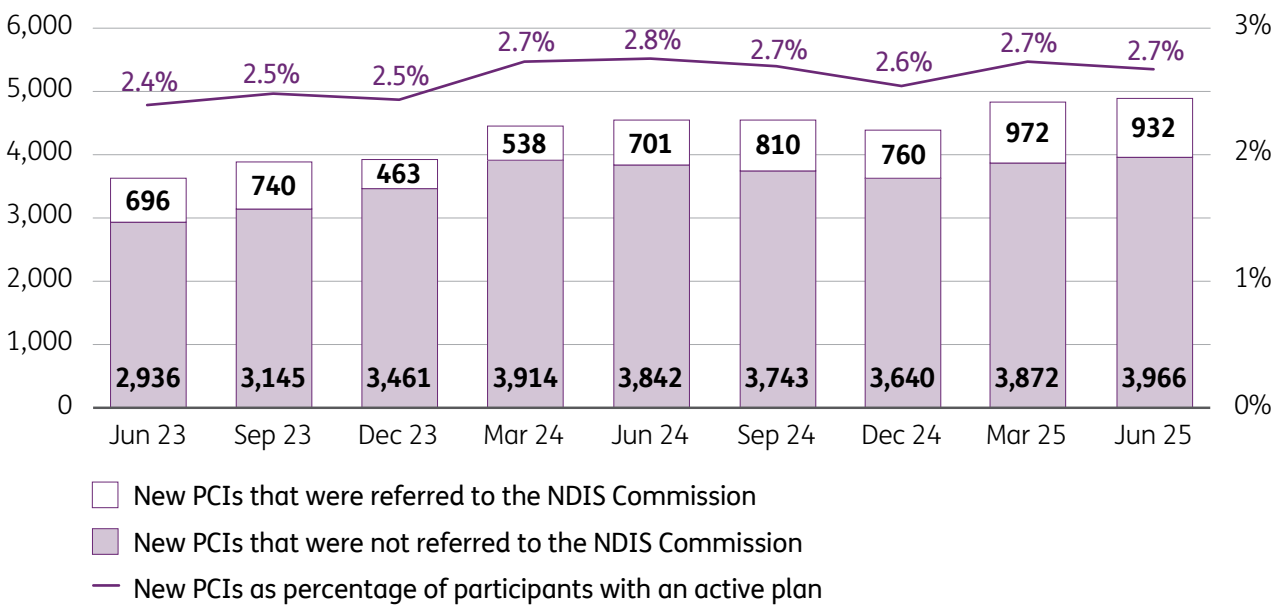
Participant critical incidents

In the course of their work, NDIA staff and staff of partners in the community may encounter circumstances or obtain information about allegations of harm to a participant. These are known as participant critical incidents (PCIs).

After taking immediate safeguarding actions, staff must report the PCI. Reports are handled by a dedicated team in the NDIA and prioritised for action based on the level of risk to the participant. Incident reports are shared with the NDIS Commission when the incident involves an NDIS Provider and meets the Commission’s Reportable Incident criteria.

During this quarter, the rate of PCI reports as a percentage of participants with an active plan remained steady at 2.7%. The total volume of PCIs reported in this quarter increased slightly compared to the previous quarter (Figure 13).

Figure 13: Number and proportion of new PCIs^{30,31}



The most common themes of PCIs in the June 2025 quarter were abuse or neglect of a participant, followed by a participant being at risk of or attempting self-harm. These themes are consistent with previous quarters.

30 The number of PCIs in the current quarter may change in the future as the method of identifying PCIs in the new computer system is further enhanced. The number of PCIs reported for the most recent quarters may still increase, as there is a lag in data collection.
 31 From February 2025, PCIs are also recorded for persons supported by partners in the community.

3.5 Review requests and Administrative Review Tribunal cases

The number of participant requests for a plan reassessment is declining, while requests for a plan variation are increasing.

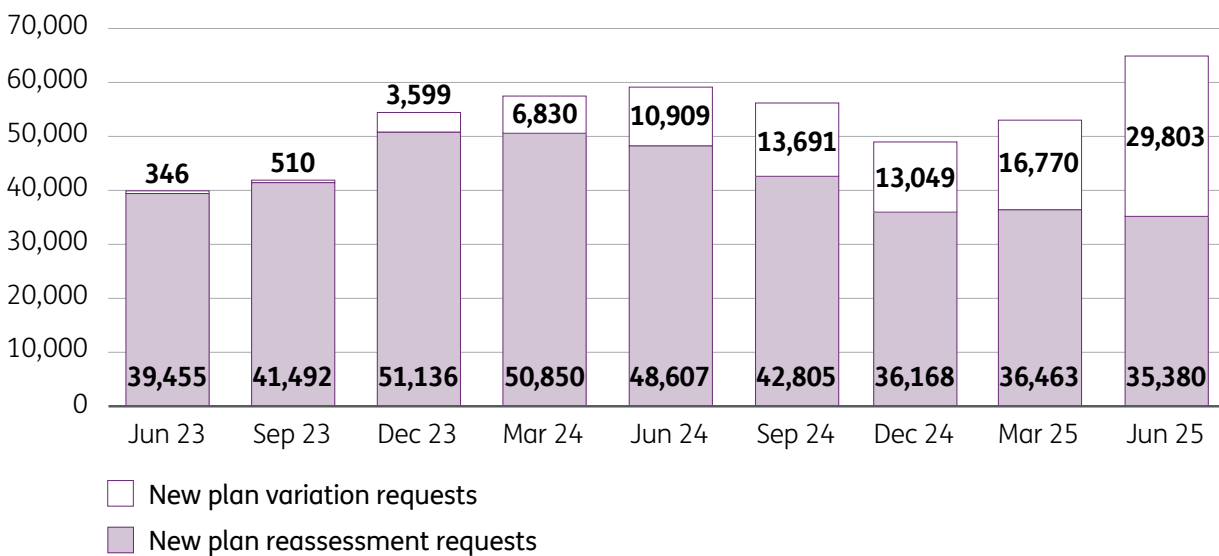
Participant-initiated plan change requests

A participant may request a plan reassessment or variation at any time; a reassessment is a complete review of the plan, whereas a variation is often a minor adjustment to a plan.

The number of plan reassessment requests increased significantly in the December 2023 quarter to 51,136, and has generally declined each quarter since, to 35,380 in the June 2025 quarter (Figure 14).

With increased staff training and the improved functionality of the new computer system, the number of plan variation requests is increasing.

Figure 14: Number of plan change requests³²



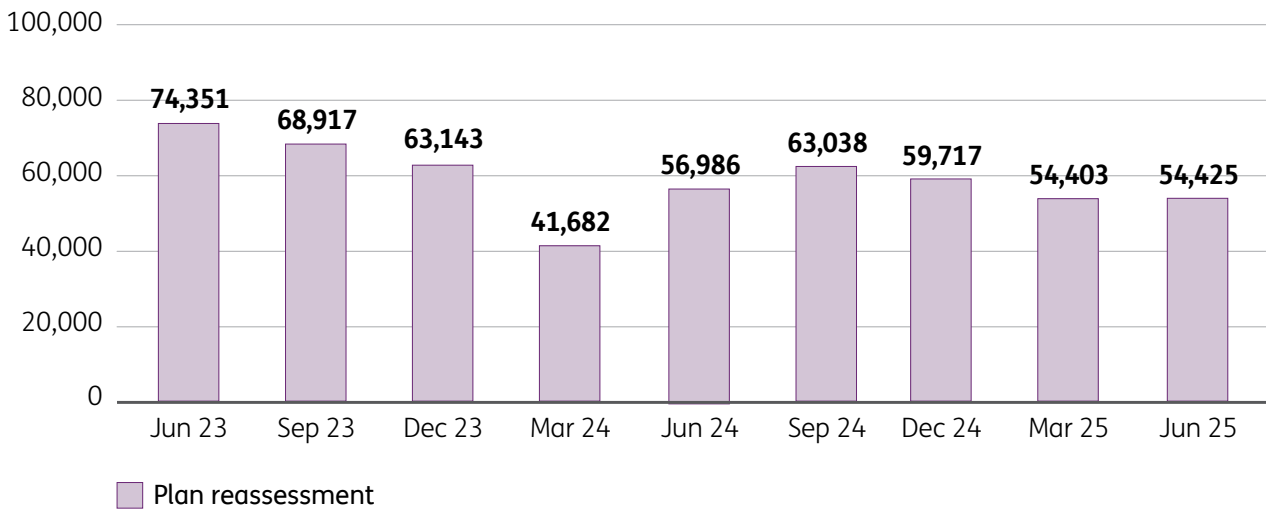
³² Number of plan change requests reported for the most recent quarters may vary, to the extent there is a lag in data collection.

Plan reassessments

Plan reassessments can be initiated by either the participant or the NDIA. As can be seen in Figure 15, the number of completed plan reassessments had been decreasing in the quarters up to December 2023. This is due to a plan continuation approach. This approach involves communicating with the participant to ensure there have been no significant changes in their circumstances and, with agreement from the participant, continuing their existing plan.

The number of reassessments completed in the June 2024 and September 2024 quarters increased as the NDIA responded to the increased volume of requests from participants for a reassessment of their plan. More recently, in the March and June 2025 quarters, the number of completed reassessments has stabilised, reflecting the stabilisation in the volume of requests for a reassessment.

Figure 15: Number of plan reassessments³³

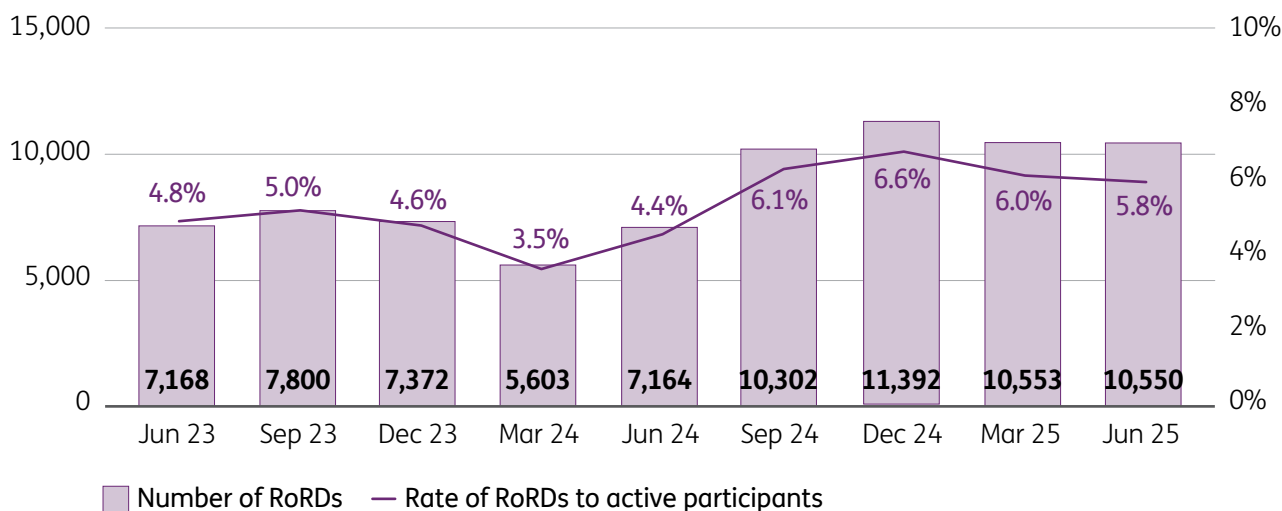


33 Includes reassessments of short plans, consistent with the functionality of the new computer system.

Review of a reviewable decision

The number of requests for a review of a reviewable decision (RoRDs) excluding withdrawn requests, as a percentage of active participants increased from 4.8% in the June 2023 quarter to 6.6% in the December 2024 quarter, before decreasing to 5.8% in the June 2025 quarter (Figure 16).

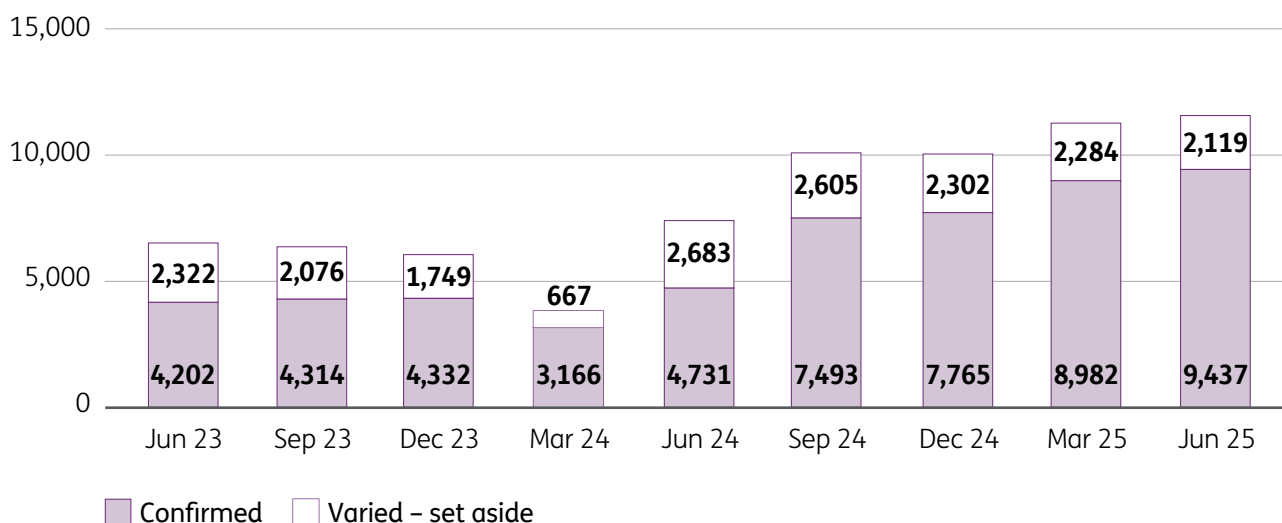
Figure 16: Requests for an RoRD by date of request³⁴



In the June 2025 quarter, 11,580 RoRDs were closed, which is slightly higher than the March 2025 quarter (Figure 17). This excludes withdrawn requests, which often occur after an internal review officer calls a participant to help them understand their current funding or explore other pathways if there are changes in their circumstances.

Of these closed RoRDs, 9,437 reviews upheld the original NDIA decision, while 2,119 resulted in changes.³⁵ These changes typically occur when new evidence that was not available to the original decision maker is provided during the review process.

Figure 17: Closed RoRDs by outcomes – quarterly trend³⁶



³⁴ Number of RoRDs reported for the recent quarters may vary, to the extent there is a lag in data collection

³⁵ A further 24 were closed in the June 2025 quarter with no specified outcome.

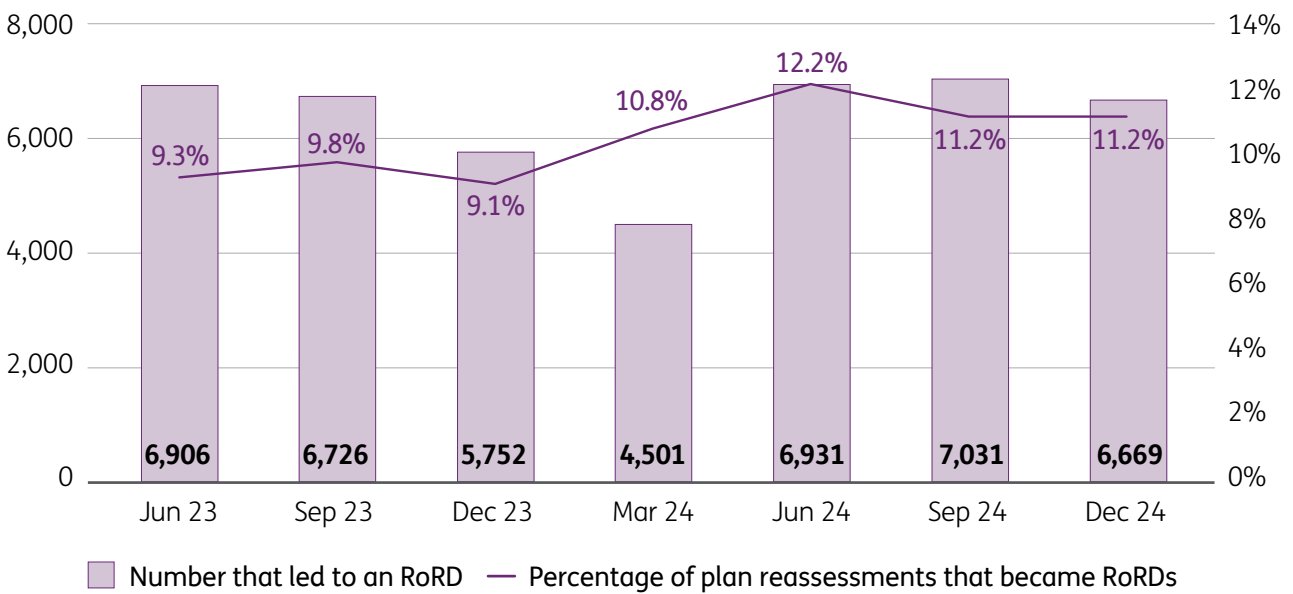
³⁶ The small number of RoRDs closed with no specified outcome are excluded.

Pathway from plan reassessment to RoRD and ART case

A participant may request an RoRD and then a further appeal to the ART. Figures 20 and 21 show the pathway from plan reassessment to RoRD and ART case between 1 April 2023 and 31 December 2024.

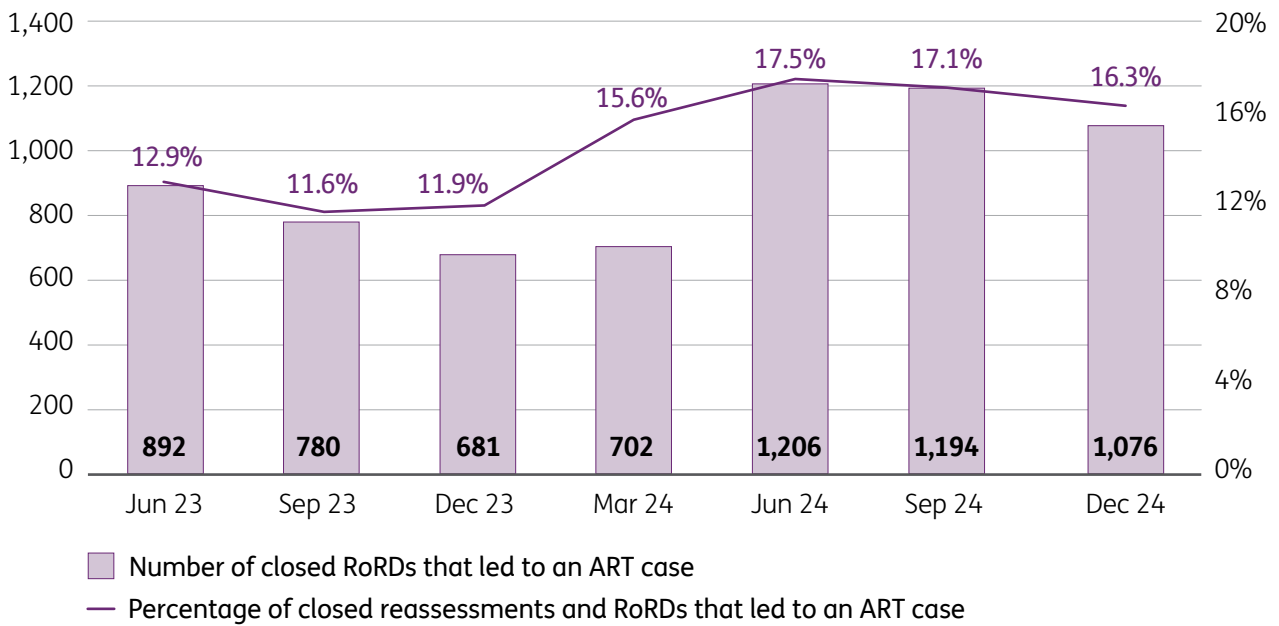
The proportion of plan reassessments that became RoRDs increased from 9.3% (6,906 RoRDs) in the June 2023 quarter to 11.2% (6,669 RoRDs) in the December 2024 quarter (Figure 18).

Figure 18: Pathway from plan reassessment to RoRD between 1 April 2023 and 31 December 2024, at 30 June 2025



The proportion of RoRDs that became ARTs increased from 12.9% in the June 2023 quarter to 17.5% in the June 2024 quarter, and then decreased to 16.3% in the December 2024 quarter (Figure 19).

Figure 19: Pathway from RoRD to ART case between 1 April 2023 and 31 December 2024, at 30 June 2025



Administrative Review Tribunal

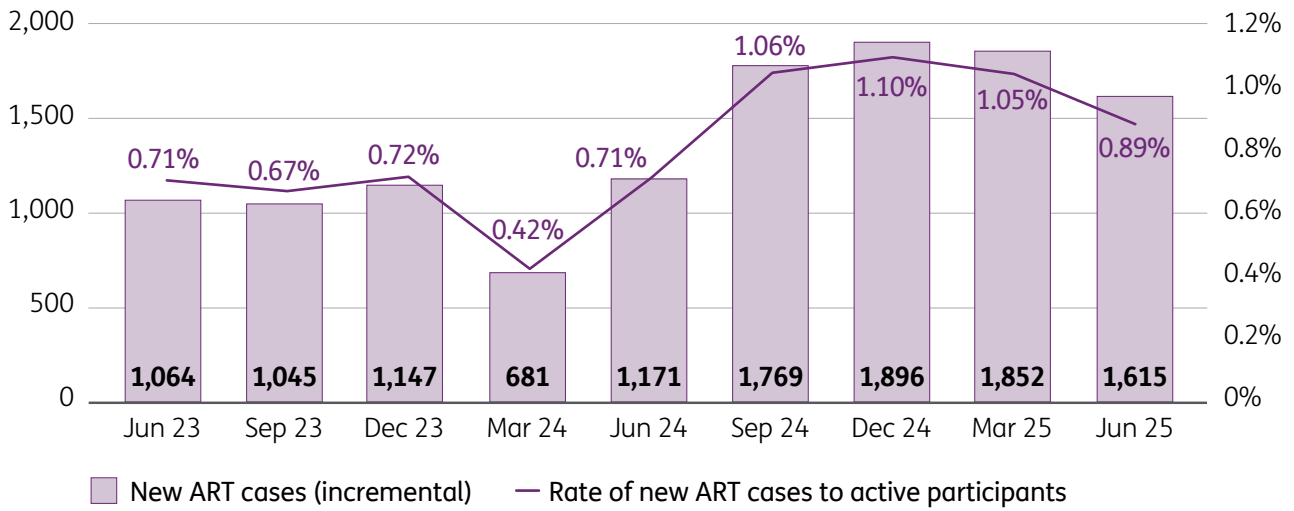
If a person is not satisfied with the outcome of their review by the NDIA, they may apply to the Administrative Review Tribunal (ART) for review of a decision made by a reviewer.^{37,38} The NDIA is committed to acting as a model litigant in the ART as required by the Legal Services Directions 2017. As a result, the NDIA works with applicants and their legal representatives to resolve their matters as early as possible in the ART process.

There were 1,615 new ART cases in the June 2025 quarter, relating to 1,579 participants (Figure 20). The number of new ART cases (as a proportion of active participants) increased from 0.71% in the June 2023 quarter to 1.10% in the December 2024 quarter and has since decreased to 0.89% in the June 2025 quarter.

37 As part of the ART process, it is not uncommon for new requests to be made and for new evidence to be provided by applicants while their matters are in progress. This contributes to NDIS decisions being varied in the ART.
 38 Further information about the ART process can be found on the ART website.

Section 3: Participant experience

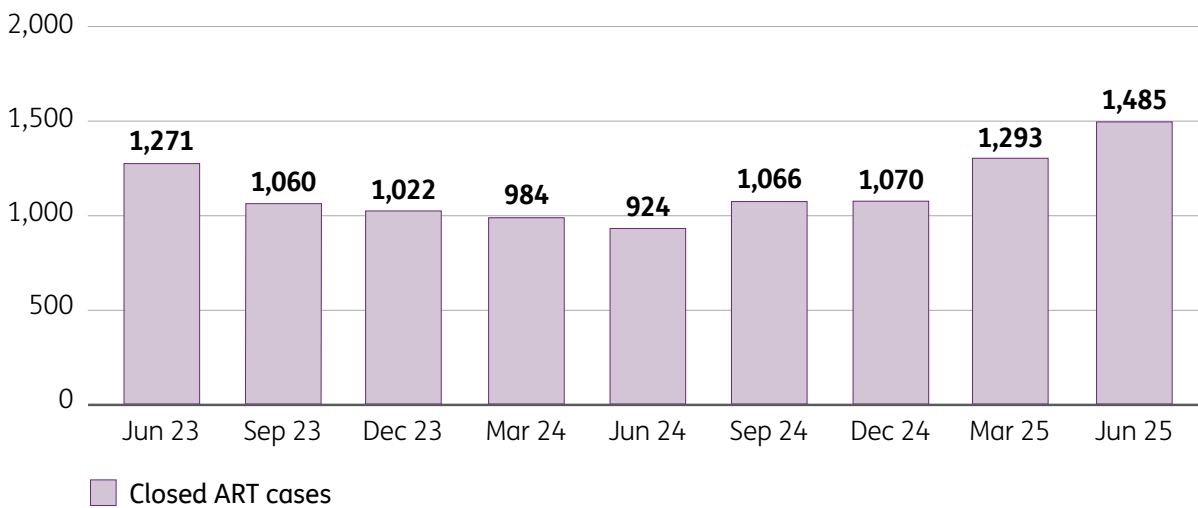
Figure 20: Number and proportion of new ART cases



In the 12 months to 31 March 2025,³⁹ of the planning related ART cases that had supports in dispute, the most common categories lodged involved capacity building (64% of disputes), core supports (54%) and SIL (20%). Cases may be lodged with more than one support in dispute.

In the June 2025 quarter, there were 1,485 closed ART cases (Figure 21). Of the cases no longer before the ART, approximately 72% were resolved by agreement, 24% were withdrawn by the applicant or dismissed by the ART, and 4% received a substantive hearing decision by the ART.

Figure 21: Number of closed ART cases



³⁹ Data on supports is shown with a one-quarter delay, due to the lags in recording the support in dispute.

3.6 Participant satisfaction

The satisfaction of participants and their families and carers remains stable or slightly more positive across most stages of the NDIS pathway this quarter.

The NDIA seeks feedback from participants and their families and carers about their experience when interacting with the NDIS. Survey questions focus on the stages of a person’s NDIS pathway.

Overall satisfaction levels

Overall satisfaction remains stable or slightly more positive across most stages. Participant satisfaction rates for this quarter are shown in Table 7.

Table 7: Rating of experience with the NDIS (1 April 2025 to 30 June 2025)^{40,41}

Rating	Early supports	Community connections	Apply for NDIS – Access met	Apply for NDIS – Access not met/ other	Plan approval	Plan implementation	Plan reassessment
Very good/good	61%	80%	65%	27%	54%	65%	71%
Neutral	19%	13%	18%	22%	16%	15%	16%
Poor/very poor	19%	8%	17%	52%	30%	20%	13%

Early supports – for the 3 months to 30 June 2025, 61% of respondents rated the early supports process as either good or very good, with a further 19% rating the experience as neutral.

Community connections – 80% of respondents rated the community connections process as either good or very good, with a further 13% rating the experience as neutral.

Apply for the NDIS – 65% of participants (that is, respondents with a status ‘access met’) rated the process of applying for the NDIS as either good or very good, compared to 27% of respondents who had an ‘access not met’ or other status at the time of interaction. Overall, 48% of respondents (participants and non-participants) rated the process of applying for the NDIS as either good or very good, with a further 19% rating the experience as neutral.

Plan approval – 54% of respondents rated the plan approval process as either good or very good, with a further 16% rating the experience as neutral.

Plan implementation – 65% of respondents rated the plan implementation process as either good or very good, with a further 15% rating the experience as neutral.

Plan reassessment – 71% of respondents rated the plan reassessment process as either good or very good, with a further 16% rating the experience as neutral.

40 Underlying total response numbers may differ across different questions in each stage due to the exclusion of ‘Prefer not to say’ and ‘Not applicable’ responses. The count is the total unique respondents in each stage.

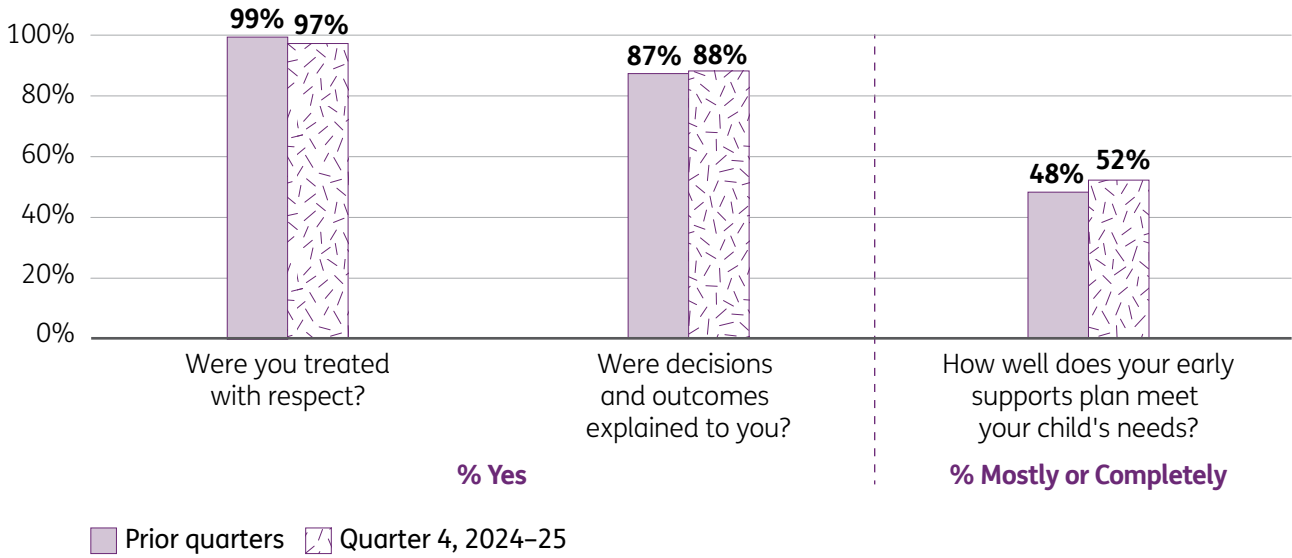
41 These results are based on 62 surveys of early supports, 855 surveys of community connections, 1,221 of applying for the NDIS, 3,308 of plan approval, 2,179 of plan implementation and 9,308 of plan reassessment, which is 16,933 in total.

Satisfaction across the 6 stages of the NDIS pathway

The survey includes questions that provide further insights at each stage of the pathway. Selected questions by pathway stage are presented in Figure 22.

Figure 22: Satisfaction across the 6 stages of the NDIS pathway

Early supports



Community connections

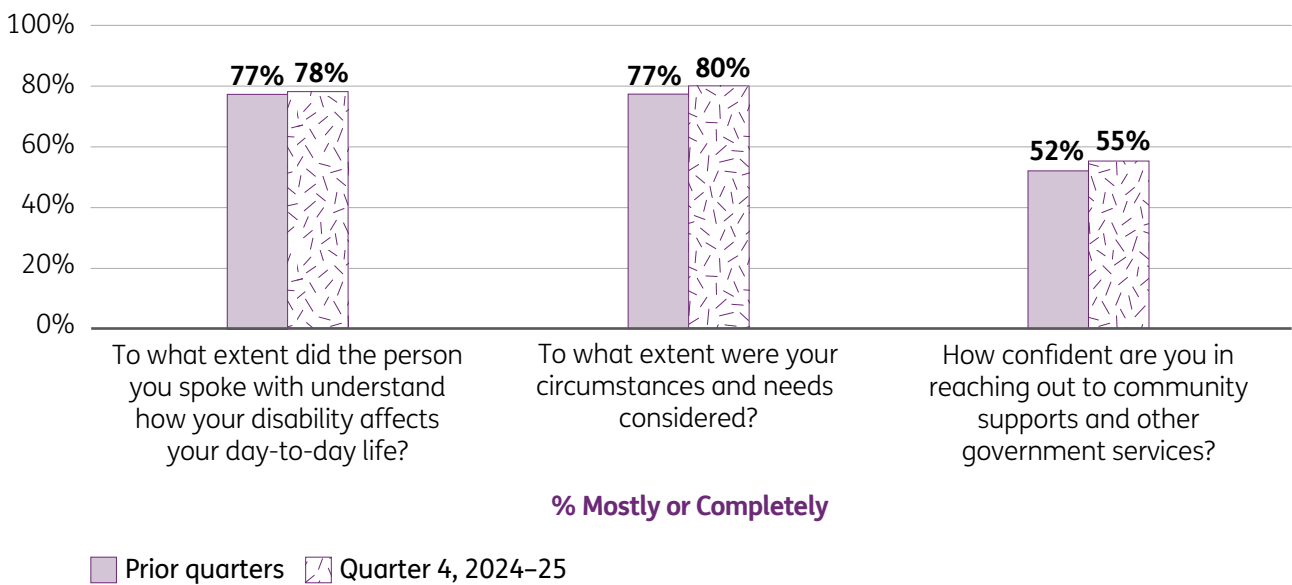
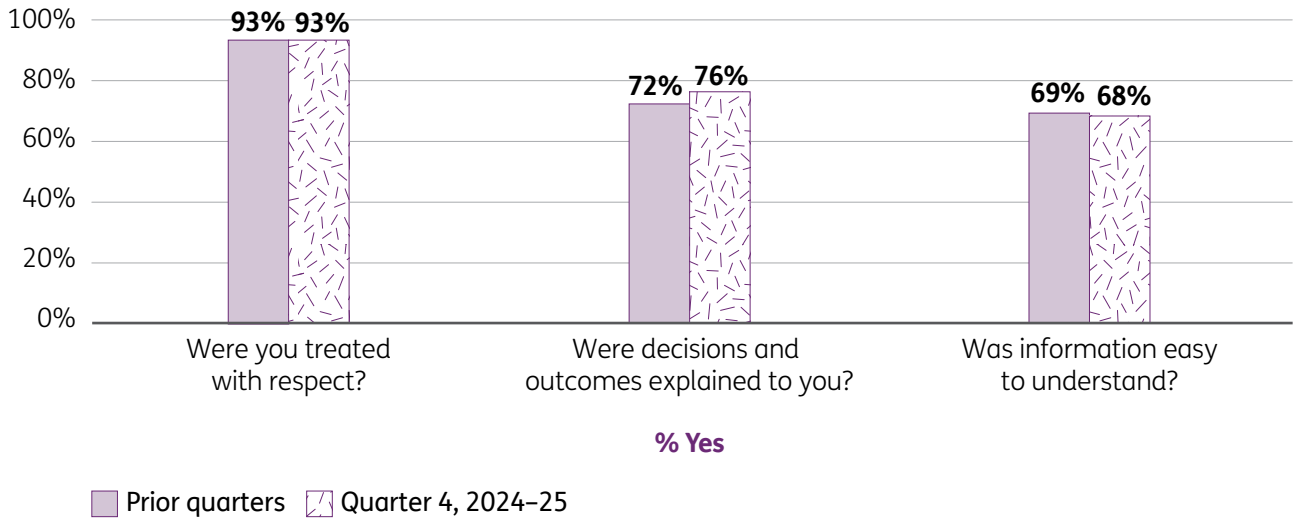
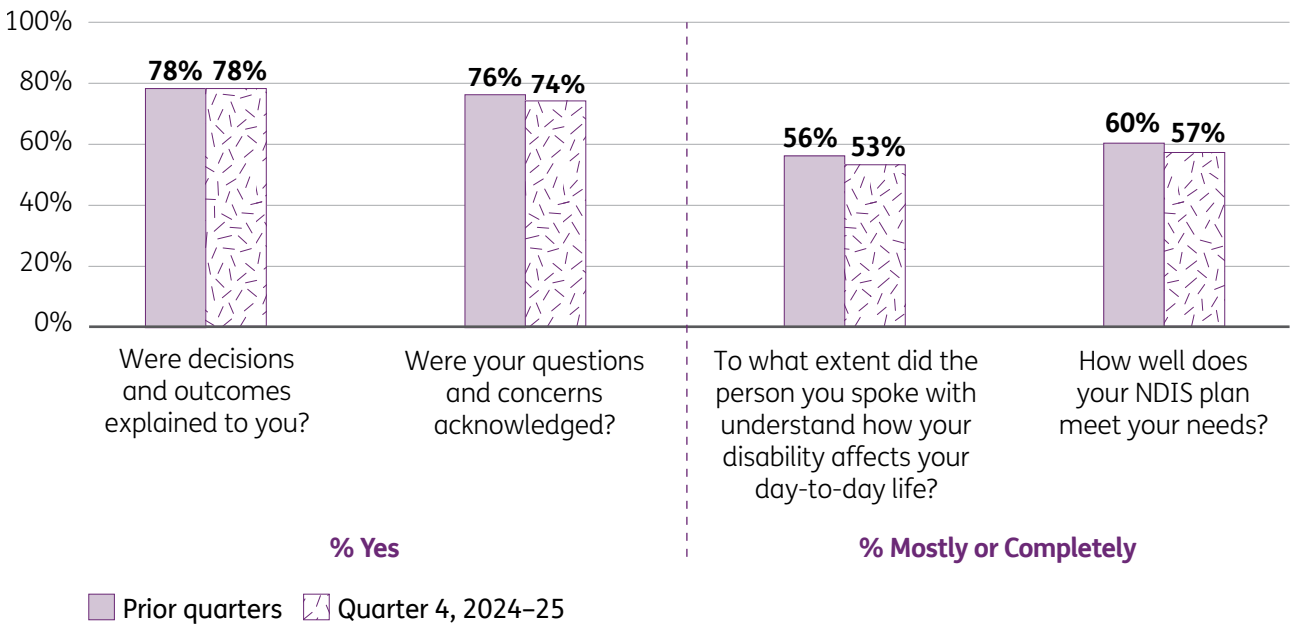


Figure 22: Satisfaction across the 6 stages of the NDIS pathway cont.

Apply for NDIS



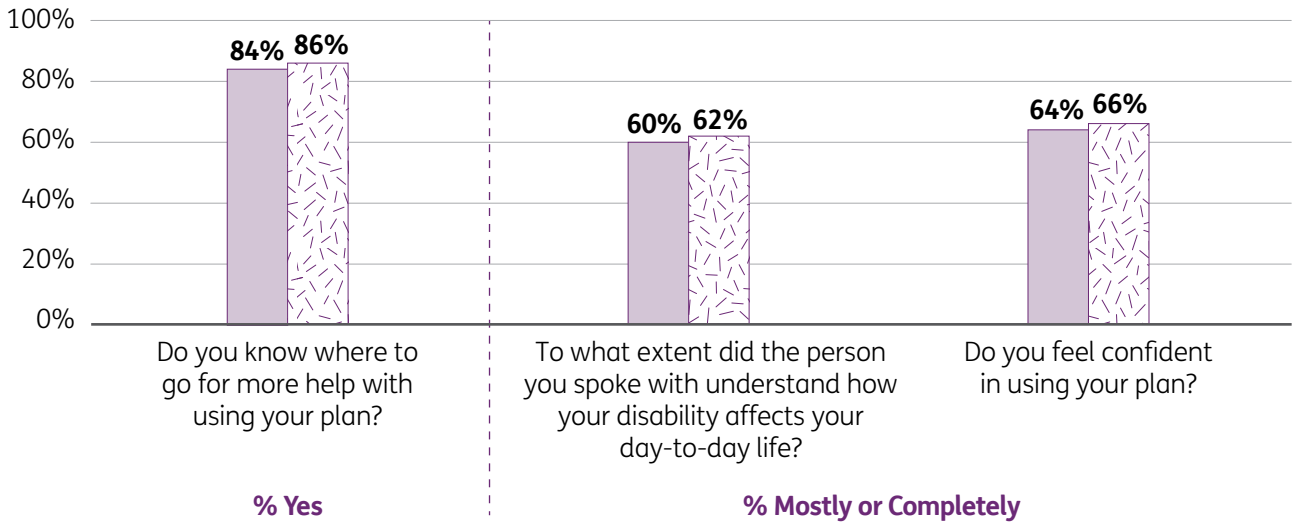
Plan approval



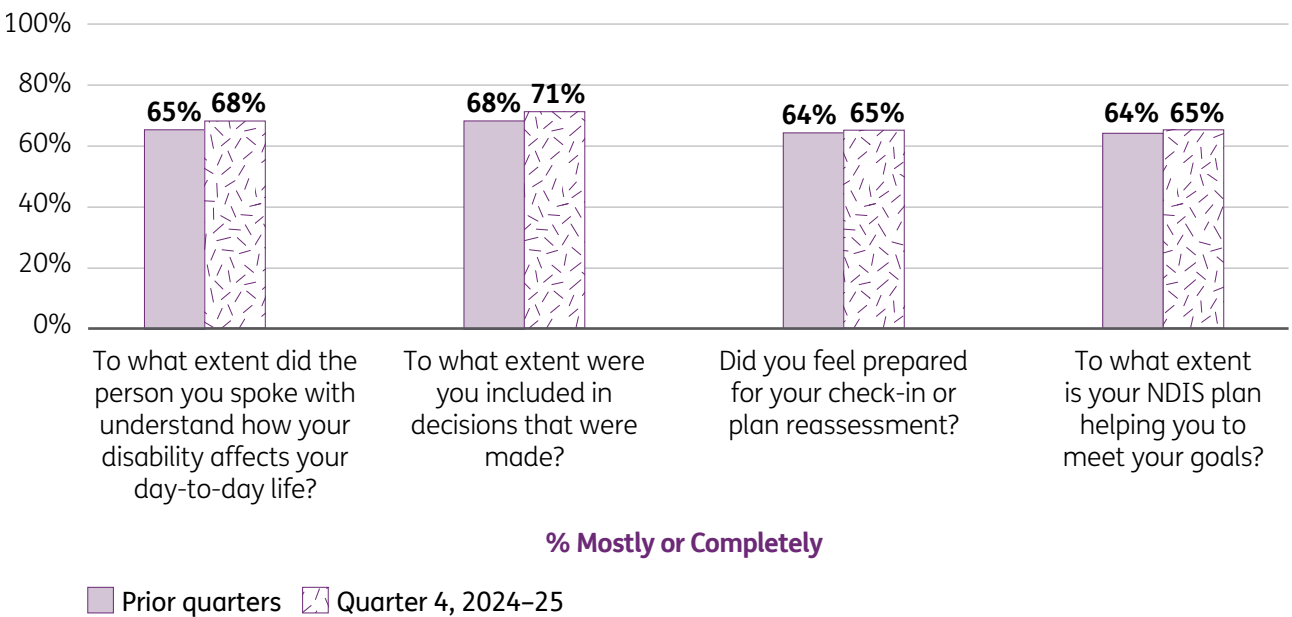
Section 3: Participant experience

Figure 22: Satisfaction across the 6 stages of the NDIS pathway cont.

Plan implementation



Plan reassessment



Positive experience across stages

The proportion of respondents answering positively by pathway stage and question is presented in Supplement E on the [NDIS website](#).

3.7 The NDIA National Contact Centre

The National Contact Centre (NCC) provides personal and high-quality services and information about the NDIA for people with disability, their families and carers, and service providers.

In the June 2025 quarter, the NCC received 833,617 contacts, a 3% increase from the March 2025 quarter. The NCC noted a slight improvement in operational results during this period.

The following is a breakdown of contacts received in the June 2025 quarter by channel:

- **Voice** – 391,156 (1% increase from previous quarter)
- **Email** – 389,613 (5% increase from previous quarter)
- **Webchat** – 52,848 (11% increase from previous quarter)

The average speed of answer for voice increased from 63 seconds to 73 seconds, with 70% of all calls answered within 60 seconds (Figure 23). In the quarter, customer satisfaction was at 91%, exceeding the target (80%), and the NCC received no significant complaints about call waiting times.

Email response times improved in the June 2025 quarter, with 85% of incoming emails answered within 2 business days (Figure 25). Email volumes included 1,149 contacts from the enquiry webform introduced to the participant app in May 2025.

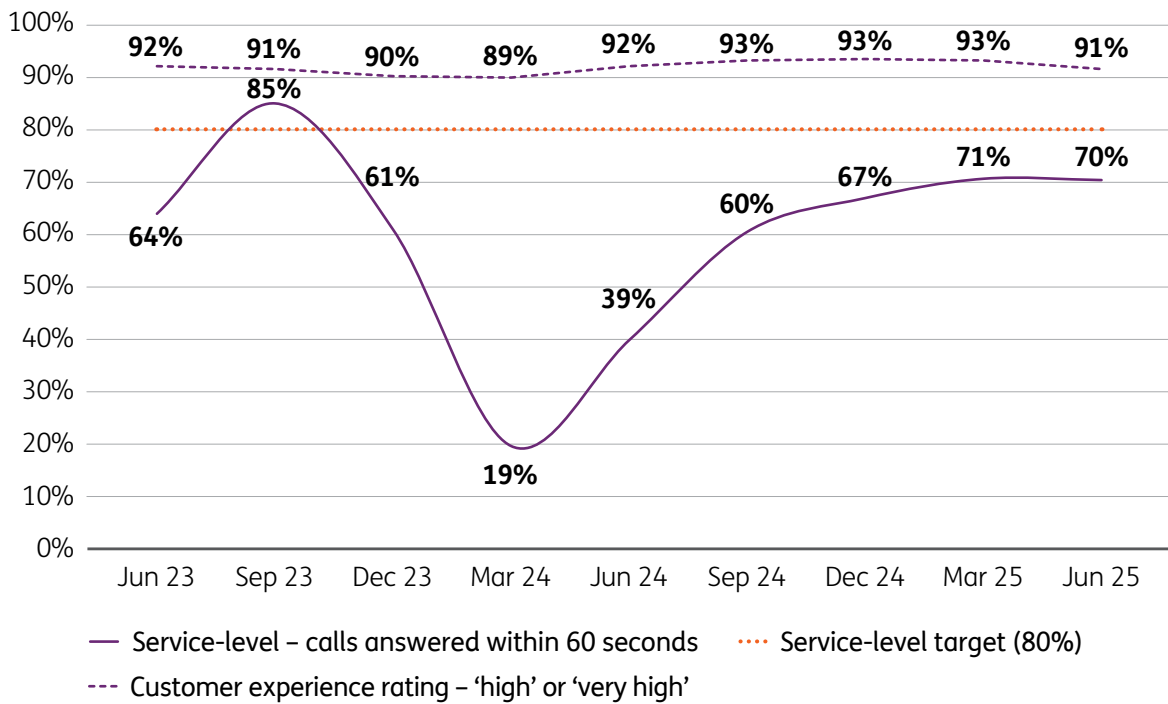
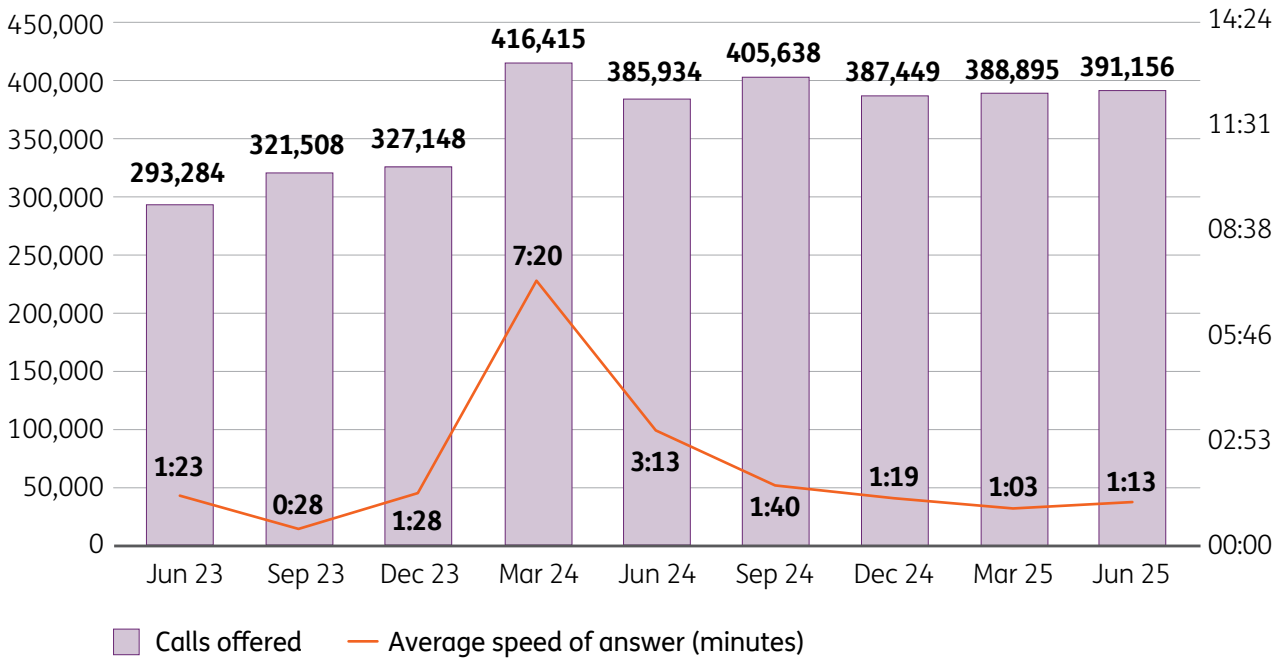
In the June 2025 quarter, the NCC undertook activities to prepare staff for price changes resulting from the 2024–25 Annual Pricing Review, effective from 1 July 2025. This preparation enabled the NCC to manage increased enquiry volumes and provide authoritative guidance during the transition. The NCC also demonstrated exceptional responsiveness by reactivating a dedicated line for participants in New South Wales affected by severe weather, ensuring essential communication pathways remained open for those who needed them.

The NCC achieved a significant milestone in June 2025, launching a new line for providers and upskilling staff to support a new enquiry specialisation model. These enhancements allow staff to develop deeper expertise in specific service areas, improving first-call resolution rates, and enhancing the quality of advice given to participants and providers. Complex inquiries are now handled by staff with targeted knowledge and experience, improving satisfaction and service efficiency. Between 2 and 30 June 2025, the NCC received 13,330 calls from providers through the dedicated phone line.

In the June 2025 quarter, 85% of callers reported their inquiries were resolved at the first point of contact, surpassing the target of 80%.

Section 3: Participant experience

Figure 23: NCC telephony – call volume (top) and performance (bottom)



Section 3: Participant experience

Figure 24: NCC webchat performance⁴²

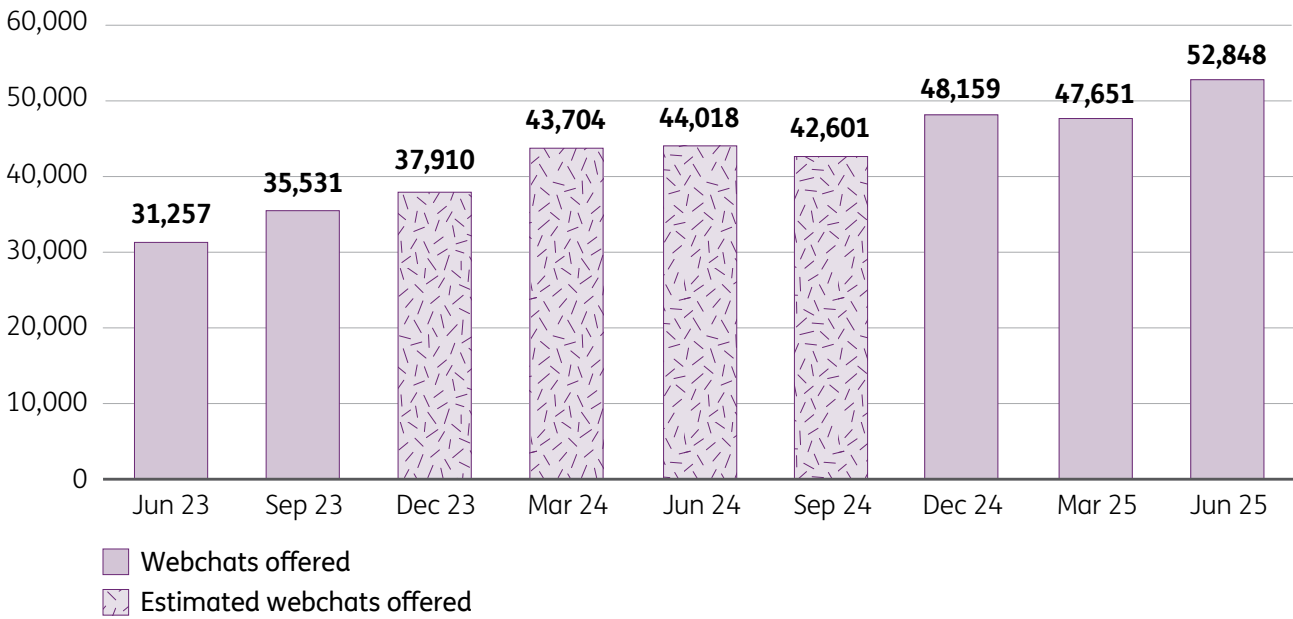
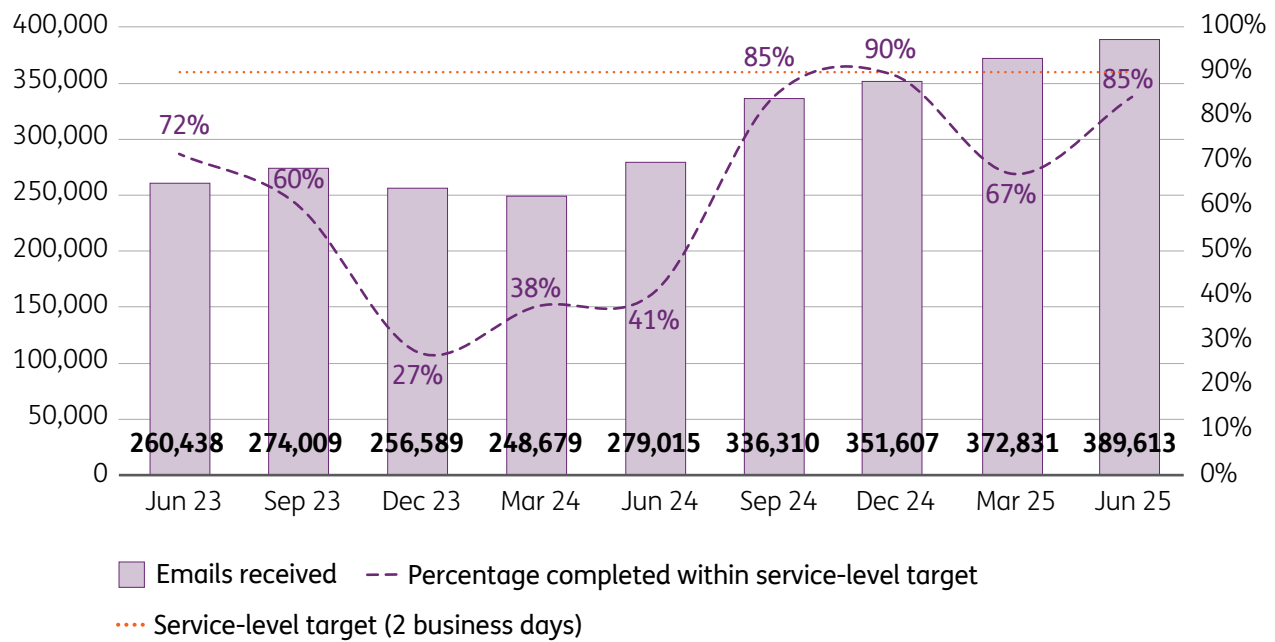
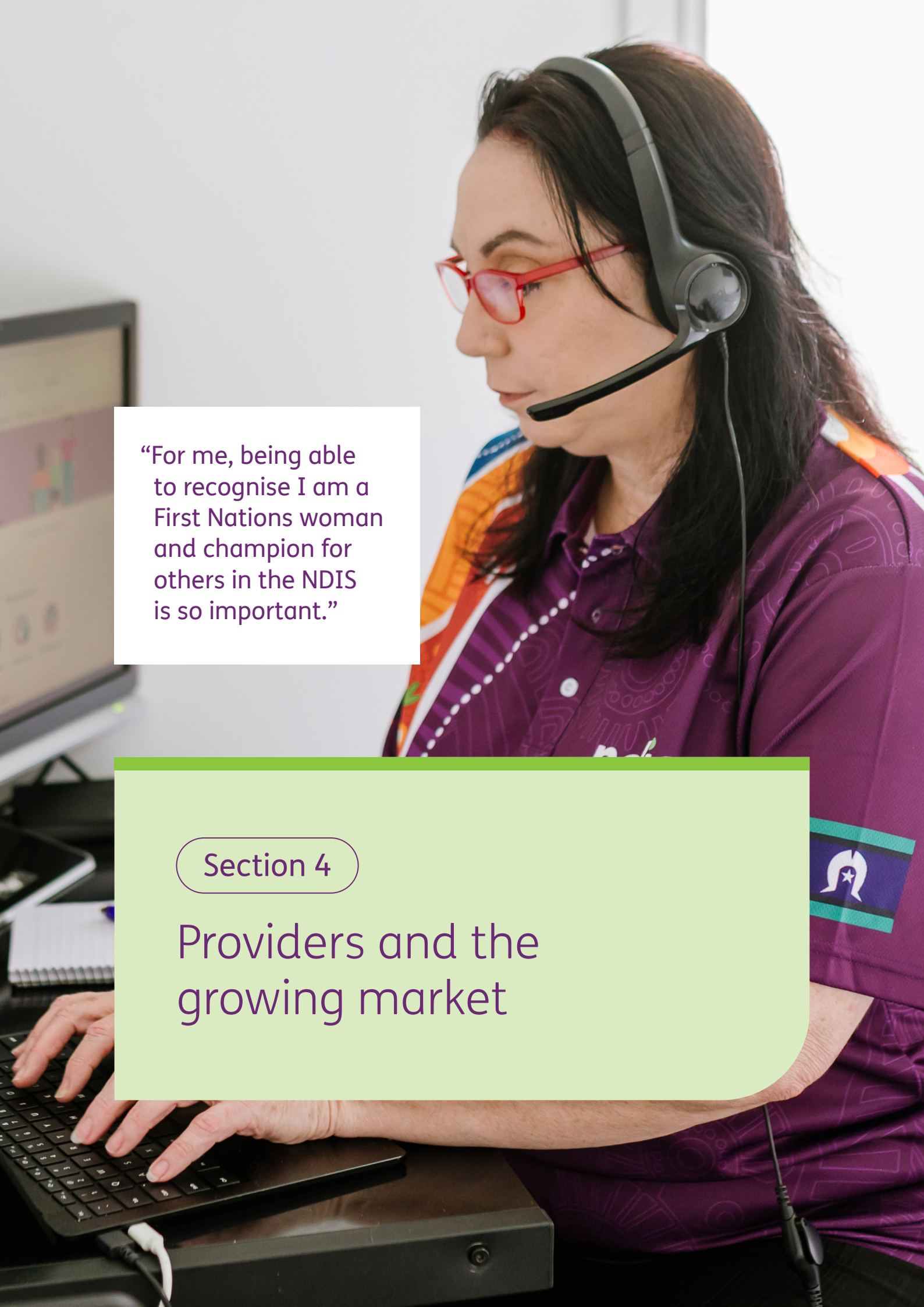


Figure 25: NCC email performance



⁴² The volume of webchats offered has been estimated from December 2023 to September 2024. This is because of reporting issues with the NDIA's new webchat functionality that was implemented in November 2023. The NDIA has identified instances where a webchat was offered but not connected to a contactor or no contact was received from the requestor. These instances were removed to estimate the webchat volume.



“For me, being able to recognise I am a First Nations woman and champion for others in the NDIS is so important.”

Section 4

Providers and the growing market

The provider market continues to grow.

4.1 Support categories

The largest support categories are core support for daily activities, core support for social and community participation, and capacity building for daily activities.

In the 12 months to 30 June 2025, \$45.9 billion in support has been provided (Table 8).⁴³ The largest support categories are core daily activities (51% of total payments), core social and community participation (24% of total payments), and capacity building daily activities (12% of total payments). Core daily activities includes payments to participants in supported independent living (SIL). Of the \$23.6 billion in payments for core daily activities in the 12 months to 30 June 2025, \$11.7 billion was for payments related to participants in SIL.

Table 8: Total payments from 1 July 2024 to 30 June 2025

Support category	Total payments (\$m)	Percentage of total payments
Core – daily activities	23,599	51.5%
Core – social and community participation	10,802	23.6%
Core – consumables and transport	1,513	3.3%
Capacity building – daily activities ⁴⁴	5,622	12.3%
Capacity building – other	3,027	6.6%
Capital	1,284	2.8%
Total⁴⁵	45,853	100.0%

Over the last 2 years, payments have grown by 32% (from \$34.7 billion for the year ending 30 June 2023 to \$45.9 billion for the year ending 30 June 2025). Payments have grown across the support categories, most notably for core daily activities and core social and community participation (growing by 34% in aggregate over the period).

⁴³ This represents total payments on a cash basis (including payments made under in-kind arrangements). On an accrual basis, total payments were \$46.3 billion.

⁴⁴ Includes therapy services.

⁴⁵ Total includes \$6.9 million of payments with no support category.

4.2 Funding management types

Most participants choose to use a plan manager.

Participants have 3 options for managing their NDIS funding – plan-managed, self-managed and NDIA-managed. They may choose one option or a combination.

In the June 2025 quarter, a minority (7%) chose to have their funding managed entirely by the NDIA, while the majority (66%)⁴⁶ preferred to engage a plan manager for some or all of their funding. It was reported that 27% of participants plan to self-manage all or part of their funding.

The NDIA supports participants to decide if self-management is right for them, and has released an [updated guide](#) to self-management. The guide explains the benefits of self-management, roles and responsibilities, and how to self-manage effectively. A participant’s initial choice of funding management type is not binding, and they make changes at any time. Table 9 shows the actual funding management type(s) used during the quarter.

Table 9: Active providers and payments by funding management type in the June 2025 quarter

Funding management type	Payments made to active providers (\$b), ⁴⁷ and proportion of total payments	Number of active providers ⁴⁸
NDIA-managed	3.3 (28%)	9,751
Plan-managed	7.4 (62%)	196,237
Self-managed	1.2 (10%)	135,570
Total	12.0	269,432

In the June 2025 quarter, of the \$12.0 billion in payments:

- \$3.3 billion was NDIA-managed (28%)
- \$7.4 billion was managed by a plan manager (62%)
- \$1.2 billion was self-managed (10%).⁴⁹

Of the 269,432 active providers in the June quarter:

- 9,751 supported NDIA-managed participants
- 196,237 supported plan-managed participants⁵⁰
- 135,570 supported self-managed participants.⁵¹

46 This figure excludes participants who have opted to self-manage part of their funding.

47 Includes cash and in-kind payments.

48 ‘Active providers’ refers to those who have received payment in the quarter for supporting NDIS participants. The count of active providers excludes providers with an invalid Australian Business Number (ABN).

49 Includes cash and in-kind payments.

50 Plan management fees, which are NDIA-managed payments, are reclassified as a plan-managed payment for the purpose of counting providers. Therefore, the count of NDIA-managed providers excludes providers who only received plan management fees and no other NDIA-managed payments.

51 From 14 October 2024, it is mandatory for participants with self-managed payments to include the ABN of the associated provider or provide a reason why it isn’t available. Previously, providing the ABN was voluntary.

4.3 Plan managers

The number of participants opting to use the services of a plan manager has continued to grow, while the number of plan managers in the NDIS has remained stable.

Provider types

Participants supported by plan managers may use registered or unregistered providers. For the 12 months to 30 June 2025, unregistered providers were used less frequently and had a higher proportion of one-off payments (that is, unregistered providers were only used once). On average, the frequency of one-off payments was approximately 3 times lower for registered providers.

Payment characteristics

In the June 2025 quarter, 196,237 providers supported plan-managed participants, of which 15,183 were registered at some point during the quarter.^{52,53}

Payments to plan managers were \$7.4 billion in the June 2025 quarter. Of the \$7.4 billion, \$167 million was for plan management services. The remaining \$7.3 billion was for plan managers to pay service providers on behalf of participants.

In the June 2025 quarter, registered providers received 57% of the \$7.3 billion overseen by plan managers, unregistered providers received 42%, and providers with unknown registration status received 1% of the plan-managed payments.

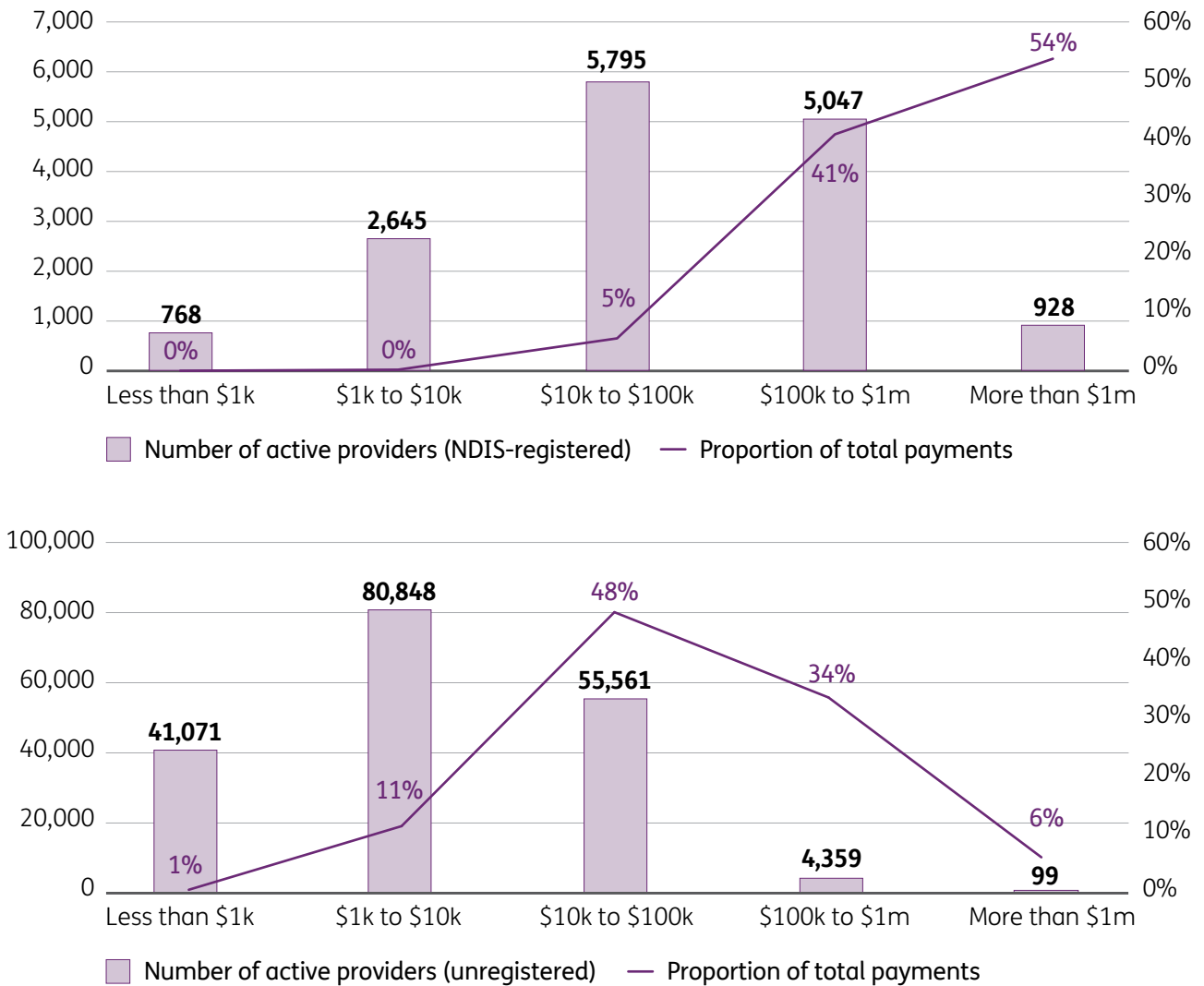
Although 42% of plan-managed payments went to unregistered providers, the market of unregistered providers is large, which means there are many unregistered providers receiving smaller total payments. While only 8% of providers paid through plan managers are NDIS-registered providers, they received 57% of total payments in the quarter. Furthermore, 39% of NDIS-registered providers received more than \$100,000 in NDIS funding for the quarter, compared to only 2% of unregistered providers receiving more than \$100,000 in funding (Figure 26).

52 Registration status of a provider may change between 'registered' and 'unregistered' during the quarter.

53 'Active providers' refers to those who have received payment in the quarter for supporting NDIS participants. The count of active providers excludes providers with an invalid ABN.

Section 4: Providers and the growing market

Figure 26: Number of active providers supporting participants through a plan manager, and proportion of total payments in the quarter by payment band – NDIS-registered (top) vs unregistered (bottom)^{54,55}



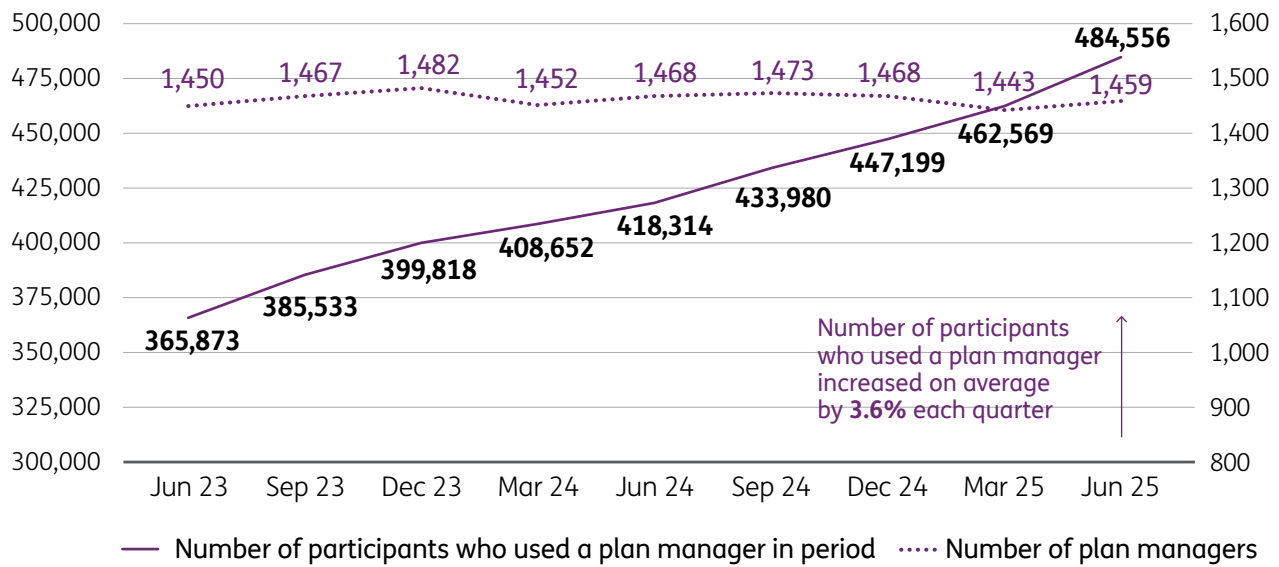
Over the past 2 years, the number of plan managers has remained stable at between 1,443 to 1,482 per quarter.⁵⁶ Over the same period, the number of participants being supported by plan managers increased from 365,873 to 484,556, which is a quarterly average increase of 3.6%. As a result, there has been a significant 32% increase in the average number of participants supported by a plan manager over this period (Figure 27).

⁵⁴ Payments of \$38 million made to providers with 'unknown' registration status have not been included in this chart.

⁵⁵ Registration status is determined as at the posting date of payment. Some providers may be counted more than once if they changed registration status during the quarter.

⁵⁶ The historical number of plan managers does not take into account any revisions in their registration status.

Figure 27: Participants and providers with a plan manager by quarter – all participants⁵⁷



4.4 Supported independent living

SIL supports of \$4.0 billion were provided in the June 2025 quarter.

The NDIA has a consistent and comprehensive participant-centric decision-making process for all participants seeking home and living supports. This includes simplifying and streamlining processes for home and living participants and improving public-facing information about NDIS-funded home and living supports. As at 30 June 2025, there are 36,691 participants in SIL.

To improve the quality and consistency of decisions and the implementation of participant plans, all specialist home and living delegates undergo extensive training to improve their knowledge of home and living supports. Decisions resulting in an increase to a SIL budget are signed off by a senior home and living delegate.

For participants who request SIL for the first time or a change to their existing SIL budget, a home and living delegate arranges a planning meeting to ensure the participant understands the decision that has been made and has support to implement their plan.

Total payments to participants in SIL, over a 12-month period, have increased by 16% annually over the last 2 years, from \$11.5 billion to \$15.5 billion.

A large component of payments to participants in SIL relates to core support for daily activities. The average payment per SIL participant for core support for daily activities has increased by 7% annually over the past 2 years (Table 10). Note that participants in SIL also receive other supports, such as core support for social and community participation, employment and capacity building.

⁵⁷ The historical number of plan managers does not take into account any revisions in their registration status.

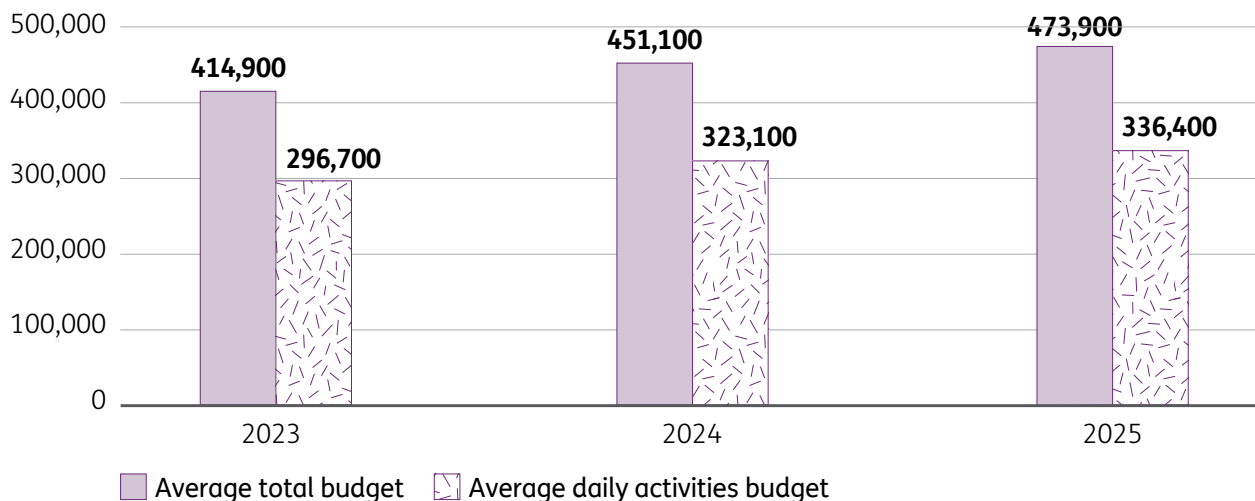
Section 4: Providers and the growing market

Table 10: Number of participants and payments for years ending 30 June – participants in SIL

Participants and payments	2023	2024	2025	Percentage increase (per annum)
Active participants	31,509	34,850	36,691	8%
Total payments (\$m)	11,481	13,965	15,537	16%
Average payment (\$)	387,700	417,400	433,300	6%
Total payments – Core daily activities (\$m)	8,837	10,620	11,679	15%
Average payment – Core daily activities (\$)	298,300	317,400	340,800	7%

In addition to the increase in payments, average plan budgets for participants in SIL have also increased over time (Figure 28), including the component of the plan budget for SIL supports (core support for daily activities). Specifically, average plan budgets and the average daily activities components of plan budgets have increased by 7% and 6% annually over the past 2 years respectively.

Figure 28: Average plan budgets over time for years ending 30 June – participants in SIL (\$)



4.5 Specialist disability accommodation

The total number of enrolled specialist disability accommodation (SDA) dwellings continues to increase.

The NDIS forms one part of the disability ecosystem, supporting Australians and their families to ensure those living with disability can lead a fulfilling life. The NDIS was designed to complement, not replace, other services for which the states and territories are responsible, including housing.

The number of participants using SDA has increased by an average of 4% annually over the past 2 years, while the number of participants eligible for SDA (but not yet using SDA) at 30 June 2025 is comparable to that at 30 June 2023.

Reasons why a participant may not have SDA funding in use include:

- SDA is newly included in their plan
- they are not yet ready to move from their current accommodation
- they are still exploring options or waiting to move when a vacancy becomes available
- they may be awaiting the completion of an (identified) new-build SDA dwelling
- they are yet to locate a suitable SDA dwelling – by location or SDA type/category.

Total SDA payments have increased by 40% annually over the past 2 years, from \$230 million to \$452 million (Table 11).⁵⁸ The average SDA payment per participant has also increased by 34% per annum.⁵⁹ New SDA benchmark prices came into effect from 1 July 2023 following the SDA Price Review, including automatic annual indexation of SDA funding amounts in plans from 1 July 2024.

The total number of enrolled SDA dwellings as at 30 June 2025 was 11,642, up by 21% annually over the past 2 years, and by 2,155 dwellings (23%) compared to 30 June 2024. This annual increase was observed across most housing design categories. The largest increase was for dwellings of the ‘robust’ category (43%, 437 dwellings) and the ‘high physical support’ category (39%, 1,452 dwellings).

All states and territories, except the Australian Capital Territory and Queensland,⁶⁰ recorded an increase in the number of enrolled SDA dwellings in the past quarter.

More granular information on SDA supply and participants with an SDA need is available in Supplement P to this quarterly report.

58 The average SDA payment figure has the number of participants using SDA as the denominator. The average SDA supports figure (Table 11) uses the number of participants with SDA in their plan as the denominator. As at 30 June 2025 this number was 18,272. This figure excludes participants who have a small placeholder amount of SDA funding entered in their plan. Once these participants have located an enrolled dwelling, the full SDA funding will be entered into the plan.

59 The number of enrolled SDA dwellings in the Australian Capital Territory remained unchanged at 194 from 31 March 2025 to 30 June 2025.

60 The number of enrolled SDA dwellings in Queensland decreased by 37 from 2,486, as at 31 March 2025, to 2,449, as at 30 June 2025.

Table 11: Number of active participants and SDA support budgets and payments for years ending 30 June

Year	2023	2024	2025	Percentage increase (per annum)
Participants using SDA ⁶¹	13,971	14,179	15,177	4%
Participants eligible for SDA, not yet using SDA ⁶²	9,853	9,955	9,880	0%
Total SDA supports (\$m)	365	470	560	24%
Average SDA supports (\$)	16,000	22,900	30,600	39%
Total SDA payments (\$m)	230	316	452	40%
Average SDA payments (\$)	17,200	22,400	30,800	34%

4.6 Market stewardship activities

The NDIA continues to support the NDIS market through market design, coordination and engagement activities.

Recent activities include a refresh of the NDIS market stewardship framework, which will establish a set of shared objectives for all Commonwealth agencies that have a role in disability provider market stewardship; a defined set of roles and responsibilities; and market ‘levers’ – the tools by which the NDIA can use to improve market performance.

Work on developing market levers includes:

- establishing provider lists to assist participants and their families and carers to find trusted information on products and providers more easily
- establishing blended payments pilot programs (that aim to remunerate providers for the outcomes achieved)
- launching quality supports pilot programs (that remunerate providers for working with the NDIA to develop a deeper understanding of quality service delivery and pricing implications)
- the integrated care and commissioning pilot program, and the alternative commissioning pilot program.

The NDIA continues to invest in managing markets to expand and improve the outcomes being achieved by providers. Projects include home and living demonstration projects, the Specialist Disability Accommodation Data Project, and employment assistance for young participants.

61 Evidence of SDA in use is estimated based on SDA payments, SDA service bookings and matching addresses to enrolled SDA dwellings. Future enhancements to the computer system will allow for better tracking and an ability to better understand why participants may not yet be using SDA funding.

62 SDA eligible participants are participants who have been found eligible for SDA through the home and living application process or through legacy system processes but have SDA funding in their plan.

Market stewardship framework

The NDIS market stewardship framework is being revised to improve the Australian Government's stewardship of provider markets. The NDIA is working closely with the Department of Health, Disability and Ageing and the NDIS Quality and Safeguards Commission, and engaging states and territories. The new market stewardship framework will define governments' role in shaping, supporting and monitoring NDIS markets to promote the efficient functioning of disability support markets.

Work to date includes identifying policy and market stewardship objectives, identifying market levers available to the NDIA, consultations to better define metrics for monitoring market performance, and considering market stewardship governance arrangements (including defining roles and responsibilities of the NDIA and other government agencies).

Provider lists

Provider lists are intended to facilitate market engagement between participants and suppliers by providing information that builds consumer capacity.

Provider lists are designed to help participants find and compare products and services from providers who meet a minimum set of standards, and choose quality supports that represent value for money. Participants can purchase their products and services from a listed provider, or another provider of their choosing.

A Dog Guide Provider List is under-development with finalisation subject to consultations with the sector.

Blended payments initiative

As part of the 2023–24 Budget, the Government committed \$24.6 million over 4 years from 2023–24 to work with NDIS participants and service providers to trial a range of blended payment models focusing on enrolment and outcome payments.

DSS is leading this initiative, working closely with the NDIA to undertake co-design and implementation activities.

Throughout 2024, we worked with participants and carers, providers, peak bodies, and disability representative and carer organisations to co-design trials of blended payments that increase the incentive for providers to innovate service delivery and improve outcomes for participants.

The NDIA and DSS are now reviewing the findings from co-design to inform potential trial activities.

Home and living demonstration projects

In 2021–22, the NDIA initiated a program of home and living demonstration projects to enable the sector to test creative and innovative home and living options.

The first round of home and living demonstration projects has been completed. Five projects were implemented and finalised by June 2024. They focused on supporting providers and participants to work together to design and test better ways of funding and delivering SIL.

The second round of projects was announced in October 2023 and focused on empowering participants to explore and understand their home and living possibilities. Projects funded through the second round of grants will be completed in the second half of 2025.

The findings and lessons learned from the home and living demonstration projects will inform future approaches to support innovation, alongside further engagement with the disability community and sector.

Specialist disability accommodation data project

The NDIA continues to enhance and share more SDA data publicly through the SDA data project. The project aims to improve accessibility and reliability of SDA data, to support informed decision-making and guide providers and investors to address future SDA needs.

Recent SDA data project releases include:

- Insights from the [SDA data project stakeholder consultation](#). SDA providers, investors, and participants, their families and carers shared their perspectives on SDA data, including what information they need to make decisions and suggestions for improvements.
- Expanding the data in [Supplement P Specialist Disability Accommodation](#). This dataset now includes more granular information.
- The latest [SDA Report](#) (May 2025). This high-level overview of SDA data and analysis up to 31 December 2024 is drawn from NDIA systems.

SDA data releases and updates can be found on the [SDA data webpage](#).

4.7 NDIS pricing

In June 2025, the NDIA released the 2024–25 Annual Pricing Review, meeting its commitment to publish the review 5 working days after the Fair Work Commission’s annual wage review announcement. The review included 17 recommendations, with pricing changes taking effect from 1 July 2025.

The NDIA is responsible for setting price limits for services provided to NDIS participants. The Annual Pricing Review is the evidence-based process for setting price limits and ensuring the market is delivering sustainable and high-quality supports for NDIS participants. Price limits are based on a range of factors, including supply and demand in the market, prices in other markets, research, public and industry engagement, and broader economic factors.

This year’s review was informed by the largest and most comprehensive collection of data to support therapy pricing recommendations – covering more than 10 million additional transactions. Benchmarking now includes Medicare data, private health insurance claims and data from 13 comparable government schemes.

Key recommendations from the review include:

- Adjusting disability support worker-related supports in line with increases in the minimum wage and changes to the superannuation guarantee.
- Increasing the price limits of level 1 support coordination and nursing and other supports.
- Making changes to therapy pricing, including non-labour travel allowances, to reflect the maturity of the market, and to align pricing across the country with comparable schemes and programs.

This year’s Annual Pricing Review begins a multi-year transition to more tailored pricing that better caters for participants’ diverse needs. The NDIA will continue to monitor markets to ensure participants have access to quality supports and the market remains sustainable.

This quarter, the NDIA released the report from the Independent Pricing Committee review of NDIS pricing. The report recommended moving to a more differentiated approach to pricing, where supports may attract different price caps, based on a range of factors, including the benefits to participants.



Section 5

Financial sustainability



John finds purpose volunteering and realises his potential



At 56, NDIS participant John has found more than a volunteer role at an op shop, he's found pride, purpose and a welcoming community.

For John, who has a moderate intellectual disability and some behavioural challenges, these are personal goals he's proud of achieving.

Volunteering has boosted his confidence, supported his independence and helped him build the job and social skills he needs to reach another goal, to find paid work.

John's journey began with a vision he shared with his support workers, Luke, Wayne and Steph. Wayne had noticed John light up when asked to lead tasks. Seeing this, he called op shop manager, Sarah, to ask if John could do some volunteer work there. Wayne also set up a few visits prior, to help John get to know the other people working there.

Feeling good about volunteering with the team, John started working there a few

hours each Friday with Steph. Soon, he was asking if he could work the whole day.

With the help of his support team, John has really grown into the role.

Luke said they helped John to learn how to greet customers, use the register, take card and cash payments and calculate the change. 'John is a different man. He's improved so much,' Luke said. 'We are all really proud of him.'

'The register is my favourite,' John said. 'I also love greeting customers.'

Now feeling valued and purposeful and with a solid set of job skills, John is getting ready for his next big step, to get paid work.

'We put all the jobs I do at the op shop on my resume,' he said.

'I'd like to see if I can get a job at a supermarket. I like helping customers and working in a team. That kind of job would be great.'

[Read more participant stories on our website.](#)

A financially sustainable NDIS achieves outcomes for participants across their lifetimes and is affordable now and into the future.

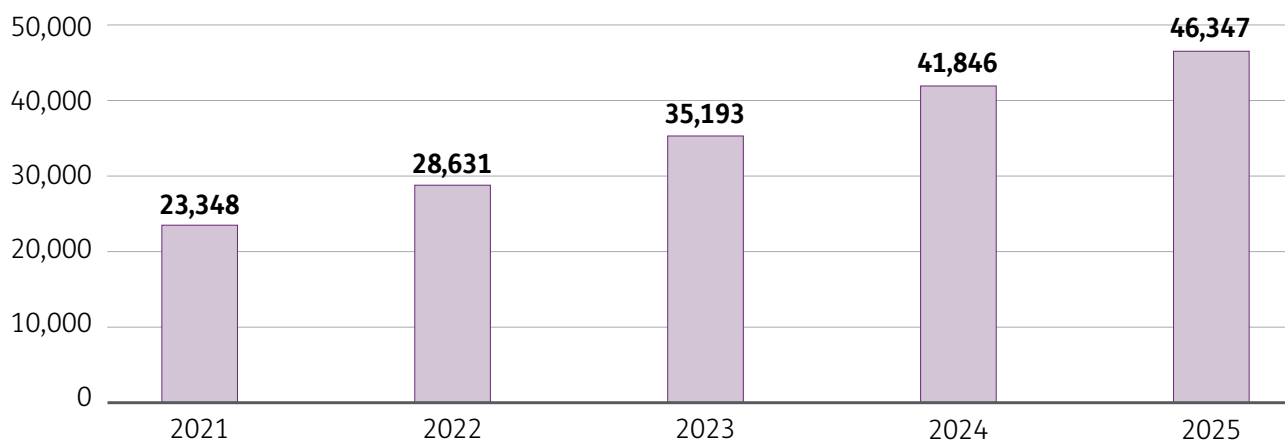
5.1 Total payments

Total NDIS payments continue to increase due to both increased participant numbers and higher average costs per participant.⁶³

Total payments in the year to 30 June 2024 were \$41.8 billion, while the payments in the year to 30 June 2025 were \$46.3 billion (Figure 29).

The increasing number of participants accessing the NDIS contributes to the increase in payments.

Figure 29: Total payments (\$m) for financial years ending 30 June



⁶³ Total NDIS costs are presented by financial year on an accrual basis, sourced from the NDIA financial accounts. The NDIS costs figure is made up of total NDIS expenses, less NDIS grant payments, write-downs and write-offs. The NDIS and NDIA costs for the 2024–25 financial year are provisional results and subject to further changes, including the Australian National Audit Office audit.

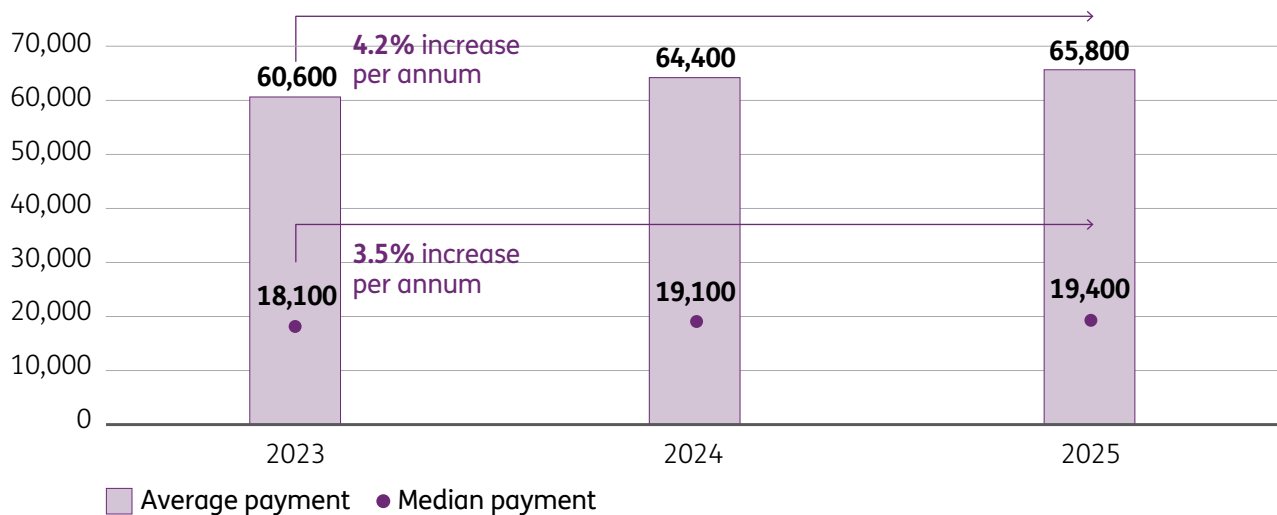
5.2 Average and median payment trends

Average and median payments per participant have increased by 4.2% and 3.5% per annum respectively over the past 2 years.

Both the average (mean) payment per participant and the median payment per participant provide useful information. In the NDIS, the average payment is much higher than the median payment, because there is a skewed distribution with a small number of participants receiving very high-cost supports, and a large number receiving low-cost supports.

Trends in average and median payments per participant between 1 July 2023 and 30 June 2025 indicate that average payments have increased by 4.2% per annum, and median payments have increased by 3.5% per annum (Figure 30).

Figure 30: Average and median payments for years ending 30 June



5.3 Average plan budget trends

Average plan budgets have also increased over time for all participants. A larger increase was observed for participants in supported independent living (SIL).

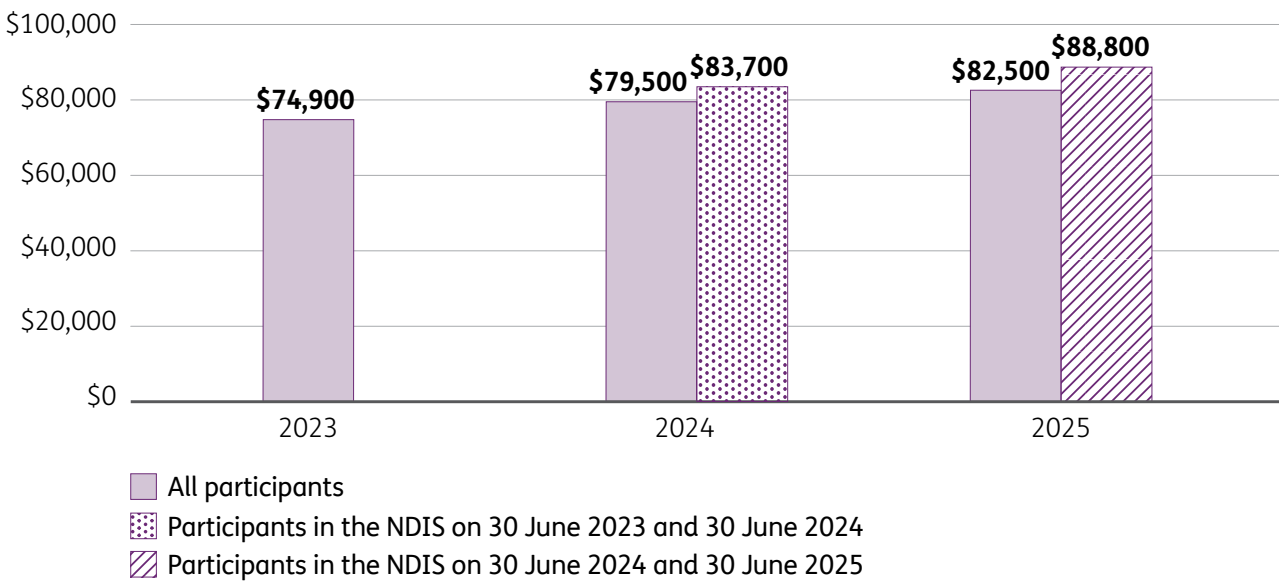
In addition to average payments increasing over time, average plan budgets have also increased over time.

Specifically, over the 2-year period to 30 June 2025, average plan budgets have increased by:

- **5.0%** per annum for all participants
- **6.9%** per annum for participants in SIL
- **4.9%** per annum for participants not in SIL.

Average plan budgets of participants continuing in the NDIS are higher than the overall average (Figure 31). For example, for these existing participants who were in the NDIS at 30 June 2023 and at 30 June 2024, the average plan budget increased from \$74,900 to \$83,700 (11.7%). Similarly, average plan budgets for those participants who were in the Scheme at 30 June 2024 and 30 June 2025 increased from \$79,500 to \$88,800 (11.7%).

Figure 31: Average annualised plan budgets for years ending 30 June



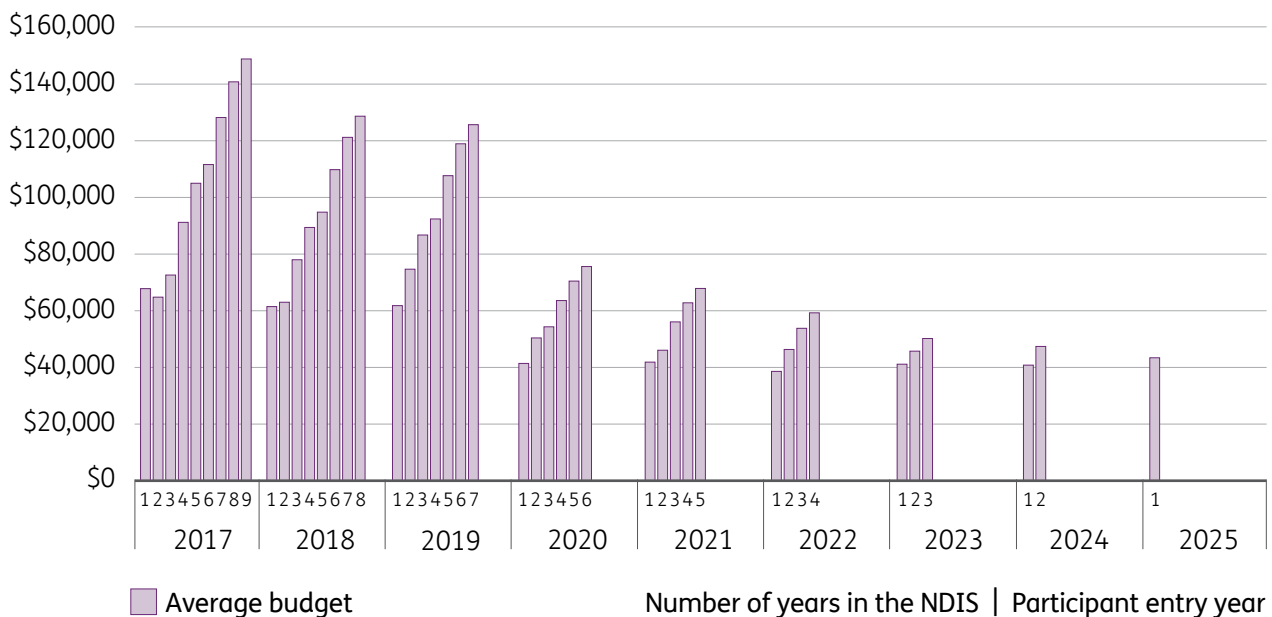
Section 5: Financial sustainability

As the mix of participants (across various characteristics) has changed over time, understanding trends in average plan budgets for the same group of participants over time is important.

Figure 32 shows participants grouped into cohorts based on the year they entered the NDIS and the trend in average plan budgets based on the number of years in the NDIS. For example, average plan budgets for participants who entered the NDIS in the year ending 30 June 2018 increased from \$61,300 for their first year to \$128,500 in the most recent year (for those who have been in the NDIS for 8 years).

Average plan budgets for participants entering the NDIS in the year ending 30 June 2020 or later are lower relative to those who entered the NDIS in earlier years. For example, those who entered the NDIS in the year ending 30 June 2020 had an average plan budget of \$41,500 for their first year, compared to a first-year budget of \$67,800 for participants who entered in the year ending 30 June 2017. This reflects a changing mix of participants over time, with the earlier years prioritising the transition of participants from existing federal, state and territory government schemes into the NDIS. Conversely, in recent years there has been a growing proportion of younger participants entering the NDIS with disabilities such as developmental delay. Children, on average, have lower plan budgets than adults.

Figure 32: Average plan budgets by year of entry ending 30 June, and number of years in the NDIS



Plan reassessments and variations in plan budgets

A plan reassessment may result in the plan budget being varied for a variety of reasons. For example, one-off capital items may be included in one plan and not the next. Another example is an investment in capacity building (such as behavioural supports) leading to less need for core supports over time. The NDIA has published an [operational guideline on plan reassessments](#) that details the reasons a new plan could be different to a current plan.

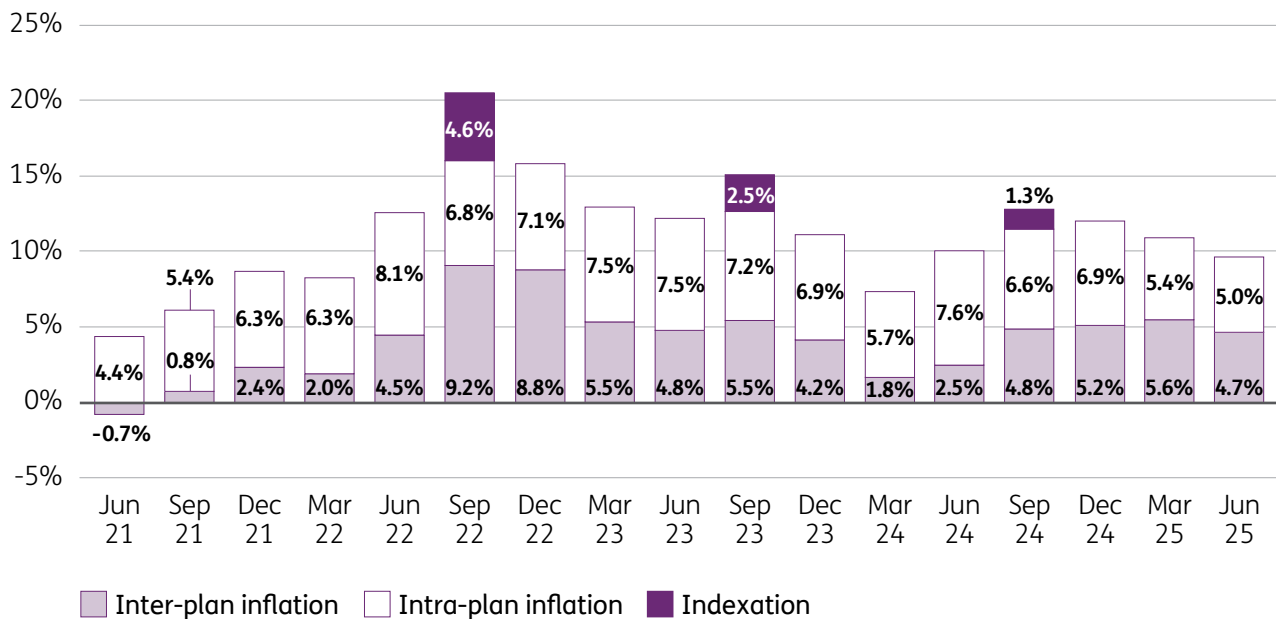
Plan inflation

In the June 2025 quarter, total annualised plan inflation was 9.7%, of which 4.7% was due to changes made at plan reassessment, and 5.0% was due to changes occurring within a plan between reassessments. (Figure 33).

The inflation rate of 9.7% per annum in June 2025 compares with a rate of 11.0% per annum in March 2025 and 12.1% per annum in December 2024. Inflation occurring at plan reassessment (inter-plan inflation) was 4.7% per annum, which compares with 5.6% per annum in March 2025, and 5.2% per annum in December 2024.⁶⁴

Inflation occurring within a plan, between reassessments (intra-plan inflation and excluding indexation), was 5.0% per annum, which compares with inflation of 5.4% per annum in March 2025, and 6.9% per annum in December 2024.

Figure 33: Annualised percentage change in plan budgets for active participants



64 The March 2025 figure for inter-plan inflation has been amended in this report due to improved calculation of indexation for plans that are auto-extended in the new computer system.

Section 5: Financial sustainability

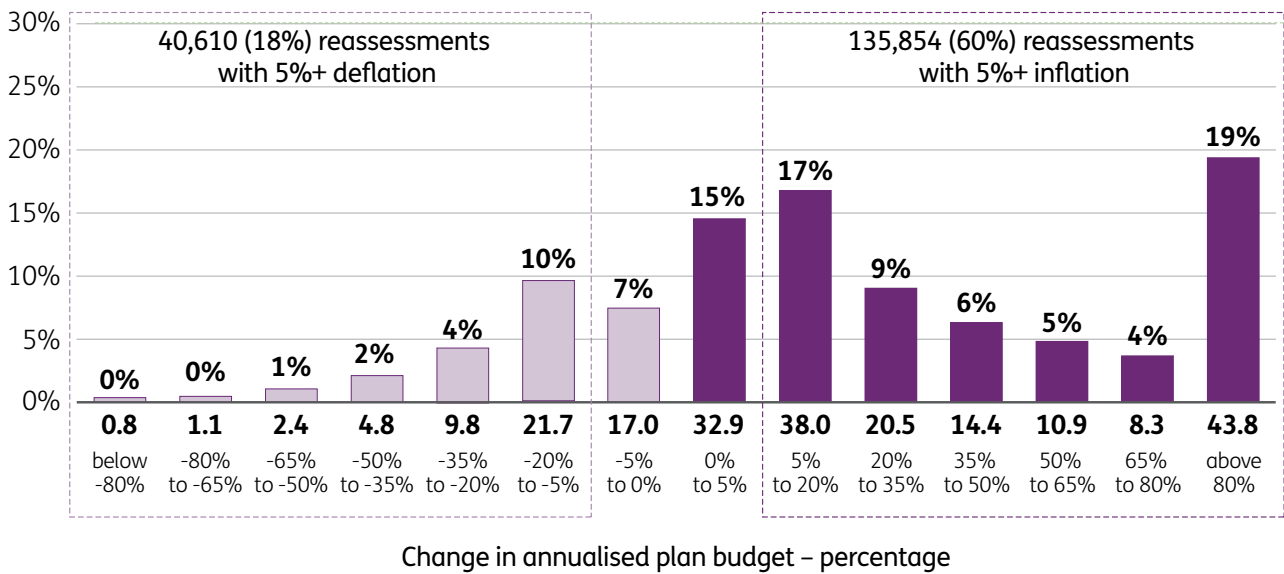
At the individual level, plan budgets can vary significantly. In this financial year, taking into account total plan inflation, plans were more likely to increase than decrease.

During the 12 months to 30 June 2025, 29% of active participants had at least one plan reassessment. Figure 34 shows that of the plans reassessed:⁶⁵

- **60%** increased at reassessment by more than 5% (compared to **55%** in the year to 30 June 2024)
- **18%** decreased by more than 5% (compared to **17%** in the year to 30 June 2024)
- **22%** remained within 5% (compared to **27%** in the year to 30 June 2024).

Of the plans reassessed, **19%** had their budgets increased by more than **80%** (remaining unchanged from the prior quarter and increasing from **17%** in the year to 30 June 2024).

Figure 34: Distribution of the percentage change in annualised plan budgets for plans reassessed between 1 July 2024 and 30 June 2025⁶⁶



⁶⁵ Numbers may not add to 100% due to rounding.

⁶⁶ The number of plan reassessments (in thousands) in each inflation percentage band is shown at the bottom of each bar in the chart. The corresponding percentage of plan reassessments in each band is shown at the top of each bar in the chart.

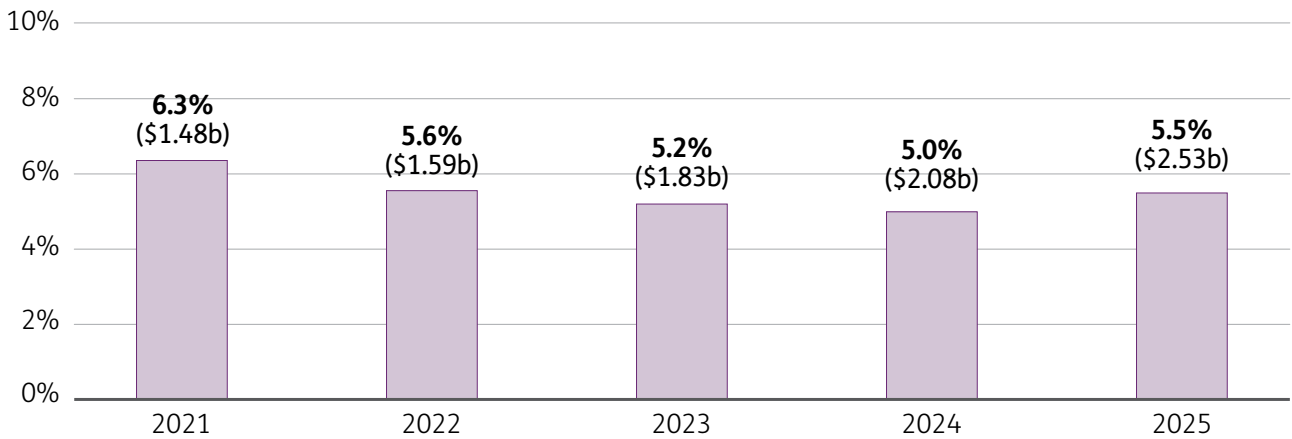
5.4 Operating expenses

Additional investments to strengthen the NDIS and improve the participant experience have increased the annual operating expenses per participant to \$3,618 in 2024–25.

In addition to the money spent through participant plans on supports for participants, the NDIA receives funding for its operating expenses, including NDIS general supports and paying staff wages. NDIA operating expenses for the year ending 30 June 2024 were \$2.08 billion, and \$2.53 billion for the year ending 30 June 2025.

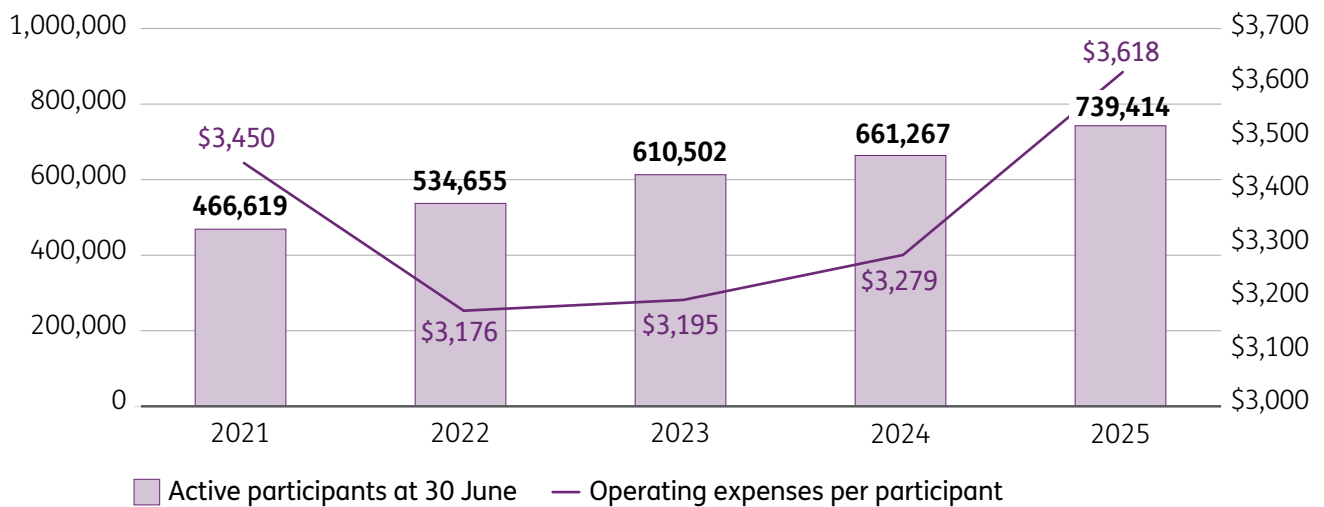
As a percentage of participant expenditure, operating expenses decreased from 5.6% in 2021–22 to 5.0% in 2023–24. In the 2024–25 year, the figure has increased to 5.5% (Figure 35). The Productivity Commission, in its 2017 study report, suggested a range of 7% to 10% as an appropriate benchmark for NDIA operating costs.

Figure 35: Operating expenses as a percentage of participant costs for years ending 30 June

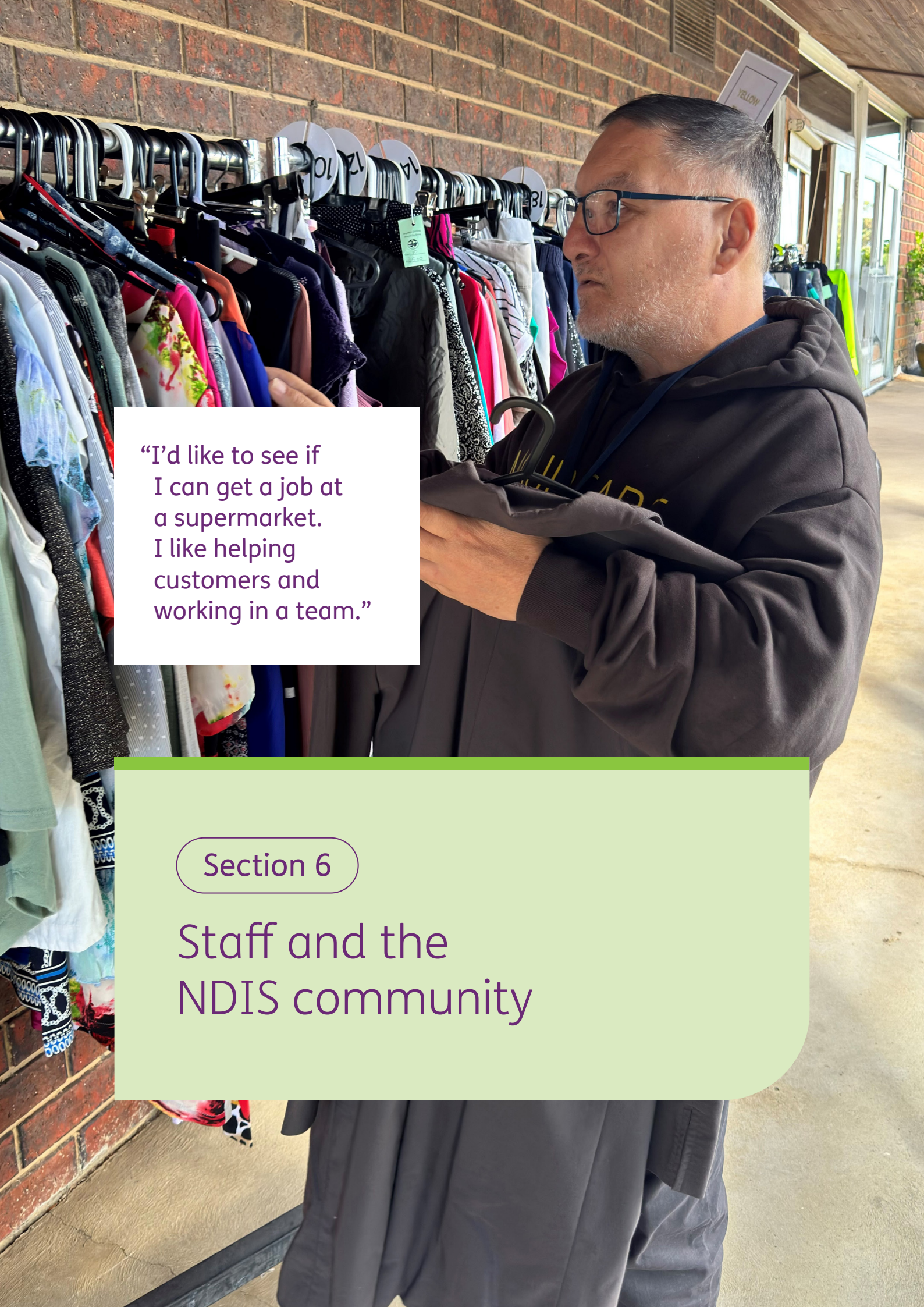


The annual operating cost per participant has increased from \$3,279 in 2023–24 to \$3,618 in 2024–25 (Figure 36).

Figure 36: Operating expense per participant for years ending 30 June⁶⁷



⁶⁷ The average number of participants is a simple average of the active participants in 2 periods (opening and closing). Cost per participant uses these average participant numbers as the denominator.

A man with glasses and a dark hoodie is looking at a rack of clothes in a store. He is holding a dark-colored garment. The rack is filled with various items, including shirts and jackets. There are signs on the rack, one of which says "YELLOW". The background shows a brick wall and a window.

“I’d like to see if I can get a job at a supermarket. I like helping customers and working in a team.”

Section 6

Staff and the NDIS community

The NDIA's diverse workforce and commitment to public data sharing enhances its engagement with participants and the sector.

6.1 Workforce diversity, inclusion and engagement

| The NDIA is committed to fostering an accessible and inclusive workplace.

As at 30 June 2025, the total NDIS workforce was 18,629 including 10,601 Australian Public Service (APS) employees and 1,780 labour hire workers and contractors. A further 6,248 people are employed by NDIS partners in the community and National Contact Centre partners. The 2024 APS Employee Census results indicate 22% of NDIA staff identify as having a disability and 11% of staff identify as neurodivergent.

Following the April 2025 launch of the NDIA's Neuroinclusion Plan, the NDIA has established a Neuroinclusion Network and online toolkit to support neurodivergent staff, their line managers and allies. Over 620 members have joined the network since its introduction. This builds upon the other diversity networks and resources already available across the NDIA to support our diverse workforce.

The NDIA's internal Auslan interpreting pilot program continues to successfully remove communication barriers and deliver industry leading support for Deaf and hard of hearing staff at the NDIA. Following its success, the pilot will transition into a permanent service.

6.2 Public data sharing and the latest release of information

| The NDIA continues to release timely data and analysis to stakeholders.

Data about the NDIS is shared publicly on the [NDIS website](#) each quarter, including interactive tools, downloadable files, reports and analyses.

In this quarter, the NDIA released the following updated data files:

- the [accompanying data supplements](#) to the quarter 3, 2024–25 Quarterly Report to Disability Ministers
- the latest [participant dashboards data](#) containing quarter 3 for 15 disability types in the NDIS
- [datasets](#) containing detailed data updates across participant, provider and market categories.

The [explore data](#) tool, an interactive visualisation tool, was updated with third-quarter data on participant, provider and market demographics.

Section 6: Staff and the NDIS community

On 20 May 2025, the latest [Specialist Disability Accommodation \(SDA\) Report \(May 2025\)](#) was released. The report provides a high-level overview of SDA data drawn from current NDIA systems until 31 December 2024. It is designed to complement existing NDIA data, including the [Quarterly Report to Disability Ministers](#) and [Supplement P](#), while sharing available SDA data in new ways.

Several deep-dive reports and analyses have also been released in previous quarters and are available on the [NDIS website](#).

6.3 Integrity of the NDIS

| The NDIA is committed to making it easier to get it right, harder to get it wrong.

Fraud Fusion Taskforce and Crack Down on Fraud program

In the 2025–26 federal Budget, the Australian Government announced additional funding of \$151 million over 4 years from 2025–26 for the existing Crack Down on Fraud (CDoF) program, with ongoing funding of \$43.8 million per year from 2029–30. The Government also announced funding of \$17.1 million in 2025–26 to continue to invest in the NDIA’s ability to detect and respond to fraud and non-compliance.

This builds on the Government’s initial investment of \$83.9 million for the CDoF program for the 2024 calendar year. The Government also announced an additional \$110.4 million for the CDoF Program for the 2025 calendar year.

In calendar year 2024, the CDoF program delivered 17 government committed milestones. The program has improved the integrity of identity information for participants whilst providing a familiar, consistent, and secure experience for participants and nominees accessing NDIS digital platforms through myGov. In its first year it also delivered a new datalake for supporting fraud detection, a new integrity management system to transform the way we do investigations and strengthening of the NDIA’s cyber event detection and analysis capabilities.

In calendar year 2025, the CDoF program continues boosting fraud-detecting IT systems to better protect participant funds. In its second year of delivery, the program builds on foundational capabilities delivered last year; implementing further changes to strengthen identity, uplift our systems and improve the integrity of the NDIS.

Integrity initiatives this quarter

In the June 2025 quarter, the integrity program continued to implement measures to address emerging and high-risk integrity issues.

The following integrity initiatives were delivered:

- **Integrity Management System (IMS)** – The IMS went into production in November 2024 with the first pilot group of investigation staff onboarded in April 2025. This new capability is world class and transforms our integrity case work and ability to work across government to identify non-compliance and dodgy providers.
- **Enhanced myGov Linking for Participant Portals** – From 18 May 2025, online portal users will receive a linking code via SMS when linking NDIS and myGov accounts. Previously, users were required to call the National Contact Centre (NCC) to obtain a linking code. This streamlined approach improves user experience and increases security, safeguarding participant information.
- **Consumer Identity and Access Management (CIAM)** – On 18 May 2025, the first release of CIAM capabilities was implemented, which has facilitated easier and more secure access for NDIA digital channels, consolidating authentication and authorisation functions which were previously managed separately in each digital channel. Additional CIAM capabilities will continue to be enhanced in subsequent releases.
- **Data sharing** – The NDIA has established external data sharing arrangements to further uplift our data analytics capabilities. NDIS Quality and Safeguards Commission (NDIS Commission), Australian Business Register (ABR), Fact of Death (FoD) and Australian Securities & Investments Commission (ASIC) data is now landing in the NDIA's Data Lake. This uplifted capability improves fraud detection, contributing to scheme integrity.
- **Integrity Analytics** – Use cases have been delivered to showcase our data and analytics capabilities to detect and identify claims that are high-risk and potentially non-compliant. These use cases also help identify accounts or identities that may be compromised. Through flagging claims for intervention this way, the NDIA is able to reduce non-compliant claims, contributing to scheme sustainability, and protect participants and their information.

Integrity outcomes this quarter

This quarter, the NDIA Pre-Payment Team reviewed over 9,000 claims from providers, plan managers and participants, with a total value of more than \$26 million. A risk-based assessment process is used to identify high-risk claims and non-compliance. Over 61% of the claims reviewed, by value, were rejected or cancelled. Not all rejected claims were fraudulent. Reasons for rejection include:

- the claimant was unable to adequately substantiate the claim
- the same claim was submitted twice
- the support was not delivered to the participant
- the claim does not align with the participant's plan.

Many of the pre-payment integrity checks have now triggered manual payment reviews. The increased use of manual payment reviews has prevented claims being made by providers and participants with significant integrity issues. Claiming from these specific providers and participants has reduced or ceased or enabled the NDIA to initiate historic audits or investigations.

Operational case outcomes

The NDIA received over 7,000 tip-offs in the June quarter, and 29,000 tip-offs over the financial year. More than 70% of tip-offs were received through the new web-based form this financial year. The quality of the tip-offs received continues to be high, enabling faster triaging, assessment and escalation.

The Fraud Fusion Taskforce, which now includes 23 Government agencies working together, continues to make significant progress in improving the Government's capability to better detect, prevent and respond to fraud against the NDIS. Partnering with other FFT agencies continues to result in increased multi-agency interventions against organised crime syndicates targeting the NDIS.

The NDIA, as part of its Fraud Fusion Taskforce activity, has disrupted over 1,900 providers who submitted incorrect or non-compliant claims to the NDIS. In the 12 months prior to the disruption, these providers had collectively claimed \$1 billion from the NDIS. Since the start of the Scheme, these providers had collectively claimed over \$4.8 billion. The actions taken by the Fraud Fusion Taskforce ensure that NDIS funding is redirected to high-quality providers and ensures that participants get the appropriate supports they need.

As of 30 June 2025, the Fraud Investigations Teams in the NDIA are working on 86 active investigations, some of which involve our FFT StrikeForce Teams. These cases have a combined estimated fraud value of \$37.2 million. There are over 15 active cases currently being prosecuted, with a total of 15 offenders before the courts.

Endnotes

- 1 This is the net increase in the number of active participants in the NDIS each period, noting some participants have left the NDIS.
- 2 There were 8,436 participants aged 0 to 74 years with a gender of 'Other'. The participants for this group are included within the total rates, but not the gender-specific participation rates.
- 3 For some participants, the identification as First Nations or CALD is not known.
- 4 This compares to 8% of the Australian population identifying as First Nations Peoples who have a need for assistance. Source: Census of Population and Housing 2021 ('Need for Assistance' variable), Persons Place of Usual Residence, by Indigenous Status.
- 5 The percentage of CALD participants excludes participants who identify as First Nations Peoples.
- 6 This compares to 2% of the Australian population living in remote or very remote areas. Source: Census of Population and Housing 2021, Persons Place of Usual Residence, by Remoteness Area.
- 7 The [Explore data](#) webpage has detail on the numbers of CALD participants and remote and very remote participants.
- 8 This includes all people who were under 65 at the time of leaving. It excludes participants who are deceased or have left the NDIS. Excludes First Nations peoples aged 50 to 64 years who meet the exceptional circumstances criteria for residential aged care.
- 9 This excludes 87 First Nations participants aged 50 to 64 years who meet the exceptional circumstances criteria for residential aged care.
- 10 Figures in this section have been rounded to the nearest whole percentage; differences are calculated from unrounded metrics
- 11 The results are based on responses provided to the outcomes framework questionnaires. Responses are collected at entry to the NDIS (baseline) and at subsequent plan reassessment or check-in. For the June 2025 quarter, valid responses that were previously marked as missing are now included in the results.
- 12 This section compares baseline indicator results when participants entered the NDIS, with results measured at the most recent participant plan reassessment or check-in for each respondent. Trial participants are excluded.
- 13 The participant age reported in this section is as per their latest plan reassessment or check-in.
- 14 Some of the increase is due to participants leaving school and starting work. As the NDIS matures it will be possible to analyse the extent to which the percentage gap increases.
- 15 Some of the decrease for older age groups is due to participants retiring from the workforce.
- 16 Some of the decrease for older age groups is due to participants retiring from the workforce.
- 17 Figures in this section have been rounded to the nearest whole percentage; differences are calculated from unrounded metrics.
- 18 Noting that the education and housing systems have a major role to play in the lifelong learning and home domains.
- 19 Respondents include NDIS participants, prospective participants, and people with disability engaging with the NDIS through community connections and early supports.
- 20 For the June 2025 quarter, performance is measured from available data on processes and dates in the new computer system. Milestones being built into the new computer system will improve the capture of performance data.
- 21 The time taken for participants to respond to requests for further information is not included.
- 22 An application is considered closed if it is cancelled or rejected, a participant is declined all home and living supports, or the application won't progress to implementation (e.g. participant deceased, participant chooses not to proceed). An application is considered implemented once a participant has a new approved plan.
- 23 33 For the June 2025 quarter, 1,249 of the 7,146 applications that were closed or implemented had no data on the closure date and were excluded from the percentage of applications closed or implemented within 90 days.
- 24 Applications that have been closed or implemented with no data on the closure date have been excluded from the percentage of applications closed or implemented within 90 days.
- 25 The NDIA is waiting on additional information from participants for 192 of the 1,115 applications awaiting a decision.
- 26 Applications on hold are excluded from the in-progress applications.
- 27 It is possible to record multiple related parties as the source of a complaint. In some cases, different complainant types (participants, providers or other parties) are linked to a single complaint. As a result, the sum of participant complaints, provider complaints and other complaints is higher than the total number of complaints.
- 28 Numbers of complaints reported for the most recent quarter may still vary to the extent there is a lag in data collection.
- 29 Numbers may change as reporting of complaints in the new computer system is refined, including identifying complaints lodged via multiple channels.

Endnotes

- 30 The number of PCIs in the current quarter may change in the future as the method of identifying PCIs in the new computer system is further enhanced. The number of PCIs reported for the past 6 months may still increase, as there is a lag in data collection.
- 31 From February 2025, PCIs are also recorded for persons supported by partners in the community.
- 32 Number of plan change requests reported for the most recent quarters may vary, to the extent there is a lag in data collection.
- 33 Includes reassessments of short plans, consistent with the functionality of the new computer system.
- 34 Number of RoRDs reported for the recent quarters may vary, to the extent there is a lag in data collection.
- 35 A further 24 were closed in the June 2025 quarter with no specified outcome.
- 36 The small number of RoRDs closed with no specified outcome are excluded.
- 37 As part of the ART process, it is not uncommon for new requests to be made and for new evidence to be provided by applicants while their matters are in progress. This contributes to NDIS decisions being varied in the ART.
- 38 Further information about the ART process can be found on the [ART website](#).
- 39 Data on supports is shown with a one-quarter delay, due to the lags in recording the support in dispute.
- 40 Underlying total response numbers may differ across different questions in each stage due to the exclusion of 'Prefer not to say' and 'Not applicable' responses. The count is the total unique respondents in each stage.
- 41 These results are based on 62 surveys of early supports, 855 surveys of community connections, 1,221 of applying for the NDIS, 3,308 of plan approval, 2,179 of plan implementation and 9,308 of plan reassessment, which is 16,933 in total.
- 42 The volume of webchats offered has been estimated from December 2023 to September 2024. This is because of reporting issues with the NDIA's new webchat functionality that was implemented in November 2023. The NDIA has identified instances where a webchat was offered but not connected to a contactor or no contact was received from the requestor. These instances were removed to estimate the webchat volume.
- 43 This represents total payments on a cash basis (including payments made under in-kind arrangements). On an accrual basis, total payments were \$46.3 billion.
- 44 Includes therapy services.
- 45 Total includes \$6.9 million of payments with no support category.
- 46 This figure excludes participants who have opted to self-manage part of their funding.
- 47 Includes cash and in-kind payments.
- 48 Active providers refer to those who have received payment in the quarter for supporting NDIS participants. The count of active providers excludes providers with an invalid Australian Business Number (ABN).
- 49 Includes cash and in-kind payments.
- 50 Plan management fees, which are NDIA-managed payments, are reclassified as a plan-managed payment for the purpose of counting providers. Therefore, the count of NDIA-managed providers excludes providers who only received plan management fees and no other NDIA-managed payments.
- 51 From 14 October 2024, it is mandatory for participants with self-managed payments to include the ABN of the associated provider or provide a reason why it isn't available. Previously, providing the ABN was voluntary.
- 52 Registration status of a provider may change between 'registered' and 'unregistered' during the quarter.
- 53 'Active providers' refers to those who have received payment in the quarter for supporting NDIS participants. The count of active providers excludes providers with an invalid ABN.
- 54 Payments of \$38 million made to providers with 'unknown' registration status have not been included in this chart.
- 55 Registration status is determined as at the posting date of payment. Some providers may be counted more than once if they changed registration status during the quarter.
- 56 The historical number of plan managers does not take into account any revisions in their registration status.
- 57 The historical number of plan managers does not take into account any revisions in their registration status.
- 58 The average SDA payment figure has the number of participants using SDA as the denominator. The average SDA supports figure (Table 11) uses the number of participants with SDA in their plan as the denominator. As at 30 June 2025 this number was 18,272. This figure excludes participants who have a small placeholder amount of SDA funding entered in their plan. Once these participants have located an enrolled dwelling, the full SDA funding will be entered into the plan.
- 59 The number of enrolled SDA dwellings in the Australian Capital Territory remained unchanged at 194 from 31 March 2025 to 30 June 2025.
- 60 The number of enrolled SDA dwellings in Queensland decreased by 37 from 2,486, as at 31 March 2025, to 2,449, as at 30 June 2025.

Endnotes

- 61 Evidence of SDA in use is estimated based on SDA payments, SDA service bookings and matching addresses to enrolled SDA dwellings. Future enhancements to the computer system will allow for better tracking and an ability to better understand why participants may not yet be using SDA funding.
- 62 SDA eligible participants are participants who have been found eligible for SDA through the home and living application process or through legacy system processes but have SDA funding in their plan.
- 63 Total NDIS costs are presented by financial year on an accrual basis, sourced from the NDIA financial accounts. The NDIS costs figure is made up of total NDIS expenses, less NDIS grant payments, write-downs and write-offs. The NDIS and NDIA costs for the 2024–25 financial year are provisional results and subject to further changes, including the Australian National Audit Office audit.
- 64 The March 2025 figure for inter-plan inflation has been amended in this report due to improved calculation of indexation for plans that are auto-extended in the new computer system.
- 65 Numbers may not add to 100% due to rounding.
- 66 The number of plan reassessments (in thousands) in each inflation percentage band is shown at the bottom of each bar in the chart. The corresponding percentage of plan reassessments in each band is shown at the top of each bar in the chart.
- 67 The average number of participants is a simple average of the active participants in 2 periods (opening and closing). Cost per participant uses these average participant numbers as the denominator.

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National Disability Insurance Agency



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