



Reviewing our decisions

Quick summary: If you don't agree with a decision we've made, please [contact us](#). We can explain our decision and the reasons behind it. You can also ask for an internal review of the decision. This means that one of our staff, who wasn't involved in the original decision, will have a look and decide if the decision was right. There are a number of decisions we can review. We call these reviewable decisions. If you still don't agree with our decision after the internal review, you can ask the Administrative Review Tribunal (the Tribunal) to review our decision. We call this an external review.

This guideline has information on what decisions we can review and how you can ask for a review of a decision. It also has information on what happens during the review, and what you can do if you don't agree with our review.

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You may also be interested in Our Guidelines:

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What if you don't agree with a decision we make?

We're committed to helping you understand how and why we make decisions. We're also committed to helping you have a decision reviewed, if you believe the original decision we



made was wrong. When we say reviewable decisions, we mean decisions that can be reviewed under NDIS laws.

We'll give you written notice and the reasons for our reviewable decisions.¹ You can ask us at any time about how we make decisions. We can explain our decision and answer your questions. If you'd like more information about one of our decisions, get in touch. You can [contact us](#) by phone, email or at one of our offices. If you're a participant, you can also speak to your my NDIS contact, local area coordinator or early childhood partner.

If you don't agree with our decision, you may be able to ask for a review of the decision.

What do we mean by reviewing a decision?

We make decisions under the law for the NDIS.²

This law tells us how we should make decisions that affect you and your NDIS plan. We need to make all our decisions under this law.

We are committed to making the right decisions under the law. If you don't agree with our decision, you may have a right to have that decision reviewed.³ If you want a decision reviewed,⁴ you'll need to ask for a review within 3 months of when we made the decision.

If you ask for a decision review, someone who wasn't involved with the original decision will have a look at it. They'll check if we made the right decision under the law, or if they need to make a new decision.

Learn more about [internal and external reviews](#).

What are my other options besides a review of a decision?

If you want to ask us to make [changes to your plan](#), we call this a [plan reassessment](#) or [plan variation](#). This is different to asking us to review a reviewable decision.

If you're not satisfied with our service, you can always [give us feedback or make a complaint](#).

We're committed to improving our services and making sure you get the reasonable and necessary NDIS supports you need. We encourage you to let us know if things aren't right.

If you're not satisfied with a service provider, you can contact them directly. Or you can contact the [NDIS Quality and Safeguards Commission](#) to [make a complaint](#) about a service provider. The NDIS Quality and Safeguards Commission also handle all internal reviews relating to [provider registration](#).

What are internal and external reviews?

There are processes we have to follow to review our decisions. We call this an internal review. There are also processes the Administration Review Tribunal (ART or Tribunal) needs to follow when reviewing our decisions. We call this an external review.

First, we need to make the decision. You can't ask for a review before we make the decision. We call this the **original decision**. For example, we could decide you're not eligible for the NDIS. Or if you're a participant, we could decide to approve your plan without some requested supports.

If you don't think our original decision is right, you may be able to ask for an **internal review**. This is where one of our staff, not involved in the original decision, checks if the right decision was made the first time.

If you don't agree with the internal review decision, you may then ask the Tribunal for an **external review**. This is where the Tribunal checks if the internal review decision was the right decision.

The Tribunal is an independent legal body that can review reviewable decisions made by the NDIA. The Tribunal is separate to us, so external reviews are independent from our decisions. You can't have an external review until we've done the internal review.

To find out more about the Tribunal, go to [When can you ask for an external review?](#)

What decisions can be reviewed?

The NDIS law tells us what decisions can be reviewed.⁵

Many decisions are reviewable. Some of the common ones include when we decide:

- you're not eligible for the NDIS⁶
- you're no longer eligible for the NDIS⁷
- to approve your plan, which includes approving the supports we fund in your plan⁸
- not to do a plan reassessment⁹
- not to do a plan variation¹⁰
- to vary your plan¹¹
- if you need a [plan nominee or a different child representative](#)¹²
- the categories of impairment you meet for disability requirements, early intervention requirements or both.¹³

If you're a participant and don't agree with your plan, you can ask us to review some parts of your plan. We can review:¹⁴

- what NDIS supports we include in your plan
- how we describe those supports
- how your funding is managed
- how long your plan goes for
- how your plan has been varied
- how we group your NDIS supports
- funding periods we apply to your plan.

Learn more about how we [create your plan](#).

If the original decision we make is reviewable, we'll write to you to let you know about our decision and the reasons for our decision.¹⁵ We include the reasons for our decision in the letter we send you when we make our decision. When we say 'you', we mean only those people who are directly affected by our decision.

If you're not sure if our decision is reviewable, you can look at [Appendix 1: What decisions can we review?](#) for a list of all the decisions we can review.

If you've requested a review of the decision that you aren't eligible for the NDIS, you can't reapply while we are doing the review. This includes when you apply for the NDIS or leave the NDIS after your status as a participant has been revoked.¹⁶ To learn more, you can go to [Leaving the NDIS](#).

What can't be reviewed?

We fund NDIS supports in your plan. NDIS laws set out what we can and can't fund.¹⁷

Sometimes, we may agree that you can spend your funding on a support that isn't an NDIS support if the NDIS laws allow for it.¹⁸ We call this a 'replacement support'. You can only spend your funding on a replacement support if we have agreed in writing that you can buy the support.

You can't ask for a review if we don't agree to your request to buy a replacement support with your NDIS funding. This is because this is not a reviewable decision.

For more information about replacement supports, go to [What does NDIS fund?](#)

When can you ask for an internal review?

After we inform you of the original decision, you then have **3 months** to ask for an internal review.¹⁹ This is 3 months from the day after you receive our decision in writing.²⁰

We can't do an internal review if you ask us after more than 3 months. If you ask us after 3 months, we'll let you know what other options you have.

For example, if we decided you're not eligible for the NDIS, and it's been more than 3 months since we made our decision, you can apply again. You can also apply if you used to be a participant, and it's been more than 3 months since we let you know that you're not eligible anymore. Learn more about [applying to the NDIS](#).

If you want the supports in your plan reconsidered, and it's been more than 3 months since our decision to approve your plan, you can ask for a:

- plan reassessment
- plan variation.

If we decide not to do a plan reassessment or variation, we can always consider your situation at your next check-in.

Learn more about plan reassessments and plan variations in [Changing your plan](#).

Example

Amir is an NDIS participant and just received his first plan. He doesn't think we made the right decision on the NDIS supports we included in his plan. He wants to ask for an internal review.

He received his plan in the mail on 1 July. He has 3 months from 2 July – the day after he received our decision in writing – to ask for an internal review.

This means Amir will need to ask for an internal review on or before 2 October.

Amir can't ask for an **internal review** after 2 October.

If his situation changes after we approved his plan, he can ask us to change his plan with a [plan reassessment](#) or [plan variation](#) at any time.

Who can ask for an internal review?

You can ask for an internal review if you're **directly affected** by our decision.²¹

Who can ask for an internal review depends on the decision. We have a [list of who can usually ask for an internal review](#) for different types of decisions.

Example

Sharon is an NDIS participant. She had funding in her first plan for physiotherapy. Her new plan doesn't include funding for physiotherapy. We didn't have evidence that physiotherapy still meets the [NDIS funding criteria](#) for Sharon.

Sharon can ask for a review of our decision to approve her plan without funding for physiotherapy. She's directly affected by our decision, as it's about her and the NDIS supports we included in her plan.

But her physiotherapist can't ask us for a review, as they're not directly affected by the decision. Even though this might cause Sharon to stop going to the physiotherapist because it's not in her plan, the link isn't direct. It's Sharon's decision if she wants to use her own money to keep going to the physiotherapist.

I need help to ask for an internal review.

You can get help to ask for an internal review from your family or friends.

Your local area coordinator, early childhood partner, my NDIS contact, or an advocate can also help you if you need them to. We can also help you book a [translator or interpreter](#) if you need one.

How to give someone consent to ask for an internal review.

If someone is helping you to ask for an internal review, you need to let us know they have your permission. We call this **consent**. This could be someone like a family member, friend, advocate, or a support coordinator.

We prefer you let us know in writing if you're giving someone consent. You can:

- send us a [letter](#) or [email](#) telling us that you give someone consent to ask for a review
- fill in the [Consent for your NDIS information](#) form
- [contact us](#) and we'll make a written note of this.

We check that your consent is for the internal review we received, and your consent still applies. We may still contact you to check you're happy for us to do an internal review.

You can provide consent for a set period of time and can also take away your consent at any time. Learn more about [consent](#).

Can other people ask for an internal review on your behalf?

You can give someone consent to ask for an internal review on your behalf. If a person wishes to apply for an internal review without your consent, they'll need to have legal authority to act on your behalf.

If you're a participant under 18 years and have a [child representative](#), they'll have legal authority to request an internal review on your behalf.²²

If you're a participant aged 18 years or older and have a [nominee](#), they may be able to request an internal review on your behalf. Your nominee will need to check if the consent you have provided allows them to request this review.

If your support coordinator has your consent to request an internal review, we need to check that you know about this request before we proceed. We won't proceed with an internal review request from your support coordinator if you haven't provided consent for them to request this on your behalf.

How do you ask for an internal review?

There are a few ways to ask us for an internal review. You can:

- complete our [form](#)
- [contact us](#) by phone or at one of our offices
- send us a [letter](#) or [email](#).

Remember, you need to ask for the internal review within **3 months** after we inform you of our original decision.

We need to know why you're asking for an internal review. This will help us understand your situation and make the internal review decision. We'll contact you if we need more information to make our decision.

To help us do the internal review, let us know:

- what decision you were expecting
- why you think we should make a different decision
- if there is any information you've already given us that you'd like us to reconsider
- if you have any new evidence, such as medical or therapy reports, you'd like us to consider.

We'll note the day you ask us for an internal review. This will be either:

- the day you ask us in person or over the phone
- the day we receive your letter or email.

What if we need more information to do the internal review?

In some situations, we may need more information to make our decision. If so, we'll contact you to confirm what information we need and why we need it.

You might also want to give us more information to help with the internal review. If you want to, you can also give us consent to discuss your situation with your doctor or other appropriately qualified person.

If we ask you for more information, or you want to provide more information, we'll wait for up to **28 days**. This means you'll have time to give us the information we need.

If you give us the information we need before 28 days have passed, we can sometimes make the internal review decision sooner.

If we don't get the information within 28 days, we need to make our decision based on the information we have. If you think you need more time to provide the information or send us a report, [let us know](#). We may be able to give you more time if your request is reasonable.

You might give us information that's different to what you're asking for in the internal review. If so, we'll work with you to decide what we should do.

For example, you may be a participant lodging an internal review about a decision we have made that you don't agree with. You may also need different NDIS supports since we approved your plan because your support needs have changed. This may mean you need a plan reassessment or in some limited circumstances, a plan variation. Or we may be able to consider those NDIS supports as part of our internal review.²³

What if you don't want an internal review anymore?

You can withdraw your request for an internal review any time before we make our internal review decision.²⁴

To withdraw your request for an internal review, you can:

- [contact us](#) by phone or in person at one of our offices
- send us a letter or [email](#).

If you tell us in person or over the phone that you withdraw your request, we'll make a note of this. This will include the date you let us know.²⁵

When do we do an internal review without you asking?

There are some situations where we need to do an internal review even though you haven't asked for one. This happens if you've requested a particular decision, and we didn't make that decision within our legal timeframes. This is because under the NDIS law, we must do an internal review if we didn't make our original decision on time. We call this an automatic internal review.

This could happen if you ask for:

- a plan reassessment and we don't decide within **21 days** if we'll do the plan reassessment²⁶

- a plan variation, and we don't decide within **21 days** if we'll do the plan variation²⁷ or inform you that we need more time to decide.²⁸

There are also two situations where this could happen when you [apply to the NDIS](#):

- We don't decide if you're eligible for the NDIS, or ask you to give us more information, within **21 days** of you applying to the NDIS.²⁹
- You provided more information or an assessment, after we made a request³⁰, but we don't decide if you're eligible, or ask for more information again, within **14 days** of receiving the additional information or assessment.³¹

We'll let you know in writing if we'll do an automatic internal review.³² You don't need to do anything. We'll let you know what the outcome is after we have made a decision.

What happens during an internal review?

After you ask for an internal review, our original decision will stand until we finish the review.³³

For example, you might be a participant and ask for an internal review of your current plan. If so, you can keep using the same NDIS supports described in your plan until we have made a decision.

Or you might ask for an internal review because we decided you're not eligible for the NDIS. A local area coordinator or early childhood partner can help you link in with other supports.

Who does the internal review?

The person who does the internal review will be one of our staff. They can only do the internal review if they weren't involved in making the original decision.³⁴ We call this person the internal reviewer.

Your internal reviewer will look at:

- your situation – for example, if you're a participant and we're reviewing our decision to approve your plan³⁵
- NDIS laws
- [Our Guidelines](#)
- reasons for the original decision, and the information we used to make the original decision
- any new information you give us.

We'll make our decision based on the evidence at the time of our internal review decision.³⁶

How long will your internal review take?

We aim to complete all internal reviews within **60 days** after you ask for one. This is 60 days from the day after we receive your request for an internal review.³⁷

If this isn't possible, we will contact you, or the person who asked for the internal review. We'll explain why we need more time, and let you know when we'll make a decision.

Find out more about our [Participant Service Guarantee](#).

Where the [original decision is reviewed automatically](#), the 60 days to make an internal review decision begins on the day after the timeframe to make the original decision ended.³⁸

For example, if you asked for a reassessment to your plan and we didn't make a decision **within 21 days**, then we'll be taken to have made a decision not to reassess your plan.³⁹ This decision will be automatically reviewed.⁴⁰ We will need to make an internal review decision within 60 days, beginning on the day after the 21 days expired.⁴¹

What if you need your internal review done sooner?

We can sometimes do urgent internal reviews sooner. We may do this if:

- there's a risk of harm to your health or wellbeing, or for someone you care for
- you're at risk of homelessness or have unstable accommodation
- your care arrangements are at risk – for example, if your primary carer can't care for you while we make our review decision
- there's a risk relating to your disability – for example, if your disability is rapidly changing or becoming more serious
- you're in hospital waiting for discharge
- you're waiting for urgent [assistive technology](#), home modifications or [supported independent living](#) NDIS supports.

If you're in one of the above situations, let us know when you ask for a review. We'll contact you, or the person who asked for the internal review, within 48 hours to talk about your situation. We'll then complete the internal review as soon as we reasonably can.

What if you need a change to your current plan, while we are completing your internal review?

If you're a participant, and your situation changes while you're waiting for an internal review, [contact us](#). We'll let you know what options are available for your situation, and how this might affect your plan and your internal review.

Your plan may need to change **before** we complete our internal review:

- You can ask for a plan reassessment or plan variation. We call these a participant-requested plan reassessment⁴² or participant requested -variation.⁴³
- Depending on your situation, we may decide to do a plan reassessment or vary your plan. We call these a CEO-initiated plan reassessment,⁴⁴ or CEO-initiated variation.⁴⁵ You can then ask for an internal review of this decision, if you don't agree.

Example

Robert is an NDIS participant.

He has requested an internal review as he is unhappy with the plan management decision in his plan. Robert wants to self-manage some of his NDIS supports.

While the internal review officer is reviewing Robert's request, he mentions his sister has been admitted to hospital.

Robert lives with his sister and relies on her to help him daily.

The internal review officer can vary Robert's plan to include additional supports as part of the internal review decision.

This means Robert will have some new NDIS supports in his plan to help him while his sister is in hospital. His internal review of the plan management decision is then considered at the same time.

If Robert doesn't agree with the decision we make relating to his internal review, he can ask for an external review.

Robert may also decide he doesn't want to proceed with his internal review due to his change of circumstances.

What happens if we make a second decision to approve a new plan, or vary your current plan, before your internal review is complete?

If we approve a new plan or vary your current plan **before** we make our internal review decision, then the internal review will cover both:

- the first decision to either approve a new plan, or vary your plan (**original decision**); and
- the later decision to either approve a new plan, or to vary your plan (**second decision**).⁴⁶

This means if you're unhappy with the second decision, you **won't** need to ask for another internal review. This is because the internal reviewer will review the second decision

automatically (as part of the current review process). The internal reviewer will consider if both decisions have been made correctly.

What if we approve a new plan, or vary your current plan, after your internal review is complete?

If the second decision is made **after** we make our internal review decision, then we can't consider the second decision as part of the existing internal review. This is because the internal review decision has already been made.⁴⁷

If you're unhappy with the decision, you'll need to ask for an internal review within 3 months after you receive notice of the second decision in the usual way.⁴⁸

Example

Neha is an NDIS participant. We undertake a reassessment of Neha's plan and approve a new plan (**original decision**). Neha isn't happy with the NDIS supports in her new plan and requests an internal review.⁴⁹

What happens if we make a second decision to vary or approve a new plan before Neha's internal review is complete?

If our **second decision** occurs **before** our **internal review decision**, Neha's internal review will now include both:

- our **original decision** to approve her plan; and
- our **second decision** to vary her current plan.

This means the internal reviewer will review both decisions.⁵⁰

What happens if we decide to approve a new plan, or vary Neha's current plan, after we have made her internal review decision?

If the **second decision** occurs **after** our **internal review decision**, then Neha will need to ask for an internal review if she's not happy with the decision. Neha will need to ask for an internal review within 3 months from when she receives the notice of our decision.

In the letter we send Neha with the outcome of our decision we would tell her about her review rights.

What internal review decisions can we make?

When we complete the internal review, there are 3 different types of decisions we can make. We can:⁵¹

- **confirm** the original decision – we don't make any changes

- **vary** the original decision – we make some changes to the original decision
- **set aside** the original decision and make a new decision.

We review all the information we have when we make our internal review decision. For example, we can look at new information you give us after we made our original decision.

When we conduct an internal review of the original decision to approve your plan, we look at the decision we've made. We do this based on the evidence we have at the time we make our internal review decision.⁵² We call the decision that fits best, based on NDIS laws, the preferable decision.

The internal reviewer can also consider NDIS supports that were not raised, or requested, by you when we made our original decision to approve your plan.⁵³

When would we confirm the original decision?

We may confirm the original decision.⁵⁴ This means there's no change to the original decision.

We confirm the original decision if we decide it was the correct or preferable decision.⁵⁵ This means, out of the decisions we could make, the internal reviewer decides the original decision is the correct decision, or the decision that fits best, based on:

- NDIS laws
- the evidence
- the facts.

For instance, we might decide you're not eligible for the NDIS, and the internal reviewer confirms the original decision. This means you're still not eligible for the NDIS.

Example

Jasmine asked for an internal review of our decision to approve her NDIS plan. Her plan includes \$3,000 funding for therapy, but she believes she needs more.

Jasmine's internal reviewer looks at all the information we have about Jasmine and her NDIS supports. Her internal reviewer decides the original plan was the preferable decision under the law. This means her plan does not change. She still has \$3,000 funding for therapy.

Example

Aimee seeks an internal review of the decision not to give her access to the NDIS.

Aimee's internal reviewer looks at the information about Aimee's age. Aimee was 70 years of age when she made her access request. The internal reviewer decides the original decision was the correct decision under NDIS laws because Aimee doesn't meet the age



requirements.⁵⁶ This means the original decision not giving Aimee access to the NDIS does not change.

When would we vary the original decision?

We may also vary the original decision.⁵⁷ This means we decide to change part of the original decision.

For example, we could decide to include a different funding component amount, or a different number of hours, for a particular NDIS support. If so, you'll get a new plan with a revised funding component amount or hours for that NDIS support. The rest of the plan will stay the same.

Example

Sam asks for an internal review of our decision to approve her plan. Her plan includes \$3,000 for therapy.

Sam's internal reviewer looks at all the information we have, including a new report from her occupational therapist with additional information.

Sam's internal reviewer decides to vary the original plan and include \$4,000 for therapy in a new plan. All the other NDIS supports in Sam's plan stay the same.

When would we set aside the original decision, and make a new decision?

Finally, we may set aside the decision and make a new decision.⁵⁸ This means the original decision no longer applies. The internal reviewer will now make a new decision.

We do this if we decide the original decision wasn't correct or preferable. Out of the decisions we could make, there's one that fits better with the NDIS laws based on the facts and evidence.

For example, if we originally decided you're not eligible for the NDIS, the internal reviewer could decide you are eligible.

Example

Jamal asks for an internal review of our decision to approve his plan. His plan did not include funding for occupational therapy. We didn't have enough evidence that it met the [NDIS funding criteria](#). After asking for an internal review, Jamal gives us more evidence on why he needs occupational therapy.

Jamal's internal reviewer looks at all the information, and decides the original plan wasn't the correct or preferable decision.

His internal reviewer decides to set aside the original decision. His internal reviewer makes a new decision to approve a plan that includes funding for occupational therapy.

What happens after we make the internal review decision?

We'll let you know in writing about what decision we made and why.

Our letter or email will explain:

- our internal review decision
- the reasons for our decision
- what evidence we looked at if we decided to confirm or vary the original decision, or make a new decision
- what you can do if you don't agree with the internal review decision.

If we vary or set aside the decision, your internal reviewer will make the changes to your NDIS record or NDIS plan to reflect their new decision.

What happens to your plan after an internal review decision?

If you're a participant, your plan may need to change depending on our internal review decision.

If we confirm the original decision to approve your plan, your plan will stay the same. You'll have the same NDIS supports, the same plan management, and your plan review date will stay the same.

If we vary or set aside the original decision, we'll then vary or replace your plan. This means your replacement plan will have any changes we decided to make about.⁵⁹

- the reasonable and necessary supports in your plan
- how we describe the NDIS supports in your plan
- how the funding in your plan is managed
- how we group your NDIS supports
- funding periods within your plan
- when we'll next review your plan.

What if you're still not happy after the internal review decision?

If you disagree with our internal review decision, you can ask for an external review of the decision. You have **28 days** after you receive our internal review decision to ask the Tribunal for an external review.

When can you ask for an external review?

If you don't agree with the internal review decision, you can ask the Administrative Review Tribunal to review it.⁶⁰ We call this an external review. You can't ask for an external review until after we make the internal review decision.

The Administrative Review Tribunal reviews decisions made by Australian Government ministers, departments and agencies. This includes our decisions, as well as decisions from other parts of government like Centrelink.

We call the Administrative Review Tribunal 'the Tribunal' in this guideline. It is also called the ART.

The Tribunal is separate from us. It has different processes on how it makes decisions, and it has different staff and its own laws. The reviews it does are independent of our decisions.

For more information about asking for an external review of an NDIS decision, check out the [Tribunal website](#).

Who can ask for an external review?

You can ask for an external review if you're **directly affected** by the internal review decision.⁶¹

If you were able to ask for an internal review, you should be able to ask for an external review. But the Tribunal will decide if you can ask for an external review.

You can also ask a friend, family member, advocate, or lawyer to help you.

How long do you have to ask for an external review?

After we make the internal review decision, you then have **28 days** to ask for an external review. This is 28 days from the day after you receive our internal review decision in writing.

In some situations, you can get more than 28 days to ask for an external review. The Tribunal may give you more time if it thinks it's reasonable, based on your circumstances.⁶²

If you need more time, you'll need to fill out an [application for extension form](#) on the Tribunal's website or write to the Tribunal. Learn more about [how the Tribunal can help you](#).

How do you ask for an external review?

You can apply for a Tribunal review [online](#), or you can fill out an [application form](#). Lodge the form directly with the Tribunal in person, by email, by fax, or by post.

You can also [give the Tribunal new information](#), if you think it will help them with the external review.

If you need help asking for an external review, you can [contact the Tribunal](#).

What if you don't want an external review anymore?

You can write to the Tribunal at any time to withdraw your application.⁶³ You must notify the Tribunal in writing. You can use the [notice of withdrawal form](#) or send them an email or letter. For more information go to [Ending a review without a hearing](#).

What happens during an external review?

When you ask the Tribunal for an external review, it'll go through a few steps before making a decision.

You can find information about the steps in the external review process on the [Tribunal website](#).

You can provide more information to the Tribunal to help them make a decision. We may also ask you, or other people, for more information to help us resolve the issue or help the Tribunal decide. If you're a participant or applying for the NDIS, we may ask you to get an assessment.

If you're a participant, you can still use the same NDIS supports described in your plan during the Tribunal process.

What support can you get at the Tribunal?

If you want an advocate or legal support at the Tribunal, you may be eligible for the [NDIS Appeals Program](#). For example, someone could represent you at the Tribunal and help you explain your situation.

If you're a participant, you can use your NDIS funding for NDIS supports during the hearings. For example, you might need support for personal care or communication supports to help you participate in discussions.

But you can't use your NDIS funding for someone to represent you at the Tribunal. For example, you can't use your NDIS funding for a lawyer, support coordinator or other provider to represent you. We also can't fund any legal advice or legal support when you go to the Tribunal.⁶⁴

Learn more about the [support you can get at the Tribunal](#).

What's our role and how can we support you at the Tribunal?

We are committed to the principles of our [Participant Service Charter](#). We want a fair outcome and to support you through the Tribunal process.

We'll let you know in writing which of our staff is assigned to work with you at the Tribunal. We call them a case manager.

27 February 2025

Reviewing our decisions

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This document is correct at the date of publication.

Always visit ourguidelines.ndis.gov.au for the latest version.

You can contact your case manager if you have any questions about the process. They can also answer any questions you might have on how the process could affect you.

We will also have a lawyer if we are not able to resolve your issues quickly. They will help you and the Tribunal with the legal aspects of the review. For example, they prepare documents that explain the issues.

We need to have lawyers to meet our legal obligations at the Tribunal. We need to [help the Tribunal make its decision](#), and act as a model litigant at the Tribunal.⁶⁵

For example, this means we must act honestly and fairly at the Tribunal by:⁶⁶

- dealing with matters quickly and without unnecessary delay
- acting consistently, and working with you the same way we work with all other people at the Tribunal
- avoiding or limiting Tribunal hearings where possible, including trying to [reach an agreement together](#) where this is the best outcome for everyone
- not taking advantage of people who don't have a lawyer at the Tribunal.

We can still act firmly and properly at the Tribunal to pursue our interests as a government agency.⁶⁷ For example, we can still defend our decision at the Tribunal if we think the right decision was made.

In some situations, we may need the Tribunal to make a decision, instead of us making an agreement together. This might be if there's a complex and unclear area of law we need to resolve at the Tribunal.

You can read more about our legal obligations in the [Legal Services Directions](#) on the Federal Register of Legislation website.

What if your situation changes while waiting for the external review?

An external review means the Tribunal decides if we made the correct or preferable decision, or if it needs to make the decision again.

If you're a participant and your situation changes during the external review process, [contact us](#). You may need a plan reassessment or a plan variation while the Tribunal is reviewing a decision about your plan.

Your case manager will explain the options available to you. We may also need to let the Tribunal know what we think we should do, as it might affect your external review.

You can still use the NDIS supports described in your plan while the Tribunal considers your external review. And you can [contact us](#) at any time if you have questions about your plan.

What if we approve a new plan or vary your current plan before the Tribunal completes their external review?

Some decisions that affect your plan will be reviewed by the Tribunal automatically, as part of an existing external review.⁶⁸

If you're unhappy with our internal review decision and have applied for an external review, the Tribunal will review the original decision. This is the decision reviewed by the internal reviewer. But they will also review any later decisions made after you applied to the Tribunal that either approve a new plan or vary your plan.⁶⁹

Example

Tim is an NDIS participant and is unhappy with our internal review decision. Tim applies to the Tribunal for an external review **on 1 July 2022**.

Any later decisions to approve a new plan or vary Tim's existing plan, made after 1 July 2022, will be included in the Tribunal's external review.

This means that the Tribunal will be able to review all decisions that have changed Tim's plan after he applied to the Tribunal for an external review. The Tribunal will consider all plans and variations approved after Tim applied to the Tribunal. The Tribunal's review will not be limited to the original decision, which was reviewed by the internal reviewer.

Can we make an agreement together instead of waiting for a Tribunal decision?

Yes. We can make an agreement together at any time during the external review. This means we come to an agreement about the decision, instead of the Tribunal making a decision.

This often means you can get the decision faster and avoid some of the Tribunal process.

Any agreement we make needs to follow NDIS laws. The Tribunal also needs to approve the agreement, to make sure it's fair and you're happy with it. This is called a consent decision.

If we don't come to an agreement, the Tribunal will make a decision after the hearing.

What external review decisions can the Tribunal make?

The Tribunal will take an independent look at:

- your situation – for example, if you're a participant and the Tribunal is reviewing our decision to approve your plan⁷⁰
- NDIS laws

- [Our Guidelines](#)
- the reasons for our internal review decision, and the information we used to make the internal review decision
- any new information you give the Tribunal.

The Tribunal will then make the ‘correct or preferable’ decision.⁷¹ This means, out of the decisions it can make, it will make the decision it thinks is the correct decision, or the best decision, under the law based on the evidence.

When the Tribunal reviews our decision to approve your plan, the Tribunal will look at whether we made the correct or preferable decision based on the evidence at the time the Tribunal makes its decision.⁷²

After the hearing, the Tribunal can make one of 4 types of decisions. It can either:

- **affirm** the internal review decision⁷³ – the Tribunal agrees with the internal decision and doesn’t make any changes
- **vary** the internal review decision⁷⁴ – the Tribunal makes some changes to the internal review decision
- **set aside** the internal review decision and **make a new decision**⁷⁵
- **set aside** the internal review decision and **send it back to us** for further consideration.⁷⁶

If the Tribunal sends the decision back to us, it often gives us instructions on how to make the new decision.

The Tribunal will give reasons for its decision and provide you with a written copy of the decision. Most of the time, it’ll publish those reasons on the [AustLII website](#).

Learn more about the [types of decisions the Tribunal can make](#).

Learn more about the [steps in the external review process](#).

What happens after the Tribunal makes its decision?

Once the Tribunal makes the external review decision, it’ll let you and us know. The Tribunal may tell you their decision verbally or in writing. For more information about how you will receive the decision, go to the Tribunal’s [website](#).

If the Tribunal changes our decision, we’ll then apply its decision. This means we may need to make changes so your NDIS record or NDIS plan reflects the Tribunal’s decision. We’re committed to doing this within **28 days** of the Tribunal’s decision.

What if you don’t agree with the Tribunal’s decision?

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Reviewing our decisions

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You can't ask for an internal review or an external review of the Tribunal's decision.

The Tribunal's decision can only be [appealed to a Federal Court](#). It's a good idea to get legal advice if you're thinking of appealing to a Federal Court.

A lawyer can tell you if you can appeal the decision. If so, they can help you lodge an appeal if that's what you want to do.

Appendix 1: What decisions can we review?

This list has all the decisions we can review under NDIS laws. It also has a list of the common groups of people who can ask for a review of those decisions.

If this list says you can ask for a review, you can also give someone else consent to ask for you.

If you're not on this list, you may still be able to ask for a review. But you'll need to show us that you're directly affected by our decision.

If you're not sure if you can ask for a review, [contact us](#) and we'll help you work it out.

Applying to the NDIS

- if we decide you're not eligible to become an NDIS participant⁷⁷
- if we decide not to give you more than 90 days to give us information or a report for your NDIS application⁷⁸
- if we decide to vary, or not to vary, a notice of impairment.⁷⁹

Who can usually ask for a review?

- the person who applied to the NDIS
- a person appointed by a court or tribunal to make decisions for the person who applied to the NDIS
- a parent or legal guardian for a child younger than 18 applying to the NDIS.

Leaving the NDIS

- if we decide you're no longer eligible for the NDIS.⁸⁰

Who can usually ask for a review?

- the person who used to be a participant
- a person appointed by a court or tribunal to make decisions for the person who used to be a participant

- a [nominee or child representative](#) of the person who used to be a participant.

Creating your plan

- approving your plan.⁸¹ This includes:
 - what NDIS supports we include
 - how we describe those NDIS supports
 - how we group your supports
 - funding component amounts and funding periods
 - how long your plan goes for, and
 - who manages the funding in your plan.

Who can usually ask for a review?

- the participant
- a [nominee or child representative](#) for the participant
- a person appointed by a court or tribunal to make decisions for the participant.

Your plan

- if we decide not to extend a grace period for your temporary absence from Australia.⁸²
 - the grace period is 6 weeks unless we decide to extend it. Your plan is suspended from the end of the grace period, until you return to Australia.

Who can usually ask for a review?

- the participant
- a [plan nominee or child representative](#)
- a person appointed by a court or tribunal to make decisions for the participant.

Varying your plan

- if we decide to vary your plan,⁸³ or decide not to vary your plan when you request a variation to your plan.⁸⁴

Who can usually ask for a review?

- the participant
- a [plan nominee or child representative](#)

- a person appointed by a court or tribunal to make decisions for the participant.

Plan reassessment

- if we decide not to do a participant-requested plan reassessment.⁸⁵

Who can usually ask for a review?

- the participant
- a [plan nominee or child representative](#)
- a person appointed by a court or tribunal to make decisions for the participant.

Child representatives

- if we decide that someone, who doesn't have parental responsibility, is a child representative for a participant younger than 18. Or, if we don't decide they're the child's representative⁸⁶
- if we decide that a child can't represent themselves⁸⁷
- if we decide that someone with parental responsibility for a child is the child's representative, instead of the child's guardian.⁸⁸ Or, if we don't decide they're the child's representative
- if we decide that only some of the people with parental responsibility are child representatives.⁸⁹ For example, if we decide one parent is a child representative, and another parent isn't.

Who can usually ask for a review?

- a participant younger than 18
- a person who has parental responsibility for someone younger than 18, including a parent or guardian
- a State or Territory Minister, or the head of a State or Territory government department.

Nominees

- if we decide to appoint a plan nominee⁹⁰
- if we decide to appoint a correspondence nominee⁹¹
- if we decide whether we cancel or suspend the appointment of a nominee.⁹²

Who can usually ask for a review?

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- the participant
- a person appointed by a court or tribunal to make decisions for the participant
- a nominee, someone who wants to be appointed as a nominee, or someone who used to be a nominee.

Compensation

- if we decide that a participant must take reasonable action to claim or obtain compensation⁹³
- if we refuse to extend how much time a participant has to take reasonable action to claim or obtain compensation⁹⁴
- if we decide to take action to claim or obtain compensation⁹⁵
- if we decide to take over the conduct of a compensation claim⁹⁶
- if we give notice that we propose to recover an amount of compensation.⁹⁷ We call this a 'recovery notice'.
- if we decide that not all or part of a compensation payment was fixed by a judgment or settlement, for the purposes of calculating how much we can recover.⁹⁸

Who can usually ask for a review?

- the participant
- a [plan nominee or child representative](#)
- a person appointed by a court or tribunal to make decisions for the participant.

Debt recovery

- if we decide not to write off a debt.⁹⁹ That is, we decide we'll still try to recover a debt.
- if we decide not to waive a debt, or we don't need to waive a debt.¹⁰⁰ That is, we decide a person still owes us money.

Who can usually ask for a review?

- the person who owes us money.

Specialist Disability Accommodation – dwelling enrolment

- if we decide not to enrol a dwelling¹⁰¹
- if we decide to cancel a dwelling enrolment.¹⁰²

Who can usually ask for a review?

- the service provider who wants to enrol the dwelling, or had enrolled it, as specialist disability accommodation.

Reference List

-
- ¹ NDIS Act s 100(1).
 - ² NDIS Act and delegated legislation made under the NDIS Act.
 - ³ NDIS Act ss 99 and 100(2).
 - ⁴ NDIS Act s 100(2); also see s 100(1A)(a)(ii) for the decisions that will be reviewed automatically.
 - ⁵ NDIS Act s 99.
 - ⁶ NDIS Act ss 99(1) item 1; 20(1)(a); 21(3); 26(2)(c).
 - ⁷ NDIS Act ss 99(1) item 3; 30(1)(5); para 30A(1)(c); subs 30A(7).
 - ⁸ NDIS Act s 99(1) item 4; 33(2).
 - ⁹ NDIS Act s 99 (1) item 6C.
 - ¹⁰ NDIS Act s 99 (1) item 6B.
 - ¹¹ NDIS Amendment Act 2022 s 99 (1) item 6.
 - ¹² NDIS Act s 99(1) items 17-22.
 - ¹³ NDIS Act ss 32(BA); 99(1) item 3A.
 - ¹⁴ NDIS Act s 99(1).
 - ¹⁵ NDIS Act s 100(1).
 - ¹⁶ NDIS Act s 19(2).
 - ¹⁷ NDIS Act s 10.
 - ¹⁸ NDIS Act s 10.
 - ¹⁹ NDIS Act s 100(2).
 - ²⁰ Acts Interpretation Act s 36.
 - ²¹ NDIS Act s 100(2).
 - ²² NDIS Act s 74(1).
 - ²³ *QDKH, by his litigation representative BGJF v National Disability Insurance Agency* [2021] FCAFC 189.
 - ²⁴ NDIS Act s 102.
 - ²⁵ NDIS Act s 102(2).
 - ²⁶ NDIS Act ss 48(4); 100(1A)(a)(ii).
 - ²⁷ NDIS Act ss 47A(5); 100(1A)(a)(ii).
 - ²⁸ NDIS Amendment Act 2022 s 47A(4)(d).
 - ²⁹ NDIS Act ss 20; 21(3)(a); 100(1A)(a)(ii).
 - ³⁰ NDIS Act ss 21(1)(b); 26(1).
 - ³¹ NDIS Act ss 21(3)(b); 26(2); 100(1A)(a)(ii).
 - ³² NDIS Act ss 21(3); 47A(5); 48(4); 100(1).
 - ³³ NDIS Act s 100(7).
 - ³⁴ NDIS Act s 100(5)(d).
 - ³⁵ NDIS Act s 33(2).
 - ³⁶ *Frugniet v Australian Securities and Investment Commission* (2019) 266 CLR 250 at [14]-[15] (Kiefel CJ, Keane and Nettle JJ).
 - ³⁷ NDIS Act s 100(6A)(b)(i).
 - ³⁸ NDIS Act s 100(6A)(b)(ii).
 - ³⁹ NDIS Act s 47A(5).
 - ⁴⁰ NDIS Act s 100(1A)(a)(ii).
 - ⁴¹ NDIS Act s 100(6A)(b)(ii).
 - ⁴² NDIS Act s 48(2).
 - ⁴³ NDIS Act s 47A(2).
 - ⁴⁴ NDIS Act s 48(2).

- 45 NDIS Act s 47(2).
- 46 NDIS Act s 101(2).
- 47 NDIS Act s 101(2).
- 48 NDIS Act s 100(2).
- 49 This means that the *new* subsection 101(2) of the NDIS Act applies. See *NDIS Amendment (Participant Service Guarantee and Other Measures) Act 2022*, s68(1).
- 50 NDIS Act s 101(2)(c).
- 51 NDIS Act s 100(6).
- 52 *Frugtniet v Australian Securities and Investment Commission* (2019) 266 CLR 250 at [14]-[15] (Kiefel CJ, Keane and Nettle JJ).
- 53 *QDKH, by his litigation representative BGJF v National Disability Insurance Agency* [2021] FCAFC 189.
- 54 NDIS Act s 100(6)(a).
- 55 *Drake v Minister for Immigration and Ethnic Affairs* (1979) 24 ALR 577 at 591 (Bowen CJ and Deane J).
- 56 NDIS Act s 22.
- 57 NDIS Act s 100(6)(a).
- 58 NDIS Act s 100(6)(c).
- 59 NDIS Act ss 33(2); 33(2A).
- 60 NDIS Act s 103.
- 61 NDIS Act s 103; ART Act s 17.
- 62 ART Act s 19.
- 63 ART Act s 95.
- 64 NDIS Act s 200A.
- 65 Legal Services Directions 2017; see also ART Act s 56.
- 66 Legal Services Directions 2017, Appendix B, paragraphs 2-3.
- 67 Legal Services Directions 2017, Appendix B, paragraph 2, Note 4.
- 68 NDIS Act s 103(2).
- 69 NDIS Act s 103(2); NDIS Amendment (PSG and Other Measures) Act 2022 s 68(2).
- 70 NDIS Act s 33(2).
- 71 *Drake v Minister for Immigration and Ethnic Affairs* (1979) 24 ALR 577 at 591 (Bowen CJ and Deane J).
- 72 *Frugtniet v Australian Securities and Investment Commission* (2019) 266 CLR 250 at [14]-[15] (Kiefel CJ, Keane and Nettle JJ).
- 73 ART Act s 105 (a).
- 74 ART Act s 105 (b).
- 75 ART Act s 105 (c)(i).
- 76 ART Act s 105 (c)(ii).
- 77 NDIS Act ss 20(a); 21(3); 99(1) item 1.
- 78 NDIS Act ss 26(2)(b); 99(1) item 2.
- 79 NDIS Act ss 32(BA); 99(1) item 3A.
- 80 NDIS Act ss 99(1) item 3; 30(1)(5); para 30A(1)(c); subs 30A(7).
- 81 NDIS Act 2013, ss 33(2); 99(1) item 4.
- 82 NDIS Act ss 40(2)(b); 99(1) item 5.
- 83 NDIS Act ss 99(1), item 6; 47A(1).
- 84 NDIS Act ss 99(1), item 6A and item 6B; 47A(4)(b); 47A(5); 47A(8).
- 85 NDIS Act ss 99(1) item 6C; 48(3)(c); 48(4).
- 86 NDIS Act ss 99(1) item 17; 74(1)(b).
- 87 NDIS Act ss 99(1) item 18; 74(5)(c).
- 88 NDIS Act ss 99(1) item 19; 75(2).
- 89 NDIS Act ss 99(1) item 19; 75(3).
- 90 NDIS Act ss 99(1) item 20; 86.
- 91 NDIS Act ss 99(1) item 21; 87.
- 92 NDIS Act ss 99(1) item 22; 89-91.
- 93 NDIS Act ss 99(1) item 23; 104.
- 94 NDIS Act ss 99(1) item 24; 104(5A).

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- ⁹⁵ NDIS Act ss 99(1) item 25; 105(4)(a).
⁹⁶ NDIS Act ss 99(1) item 25; 105(4)(b).
⁹⁷ NDIS Act ss 99(1) item 26; 111.
⁹⁸ NDIS Act ss 99(1) item 27; 116.
⁹⁹ NDIS Act ss 99(1) item 29; 190.
¹⁰⁰ NDIS Act ss 99(1) items 30-33; 193; 195.
¹⁰¹ NDIS Act s 99(2); NDIS (SDA) Rules r 26(3).
¹⁰² NDIS Act s 99(2); NDIS (SDA) Rules r 27(4).

Escalating a request for internal review (s100)

This article provides guidance for all NDIA staff and partners to:

- identify situations where an internal review needs to be escalated
- use the escalation and prioritisation matrix to confirm the level of risk
- escalate an existing request for internal review (s100).

Recent updates

3 April 2025

Minor update to reflect change to article title Create an internal review (s100) for all PACE decisions and SAP CRM access not met and statement of support decisions excluding compensation to Submit a request for an internal review (s100).

Before you start

You have read and understood:

- [Our Guideline - Reviewing our decisions \(external\)](#) to inform your decision to escalate a request for internal review (s100)
- [Our Guideline - Applying to the NDIS - When do we make priority eligibility decisions? \(external\)](#).

How to escalate a request for internal review (s100)

Identify situations where an internal review needs to be escalated

In some situations, you may need to escalate a request for an internal review. This includes cases where there is evidence of:

- risk of harm to the health or wellbeing of the applicant or participant
- risk to stability in the accommodation arrangements of the participant, including the risk of homelessness
- risk to stability in the care arrangements of the participant, including the risk of a primary carer not being able to provide care
- risk associated with the nature of the applicant or participant's disability, including the risk of rapid deterioration or progression
- the participant being in hospital and is awaiting discharge

- the participant having an active request for Assistive Technology, Home Modifications or Supported Independent Living.

Use the Escalation and Prioritisation Matrix to confirm the level of risk

Go to article [Review the escalation and prioritisation matrix](#) to identify the level of risk associated with the review request.

Select the option that most closely matches the applicant or participant's situation to identify the risk level. Select the highest risk level identified if there are multiple risks.

The Reviews Branch will prioritise escalations identified as high or extreme risk.

Escalate an existing request for internal review (s100)

Note: This process is for escalating an **existing** internal review request in PACE. New internal review requests are escalated during creation. Go to article [Submit a request for an internal review \(s100\)](#) if you are escalating a new internal review request.

You **must** escalate review requests that meet **medium** or **high** risk criteria.

To escalate a request for internal review:

1. You **must** email [s47E\(d\) - certain operations of agencies](#) for planning decisions or [s47E\(d\) - certain operations of agencies](#) for access decisions.
2. Use the **subject line**: Internal Review Escalation: Updated Risk Level <NDIS Number>.
3. Include the reason for the escalation, including the risk level.
4. You **must** record the contact with the Reviews Branch in the **Log Activity** from the **Activity Panel**. Use the activity type **Internal Note** when contacting or leaving internal details for the Review Team. For the steps to complete this, go to article [Log an activity or internal note](#).

Note: due to system limitations, this off-line process must be used to escalate existing internal review requests.

Next steps

The escalation request will be triaged and actioned by the Reviews Branch.

IRT – Access and revocation practice guide

This article provides guidance for business support officers (BSO) and internal review officers (IRO) to support decision making practices and is to be used alongside [NDIS Act 2013 \(external\)](#), [NDIS \(Becoming a Participant\) Rules 2016 \(external\)](#), and [Our Guidelines \(external\)](#).

Recent updates

1 December 2025

Updates to:

- Language, formatting and hyperlinks
- Gathering further information example templates
- Early Intervention not met decision letter example wording
- Appendix B – Legislation Amendments

Procedural fairness or natural justice

When completing an Access or Revocation Internal Review, procedural fairness is applied throughout the review process so the correct decision is made according to the law.

The IRO must follow the principles during the internal review process:

- **Bias Rule:** The decision maker must be impartial and approach the review with an open mind. If there is a conflict of interest, the IRO will advise their line manager for reassignment to another IRO.
- **Evidence, facts and findings:** An IRO's decision is made on the available evidence.
- IROs may also request additional evidence.

Checking for integrity issues

When completing an internal review, IROs may encounter fraudulent documents or information.

If an IRO suspects fraudulent information has been provided, or there is a conflict of

interest, the IRO must contact their line manager and follow steps outlined in article [IRT – Complete an access or revocation internal review](#) case.

Examples of integrity issues

Identity or identity documents

For guidance about integrity issues relating to a person's identity or their identity documents, refer to article [Escalate an integrity issue about identity](#).

NDIS Application consent

- Applicant does not have capacity to provide consent, and they do not have a legally authorised representative.
- Applicant signed the NDIS application form; however, the evidence indicates they do not have capacity to provide consent.
- Cut and pasted signatures in signature blocks within documents.
- Applications where communication has primarily been through a third party.

Treating professional information

- Unable to confirm a treating professional's qualifications and registration in [Australian Health Practitioner Regulation Authority \(external\)](#) (AHPRA).
- Error in the treating professional's title.
- Contact information for the treating professional is the same as the applicant. For example, phone number, email address.
- Contact information for the treating professional is personal, rather than business.
- A treating professional should not be using personal email addresses (for example: Gmail or Hotmail) due to privacy and security concerns.
- Address for treating professional is not a legitimate address. For example, address appears as another business when you search online through open-source information. Another way to check, is by using their Australian Business Number (ABN) and searching on [Australian Business Register \(external\)](#) (ABR).

Signs evidence of disability may be fraudulent

- No difference in handwriting between the applicant and treating professional section.
- Evidence of disability is all self-reported.

- Documents are unprofessional. For example, a change of language style within the document, lack of appropriate detail, spelling errors, inappropriate use of grammar.
- Name of another applicant appears in the document and/or misspelled names.
- Signs of text being removed, added, or changed within document. For example, white out used to remove important information.
- Inconsistent fonts, sizes, misalignment of text or paragraphs in documents.
- Poor character quality due to repeated scanning and photocopying. For example, document is hard to read.
- Partial documents from a treating professional.
- Documents can be edited.

Signs of altered documents

- Signs of text being removed, added, or changed within document. For example, white out used to remove important information.
- Inconsistent fonts, sizes, misalignment of text or paragraphs in documents.
- Poor character quality due to repeated scanning and photocopying. For example, document is hard to read.
- Partial documents from a treating professional.
- Documents can be edited.
- Changes in pronouns throughout document.

Signs of a conflict of interest

- Provider that gave evidence of disability may benefit from the applicant becoming a participant.
- Interactions indicate excessive and repeated contact from provider, and provider may benefit from the applicant becoming a participant.
- Treating professional may be related to the applicant. For example, the treating professional has a similar name.
- Applicant has made more than two applications to access the NDIS and changed the primary disability each time.

Verifying age and residency

When completing an access or revocation internal review, at times, an applicant may not provide consent to verify age and residency through Centrelink, may not have a Centrelink customer reference number, or Centrelink information may be incorrect or out of date. In this circumstance, an IRO must confirm age and residency through documentary evidence. Documents are typically verified as part of the original access request pathway by our Partner teams. Any documentation that we request will need to be provided to these teams to complete verification. IROs may complete a referral to the Access Integrity Management team outlined within the article [IRT – Complete an access or revocation internal review case](#).

The age and/or residency criteria must be satisfied for an IRO to assess the other eligibility criteria (disability and early intervention). This should be considered when verifying age and/or residency and when requesting further information. This also informs our decision correspondence.

Verifying age

To be eligible for the NDIS, an applicant must be younger than 65 on the day they apply.

When checking an applicant's age, their date of birth must match one of the following documents:

- Full birth certificate (an extract is not acceptable)
- My First Health Record ('Blue Book' in some states) signed by a doctor or midwife (only for a newborn under 3 months of age)
- Passport biodata page (the page that has their photograph on it) from a current passport or a passport that expired within the last 2 years (but was not cancelled)
- Proof of age card issued by state licensing authorities
- Driver's license
- Adoption papers
- ImmiCard.

Verifying residency

To meet the residency requirements, an applicant must be an Australian citizen or permanent resident and live in Australia.

When checking an applicant's residence status, it must match one of the following:

- Full Australian birth certificate (an extract is not acceptable) (See below for additional documents required if the applicant was born on or after 20 August 1986.).
- Australian passport biodata (the page that has their photograph on it) from a current passport or a passport that expired in the last two years (but was not cancelled).
- Australian citizenship or naturalisation certificate.
- Overseas passport or travel document which includes a valid Australian Permanent Residency Visa or Protected Special Category Visa.

If the applicant was born in Australia on or after 20 August 1986, check that the citizenship status matches one of the following documents:

- Australian passport issued on or after 1 January 2000 in the applicant's name, valid for at least 2 years
- Australian citizenship certificate
- full Australian birth certificate (an extract is not acceptable).

If these are not available, proof of one parent's Australian citizenship is required and must match one of the following documents:

- full Australian birth certificate from one parent* (an extract is not acceptable), showing the parent was born in Australia before 20 August 1986 or
- Australian passport from one parent* before the applicant's birth, valid for at least 2 years and issued on or after 20 August 1986 or
- Australian citizenship certificate from one parent*, showing they were an Australian citizen before the applicant's birth.

Note: If the parent was born on or after 20 August 1986, the applicant will also need to provide proof that one of their grandparents was an Australian citizen before this date. If

the applicant can only provide partial evidence, such as their own birth certificate without any other documents listed above, discuss their circumstances with your line manager to consider the most appropriate alternatives.

If the evidence does not match the above requirements and the applicant has provided a passport, visa grant notification or Immi Card, you may be able to verify visa status in the [Visa Entitlement Verification Online system \(external\)](#) (VEVO). Complete the check and save the VEVO result to the **Internal Review Case**. Refer to the resources [IRT – Setting up VEVO login details \(DOCX 64KB\)](#) and [IRT – Complete a VEVO check \(DOCX 62KB\)](#).

Note: New Zealand citizens who enter Australia on a New Zealand passport are granted a Special Category Visa (TY-444) (Temporary Visa). A Special Category Visa holder is protected if they:

- were in Australia on 26 February 2001 or
- were in Australia for at least 12 months in the 2 years before 26 February 2001 and returned to Australia after that day.

There are two ways to obtain documentary evidence the applicant has a protected Special Category Visa. Both options need to show a visa class/subclass TY-444 and have a grant date of 26 February 2001 or before.

1. VEVO Check online (the Applicant must have a valid passport or ImmiCard to obtain a VEVO check.
2. Receive an IMMI Grant Notification.

Weighing evidence of disability

When completing an internal review, IROs will see a range of different types of evidence from varying health professionals and providers and are to refer to, [Our Guidelines, How we do weigh evidence of disability? \(external\)](#). When weighing the relevance and importance of the evidence of disability provided, the two main considerations an IRO needs to make are:

- How old is the evidence
- Who is providing the evidence.

Identifying if key information is required

When completing an access or revocation internal review, IROs need to consider key indicators as part of their desktop review to determine whether further information is required.

Examples of key indicators are, but not limited to:

- An applicant relies on prescribed aides and devices for most tasks most of the time (other than a common item).
- An applicant has a [List B \(external\)](#) impairment.
- Applicant demonstrates a reliance or noted deterioration requiring the support/intervention of other people for most tasks most of the time.
- Applicant is unable to perform tasks or actions needed to participate in an activity.
- Sections of the access criteria are met (for example, an applicant has a substantial reduction in functional capacity, but permanency of impairment is unclear).
- A new or recent diagnosis has been provided.
- The applicant has a degenerative condition.

IROs need to identify whether these key indicators exist for an applicant and if this may lead to a confirmed or set-aside decision. This will determine the appropriate pathway for the internal review. During the review, information or evidence provided may change the path of the review.

There are two primary examples as to how to progress an internal review:

- Option 1 - original decision is likely to be confirmed
- Option 2 – original decision is likely to be set-aside with additional evidence.

Note: During initial contact, information can be gathered to determine next steps, including whether seeking additional information is required.

Option 1

If an internal review has no key indicators, the outcome is likely to be confirmed even if the applicant provides further evidence.

Before progressing, an IRO must make sure:

- Information and evidence provided for the internal review clearly indicates the original decision was correct.
- The impairment is not a [List A \(external\)](#), [List B \(external\)](#), or [List D \(external\)](#) impairment.
- Sections of the access criteria are not met (for example, a recent assessment will not meet the access criteria for permanence). In this situation IROs may need to request non-mandatory technical advice. IROs should discuss the case before progressing.
- The evidence-based treatments and therapies have not been trialled or ruled out by treating practitioners as to reasons why treatment cannot be undertaken.
- Other than a new assessment of impairment or rapid deterioration in functional capacity, the applicant is unlikely to meet the access requirements.
- The applicant has indicated they do not intend to provide further information or evidence in support of their review.

While an IRO does not need to request further information, they must make sure the applicant is provided the opportunity to supply further information. If the applicant wishes to provide further evidence, refer to article [IRT - Requests for further information](#).

Option 2

If an internal review has key indicators and the original decision may be set-aside with additional evidence, the IRO should seek additional evidence. Refer to article [IRT - Requests for further information](#).

IROs should follow the gathering further information steps to make sure they have provided adequate opportunity for new information to be considered.

An IRO may speak to an applicant directly to gather supplementary functional information and/or seek consent to contact an applicant's health professional (where appropriate) to confirm information.

If an IRO is considering a set-aside outcome, a proposal must be submitted via the [Access - Proposed Set Aside Decisions MS Teams form \(external\)](#).

For APS5 delegates, all proposed set-aside outcomes must be reviewed and supported by an APS6/TL, irrespective of any additional information provided by the applicant or any TAPIB advice that has been sought.

For APS 6 delegates, only proposed set-aside outcomes where there is no new information since the original decision are required to be reviewed and supported by an EL1/TL.

Note: whilst an APS6 delegate does not require a proposed set-aside outcome to be reviewed and supported by an EL1/TL where additional information has provided by the applicant or TAPIB input has been sought, the proposed set-aside outcome must still be submitted via the [MS teams form](#) so that the branch can capture relevant data regarding set-aside outcomes.

For further guidance and instructions on submitting a proposed set-aside outcome refer to the article [IRT – Complete an Access or Revocation Internal Review Case](#).

Seeking Technical Advice & Practice Improvement Branch (TAPIB) Advice considerations
TAPIB advice is required for all mandatory requests as per [TAPIB instructions](#).

IROs may also need to seek non-mandatory advice if evidence indicates an applicant has a substantially reduced functional capacity but permanency of an impairment is not clear. It is recommended IRO's discuss with their line manager.

To submit a referral for technical advice, refer to the article [Create a technical advice case](#).

Gathering further information

Further information request letter example templates

The following are example templates to assist IROs to prepare the letter and complete the free text field when further information is needed. These cover the most common requests.

Section 22 and Section 23 – requests regarding age and residency

Evidence is required that confirms <you/applicant's name> meet the <age/residency/age and residency> requirements. Please provide formal documentation, which confirms <your/applicant's name> <date of birth/citizenship/visa status>. This can be demonstrated via a <birth certificate/passport/visa documentation> and provided to your Partner in the Community, <insert Partner contact information>. You can also provide consent for the NDIA to access your age and residency information from your Centrelink record.

Section 24(1)(b) and Section 25(1)(a) – permanency of an impairment

Please provide information from your treating health professional about your treatment history. This should include a timeline of all past and current treatments to remedy or cure your impairment that you have undertaken. The frequency, duration, level of engagement of treatments and their outcomes or expected outcomes, as well as any appropriate treatment options you may have not yet explored. If certain treatments are deemed unsuitable, reasons must be provided. Treatments may include medications, therapies, surgeries, or rehabilitation. Where possible, obtain this from the most relevant treating professional. You may also include any existing reports or assessments that have been completed.

Section 24(1)(c) – functional impact of a permanent impairment

Please provide information from your treating health professional about the everyday tasks you cannot complete without a high level of support, due to your impairments. This may include information about what a typical day/week looks like, and evidence about the types of disability-specific supports you need (e.g. physical assistance, assistive technology or equipment prescribed by a doctor or medical/allied health professional), including how often and for how long. This should cover relevant areas related to your impairment such as mobility, communication, socialising, learning, self-care, and self-management (if older than 6). You may also include any existing reports or assessments that have been completed.

Section 25(1)(b) and/or Section 25(1)(c) – early intervention capacity building and/or reducing future need for support.

Please provide information from your treating health professional about recommended capacity-building supports and those already implemented. This should include frequency, duration and outcomes or expected outcomes, as well as how early intervention supports are likely to reduce your future support needs in relation to disability. You may also attach any relevant reports or assessments. All information should be provided by the professional most familiar with your impairment.

Section 25(d) – early intervention supports that would likely benefit the person are NDIS supports

Please provide information from your treating health professional that confirms the supports you require are not most appropriately funded by other government services such as mainstream health or education.

Please provide information from your treating health professional that confirms the supports you require are deemed to be NDIS Supports.

Section 25(1)(a) – Developmental delay

Please provide information from your child's treating health professional about their functional capacity in self-care, language, cognitive, and motor development as compared to children of the same age. This may also include any recommended early intervention supports, the expected frequency, duration and outcomes of any recommended supports, and any risk of future disability where assessment is difficult due to age. You may also attach any relevant reports or assessments that have been completed.

Substantially Reduced Functional Capacity (SRFC)

Access or Revocation Internal Review (s100) decisions are made based on the NDIS Act, Becoming a Participant Rules, and relevant Guidelines.

This involves considerations against the age access criteria (s22), residence (s23), disability (s24), and early intervention criteria (s25).

As part of the considerations for disability requirements (s24), an IRO is required to assess whether an applicant has SRFC in one or more relevant activities in mobility, self-care, learning, self-management, communication or social interaction (section 24(1)(c) of the NDIS Act 2013). These activities are defined in [Our Guidelines - Applying to the NDIS \(external\)](#).

An IRO will assess SRFC for an applicant by reviewing the available evidence of the applicant's current functional capacity or impairments against the relevant activities.

[Our Guidelines - Applying to the NDIS \(external\)](#) describes when an impairment is likely to result in a SRFC to perform one or more activities.

Substantially Reduced Functional Activity examples across the six key life activities is found in Appendix A.

Completing the access or revocation decision letter

A letter and basis of decision (in the same document) will need to be completed to inform the Applicant of the outcome. Letter and basis of decision templates are available on the [Internal Review Branch Hub](#).

The following sections are example wording to complete the Access or Revocation successful and unsuccessful decision letter and/or the basis of decision at the end of the letter for Access criteria. Depending on the circumstances and evidence, the wording can be modified in the below examples.

Note: If age and/or residency criteria are not met, further assessments for other eligibility criteria is not required. The IRO can delete all reference to other criteria on the access or revocation decision letters.

Age not met (s22)

The criteria for access to the NDIS is set out in section 22 of the National Disability Insurance Scheme Act 2013, which states a person must be aged under 65 when an access request was made.

The NDIA is unable to waive this legislative requirement.

As <you/applicant's name> were not younger than 65 on the day <you/applicant's name> made your NDIS application, <you/applicant's name> do not meet the age requirements.

Further assessment of <your/applicant's name> eligibility in relation to the residency, disability, and early intervention requirements (set out in sections 23, 24 and 25 of the National Disability Insurance Scheme Act 2013) will not be considered as part of this internal review.

Residence not met (s23)

The criteria to access the NDIS is set out in section 23 of the National Disability Insurance Scheme Act 2013, which states a person must meet the residence requirements to meet the access criteria. The NDIA is unable to waive this legislative requirement.

As <you/applicant's name> <reason for not meeting for example <are not the holder of a permanent visa/are not Australian citizen>, you do not meet the residency requirements.

As <you/applicant's name> do not meet the residence requirements, further assessment of your eligibility in relation to the disability and early intervention requirements (set out in sections 24 and 25 of the National Disability Insurance Scheme Act 2013) will not be considered as part of this internal review.

Disability not met

Does not meet section 24(1)(a): impairment attributable to disability

For the purposes of becoming a participant of the NDIS, (as outlined in the [Our Guidelines - Applying to the NDIS \(external\)](#) when we consider your disability we think about whether any reduction or loss in your ability to do things, across all life domains, is because of an impairment. The term 'impairment' is a loss of or damage to your body's functions. We look at:

- your body's functions
- your body structure
- how you think and learn

<Include one of the following options:

Option 1 - applicant does not have evidence of impairment and disability:

Evidence provided does not demonstrate <your/applicant's name> <condition/name diagnoses> <result/s> in an impairment or disability attributable to an impairment. As such, <they/name of condition> will not be assessed further in this review.

Option 2 – applicant has no evidence of disability:

Evidence provided does not indicate <your/applicant's name> <condition/s> of <name of diagnoses> results in a reduction or loss in <your/applicant's name> ability to do things, and as such, I have concluded <it/they> <has/have> not resulted in disability consistent with NDIS requirements. As such, <they/name of condition> will not be assessed further in this review.

Option 3 – applicant has no evidence of impairment:

As <diagnosis/diagnoses> <is/are> not a loss or significant change to <your/applicant's name> body's functions, structure, or how <you/applicant's name> <think/s> and <learn/s>, I have concluded <this/these conditions> cannot be considered <an impairment/s> consistent with NDIS requirements. As such, <they/name of condition> will not be assessed further in this review.>

Does not meet section 24 (1)(b): permanency

Importantly, even when a condition or diagnosis is permanent, the NDIA must assess the permanency of the associated and resulting impairment(s). For example, reduced capacity for mobility, socialising and so on. In line with [Our Guidelines - Applying to the NDIS \(external\)](#), a person may not be eligible if their impairment is temporary, still being treated, or if there are remaining treatment options. Generally, the NDIA will consider a person's impairment is likely to be permanent after all available and appropriate treatment options have been pursued or ruled out and the impairment is considered enduring. This means that we need to know whether your impairments are enduring so that you require NDIS supports on an ongoing basis.

To effectively assess the functional impact of an applicant's impairment, the NDIA must have sufficient evidence that demonstrates that the impairment has been optimally treated.

When the NDIA looks at what treatments are available, we think about whether the treatment is suitable for an applicant's personal situation. We consider the availability and appropriateness of the treatment and whether there are any other known and available treatments that could be suitable. Treatment should be understood in a broadest sense and may include changes to your diet and lifestyle.

In making this determination, I have consulted the following legislation and guidelines:

- [Section 5.4 of the National Disability Insurance Scheme \(Becoming a Participant\) Rules 2016 \(external\)](#), which states, an impairment is or is likely to be permanent only if there are no known, available and appropriate evidence-based clinical, medical or other treatments that would be likely to remedy the impairment.
- [Section 5.6 of the National Disability Insurance Scheme \(Becoming a Participant\) Rules 2016 \(external\)](#), which states, an impairment may require medical treatment and review before a determination can be made about

whether the impairment is permanent or likely to be permanent. The impairment is, or is likely to be, permanent only if the impairment does not require further medical treatment or review in order for its permanency or likely permanency to be demonstrated (even though the impairment may continue to be treated and reviewed after this has been demonstrated).

- [Section 5.7 of the National Disability Insurance Scheme \(Becoming a Participant Rules 2016\) \(external\)](#), which states if an impairment is of a degenerative nature, the impairment is, or is likely to be, permanent if medical or other treatment would not, or would be unlikely to, improve the condition.
- [Our Guidelines - Applying to the NDIS \(external\)](#) states if a person is still undergoing or have recently had treatment, we'll need to wait until the outcome of the treatment is known before, we can determine your impairment is likely to be permanent.

<Include one of the following options:

Option 1 – applicant has been assessed at 24 (1)(a) as not having an impairment or disability attributable to an impairment:

As outlined in criterion (a) of Section 24 – Disability Requirements, I am unable to conclude from the evidence provided that <your/applicant's name> <condition/name diagnoses> <result/s> in an impairment or disability attributable to an impairment. Therefore, the requirements of criterion (b) have not been satisfied, as criterion (b) relies on first meeting the requirements of criterion (a).

Option 2 – applicant is undergoing treatment or has treatment available:

It is acknowledged <you/applicant's name> <have/has> experienced long-standing symptoms and difficulties as a result of <your/their> diagnosed condition/s. However, information provided by <name> indicates <you/applicant's name> are currently <undergoing <type of treatment. For example "Group based Dialectical Behaviour Therapy (DBT)"> <or/and> <recommended by <name> to engage with <type of treatment>>.

As the evidence indicates that <you/applicant's name> <have/has> not completed all available and recommended treatments, the likely permanency of <your/applicant's name> impairment/s cannot be determined at this time. Without specialist evidence

confirming that all available treatment options have been explored, completed, and that <your/applicant's name> <impairment/s have/has> been optimally treated and stabilised, your <impairment/s> cannot meet this criterion.

Option 3 – applicant has received some treatment:

The evidence states <your/applicant's name> <have/has> received some appropriate and recommended treatments for <your/their impairment/s>. However, there is not enough information to confirm that there are no further known and available appropriate evidence-based treatments that are likely to remedy <your/applicant's name> <impairment/s>.

Without specialist evidence confirming that all available treatment options have been explored, completed, and that <your/applicant's name> <impairment/s> <have/has> been optimally treated and stabilised, <your/applicant's name impairment/s> cannot meet this criterion.

Option 4 – applicant has not provided treatment history:

The evidence provided does not address any previously completed treatment, current treatment, or future treatment, which may have been recommended to <you/applicant's name>. Therefore, it cannot be concluded all available and appropriate treatments options which may remedy <your/applicant's name> <disability type/s/condition> have been explored.

Option 5 – treatment history is not thorough:

The evidence received does not include a detailed treatment history for <your/applicant's name> <impairment/s>. Detailed evidence of <your/applicant's name> treatment history should include a timeline of treatments undertaken, types and frequency of treatments, the duration and outcome of treatments, including a report from <your/applicant's name> <Treating Practitioner/Specialist> about the outcomes.

The evidence does not conclude that all recommended treatment options have been explored and completed. Therefore, based on the provided evidence, the permanency of <your/applicant's name impairment/s> cannot be determined at this time.

Option 6 – future applications would benefit from further information:

Future applications would benefit from a thorough treatment history for <your/applicant's name> <impairment/s> indicating the outcomes of all medical treatment, <surgical intervention (if applicable)>, specialist reviews, and specialist prognosis. The evidence would need to show that all readily available and evidence-based treatments that would be likely to remedy <your/applicant's name> <impairment/s> have been completed, become unavailable, or no longer deemed medically viable by the relevant treating professionals/specialists.>

Does not meet section 24(1)(c): substantially reduced functional capacity**Option 1 – applicant has been assessed at 24 (1)(a) as not having an impairment or disability attributable to an impairment:**

As outlined in criterion (a) of Section 24 – Disability Requirements, I am unable to conclude from the evidence provided that <your/applicant's name> <condition/name diagnoses> <result/s> in an impairment or disability attributable to an impairment. Therefore, the requirements of criterion (c) have not been satisfied, as criterion (c) relies on first meeting the requirements of the preceding criteria.

Option 2 - not met due to impairments not being considered permanent

As explained in [Our Guidelines - Applying to the NDIS \(external\)](#), the NDIA only considers an applicant's permanent impairments when assessing their functional capacity or ability to undertake activities.

As noted in Section 24(1)(b) <your/applicant's name impairment/s> cannot be considered permanent therefore, this criterion has not been met.

We acknowledge that <you/applicant's name> <live/s> with limitations that affect <your/their> functional capacity, that <you/they> have had to adjust the way <you/they> do things and occasionally rely on others for assistance. However, to meet this criterion, the evidence must demonstrate that an applicant usually needs disability-specific support to participate or complete activities in one or more of the six key activities assessed (communication, socialising, learning, mobility, self-care, and self-management (if older than 6)).

As described in [Our Guidelines - Applying to the NDIS \(external\)](#), your impairment substantially reduces your functional capacity if you usually need high levels of disability-specific supports to participate in or complete key activities. These disability-specific supports include:

- a high level of support from other people, such as physical assistance, guidance, supervision or prompting
- assistive technology, equipment or home modifications that are prescribed by your doctor, allied health professional or other medical professional.

Information provided indicates that <your/applicant's name> <impairment/s have/has> resulted in difficulties with completing certain tasks. We acknowledge that <you/applicant's name> <experience/s> challenges which prevent <you/them> from fully participating in some tasks and the seriousness and significance of <your/their> impairment is not disputed.

However, I have been unable to conclude from the existing evidence, that <you/applicant's name> usually <require/s> a high level of support from other people, assistive technology, or equipment and home modifications to complete the activities assessed and to ensure <your/their> safety and independence in the community.

In making this determination, I have referred to [section 5.8 of the National Disability Insurance Scheme \(Becoming a Participant\) Rules 2016 \(external\)](#), which states an impairment results in a substantial reduction in functional capacity if:

- The person is unable to participate effectively or completely in the activity, or to perform tasks or actions required to undertake or participate effectively or completely in the activity, without assistive technology, equipment (other than commonly used items such as glasses) or home modifications or
- The person usually requires assistance from other people to participate in the activity or to perform tasks or actions required to undertake or participate in the activity or
- The person is unable to participate in the activity or to perform tasks or actions required to undertake or participate in the activity, even with assistive technology, equipment, home modifications or assistance from another person.

Option 3 - not met as reduced capacity is only limited to activities required to be completed in a slower or modified manner:

I understand <your/applicant's name> <impairment/s have/has> resulted in difficulties with a number of tasks, and <you/they> may need to complete these tasks in a slower or different manner.

For example, <refer to applicant's individual functional evidence for relevant tasks. For example. "When mobilising in the community, you need to take rest breaks before you are able to mobilise further. When getting dressed you do so in a seated manner">. While it is noted that <you/applicant's name> <do/does> have a reduced functional capacity, it cannot be said that <you/they> have a substantially reduced functional capacity as <you/they> do not require a high level of support from other people, assistive technology, or home modifications.

Option 4 - not met as the assistive items stated to be required are commonly used items:

I understand <you/applicant's name> <require/s and benefit/s> from equipment such as <insert item for example <a walking stick, shower chair and bathroom grab rails>. Reliance on such <an item/items> is not considered substantially reduced functional capacity as the <item/items> required <is/are> considered to be a <'commonly used item'/'commonly used items'> rather than specialist equipment or technology that is specifically designed to increase the functional capacity and participation of people with disability.

Option 5 – not met as reduced capacity only occurs during acute episodes:

Evidence provided indicates <your/applicant's name> <impairment/s> <is/are> fluctuating and <you/they> experience greater difficulty with daily tasks during certain periods. For example, <insert circumstances related to acute episodes for example when unwell you require personal assistance with showering>.

We consider an applicant's ability over time, taking into account their ups and downs. From the evidence provided, I cannot determine that, on an average day,

<you/applicant's name> <require/s> a high level of support from other people, assistive technology, or home modifications.

Option 6 - not met as no evidence provided for reduced functional capacity:

I understand <your/applicant's name> <impairment/s> <have/has> resulted in difficulties with a number of tasks, however, based on the information provided, there is no evidence to indicate <you/they> have reduced functional capacity or ability to participate in activities in one of the following: communication, social interaction, learning, mobility, self-care or self-management.

Option 7 - future applications may benefit from further information:

Future applications may benefit from a thorough functional assessment detailing the impacts of your permanent impairments on your day-to-day living. The information would need to include what tasks you are unable to do, what type of support you require to complete tasks, and the frequency of supports required.>

Option 8 - for children:

To help us decide if a child's ability is substantially reduced, we compare their abilities with other children of the same age. Sometimes when a child's impairment doesn't substantially reduce their ability right now, but might in the future, we will look at the early intervention requirements. Similarly, if a child's impairment currently substantially reduces their ability, but may not after receiving supports, we will look at the early intervention requirements. We have considered Early Intervention as most appropriate for <Child's name>.

Option 9 – for hearing impairments:

We'll generally decide you have a substantially reduced functional capacity if your hearing loss is at least 65 decibels in your better ear. This is based on a pure tone average of 500Hz, 1000Hz, 2000Hz and 4000Hz.

We may also decide you have a substantially reduced functional capacity if your hearing loss is less than 65 decibels in your better ear. We may decide this if either:

- you also have another permanent impairment, such as a vision or cognitive impairment
- you give us evidence your speech detection and speech discrimination outcomes are significantly poorer than expected

The evidence provided does not demonstrate that you meet the above criteria.

Does not meet section 24(1)(d): social and economic participation

Option 1 – applicant has been assessed at 24 (1)(a) as not having an impairment or disability attributable to an impairment:

As outlined in criterion (a) of Section 24 – Disability Requirements, I am unable to conclude from the evidence provided that <your/applicant's name> <condition/name diagnoses> <result/s> in an impairment or disability attributable to an impairment, which in turn affects <your/their> capacity for social or economic participation. Therefore, the requirements of criterion (d) have not been satisfied, subsequent to the preceding criterion not being met.

Option 2 – does not reduce capacity for social and economic participation:

The evidence provided does not currently demonstrate that <your/applicant's name> impairment has impacted <your/applicant's name> capacity for social and economic participation.

Option 3 – not met due to impairments not being considered permanent:

As explained in [Our Guidelines - Applying to the NDIS \(external\)](#), we only consider an applicant's permanent impairments when assessing their ability to participate socially and economically.

As noted in Section 24(1)(b) <your/applicant's name> <impairment/s> <is/are> not considered to be permanent therefore this criterion has not been met.>

Does not meet section 24(1)(e): lifetime NDIS supports:

To meet this criterion, an applicant must be likely to need NDIS support for their lifetime. When we decide if an applicant likely needs NDIS supports for their lifetime, we consider:

- a person's life circumstances
- the nature of a person's long-term support needs
- whether a person's needs are best met by the NDIS, or by other government and community services

Option 1 – required supports are not NDIS supports:

[NDIS supports \(external\)](#) are the services, items, and equipment that can be funded by the NDIS. We cannot fund supports that are not NDIS supports. For example, while the NDIS is responsible for supports related to a person's ongoing functional impairment, the NDIS is not responsible for the diagnosis and clinical treatment of health conditions, including chronic health conditions. From the information provided, the supports <you/applicant's name> require are not NDIS supports; therefore, this criterion is not met.

Option 2 – no identified impairment or disability attributable to an impairment, or no permanent impairment, or no substantially reduced functional capacity

It is clear the challenges <you/applicant's name> <face/s> <are/is> unique and significant and <you/applicant's name> would benefit from support. However, without meeting all of the criteria outlined within Section 24(1)(a)(b)(c) and (d), it cannot be said that <you/applicant's name> will require the support of the NDIS for <your/their> lifetime, and thus <your/applicant's name> support needs are not best met through the NDIS.>

<**Note:** include one of the following three options depending on the applicant's circumstances (remove the number when inserting into the letter template

- Local Area Coordinators are available to assist people that are not eligible for the NDIS to link with mainstream services. The Local Area Coordinator for <your/applicant's name> region is < Local Area Coordinator Details> who are

located at <address>. They can be contacted by phone on <phone number> or via email <email address>.

- The early childhood approach is for children younger than 9 years. Children, younger than 6 who do not fully meet the definition of developmental delay and have developmental concerns will also be supported through the early childhood approach. The early childhood approach was developed using evidence-based research with the help of leading experts in early childhood intervention. In many areas around Australia, Early Childhood (EC) Partners are available to help provide support for <your child's/child's name> needs. EC Partners are local organisations that are funded to deliver the early childhood approach. The EC Partner for your region is <EC Partner Name> who are located at <address>. They can be contacted by phone on <phone number> or via email <email address>.
- <You/Applicant's Name> may also be eligible for supports through the aged care system via an early aged care assessment. <You/Applicant's Name> can speak to your Local Area Coordinator or General Practitioner about this, or call My Aged Care on 1800 200 422 for further information.

Early Intervention Not Met

Does not meet Section 25(1)(a): Permanent Disability or Developmental Disability

Option 1 - no identified impairment

As outlined in criterion (a) of the Disability requirements, I am unable to conclude from the evidence provided <your/applicant's name> <condition/s> of <diagnosis/diagnoses> <is/are> a loss of, or damage to <your/their> body's functions, structure, or how <you/they> think and learn. As such, it cannot be determined that <you/applicant's name> meet this criterion.

Option 2 - no permanent impairment

[Our Guidelines - Applying to the NDIS \(external\)](#) explain that to meet this criterion, an applicant must have an impairment that is likely to be permanent. When deciding if a person has an impairment that is likely to be permanent, the NDIA considers the same things as in the disability requirements.

As outlined in criterion (b) of the Disability requirements, I am unable to conclude from the evidence provided <your/applicant's name> <impairment/s is/are> permanent. As such, it cannot be determined that <you/applicant's name> <meet/s> this criterion.

Option 3 - no developmental delay

When we decide if a child has developmental delay, we use the definition in [Section 9 of the NDIS Act 2013 \(external\)](#).

We need to know that the child is under the age of 6 and that the delay:

- is [due to mental or physical impairments \(external\)](#)
- [substantially reduces the child's functional capacity \(external\)](#) compared with other children the same age
- means [the child needs specialist services \(external\)](#) from more than one professional working as a team to support the child and for longer than 12 months.

<option: does not meet age – As <child's name> was already 6 years of age at the time of the original access decision, it cannot be said that they have has a developmental delay, and therefore cannot meet this criterion>

<option: does not indicate a substantial delay: As the evidence provided does not outline <child's name> has a substantial reduction in functioning in either self-care, receptive and expressive language, cognitive development, or motor development, it cannot be said that they meet the definition of a developmental delay under [Section 9 of the NDIS Act 2013 \(external\)](#). As such, this criterion cannot be met.

<option: does not require multidisciplinary support: As the evidence does not indicate that <child's name> needs specialist services from more than one professional working as a team to provide support for longer than 12 months, it cannot be said that they have a developmental delay as per [Section 9 of the NDIS Act 2013 \(external\)](#). As such, this criterion cannot be met>.

Does not meet Section 25(1)(b): reduces future support needs

Option 1 - longstanding impairment

To meet this criterion, [Our Guidelines - Applying to the NDIS \(external\)](#) explain that early

intervention (early access to supports) must be likely to reduce a person's future disability support needs.

Due to the long-standing nature of <your/applicant's name> <impairment/s>, I am not satisfied the supports required are 'early intervention' in nature. From the evidence provided, <early intervention supports are not likely to reduce your/applicant's name future needs for support in relation to disability/there is no information available to determine that early intervention supports are likely to reduce your/applicant's name future support needs in relation to disability>.

Option 2 - no evidence of EI supports being required

To meet this criterion, [Our Guidelines - Applying to the NDIS \(external\)](#) explain that early intervention (early access to supports) must be likely to reduce a person's future disability support needs.

From the evidence received, there is no information to determine that early intervention supports are likely to reduce <your/applicant's name> future support needs in relation to disability.

Does not meet Section 25(1)(c): Benefiting the person, which may be shown in one of four ways

1. Lessening the impairment's impact on the functional capacity for communication, social interaction, learning, mobility, self-care or self-management or
2. Preventing the deterioration of functional capacity or
3. Improving functional capacity or
4. Strengthening informal supports, including building the carer's capacity

Evidence provided does not indicate early intervention supports are likely to benefit you by achieving one or more of the outcomes listed above. There is no indication in the evidence provided as to what benefits may or may not be experienced from receiving support.

Does not meet Section 25(1)(d): Benefiting the person – the early intervention supports that would likely benefit the person are NDIS supports

To meet this criterion, the support a person requires must be most appropriately funded or provided by the NDIS.

A person won't be eligible if we decide the support required is more appropriately funded or provided:

- by other general systems of service delivery or support services, such as a workers compensation scheme
- under a universal service obligation that other government services must provide to all Australians, such as schools and public hospitals
- as a reasonable adjustment under discrimination law, such as making places or venues accessible for you.

The evidence provided does not indicate that early intervention supports are most appropriately funded by the NDIS. Early intervention for <your/applicant's name> <impairment/s is/are> most appropriately provided through the Health System or other government services. Clinical treatment is the responsibility of the Health System and not the NDIS.

This determination is in line with [Our Guidelines - Applying to the NDIS \(external\)](#). Further information on when early intervention supports are more appropriately funded by the NDIS or by other services can be found here:

- [Our Guideline Mainstream and community supports \(external\)](#)
- [Schedule 1 of the NDIS \(Supports for Participant\) Rules \(external\)](#)

Mainstream Early Intervention – Psychosocial Interventions

The information does not indicate that early intervention supports are most appropriately funded by the NDIS. Early intervention for <your/applicant's name> psychosocial impairment is most appropriately provided through the Health System. Treatment of mental illness including acute inpatient, ambulatory, rehabilitation/recovery, early intervention and clinical support for child and adolescent developmental needs is the responsibility of the Health System and not the NDIS.

Developmental Delay – The NDIS is not the most appropriate system

To meet this criterion, the support a child requires must be most appropriately funded or provided by the NDIS.

A child won't be eligible if we decide the support required is more appropriately funded or provided:

- by other general systems of service delivery or support services, such as a workers compensation scheme
- under a universal service obligation that other government services must provide to all Australians, such as schools and public hospitals
- as a reasonable adjustment under discrimination law, such as making places or venues accessible for you.

For example, children usually won't be eligible if they only need the following supports. These are more appropriately provided by other government and community services:

- medical services, and treatments for health conditions
- inclusion supports to help young children join early childhood learning and care settings
- school readiness programs to help children prepare for school
- newborn follow-up, such as child and maternal health services.

It has been considered <child's name> would benefit from intervention during this period in their life. However, as outlined above in Section 25(1)(a), as <child's name> does not meet the definition of developmental delay under [Section 9 of the NDIS Act 2013 \(external\)](#) and [Our Guidelines - Applying to the NDIS \(external\)](#), it cannot be said that they have a developmental delay, and therefore the NDIS is not the most appropriate agency to fund supports.

This determination is in line with [Our Guidelines - Applying to the NDIS \(external\)](#). Further information on when early intervention supports are more appropriately funded by the NDIS or by other services can be found at:

- [Our Guideline and Mainstream and community supports \(external\)](#)

- [Schedule 1 of the NDIS \(Supports for Participant\) Rules \(external\)](#)

Appendices

Appendix A – Examples of SRFC under the Six Key Life Activities

The following reference to Rules refer to the National Disability Insurance Scheme (Becoming a Participant) Rules 2016.

Mobility

Rule 5.8(a) reliance on prescribed aides and devices

SRFC may look like but is not limited to:

- The use of a prescribed wheelchair or mobility scooter (for either short or longer distances)
- Prescription of an AFO (Ankle Foot Orthosis) or KFO (Knee Foot Orthosis)
- Prescribed build up shoes related to a disability such as Post-Polio Syndrome
- Prescription or use of callipers
- Reliance upon Prosthetics required for amputated lower limbs/congenital missing limbs (missing toes, forefoot without the prescription of aides may not meet SRFC)
- Hoists or slings

Note: An IRO would assess prescribed aids based on the recommendations and prescriptions of health professionals. If a person chooses not to wear a prescribed aide as they feel it is uncomfortable or does not fit, this should not disqualify them.

Rule 5.8(b) reliance on the support/intervention of others

SRFC may look like a combination of these indicators but is not limited to:

- Assistance needed to stand and walk around the community or propel a wheelchair
- Frequent falls and unable to get up off the floor without assistance

- Using a number of common items such as 4-wheel walkers, frame and walking sticks, single point sticks, quad cane Canadian crutches, forearm crutches, belt strap as well as standby support of another person.

Rule 5.8(c) unable to participate in the activity

SRFC may look like but is not limited to:

- Hoist or slings transfers to a motorised wheelchair with reliance on another person for 24/7 mobility support.

Psychosocial Disability

It would be unusual to see a SRFC in mobility attributable to a psychosocial condition without any coexisting disabilities present. An example of reduced capacity for mobility resulting from a psychosocial impairment alone would be a conversion disorder (also known as functional neurological disorder) where psychosocial impairment shows as physical symptoms.

Further information can be found in the [Guide - Psychosocial Disability](#).

Examples of what evidence may **not** meet the requirements of SRFC for Mobility include:

- Build up shoes used for leg length discrepancies or stand-alone foot or back conditions
- Orthopaedic inserts
- Charcot Restraint Orthotic Walker (CROW) boots, even when these are formally prescribed, they are viewed as temporary aides
- Four-wheel walkers or frame and walking sticks, single point sticks, quad cane, Canadian crutches, forearm crutches used independently for short and/or long distances. These items can be purchased from chemists and mobility shops and do not require a formal prescription from a suitably qualified health professional

- Mobility scooter or wheelchair self-purchased or borrowed that has not been formally prescribed
- Not being able to complete isolated tasks such as sweep and mop, scrub shower recesses, mow lawns, complete household cleaning tasks, carry groceries, and lift small items such as a cooking pot. Regarding household tasks, the functional evidence obtained should be weighed to see if the applicant experiences substantially reduced functional capacity in the broader sense of the functional domain rather than in isolated tasks
- Not being able to catch public transport

Self-Care

Rule 5.8(a) reliance on prescribed aides and devices

SRFC may look like but is not limited to:

- Slings Hoist transfers for bathroom access
- Use of prosthetics for self-care tasks. The requirement of prosthetics for upper limb amputations/congenital missing limbs would result in SRFC in Self-care. An additional discussion may be needed with your Line Manager or TAPIB about missing fingers
- Percutaneous Endoscopic Gastrostomy (PEG) flexible feeding tube that cannot be managed independently
- Stoma or colostomy bags that cannot be managed independently
- Catheters that cannot be managed independently.

Rule 5.8(b) reliance on the support or intervention of others

SRFC may look like a combination of these indicators but is not limited to:

Note: there is an overlap between self-management and self-care for people living with intellectual, psychosocial and cognitive impairments. If the evidence supports limited insight into caring for one's own self-care needs and the need for stand by assist for the majority of self-care tasks, then it meets the SRFC criteria.

- Evidence is needed for prescribed items such as stand by assistance or hands on support. There may be a need for a support person to lay out hygiene equipment (for example toothbrush, soap, face washer) and then talk the person through using each item.
- Evidence of fine motor difficulties is considered for SRFC in self-care. A condition that affects the fingers/upper limbs may affect the person's ability to complete fine motor self-care activities. Examples and further information of the supports needed for upper limb/fine motor difficulties are available in the SRFC phone guide for question examples.

Rule 5.8(c) unable to participate in the activity

SRFC may look like but is not limited to:

The reliance on another person for 24/7 self-care support including overnight supervision or live in support of the person.

Psychosocial Disability

SRFC may look like but is not limited to:

- The person does not wash or change clothing without significant intervention
- The person soils clothing or bedding and does not acknowledge need to wash/change soiled items
- The person may have a lack of insight and requires intervention to manage health care needs.

Examples of what evidence may **not** meet the requirements of SRFC for Self-Care

The below items are considered general items that are available in the community and are reasonable adjustments to living environments:

- Commodes

- Over-toilet seats
- Webster packs to track medication
- Shower chairs
- Slip-resistant mats
- Bath-boards
- Modified cutlery
- Personal safety alarms
- Long handled brushes and pick up sticks
- Accessible tap handles
- Simple modifications to kitchen environment
- Sitting down to prepare meals
- Making use of microwave meals or simple recipes
- Not being able to wash hair or cut toenails
- The independent use a catheter, stoma, colostomy bag or peg tube.

With regard to a psychosocial impairment, these examples alone are **not** considered to meet SRFC

- Needs periodic assistance to check compliance with medications.
- Shows limited interest in self-care and sometimes fails to wash and change clothes regularly.

Learning

Rule 5.8(a) reliance on prescribed aides and devices

A prescribed aide or device for learning would not meet SRFC. Specialised aides and devices are usually provided by the education sector.

Rule 5.8(b) reliance on the support/intervention of others

SRFC may look like a combination of these indicators but is not limited to:

- Evidence the person gets lost easily if they leave the house by themselves
- An inability to implement road safety or maintain stranger danger awareness
- Inability to learn a new bus route by themselves
- They are part of an Australian Disability Enterprise (ADE)
- Unable to learn simple recipes or the process involved with other household tasks, such as, how to use a washing machine or dishwasher
- Step by step instruction from another person is always required to learn a new task
- A significant length of time is required to practice a new task before becoming independent or transferring the newly learned skill to a different environment
- They may be an adult living at home who is unable to live independently
- There may be guardianship or trustee orders in place or legal Authorised Representative acting on their behalf
- Carers or support person plays a key role in all learning tasks required for community access. There may be an overlap with self- management
- Verbal prompting may be required for all learning including a new morning routine, how to meet up with a new friend, how to travel to a new place.

Rule 5.8 (c) unable to participate in the activity

SRFC may look like but is not limited to:

There may be evidence of an inability to learn new tasks, remember information or practice a new skill. Formal guardianship orders may be in place. There may also be overlap with other key life areas such as self-management, mobility (for example, unable to learn to catch public transport), and social interaction.

Psychosocial Disability

SRFC may look like but is not limited to:

- Unable to learn a new bus route to get from home to work without assistance (not a substantial reduction, if it is age appropriate for assistance to be required).
- Unable to learn simple tasks such as how to make a sandwich or a very basic meal.

Examples of what evidence may **not** meet the requirements of SRFC for learning. Please note these also apply to the area of psychosocial disability.

- Requiring an aide in school or TAFE. This support is provided through the education setting. NDIS does not provide support to teach reading, writing and arithmetic
- Needing electronic phone reminders to attend TAFE, school or university
- Attendance issues relating to school TAFE or university
- Lack of organisation or preparation skills to hand in school, TAFE or University assignments
- The need for education adjustments within the school, TAFE or university setting

Self-Management

Rule 5.8(a) reliance on prescribed aides and devices

SRFC may look like but is not limited to:

The combination of standby support or physical prompting to use common items such as simple memory supports, such as, diaries, calendars, alarms and reminders, Webster packs for medication, direct debit arrangements, lists to remember tasks, personal safety alarms. Usually, common items used in isolation would not meet the SRFC requirements. Consider the below and discuss with your Line Manager or TAPIB advisor where needed.

Rule 5.8 (b) reliance on the support/intervention of others

SRFC may look like a combination of these indicators but is not limited to

- The person consistently has trouble-managing money and requires others to help
- There may be a history of risk of financial and/or physical exploitation
- Community Treatment Orders (CTO) may be in place
- Medication non-compliance or poor insight into taking medication may be evident
- There may be evidence of poor insight to manage health care needs appropriately
- There may be evidence of guardianship orders, informal/formal care arrangements
- Public trustee may be involved with management of finances
- The person may be living in supported accommodation (formal / informal) or a supported independent living (SIL) environment
- Strong evidence of hoarding and squalor leading to tenancy or health risks
- Inability to live at home safely by themselves. Carers are required to monitor regular and safe use of kitchen appliances
- Inability to solve a problem if they were out in the community by themselves. For example, how to calculate change accurately, what to do if they miss the bus
- Limited insight into the value of money
- A history of or risk of homelessness
- There may be a dual diagnosis of a psychosocial disability and an intellectual disability
- The person may not be able to plan their day by themselves or organise their time
- The person may require the support of a carer to make all decisions regarding finances, health or housing

Rule 5.8(c) unable to participate in the activity

There may be evidence of an inability to self-manage one's own life. Formal guardianship orders may be in place. Informal supported decision-making supports may be in place. The person may be residing in supported accommodation or be an inpatient requiring support with all self-management. There may also be overlap with other key life areas such as learning.

Psychosocial Disability

SRFC may look like but is not limited to:

- Repeat homelessness as unable to manage a tenancy and make decisions
- Unable to manage finances
- Hoarding has become a health and safety concern. No insight to manage the household.

Examples of what evidence may **not** meet the requirements of SRFC for learning. Please note these also apply to the area of psychosocial disability.

- The person may make poor financial decisions (has been known on occasion to spend entire weekly income on new clothes leaving nothing for bills and food) but this is not always the case
- Lack of motivation to clean the house or inability to complete household chores
- Simple aides and supports used independently without support from another person
- Simple memory supports- diaries, calendars, alarms and reminders used independently
- Medications - Webster packs, pharmacist supports
- Direct debit arrangements
- Lists to remember tasks
- Personal safety alarms.

Communication

Rule 5.8(a) reliance on prescribed aides and devices

SRFC may look like but is not limited to:

- Adaptive computer equipment such as screen readers for example, "JAWS", magnifiers.
- Augmentative and Alternative Communication (ACC) Devices for example, Proloquo2go, or text to speech software programs, picture exchange system such as PECS or boardmaker or Compic Pictographs.

Rule 5.8(b) reliance on the support/intervention of others

SRFC may look like a combination of these indicators but is not limited to:

- The person is unable to express basic needs and wants without the support of another person
- The person is unable to communicate with members of the community without the support of another person
- The person cannot follow the rules of a conversation
- Frequent communication breakdowns where the message is unable to be verbalised or understood resulting in a behavioural response outside the limits of reasonable community expectations
- Unable to follow a 2-step verbal instruction without repetition
- Unable to follow verbal instructions at work and require additional support from another person to understand
- Unable to follow the rules of a community sporting group and require both pictures and the support of another person in order to understand
- The person is "non-verbal" and is reliant on the support of another person to interpret gesture, signs or eye movements
- The person only has a few verbal words. For example, yes, no, toilet or more.

Rule 5.8(c) unable to participate in the activity

There may be evidence of an inability to communicate, or the person is "non-verbal". Formal guardianship orders may be in place. Informal supported decision-making supports may be in place.

The person may be residing in supported accommodation or be an inpatient requiring support with all communication. There may also be overlap with other key life areas such as learning, self- management.

Psychosocial Disability

Examples of SRFC:

- Passive behaviour (involving mainly yes or no answers) with no or very limited conversation and no initiation of conversation. (Note that culture and language is contextual)
- Auditory hallucinations or thoughts interrupting communication attempts. The person may interrupt, shift topic, or have a separate conversation.
- Other cognitive or intellectual impairments that need the support of another person to manage behaviours.

Examples of what evidence may **NOT** meet the requirements of SRFC for communication. Please note these also apply to the area of psychosocial disability.

- A learning disorder which limits a persons' ability to read and write
- Attending speech pathology for help with communication
- Help for remembering information at appointments
- Support and prompting to share feelings.

Case Studies in Communication – other key indicators

Apraxia of Speech

Apraxia of speech (often referred to as Childhood Apraxia of Speech 'CAS') is a motor speech disorder. This is a neurological impairment commonly diagnosed by a neurologist and/or speech pathologist. The TAPIB have advised IROs to consider Access Met – Early Intervention (section 24(1) (b), s251 (a) satisfied) and support the gathering of further information if required and completing a functional call with relevant authorised health professional and/or a 'request further information' letter.

Stroke/Cerebrovascular Accident (CVA), Traumatic Brain Injury (TBI) or Acquired brain Injury (ABI), Hypoxic brain Injury with communication impacts

Pathways in the brain are responsible for both understanding (receptive language) and speaking (expressive language). Any impacts on the brain can affect these areas responsible for communication. There will usually be a speech pathologist report, neurologist report or rehab specialist report. Further information should be sought using a functional capacity phone call or request for further information letter if there is evidence of one of these impairments related to brain injury and there is information another person is supporting most communication attempts.

Advice from your Line Manager or TAPIB advisor may be needed, if you notice any of these key indicators.

Vision and Hearing Impairments

Have reference to the [Our Guidelines - Applying to the NDIS \(external\)](#) when assessing visual and hearing impairments and obtain further information if the SRFC requirements are not met.

An application does not need to demonstrate the application from a Deaf or Hard of Hearing person would meet the List A or B requirements to meet the Section 24 Disability Requirements. For example, if a case shows the use of Cochlear implants and Auslan is the primary language, do not request further evidence in terms of audiograms or surgical reports if the functional evidence is demonstrating substantially reduced functional capacity.

The same is considered for visual impairments. An IRO can apply discretion around whether guide dogs, white cane, legally blind is mentioned in the evidence coupled with strong functional information rather than request evidence from an ophthalmologist. If in doubt, have a conversation with your line manager or receive further advice through TAPIB.

Other key indicators to consider for vision and hearing impairments may include:

- Braille

- Hearing loss at a young age, now an adult and still reliant on aides
- Audiogram where the hearing limits do not reach the levels adequate for speech sound discrimination

Social interaction

Rule 5.8(a) reliance on prescribed aides and devices

SRFC may look like but is not limited to:

It is rare a person would be completely reliant upon a device for social interaction. There may be an overlap with a communication device, which the person uses when in social settings.

Rule 5.8(b) reliance on the support/intervention of others

SRFC may look like a combination of these indicators but is not limited to:

- History of inappropriate behaviours towards others
- History of violent aggression where the person consistently misinterprets the responses of others
- The person usually requires people to act as intermediary between them and others
- The person's main social engagement is through facilitated and/or supported groups. For example, day programs, social clubs
- The person's parents may still organise their outings as an adult
- The person's friends are mainly other people living with a disability or are trusted support workers
- Evidence the person cannot make or keep friends
- The person might regularly lose friends easily
- The person may overshare to the point of vulnerability or offence
- The person may not be able to access their community effectively due to a lack of ability to behave within social norms

- There may be a history of being taken advantage of socially or a history of being socially vulnerable.

Rule 5.8(c) unable to participate in the activity

SRFC may look like but is not limited to:

There may be evidence of a complete inability to participate in the mainstream community appropriately. There may also be overlap with other key life areas such as learning, self-management.

Psychosocial Disability

Examples of SRFC in social interaction.

- The person may not be able to interact with members of the community due to social anxiety. They may require a support person to leave the house and interact with people at the bank, shop or post office
- An inability to make and keep any friends
- An inability to access any section of the community
- An inability to behave within limits which are acceptable within the community

Examples of what evidence may NOT meet the requirements of SRFC for communication. Please note these also apply to the area of psychosocial disability.

- Needs help to make contact with friends or socially withdraws when unwell
- Only has contact with friends via phone, email
- Socially isolated because friends and family live far away
- Socially isolated because they are a person from a culturally and linguistically diverse background (CALD)

Appendix B – Legislation Amendments

On 22 August 2024 the 'Getting the NDIS back on track No.1' Amendments Act 2024 passed through parliament with the purpose of amending the NDIS Act 2013. This Amendments Act applies only to internal review requests for decisions made after the 3 October 2024. This Amendment Act repealed and replaced the wording within the Disability criteria, Section 24(1)(e) to confirm that supports provided must be 'NDIS Supports'. The Amendments Act also replaced the Early Intervention criteria s25(1)(3) with 25(1)(d) to note that a person must meet the criteria for requiring 'NDIS Supports' to be eligible for the NDIS. 'NDIS Supports' are outlined within Section 10 of the Act and enlivened through our National Disability Insurance Scheme (Getting the NDIS Back on Track No. 1) (Miscellaneous Provisions) Transitional Rules 2024.

The Amendments Act also outlined that a person who is applying for the NDIS may be eligible for either the Disability criteria, Early Intervention criteria or both. The NDIS must confirm what eligibility criteria a participant has met for in writing.

From January 2025 the NDIS must provide impairment categories information as part of access met decision outcomes. When an IRO decides to set aside a previous 'access not met' decision, a letter with impairment categories information, specifying the category or categories of impairments that cover the impairment or impairments for which the participant has met the disability and/or early intervention requirements, is automatically included with the participant's successful NDIS application letter.

The NDIS Act was previously amended on 1 July 2022, to provide more clarity around the eligibility criteria for people with episodic or fluctuating impairments. These amendments also update the language in respect of episodic or fluctuating impairments.

Terminology has changed from 'psychiatric condition' to 'psychosocial disability'.

All impairments which are episodic or fluctuating in nature may be taken to be permanent, regardless of whether the impairment is attributable to a psychosocial or non-psychosocial disability. This clarification reflects recommendations from the Tune Review.

Currently, there are no changes to how Section 24(1)(c) substantially reduced functional capacity is assessed.

Please speak to your line manager if you have any questions in relation to Access or Revocation Internal Reviews impacted by these changes.

Appendix C – Guidance for using Templates along with free text for s100 outcome letters

1. Ensure information is objective, include facts based on evidence, and avoid personal opinions or feelings. We must make good, evidence-based decisions. Communicating the internal review decision clearly is critical as it improves the applicant/participant experience and understanding.
2. Reference all information the applicant/former participant/participant has provided in your decision. This includes any relevant documents or material relied on such as medical reports, comments, conversations, and emails.
3. Keep the text short, simple and in plain conversational English.
4. Avoid jargon, terminology or additional information that is non-specific or does not add value to the understanding of the internal review outcome.
5. Introduce all acronyms before using them. For example, 'Occupational Therapy (OT)'.
6. Cross-check your decision against the statutory criteria to ensure you meet all necessary sections.
7. Provide the basis for how you reached your decision against each criteria in the legislation.
8. Provide relevant information on how and why the internal review decision was made.

IRT - Access and revocation request internal note templates

This article provides guidance for an internal review officer to use templates accurately to record activities in PACE.

Recent updates

15 December 2025

Updates to:

- s100 – Initial contact template
- s100 – Request Withdrawn template

Templates

Recording activities within PACE is essential for information gathering, record keeping and a nationally consistent service delivery approach. Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

All references to applicant in this document also refers to former participants (for revocations), authorised representatives, nominees and child representatives.

Recording Internal Notes in PACE is mandatory. It is essential for information gathering, record keeping and a nationally consistent service delivery approach.

s100 – Initial Contact

Record initial s100 contact with the applicant

Date: <dd/mm/yyyy>.

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to applicant's name/authorised representative>.

Contact with: <full name> <relationship – applicant's name/authorised representative>.

Phone no: <number>.

Consent confirmed: <Yes/No> <who gave consent, how – over the phone/in writing, to whom the consent is being given, for what purpose, for how long the consent is provided>.

POI Confirmed: <Yes/No> <3 point security check – full name, address, DOB, email, organisation name, work email, work address, applicant's NDIS no., applicant's DOB.>.

Valid request for s100: Confirmation of consent and authority of the applicant <full name> <relationship – nominee/child representative/guardian> established <prior to

initial contact and verified by IRO/during initial contact as required by IRO>.

<Confirm the disabilities/impairments to be reviewed informed by what was assessed in the original decision>

<Insert any concerns or discussion raised about the review from the applicant here>.

<Confirming the confirmation of all documents with the applicant>.

All evidence provided for the internal review: <Yes/No>. <If No, provide details of what information is to be provided>.

Further evidence requested by IRO: <Yes/No>.

Document Listing: <Optional inclusion: Insert evidence used for most recent decisions and all newly provided evidence using the naming convention: Applicant surname, Applicant first name, NDIS number, Topic/Document Name/Document and Report Date.>

Agreed timeframe: <Provide details about what information to be provided, how information is to be provided> by agreed timeframe of <dd/mm/yyyy>.

IRO acknowledged <applicant's> concerns/review request and explained the review process and access criteria.

<Insert any discussion points in response by the IRO with the applicant>.

Preferred Method of Contact for Internal Review Outcome: <Confirmed as per current information on PACE as phone/email/mail> <Preferred Method of Contact Details updated> <Internal review decision agreed to be communicated by phone/email/mail>.

Action: <insert next steps for IRO>.

If no response is received by the due date, a decision will be made based on the evidence available.

Details provided to assist with gathering further evidence: Details provided include <provide relevant details about Support Coordinator/Local Area Coordinator or Early Childhood Partner>.

Once the internal review decision is made the outcome will be communicated by <phone/email/mail>.

s100 – Initial Contact (within 14 days of the Acknowledgement Letter)

Date: <dd/mm/yyyy>.

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to applicant's name/authorised representative>.

Contact with: <full name> <relationship – applicant's name/authorised representative>.

Phone no: <number>.

Consent confirmed: <Yes/No> <who gave consent, how – over the phone/in writing, to whom the consent is being given, for what purpose, for how long the consent is provided>.

POI Confirmed: <Yes/No> <3 point security check – full name, address, DOB, email,

organisation name, work email, work address, applicant's NDIS no., applicant's DOB.>.

Valid request for s100: Confirmation of consent and authority of the applicant <full name> <relationship – nominee/child representative/guardian> established <prior to initial contact and verified by IRO/during initial contact as required by IRO>.

<IRO confirmed that no further information would be provided within the 14-day acknowledgement timeframe and <applicant's name/authorised representative> provided consent for the review to progress and for a decision to be made.>

<IRO advised the additional information is required to be submitted by <insert date>.

IRO explained a Further Information Request letter would be <posted/emailed>. IRO further explained if the additional information was not provided by that date, and if no contact was made by <applicant's name/authorised representative>, the Internal Review would proceed, and a decision would be made using the available information.>

IRO acknowledged <applicant's> concerns/review request and explained the review process and access criteria.

<Insert any discussion points in response by the IRO with the applicant>.

Action: <insert next steps for IRO>

s100 – Unable to Contact

Date: <dd/mm/yyyy>

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to applicant's name/authorised representative>

Contact with: <full name> <relationship – applicant's name/authorised representative>

Phone no: <number>

Contact attempt was made regarding an Internal Review via <email/phone/SMS> to <applicant's name/authorised representative> on <insert phone number/email address>.

If contact was via phone, add the following sentence <Message left on voicemail> OR <No verifiable voicemail therefore no message was left>.

s100 – Unauthorised Request

An internal review request was lodged on <dd/mm/yyyy> by an unauthorised person.

<Record the detail of the unauthorised representative, relevant information>. The

Internal Review Branch has withdrawn the internal review and will take no further action on this request. It was an invalid request without record of consent from the applicant.

I confirm I have checked this file and the party that submitted the review request does not have authority to act on behalf of the applicant.

If an internal review is required, please advise the requestor that they will need to re-submit the request with the required consent. Refer to Internal Review guidelines and Our Guideline - Your privacy and information (external) for who is authorised to request an internal review .

If the applicant provides consent for the review in the future and within time, the date of

the request should reflect the date a valid request was made.

The Internal Review Unauthorised Request Letter has been sent to <applicant> on <dd/mm/yyyy>.

<IRO/BSO Logon>

s100 – Internal review requested

s100 form submitted on: <dd/mm/yyyy>.

Submitted by: <Name> <relationship>.

Review Type: <Access not met/Access revoked>.

IRT Intake completed by: <Logon ID>

Date received by Agency: <dd/mm/yyyy>

Authorised Representative: <Authorised representative that consented to review/no consent>

Acknowledgement letter sent: <dd/mm/yyyy>

Core issues associated with review request: <core issues>

Risk: <risk level and risk category>

Reason for risk: <Describe why prioritised if prioritised as High or extreme otherwise delete.>

Type of s100: <access or revocation>

s100 – Request for Further Information

Request for further information from <applicant> or <applicant wishes to provide further information>.

Formal request for information issued via email/post on <dd/mm/yyyy>.

Further evidence to be provided by mail/email. Email/return postal address details provided. Due date: <dd/mm/yyyy>.

Consent has been provided to contact third parties regarding the information: <Y/N, details of third party, and note you have recorded their consent on PACE>.

Due date based on method of provision and <details regarding information needing to be obtained or already available and ready to be forwarded>.

s100 – Request Withdrawn

s100 of <s20 Access not met> **or** <s30 Revocation> decision withdrawn on <dd/mm/yyyy>.

Withdrawn by: <name of Applicant/Authorised representative>

Reason for withdrawal: <Initiated by affected person or applicant>. I have advised the impact of withdrawal on the review request (no decision will be made, no ART rights) to the applicant, as well as options for new access application in the future.

If applicable, add following paragraph about POI

Any required POI check had been completed via <insert method for example. 3-point

security check – full name, address, DOB, email, organisation name, work email, work address, applicant's NDIS no., applicant's DOB.>.

s100 – Confirmed (Access not met) – Age Requirements

Review of Access not met/Revocation decision – completed by <IRO name and Logon ID>.

Original Access not met/Revocation decision made – <dd/mm/yyyy>.

As a delegate of the CEO, I am not satisfied <applicant> meets the access criteria to become a participant of the NDIS.

The criteria for access to the NDIS is set out in section 22 of the National Disability Insurance Scheme Act 2013. This states a person must be aged between 0 and 64 when an access request is made. The NDIA is unable to waive this legislative requirement.

As the age requirements are not satisfied by information and evidence provided for the internal review, further assessment of eligibility in relation to the Disability, Residency and Early Intervention requirements (set out in sections 23, 24 and 25 of the National Disability Insurance Scheme Act 2013) has not been considered as part of this internal review.

<Copy and paste entire s100 outcome basis of the decision section into Internal Note.>

s100 – Confirmed (Access not met) – Residency Requirements

Review of Access not met/Revocation decision – completed by <IRO name and Logon ID

Original Access not met/Revocation decision made – <dd/mm/yyyy>.

As a delegate of the CEO, I am not satisfied <applicant> meets the access criteria to become a participant of the NDIS.

The criteria to access the NDIS is set out in section 23 of the National Disability Insurance Scheme Act 2013. This states a person must meet the residence requirements to meet the access criteria. The NDIA is unable to waive this legislative requirement.

As the age requirements are not satisfied by information and evidence provided for the internal review, further assessment - of eligibility in relation to the Disability, Residency and Early intervention requirements (set out in sections 23, 24 and 25 of the National Disability Insurance Scheme Act 2013) has not been considered as part of this internal review.

<Copy and paste entire s100 outcome basis of the decision section into Internal Note.>

s100 – Confirmed (Access not met) – Disability and Early Intervention

Review of Access not met/Revocation decision – completed by <IRO name and Logon ID>.

Original Access not met/Revocation decision made – <dd/mm/yyyy>.

As a delegate of the CEO, I am not satisfied <applicant> meets the access criteria to

become a participant of the NDIS.

<Copy and paste entire s100 outcome basis of the decision section into Internal Note.>

s100 – Set Aside (Access met)

Review of Access not met/Revocation decision – completed by <IRO name and Logon ID>.

Original Access not met/Revocation decision made – <dd/mm/yyyy>.

Recent contact made with <applicant's name> and <they provided additional documents/no-additional documents provided>.

As a delegate of the CEO, I am satisfied <applicant name> meets the <s24 disability criteria/ s25 early intervention criteria/s24 disability and s25 early intervention criteria> to become a participant of the NDIS. The applicant has met for the following impairment <category/categories>:

<Instruction: Remove any impairment categories that are not required>

- Physical
- Intellectual
- Cognitive
- Sensory
- Neurological
- One or more impairments to which a psychosocial disability is attributable
- Developmental Delay

Section 22 and 23 Met Justification:

Age and residency criteria are met for <applicant name> as verified through <Centrelink mainframe with consent by <Login ID> on <date>/documents attached to PACE by <Login ID> on <date>/Document Verification System with consent by <Login ID> on <dd/mm/yyyy>.

Section 24 <Met/Not Met> Justification:

Based on the information provided <applicant name> meets/does not meet the disability criteria as set out in s24 of the NDIS Act 2013 based on the following:

<Option 1 – Disability justification>

<Provide a brief statement as to why the criterion was met or not met, and what piece of evidence supports your statement of claim under the appropriate headings below:>

24 1a – Impairment

<List all impairment categories that meet the disability criteria.>

24 1b – Permanence

24 1c – Substantial reduction in functioning

24 1d – Participation

24 1e – Requires lifetime NDIS supports>

<Option 2 – List A justification>

<Attached evidence from <name, date and discipline of health professional> indicates <applicant name> has <state impairments>. This is on List A and no further assessment is required.>

Section 25 <Met/Not Met> Justification:

Based on the information provided <applicant name> meets/does not meet the early intervention criteria as set out in s25 of the NDIS Act 2013 based on the following:

<Option 1 – Early intervention justification>

<Provide a brief statement as to why the criterion was met or not met, and what piece of evidence supports your statement of claim under the appropriate headings below:

25 1a – Impairment

<List all categories of impairments that meet the early intervention criteria>

25 1b – Reducing future need for support

25 1c – Benefiting the person
25 1d – Early intervention supports that would likely benefit the person are NDIS supports>

<Option 2 – Developmental delay justification>

<Provide a brief statement as to why the criterion was met and what piece of evidence supports your statement of claim under the appropriate headings below:

25 1a – Delay attributable to Impairment

<Under the age of 6 at the time of assessment>

<Delay attributable to an impairment>

<Substantial reduction in <self-care, receptive or expressive language, cognitive

development or motor development>

<Need for combined and sequenced supports>

25 1b – Reducing future need for support

25 1c – Benefiting the person

25 1d –Early intervention supports that would likely benefit the person are NDIS supports>

<Option 3 – List D justification>

<Based on the information provided, <applicant name> meets the Early Intervention criteria as set out in s25 of the NDIS Act 2013 based on the following:

This child under 7 years old has a condition listed on List D and no further information is required.>

Set Aside Completion Tasks

<Instruction: Include this information at the end of the section 24/25 justification for all set aside decisions>

Note: <applicant name> has only met access for <list impairment categories>. They do not meet access for <list impairment categories>.

The following pre-planning tasks have been completed or confirmed based on available evidence/information at time of Internal Review decision: Streaming correct.

Primary disability correct.

s100 – Communicate Confirm Decision (phone and email/mail)

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to applicant's name/authorised representative>.

Successful phone contact made with <applicant> on <phone number>.

POI Confirmed: <Yes/No> <3 point security check – full name, address, DOB, email, organisation name, work email, work address, applicant's NDIS no., applicant's DOB.>

Decision outcome:

<Insert IRO communication regarding the decision outcome, the evidence supporting it, a brief explanation, and ART rights>.

<Insert applicant's response to the decision outcome>.

Action undertaken:

Internal review outcome to be finalised with the basis of the decision letter sent via <email/mail> to <applicant>.

If applicable add information about agency risk, otherwise delete

<Describe the agency risk and the IRO has alerted team leader>.

Refer to the outcome decision letter for further information.

If applicable add information about SMS notification sent for email outcome

Notification SMS Sent for s100 outcome email sent: <Yes on dd/mm/yyyy to applicant's name/authorised representative>

s100 – Communicate Confirm Decision (email/mail)

Decision outcome provided via <email/post>.

Decision outcome, ART rights, Local Area Coordinator/other community supports provided within correspondence.

Refer to the decision letter for further information.

s100 – Communicate Set-aside Decision

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to applicant's name/authorised representative>.

Successful phone contact made with <applicant> on <Phone Number>.

POI Confirmed: <Yes/No> <3 point security check – full name, address, DOB, email, organisation name, work email, work address, applicant's NDIS no., applicant's DOB.>

Decision outcome:

IRO provided outcome of the internal review to <applicant> as a set aside decision with the evidence meeting the <disability criteria/early intervention criteria/disability and early intervention criteria>. IRO advised that <applicant> has met for their <state impairment categories>.

If applicable add information about the Impairments categories information

IRO advised these impairment categories will be listed on the participant's Impairments categories information.

IRO advised <applicant> they would receive contact from an NDIS representative to arrange a planning appointment.

<Insert any discussion points in relation to the Internal Review here>.

Action undertaken:

s100 letter has be sent via <email to <email address>/mail to applicant's address>.

If applicable add information about SMS notification sent for email outcome

Notification SMS Sent for s100 outcome email sent: <Yes on dd/mm/yyyy to applicant's name/authorised representative>

Refer to the outcome decision letter titled s100 internal review request <dd/mm/yyyy> for further information.

s100 – Outcome Recorded, Internal Review Closed

Original Access not met/Revocation decision made: <dd/mm/yyyy>

Internal review decision made: <dd/mm/yyyy>.

Any relevant information or documents have been uploaded to PACE.

I confirm all materials relevant to the decision, including the decision letter, are attached to the participant file on PACE.

s100 – Explanation of Decision

Date: <dd/mm/yyyy>

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to applicant's name/authorised representative>.

Contact with: <full name> <relationship – <applicant's name/authorised representative>.

Phone no: <number>

POI Confirmed: <Yes/No> <3 point security check – full name, address, DOB, email, organisation name, work email, work address, applicant's NDIS no., applicant's DOB.>.

<Attempt number>: Phone/Email contact made to discuss the request for Explanation of decision, no answer, <no message was left/a voicemail message was left with Review Officer's name.

Explanation of Decision:

Review request: (list the requests)

Decision made: (confirm/set-aside)

Explanation:

<Explanation provided to participant or authorised representative for outcome reached>

Would you like today's explanation of decision in writing? Y/N?

If not satisfied with the decision they may also apply to the Administrative Review Tribunal (ART) for a further external review within 28 days of receiving the s100 outcome letter.

More details about ART are included in the letter.

IRT - Access not met letter not on record

This article provides guidance for review officers on how to create an enquiry case requesting the Scheme Eligibility Branch (SEB) to upload the Access Not Met (ANM) to the PACE record.

Recent updates

16 September 2024

New guidance.

Create an enquiry case for the ANM letter to be uploaded

From the **Person Account**:

1. Select **Cases** tab.
2. Select **New**.
3. Select **Enquiry – Case for Enquiries**, then select **Next**.
4. In **Categorisation Type**, select **Access**.
5. In **Categorisation Category** select **Access Request**.
6. In **Categorisation Sub Category** select **Escalation Enquiry**.
7. In **Subject** add the following template: Remediation required by SEB for s100.
8. Select **Save**.
9. Navigate to the **Enquiry** tab and complete **Who is Making the Request details?**
 - For **Requested by** select **Participant**.
 - For **Case Origin**, select **Internal**.
10. Select **Next**.
11. Complete the Risk Matrix, then select **Next**.
12. In **Enquiry Notes** add the below template:
 - Access Not Met letter to be uploaded to documents.
13. In **Enquiry Outcome**, select **Re-assign this enquiry to another user**.
14. For **Case Re-assignment Reason**, select **Escalation**.
15. For **Select User or Queue**, select **Queue**.

16. For **Case Owner** enter **National Eligibility Escalation Queue** and select **Next**.

17. Review the details entered and select **Submit**.

Note: A **Next Action** may appear prompting for the enquiry case to be referred to the Access Request Routing Queue. Make sure case owner stays as National Eligibility Escalation Queue.

Once this enquiry is actioned and the letter is uploaded to **PACE**, the enquiry case will be reassigned back to the review officer.

If the enquiry case has not been actioned within 4 business days, refer to your team leader who will email [s47E\(d\) - certain operations of agencies](#) with the enquiry case number requesting an update.

IRT – Adding and linking documents to an internal review case

This article provides guidance for an internal review officer, business support officer, or participant support officer to:

- add documents to the internal review case.
- link documents to the internal review case.

Recent updates

10 November 2025

Title of article and headings updated.

Additional guidance added to clarify the distinct requirements for adding new documents versus linking pre-existing ones to an **Internal Review Case**.

Adding or linking documents to an internal review case

All pre-existing documents in **PACE** that are related to an internal review need to be linked to the **Internal Review Case** as a PDF. This includes any information you have considered and received as part of the internal review, for example, emails, reports, communications, or evidence.

Any pre-existing documents located in **SAP CRM** that are considered as part of the internal review do not need to be saved and uploaded as a PDF into the **Internal Review Case** in **PACE**.

When adding a new document to the **Internal Review Case**, the file must be named using the endorsed naming convention style:

Participant or Applicant surname, Participant or Applicant first name, NDIS number, Topic/Document Name/Document and Report Date.

For example, Smith James 4312345678 Acknowledgement Letter 2023-April-29 or Smith James 4312345678 Occupational Therapist Report 2022-April-29.

Note: Pre-existing documents located in the **Person Account** may not adhere to the endorsed naming conventions as they may have been uploaded by participants,

applicants, or staff from other branches. Whilst it is not mandatory to rename the pre-existing documents when linking them to the **Internal Review Case**, it is considered best practice to do so if the document is particularly significant or directly relevant to an adverse decision. In such cases, downloading, renaming, and re-uploading the file using the endorsed naming conventions is recommended.

All documents need to be checked for integrity issues. While some documents may have been previously checked, it is best practice to review all previous and new documentation. Refer to article [IRT – Checking for integrity](#).

Adding new documents to an internal review case

From the **Internal Review Case**:

1. Select the **Documents** tab.
2. From the **Documents** view, select **Add Documents**.
3. From the **Document Details** window, complete the relevant fields:
 - Select the relevant **Document Category**.
 - Select the relevant Document **Sub Category**.
 - Select either **Yes** or **No** for **Does this document contain any Personal identifiable information**.
 - Provide any further information in the **Description** free text field.
4. Select **Next**.
5. From the **Upload Document** window, Select **Upload Files** (you can also drag the relevant files).
6. Select **Save**.
7. Select **Close**.

Your document will now be added to the **Internal Review Case**.

Linking documents from the Person Account to an internal review case

From the **Internal Review Case**:

1. Select the **Documents** tab.
2. From the **Documents** view, select **Link Documents**.
3. From the **Link Documents** view, select the relevant document.
4. From the **Link Document** window, select **Link**.
5. Select **Close**. You will now automatically return to the **Link Document** view.
6. Select **Finish**.

Your document will now be linked to the **Internal Review Case**.

If linking more than one document, you must repeat the above process.

IRT - Allocating a request for action

This article provides guidance for a business support officer or participant support officer to allocate a request for action to a review officer.

Recent updates

1 July 2024

Allocating a request for action

Allocating a request for action

From the **Omni-channel**:

1. Set your status to **Available**.
2. Select the **Tick box** to select a **Request for Action** case. The **Request for Action** case will now be assigned and open automatically.
3. If there is new information since the creation of the **Request for Action** case, ensure the **Priority** level is correct.
 - Refer to article [Review the escalation prioritisation risk matrix](#) to identify the level of risk to the participant or applicant making the review request.
 - You can view the **Priority** level in the **Details** tab. If you change the priority level, you must log an **Internal Note**. Refer to article [Log an activity or internal note](#) for guidance on creating case activities.
 - If the priority level is **Medium** or **High**, you must alert the triage team leader.
4. The **Request for Action** case is now ready to assign to a review officer.
5. From the **Details** tab, select the **Parent Case** number. The **Feedback and Complaints** case will open automatically.
6. From the **Details** tab, select the **Parent Case** Number. The **Internal Review Case** will open automatically.
7. From the **Details** tab, take note of the **Case Owner**.
8. You will need to confirm the review officer is still within the Reviews Branch and is not currently on leave. You can check their current organisation and status via Microsoft Teams. If they are no longer in the Reviews Branch, or are on leave, contact the triage team leader.
9. Return to the **Request for Action** case, select the **Details** tab.

10. In **Case Owner**, select **Change Owner**.
11. From the **Change Case Owner** view, search users and select the review officer.
12. Select **Send notification email**.
13. Select **Change Owner**.

The **Request for Action** case has now been assigned to the review officer.

IRT - Checking for integrity

This article provides guidance for a review officer, business support officer or participant support officer to check the integrity of documents provided by a participant or applicant for an internal review.

Recent updates

1 July 2024

Removed Before you start section.

Checking for integrity issues

When completing an internal review, review officers may encounter fraudulent documents or information.

If a review officer believes fraudulent information has been provided, or there is a conflict of interest, the review officer must contact their line manager.

Examples of integrity issues

Identity or identity documents

For guidance about integrity issues relating to a person's identity or their identity documents, refer to article [Escalate an integrity issue about identity](#).

NDIS Application consent

- Applicant does not have capacity to provide consent and they do not have a legally authorised representative.
- Applicant signed the NDIS application form, however, the evidence indicates they do not have capacity to provide consent.
- Cut and pasted signatures in signature blocks within documents.
- Applications where communication has primarily been through a third party.

Treating professional information

- Unable to confirm a treating professional's qualifications and registration in [Australian Health Practitioner Regulation Authority \(External\)](#) (AHPRA).
- Error in the treating professional's title.
- Contact information for the treating professional is the same as the applicant. For example, phone number, email address.

- Contact information for the treating professional is personal, rather than business.
- A treating professional should not be using personal email addresses (for example: Gmail or Hotmail) due to privacy and security concerns.
- Address for treating professional is not a legitimate address. For example, address appears as another business when you search online through open-source information. Another way to check, is by using their Australian Business Number (ABN) and searching on the [Australian Business Register \(External\)](#) (ABR).

Signs evidence of disability may not be genuine

- No difference in handwriting between the applicant and treating professional section.
- Evidence of disability is all self-reported.
- Documents are unprofessional. For example, a change of language style within the document, lack of appropriate detail, spelling errors, inappropriate use of grammar.
- Name of another applicant appears in the document and/or misspelled names.
- Signs of text being removed, added, or changed within document. For example, white out used to remove important information.
- Inconsistent fonts, sizes, misalignment of text or paragraphs in documents.
- Poor character quality due to repeated scanning and photocopying. For example, document is hard to read.
- Partial documents from a treating professional.
- Documents can be edited.

Signs of altered documents

- Signs of text being removed, added, or changed within document. For example, white out used to remove important information.
- Inconsistent fonts, sizes, misalignment of text or paragraphs in documents.
- Poor character quality due to repeated scanning and photocopying. For example, document is hard to read.
- Partial documents from a treating professional.
- Documents can be edited.

- Changes in pronouns throughout document.

Signs of a conflict of interest

- Provider that gave evidence of disability may benefit from the applicant becoming a participant.
- Interactions indicate excessive and repeated contact from provider, and provider may benefit from the applicant becoming a participant.
- Treating professional may be related to the applicant. For example, the treating professional has a similar name.
- Applicant has made more than two applications to access the NDIS and changed the primary disability each time.

IRT - Communicate an outcome

This article provides guidance for a review officer to communicate the outcome of an internal review decision.

Recent updates

12 August 2024

Removal of instruction to send the Email and Mail SMS.

Before you start

You have completed the steps in the article [IRT - Enacting a planning review decision](#) or [IRT - Enacting an access or revocation review decision](#).

Communicate the outcome

The participant, applicant, or their authorised representative who requested the review will need to be informed of the outcome of the internal review.

This includes information about how and why the decision was made, where to seek further assistance if required and their review rights. You must document this contact as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

When contacting a participant, applicant, or authorised representative, you must first check their preferred communication method. Refer to article [Check a person's preferred contact method](#).

If making phone contact, refer to the [Guide - Conversation style guide](#) for guidance on how to have authentic and engaging conversations.

If during contact, there is a media threat, advise your line manager who will contact the Media Team and advise of any follow up action if required.

At times, a participant, applicant or their authorised representative may request a face-to-face meeting. As the Reviews Branch is a virtual team with a limited footprint, face-to-face meetings are not included as part of the standard service offering. Review officers can use telephone calls and emails to discuss the review with those who request them.

If a face-to-face meeting is requested, and after discussing and exploring other options,

such as engaging with advocates, authorised representatives, interpreting supports, and organising specific times to call, if it is determined a face-to-face meeting may be necessary, seek assistance from your line manager to identify a pathway forward.

Phone

1. Make one attempt to contact the participant or applicant. This attempt requires a pre-call SMS. Refer to article [IRT – Send an SMS](#). If contact is unsuccessful, and if the internal review is a priority or escalation, further outcome contact attempts may be required.
2. If contact is successful begin by:
 - stating your name, advising you are from the NDIA
 - verifying the identity of the person you are calling, refer to article [Understand how to verify identity documents](#).
3. Communicate the outcome of the decision by explaining:
 - what evidence was reviewed
 - the reasons for the decision, referencing the appropriate legislation and guidelines.
4. Continue the process by referring to one of the relevant headings below:
 - For planning internal review with an outcome of set-aside or vary
 - For planning internal reviews with an outcome of confirm
 - For access or revocation internal reviews with an outcome of set aside
 - For access or revocation internal reviews with an outcome of confirm.

For planning internal reviews with an outcome of set-aside or vary

1. Advise how the plan will be provided and what has changed in the plan. Provide implementation support information and check with the participant if they would like a plan implementation meeting.
2. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

For planning internal reviews with an outcome of confirm

1. Advise what is approved in the plan and provide information about Early Childhood Partners, Local Area Coordinators or Support Coordinators to help use their plan to access or find supports, including where it has been identified supports are best delivered by other services. Provide implementation support

information and check with the participant if they would like a plan implementation meeting.

2. Advise the participant of their Administration Appeals Tribunal (AAT) rights. AAT applications need to be lodged within 28 days of the internal review decision. Refer them to the AAT website or provide the AAT phone number if required (1800 228 333).
3. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

For access or revocation internal reviews with an outcome of set aside

1. Advise a planner will be in contact to assist in the planning process.
2. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

For access or revocation internal reviews with an outcome of confirm

1. Advise the applicant of their Administration Appeals Tribunal (AAT) rights. Explain that AAT applications must be lodged within 28 days of the internal review decision date. A Disability Advocate may also be able to help them with lodging an external review. Refer them to the AAT website or provide the AAT phone number if required (1800 228 333).
2. Where applicable, advise of mainstream services which may be able to assist them such as a General Practitioner care plan or early aged care assessment; their Local Area Coordinator office or Early Childhood Partner will be able to assist them.
3. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

Email

1. Send an email with the outcome internal review letter attached. Refer to articles [IRT – Sending an email](#) and [IRT – Sending a manual letter](#).

Mail

1. Send the outcome internal review letter to the participant or applicant's mailing address. Refer to article [IRT – Sending a manual letter](#).

Next steps

- Refer to article [IRT - Complete remaining closure tasks for an internal review](#).

IRT - Complete an access or revocation Internal Review Case

This article provides guidance for an internal review officer to complete internal review requests for access and revocation decisions. It also includes process steps for non-delegates including business support officers and participant support officers, troubleshooting tips and contact process in appendix.

You can also refer to the article [IRT - Access and revocation practice guide](#) which will support decision making. Internal review officers should always be considering relevant legislation and policy in the first instance when making decisions.

Recent updates

15 December 2025

Additional steps added at Making a set-aside decision.

Removal of Proposing a set-aside outcome section.

Removal of references to mandatory TAPIB requests.

Additional scenario added at Appendix 7.

Conduct a desktop review

An initial assessment of the internal review should be completed using the information available on the applicant's record in **PACE**.

From the **Person Account**:

1. Review and take note of any **Alerts** on the applicant's record and follow any instructions detailed within the alert.
2. Confirm the **Tier Role** shows **Person with a disability** and if it doesn't, send an email to the Intake and Triage Team, cc'ing in your team leader and include the applicant's name, their NDIS number, a description of the error and a request to change the tier role to **Person with a disability**.

Note: You will not be able to make a decision in **PACE** until the tier role has been corrected. This requires an ICT ticket to be lodged by the Intake and Triage team via the [ICT Service Desk](#).

Tier role status and Revocations: It is essential that IROs check both the **Leaving the NDIS Date** and the **Tier Role** status for each internal review of a

revocation decision. Please refer to the scenarios in **Appendix 7** to determine the appropriate steps to follow in these cases.

3. Within the **Details** tab, confirm the **Identity Confirmation Status**. Refer to article [Understand the identity confirmation status](#).

Note: Identity can also be confirmed and recorded within interactions from **SAP CRM**. If identity cannot be verified via a Centrelink check, complete steps to verify Age and Residency through a request for further information and/or completing an AIM referral. Refer to the heading **Referrals to the Access Integrity Management team** for information on AIM referrals. For more information on identity confirmation, refer to the article [IRT - Access and revocation practice guide](#).

4. Confirm a postal address is recorded for the applicant and/or authorised representative. To add or change information, refer to article [Update a person account](#).
5. Select the **Cases** tab and confirm there isn't concurrent cases open for a new access request or a review. New access requests can only be made once a review is complete.

Applicants have the option to withdraw the **Internal Review Case** or the **Access Request**. You must contact the applicant to confirm if they want to continue with the internal review or withdraw it and continue with the access request. Refer to the heading **Contact the applicant** and article [IRT- Withdraw or cancel an internal review](#).

6. Select the **Documents** tab to confirm the access not met (ANM) letter has been uploaded. If the letter isn't uploaded refer to article [IRT- Access not met letter not on record](#).
7. Select the **My Profile** tab, and from the **Disabilities** view and note the disabilities recorded.

Validate consent

From the **Person Account**:

1. Select the **Relationships** tab.

2. From the **Authorised Reps** tab, in **Roles and Relationships**, confirm the person who requested the review is listed as an **Authorised Person** with a **Status** of **Active**.
3. Select **Check Authorities** to make sure the **Submit request to review a decision made by the NDIA (S100)** box is selected. If a person has the correct roles and authorities, you can continue to the heading **Validate the request lodgement date**. If the person does not have the correct authorities, continue to **step 4**.

Note: select the **Relationships** tab for relationship details and parental responsibility when completing an internal review for a child.

4. Make one attempt to contact the applicant, or their authorised representative to seek consent for the internal review to proceed. This attempt requires an SMS and either a phone call or email. If contact is successful and consent is not provided, or contact is unsuccessful and you are unable to obtain consent, proceed to **step 6**.
5. Send the **Internal Review Unauthorised Request Letter**. Refer to the article [IRT – Sending a manual letter](#).
6. Withdraw the **Internal Review Case**. Refer to the heading **Withdraw an internal review case** in the article [IRT - Withdraw or cancel an internal review](#). As the unauthorised request letter is being sent, a withdrawal letter is **not required** to be sent.

Validate the request lodgement date

1. From the **Internal Review Case**, select the **Request** tab and confirm the **Date review request submitted** date is correct by comparing the date the NDIA received any written communication or recorded contact requesting the internal review.
2. If the **Date review request submitted** date was entered incorrectly, but still within 3 months of the original decision, you must withdraw the **Internal Review Case**. Refer to the heading **Withdraw an internal review case** in the article [IRT- Withdraw or cancel an internal review](#) and proceed to step 4. If the **Date review request submitted** date was entered incorrectly, and the timeframe to request an internal review has expired, refer to article [IRT- Miscategorised request](#).
3. Confirm the access not met or revocation **Decision Date** is correct and if not you must cancel the **Internal Review Case**. Refer to the heading **Cancel an internal**

review in the article [IRT- Withdraw or cancel an internal review](#) and proceed to step 4.

4. Re-create the internal review with the valid request date, refer to article [Submit a request for an internal review \(s100\)](#).

Check for legislation used in original decision

Check the **Access Decision Case** to see what legislation was used in the original decision.

From the **Access Decision Case**:

1. Select the **Decision** tab and check the legislation that was used at the time of the original decision. For review of a decision to revoke a person's status as a participant, apply the same legislation that was applied at the original eligibility reassessment decision.

Validate the request type

1. From the **Request** view, confirm the below details:
 - At **Decisions**, the **Decision User Code** does not show as NA or blank.
 - At **Requests for PACE Decisions**, the RORD line (**Name**) is not blank or does not have a forward slash / and the **Decision Type** is **Access**.
 - If the above details are incorrect, you must cancel the **Internal Review Case** and recreate it.
2. Refer to the heading **Cancel an internal review case** in the article [IRT- Withdraw or cancel an internal review](#) and proceed to step 3.
3. Re-create the internal review with the valid request date, refer to article [Create an internal review \(s100\) for all PACE decisions and SAP CRM access not met and statement of support decisions excluding compensation](#).

Technical advice

1. If Technical Advice and Practice Improvement Branch (TAPIB) input is required, refer to article [Create a technical advice case](#). If evidence indicates an applicant has a substantially reduced functional capacity but permanency of an impairment is not clear, it is recommended that IROs discuss this with their line manager before submitting a TAPIB request.

Note:

- if you need to create a **Technical Advice Case** you must create this from the **Internal Review Case**.
 - when creating a Technical Advice Case, within the **Case Information view**, in the **Subject Line** of the advice request, enter **s100**.
2. Wait for TAPIB to action the **Technical Advice Case** before progressing with making a decision.

Revocation cases only - Confirming Requests for PACE Decisions

Within the **Requests for PACE Decisions** view, confirm the correct **Name** is displaying.

From the **Internal Review case**:

1. Select the **Decisions** tab.
2. In the **Requests for PACE Decisions** view, if the **Name** field displays as **Eligibility Reassessment**, the **Internal Review Case** will need to be cancelled and recreated. Refer to **Appendix 4 – Cancel and recreate a revocation case**.

Scheme integrity

When completing the desktop review, make sure you review and check all documents for integrity issues. Refer to article [IRT – Checking for integrity](#).

If there is scheme integrity information, such as an **Internal Note** or an **Alert**, review the information and contact your team leader if guidance is required.

Referrals to the Access Integrity Management team

The Access Integrity Management (AIM) team can perform verification checks on all access not met and revocation internal reviews.

Identity Verification – Applies to set aside internal review decisions only

If you identify concerns surrounding the identity verification steps taken you must submit an enquiry to the AIM team through the **Refer to AIM** button in **PACE**.

Note: this referral should be made prior to completing the set-aside outcome.

From the **Person Account**:

1. Select the drop down menu located on the **Person Account** banner.
2. Select **Refer to AIM**.
3. From the **Referral Reason** drop-down menu, select the appropriate reason.
4. Complete the **Other details** section with concerns and information relating to identity verification.
5. Select **Next**.
6. Do not proceed with the decision until a response is received.

Residency – Applies to all internal review decisions

If there are concerns regarding residency status, referrals to the AIM team to request validation from the Immigration database are to be made via the [AIM Hub](#).

1. Open to the [AIM Hub](#).
2. Select the **Integrity & Residency Enquiries** button
3. Under the heading **What is your role?** select **IRT Access**.
4. Select your enquiry type and complete the applicable fields.
5. Once the enquiry has been submitted AIM will review the enquiry and respond via email.

Validating evidence of a disability – Applies to all internal review decisions

If there are concerns surrounding validating evidence of a disability, referrals to the AIM team are to be made via the [AIM Hub](#).

1. Open the [AIM Hub](#).
2. Select the **Integrity & Residency Enquiries** button
3. Under the heading **What is your role?** select **IRT Access**.
4. Select your enquiry type and complete the applicable fields.

5. Once the enquiry has been submitted AIM will review the enquiry and respond via email.

Contact the applicant

You will need to contact the applicant to clarify their request and gather additional details.

When completing an internal review, the applicant must be part of the decision-making process.

When contacting an applicant or authorised representative, you must first check their preferred communication method and authorisations. Refer to the article [Check a person's preferred contact method](#) for further information.

When contacting an applicant, or authorised representative, you must also log an Activity. Activity types include:

- SMS messages
- phone calls
- emails
- face-to-face meetings.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

As the Reviews Branch is a virtual team with a limited footprint, we do not include face-to-face meetings as part of the standard service offering. If a face-to-face meeting is requested, the review officer must discuss and explore other options, such as engaging with advocates/authorised representatives, interpreting supports, and organising specific times to call, it is determined that a face-to-face meeting may be necessary, seek assistance from your line manager to identify a pathway forward.

If during contact, there is a media threat, advise your line manager who will contact the Media Team and advise of any follow up action if required.

Phone

If the applicant's preferred contact method is by phone:

1. Make one contact attempt. This attempt requires a pre-call SMS. Refer to **Appendix 1 – SMS process**. If contact is unsuccessful, leave a voicemail (if possible) and refer to the article [IRT – Unable to contact process](#).
2. If contact is successful begin by:
 - Stating your name, advising you are from the NDIA.
 - Verifying the identity of the person you are calling. Refer to article [Understand how to verify identity documents](#).
 - Acknowledging the type of internal review.
 - Listing the documents received that will be considered as part of the internal review.
 - Confirming whether the applicant would like to supply further information, and if so, refer to the article [IRT – Requests for further information](#). If they do not wish to provide further information, advise them the review will progress based on the available information.
3. Confirm their preferred method of contact for the internal review outcome notification.
4. Remind the applicant of the support pathways available via their Local Area Coordinator, Early Childhood Partner and/or Support Coordinator, the contact centre, and local NDIS office. This will assist with connecting to mainstream supports and gathering and submitting information for their internal review.

Email

If an applicant's preferred contact method is email:

1. Send an email. Refer to **Appendix 2 – Email process**.
2. The next business day after the introduction email timeframe has lapsed, if there has been no response, proceed with the review based on the information available.

Mail

If an applicant's preferred contact method is mail:

1. If appropriate send the **Internal Review Request for Information Letter** to the applicant's listed address and request a reply within 14 days. Refer to the article [IRT – Sending a manual letter](#).
2. The next business day after the request for further information letter timeframe has lapsed, if there has been no response, proceed with the review based on the information available.

Adding evidence to the internal review case

From the **Internal Review case**:

1. Navigate to the **Evidence** tab and select **Add Evidence**.
2. Select the **Evidence Type** and **Document Type**, then select **Next**.
3. Complete the mandatory fields.
4. Complete **Evidence description** using the following format:

Recipient surname, Recipient first name, NDIS number, Letter Type, Date
For example, Jones Ruby 888888888 Name of document, 2024-Mar-29

Note: for **Health Professional Details** AHPRA Number. Refer to website [Australian Health Practitioner Regulation Agency \(external\)](#).

5. Select the document from **Attachments** list, then select **Submit**.
6. Select **Link to case**.

Repeat the above steps until all evidence used in the decision is recorded individually.

Review the evidence

Evidence in both **SAP CRM** and **PACE** needs to be reviewed.

If documents are in **SAP CRM**:

- they do not need to be transferred to **PACE**

- an internal note must be created advising the documents are located in **SAP CRM**. Refer to article [Log an activity or internal note](#).

During your review of the evidence, you may determine that additional information is needed, refer to article [IRT – Requests for further information](#).

If the original decision was made post 3 October 2024, you must consider whether the applicant meets the Disability (s24) requirements, Early Intervention (s25) requirements, or both.

Enacting an access or revocation review decision

Making a confirmed decision

From the **Internal Review case**:

1. Select the **Decision** tab.
2. From **Request for PACE Decisions**, select **Pending Decision**.
3. Select **Make a Decision**.
4. From the **Decision** view, complete the mandatory fields for decision.
5. Select **Next – Justification**.
6. From the **Justification** view, select relevant **Justification**.
7. Select relevant **Sub-Justifications**. Add any further **Justifications** or **Sub-Justifications** by selecting **Add**.
8. Record the reasoning for each Sub-Justification in the **Explanation** section.

Note: select all **Justifications** and **Sub-Justifications** where Disability (s24) and Early Intervention (s25) has not been met.

9. Select **Next – Evidence**.
10. From the **Evidence** view, complete mandatory fields for evidence.
11. Select **Next**.
12. From the **Confirmation** view, select **Done**.
13. The **Decision** will now show as a **Drafted decision**.

Note: if the **Decision** remains as **Pending Decision** rather than **Drafted Decision**, or the **Justifications** and **Sub Justifications** do not display, refer to **Appendix 5 – Confirmed decisions**.

Note: if the **Justifications** duplicate, a [3P Support Suite ticket](#) will need to be raised. When submitting the ticket via the Service Desk you will need to select the option to Share the ticket for tracking. Refer to your team leader for who this is to be shared with.

14. **For non-delegates**, progress to the heading, **Non delegate decisions** to send a drafted decision for approval.
15. Return to the **Internal Review case** and from the **Decisions** tab select **Submit Decisions**.
16. From the **Confirmation** view, select **Next**.
17. From the **Summary** view, select **Done**. The decision will now show as a Completed decision.
18. From the **Decision** tab, select **Confirm manual letter has been sent**.
19. From the **Confirmation** view, select the appropriate option.
20. Select **Next**.
21. From the **Decision Letter Sent** view, select **Next**. You will now be returned to the **Internal Review Case**.
22. Send the decision outcome letter, refer to article [IRT – sending a manual letter](#).
23. The applicant or their authorised representative who requested the review will need to be informed of the outcome. Refer to **Appendix 3 – Communicate an outcome for guidance on communicating the decision outcome**.

Complete closure tasks for the internal review

From the **Internal Review Case**:

1. From the **Log Activity** view, create an Internal Communication to note the decision has been made using the correct template from [IRT- Access and revocation request internal note templates](#). Refer to article [Log an activity or internal note](#) for guidance on creating case activities.
2. From the **Details** view, in the banner, select the **Complete Case** button.
3. At **Closure Reasons** options, from the drop down menu, select **Completed**.

4. Closure comments can be added to advise of a confirmed decision
5. Select **Confirm** and then select **Done**.
6. From the **Person Account** navigate to the **Cases** tab and check **Open Cases** to see if any other cases relevant to the internal review have a status of **New** or **In Progress**. These cases can be **Closed** or marked **Completed** if there is no further action required.

Making a set aside decision

From the **Person Account**:

1. Confirm the correct **Tier Role** is reflected.

Note: In the majority of cases, the **Tier Role** should reflect **Person with a Disability**, however in some revocation scenarios the **Tier Role** may still reflect **Participant** or **N/A**. Refer to **Appendix 7 - Tier role status in revocation internal review decisions** for guidance on correcting the **Tier Role** before progressing to the next steps.

2. Complete a **Streaming Case**. Refer to article [Complete a streaming case \(streaming and restreaming\)](#).

From the **Internal Review Case**:

1. Select the **Decision** tab.
2. From the **Decision** tab select **Pending Decision** from **Request for PACE Decisions**.
3. Select **Make a Decision**.
4. From the **Decision** view, complete the mandatory fields.
5. Select **Next – Justification**.
6. From the **Justification** view, select the relevant **Justification**.
7. Select the relevant **Sub-Justification**. Add any further **Justifications** or **Sub-Justifications** by selecting **Add**.
8. Record the reasoning for each Sub-Justification in the **Explanation** section.

Note: select all **Justifications** and **Sub-Justifications** where Disability (s24) and Early Intervention (s25) has been met.

9. Select **Next – Evidence**.
10. From the **Evidence** view, complete mandatory fields for evidence.
11. Select **Next**.
12. From the **Confirmation** view, select **Done**. The decision will now show as a Drafted decision.

Note: if the justifications duplicate a [3P Support Suite ticket](#) will need to be raised. When submitting the ticket via the Service Desk you will need to select the option to **Share** the ticket for tracking. Refer to your team leader for who this is to be shared with.
13. Return to the **Internal Review Case** and from the **Decisions** tab select **Submit Decisions**.
14. From the **Confirmation** view, select **Next**.
15. In the **Summary** view, select **Done**. The decision will now show as a Completed decision.
16. From the **Decision** tab, select **Confirm manual letter has been sent**.
17. From the **Confirmation** view, select the appropriate option.
18. Select **Next**.
19. From the **Decision Letter Sent** view, select **Next**. You will now be returned to the **Internal Review Case**.
20. Select the **Case Activity** tab and review the list of **Open Activities**.

- If there are no open activities, proceed to **step 21**.
- If you identify an open **Participant has left the NDIS** activity:
 - Select the **Participant has left the NDIS** activity hyperlink in the subject field.

- Select **Mark Complete**.
- Confirm this updates to **Completed**.
- Select the refresh icon.

The **Participant has left the NDIS** activity should no longer appear in the list of open activities.

- Return to the **Decision** tab, proceed to **step 21**

21. From the **Decision** tab, select **Create Access Decision Case**.
22. Select **View Child Case**. The **Access Decision Case** will open automatically.
23. From the **Access Decision Case**, update the case status from New to **In Progress** by selecting the **Progress Case** button.
24. From the **Access Decisions Case** view, select the **Decision** tab.
25. From the **Pre-Assessment** view, select the **Legislation version that will be used for the access decision** from the drop-down options by identifying the date of the original access request.

Note: when setting aside a decision to revoke a person's status as a participant apply the same legislation that was used in the original eligibility reassessment decision not the date of the original access met decision.

- If the date of the original access request is before 3 October 2024, select **National Disability Insurance Scheme Act 2013**.
- If the date of the original access request is on or after 3 October 2024, select - **National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Bill 2024**.

26. Complete the mandatory fields for **Further Information** and **Identity Evidence**.
27. From **Disability Evidence**, confirm that you have verified the evidence of disability. Once confirmed, the **Impairment Assessment** will appear.
28. Complete the **Select assessed Impairment field** and add all impairments that meet the disability or early intervention criteria. If the criteria has been met for

multiple impairments, select the **Add** button to add details of any further impairments.

29. Complete all remaining mandatory fields.

30. Select **Next**.

31. From the **Age & Residency Sub Criterion** view complete the mandatory fields.

32. Select **Next**.

33. From the **Early Intervention Sub Criteria view** complete the mandatory fields.

34. Select **Next**.

35. From the **Disability Sub Criteria** view complete the mandatory fields.

36. Select **Next**.

37. From the **Decision Main Criteria** screen, complete the relevant step depending on the legislation used:

- **National Disability Insurance Scheme Act 2013**, make sure the **Overall Access Decision** is **ACCESS MET**. You can return to the previous screens by selecting **Back** if changes are required.
- **National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Bill 2024.**, you must select one or more of the related impairments that meet the requirements for disability, early intervention, or both. For guidance on how to complete this, refer to **Appendix 8 - Impairment Categories**. Under this legislation, participants will receive an automatically generated **PACE** letter. For decisions where the original access request was made on or after 1 January 2025, the letter will include impairments categories information. The impairments selected at this step will be included in the impairments categories information.
- Make sure the **Overall Access Decision** is **ACCESS MET**. You can return to the previous screens by selecting **Back** if changes are required.

38. Select **Approve**. If you have made the decision under the **National Disability Insurance Scheme Act 2013**, an automatically generated letter will not be issued, and **steps 42-47** will not be relevant.

39. From the **Recipient Details** view, select **Next**.

40. From the **Preview Options** view, under **Do you want to preview the document before sending it?**, select **Yes**. Under **Select a Recipient** for preview, select the appropriate option.
41. From the **Preview Document** view, review the document and select **Next**. You can return to the previous screens by selecting **Back** if changes are required.
42. From the **Correspondence Confirmation** view, select **Submit Correspondence**.
43. From the **Correspondence Summary** view select **Next**.
44. From the **Confirmation** view select **Done**.

The **Access Decision Case** status will automatically change to **Closed**. A **Plan Approval Case** will be automatically generated.

Note: if the plan approval case does not generate, or the review does not automatically close a [3P Support Suite ticket](#) will need to be raised. When submitting the ticket via the Service Desk you will need to select the option to **Share** the ticket for tracking. Refer to your team leader for who this is to be shared with.

45. Send the decision outcome letter, refer to article [IRT – sending a manual letter](#).
46. The applicant or their authorised representative who requested the review will need to be informed of the outcome. Refer to **Appendix 3 – Communicate an outcome** for guidance on communicating the decision outcome.

Note: If making a set aside for a revocation decision, you must action the **Leaving the NDIS Case**. To action the **Leaving the NDIS** case, follow the steps in **Appendix 6 – Actioning an open Leaving the NDIS Case**.

Update the Disabilities tab

1. From the **Person Account**, select **My Profile**.
2. Select the **Disabilities** tab.
3. Review **Active status** to see what disabilities are current.

If required, use article [Update a person account](#) to:

- add any disabilities that meet the eligibility requirements for disability, early intervention, or both.
- remove any disabilities that don't meet the eligibility requirements by adding an **End Date**.

Non-delegate decisions process

Before completing any actions in **PACE**, non-delegates must determine if they are proposing a set aside or confirmed outcome. The non-delegate must complete both the appropriate outcome letter and basis of decision, which must then be uploaded to the Microsoft Teams folder.

The non-delegate must update the subject of the **Internal Review Case** to **ready for delegate**.

If proposing a set aside outcome, the non-delegate must escalate this to their team leader via email. If the team leader agrees with the set aside proposal, the decision will then be sent to the lead delegate to finalise.

Once the letter and basis of decision has been uploaded to the Microsoft Teams folders, the non-delegate must change to **Case Owner** to their team leader.

Appendix 1 – SMS Process

All contact methods and attempts require internal review officers to send a text message to the applicant.

When sending an SMS:

- Make sure the SMS is sent one hour before contact is made.
- Consider appropriate contact times based on varying time zones, gazetted public holidays, and other relevant factors such as school drop off and pick up times.

For every SMS sent, make sure you log an activity to record your SMS contact and include the following:

- which SMS template was sent
- why the SMS was sent
- details of who the NCC need to direct the call to if the SMS sent asks the person to call us.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

Send an SMS

In **PACE**:

1. From **Open Cases**, select the case you want to send an SMS from.
2. From the **Activity** panel, select **Send SMS**. The **Mobile Number** will populate from the person account.

Note: if you're sending an SMS from the case you're working in, it will use the mobile number on the person account linked to that case. If the person has an authorised representative, the mobile number won't populate from the authorised representative's account. For more information regarding this, refer to the heading **Understand who an SMS will send to** in the article [Send an SMS in PACE](#).

3. At **Select an SMS Template**, select the type of SMS you want to send from the drop down list.
 - Unable to contact
 - We are going to call you.

Note: You have an appointment and You have missed an appointment SMS templates are not used in the internal review process.

4. Select **Next**.
5. Review the message in **Preview of SMS**. If the message:
 6. Is correct, select **Send SMS**. Progress to **step 6**.
 7. Needs to be changed, select **Select another template**. Go back to **step 3**.
 8. Once the SMS has successfully been sent, select **Finish**.

Appendix 2 – Email process

To send an email in **PACE**, navigate to the **Activity** window:

1. Select the **Email** tab.
2. In **From**, select the account you would like to send your email from.

Note: applicant contact must be sent from enquiries@ndis.gov.au.

3. In **To** enter the email address, or addresses, you would like to send your email to. You may select the **Cc** button if you would like to add the **Cc** field.
4. In **Sensitivity Label Category**, select the appropriate classification.
5. In **Subject**, enter the subject of your email.
6. Complete body of the email, using the [IRT – Internal review email templates](#) as required.
7. Select **Send**.
8. Document the email contact as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

Appendix 3 – Communicate an outcome

The applicant, or their authorised representative who requested the review will need to be informed of the outcome of the internal review. This includes information about how and why the decision was made, where to seek further assistance if required and their review rights. You must document this contact as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

When contacting an applicant, or authorised representative, you must first check their preferred communication method. Refer to article [Check a person's preferred contact method](#).

If making phone contact, refer to article [Guide - Conversation style guide](#) for guidance on how to have authentic and engaging conversations.

Phone

1. Make one attempt to contact the applicant. This attempt requires a pre-call SMS. Refer **Appendix 1 – SMS process**. If contact is unsuccessful, and if the internal review is a priority or escalation, further outcome contact attempts may be required.

2. If contact is successful begin by:

- stating your name, advising you are from the NDIA
- verifying the identity of the person you are calling, refer to article [Understand how to verify identity documents](#).

3. Communicate the outcome of the decision by explaining:

- what evidence was reviewed
- the reasons for the decision, referencing the appropriate legislation and guidelines.

4. Continue the process by referring to one of the relevant headings below:

- For access or revocation internal reviews with an outcome of set aside
- For access or revocation internal reviews with an outcome of confirm.

For access or revocation internal reviews with an outcome of set aside

1. Advise a planner will be in contact to assist in the planning process.
2. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

For access or revocation internal reviews with an outcome of confirm

1. Advise the applicant of their Administration Review Tribunal (ART) rights. Explain that ART applications must be lodged within 28 days of the internal review decision date. A Disability Advocate may also be able to help them with lodging an external review. Refer them to the ART website or provide the ART phone number if required (1800 228 333).
2. Where applicable, advise of mainstream services which may be able to assist them such as a General Practitioner care plan or early aged care assessment; their Local Area Coordinator office or Early Childhood Partner will be able to assist them.

3. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

Email

Send an email with the outcome internal review letter attached. Refer to **Appendix 2 – Email process** and article [IRT – Sending a manual letter](#).

Mail

Send the outcome internal review letter to the applicant's mailing address. Refer to article [IRT – Sending a manual letter](#).

Appendix 4 – Cancel and recreate a revocation case

To cancel the **Internal Review Case**:

1. From the **Details** view, in the banner, select the **Cancel Case** button.
2. From the **Closure Reason** drop down select **Cancelled-Other**.
3. In the **Closure Comment** field enter closure comments
4. Select **confirm**.

The **Internal Review** has now been cancelled.

To create a new **Internal Review Case**:

1. From the **Person Account**, select the **Cases** tab, then select **New**.
2. Select **Internal Review** then select **Next**.
3. In Categorisation Type select Scheme Eligibility.
4. From the Initiate Request view, select Date review request received.
5. Select the option for **Who is requesting review**.
6. From the Decisions view, select Decision from SAP CRM.
7. At the **Type** drop-down list, select **Access**.
8. Select **New**.
9. At the **Decision Name** drop-down select **Access Revoked** and complete remaining mandatory fields.

10. Select **Save**.
11. Select **Next**.
12. At Reason for review drop-down select Don't agree with original decision.
13. In the **Additional Information** field add the below template:

Eligibility Reassessment revoked dd/mm/yyyy

14. Select **Save**, then select **Next**.
15. Select **Add** or **Link Documents**, then select **Next**.

Note: if adding documents, they must be saved using the following format:

Recipient surname, Recipient first name, NDIS number, Letter Type, Date

For example, Jones Ruby 88888888 Name of document, 2024-Mar-29

16. Select **Next**.
17. Complete **Risk Matrix** then select **Next**.
18. From the Submit Internal Review Request view, add in any Call Notes from original Internal Review Case.
19. Select **Submit**.

Note: The **Status** of the case will show as **New**. Assign the **Internal Review Case** to yourself by selecting **Change Case Owner**. The **Internal Review** case is now created.

Appendix 5 – Confirmed decisions

If the **Decision** remains as **Pending Decision** rather than **Drafted Decision**, or the **Justifications** and **Sub Justifications** do not display, complete the below steps:

1. From **the Decision** view, complete the mandatory fields then select **Next – Justification**.
2. From the **Justification** view, select only the first relevant **Justification**.
3. Select only the first **Sub-Justification**.
4. Select Next **Evidence**.

5. From the **Evidence** view, complete mandatory fields for evidence then select **Next**.
6. From the **Confirmation** view, select **Done**.
7. The **Make a Decision** will now show as **Modify a Decision** which you can now select.
8. Add any further **Justifications** or **Sub-Justifications** by selecting **Add**.

Note: select all **Justification** and **Sub-Justification** where disability (s24) and early intervention (s25) has not been met.

9. Select **Next – Evidence**.
10. From the **Evidence** view, complete mandatory fields for evidence then select **Next**.
11. From the **Confirmation** view, select **Done**.
12. Return to the heading **Making a confirmed decision** and complete the remaining steps in the process.

Appendix 6 – Actioning an open Leaving the NDIS case

For set aside revocation decisions only, internal review officers will now identify one of three scenarios to be able to action an open **Leaving the NDIS Case**. Scenarios 1 and 2 apply when the date in the **Leaving the NDIS Case** has already surpassed, for example, typically 28 days or more. Scenario 3 applies when the **Leaving NDIS Case** date has not been reached, for example, it is less than 28 days.

Scenario 1: Leaving the NDIS Case has been open for more than 28 days and the final checklist is greyed out and no submit button is available

These leaving cases will not be actionable by staff and require Office of the Chief Information Officer (OCIO) support by raising a ticket via the 3P Support Suite, as required.

Scenario 2: Leaving the NDIS Case has been open for more than 28 days and the final checklist has not been completed and the submit button is available

These leaving cases will be actionable by staff and will not require OCIO closure support. Before completing the set aside review outcome in PACE, close the **Leaving the NDIS Case** by answering each checklist question with not applicable (n/a) and select submit. Refer to article [Close the leaving case](#) for further information.

Scenario 3: Leaving the NDIS Case has been open for less than 28 days.

The **Leaving NDIS Case** needs to be cancelled before the internal review set aside decision is made. Only OCIO can cancel the case in this scenario. An escalation email with ticket details will need to be sent to your assistant director using the below template, for OCIO to cancel the in-flight leaving case. This will ensure that the participant is not re-revoked after the internal review has been completed. Raise a ticket via the [3P Support Suite](#).

Service Delivery Hypercare Escalation Request template

Information type	Details
Participant Name	<Insert the participants name>
NDIS Number	<Insert the NDIS number>
PACE Case Number	<Insert the PACE Case number>
PACE Case Type	<Insert the PACE Case Type>
Issue	Leaving NDIS Case needs to be cancelled before the internal review set aside decision is made (Leaving case open for less than 28 days).
Escalation Request	<Enter details regarding the escalation request>
PSDS/PSS Number	<Enter the PSDS/PSS number>
ICTSD Number	<Enter the ICTSD number>
Rise Type	<Enter the risk type>
Additional Information	<Enter any relevant additional information>
Ministerial or Complaints involvement?	<Enter relevant information regarding and ministerial or complaints involvement>

Appendix 7 - Tier role status in revocation internal review decisions

It is essential that IROs check both the **Leaving the NDIS Date** and the **Tier Role** status for each internal review of a revocation decision, as the tier role status may need to be updated before the case can be progressed. Please refer to the following scenarios to determine the appropriate steps to follow.

Scenario one: Internal Review case to be actioned before the leaving the NDIS date has passed

If the IRO is making a confirm revocation decision and the **Leaving the NDIS Date** has not yet passed, they should proceed with finalising the decision and complete the **Internal Review Case** in the system.

If the IRO is making a set-aside revocation decision and the **Leaving the NDIS Date** has not yet passed, they must raise a ticket with [PACE Platform Support](#). Mention [PSS-18395](#) MASTER ISSUE when asked if it is related to an existing defect. If escalation is required, IROs are to escalate to their Assistant Director or Team Leader as per the escalation process as outlined below. The Internal Review Case is unable to be completed until the ticket has been finalised.

Scenario two: Internal Review case to be actioned after the leaving the NDIS date has passed, and the tier role is still 'Participant'

If the **Leaving the NDIS Date** has passed and the tier role is still displaying as **Participant**, a ticket must be raised with [PACE Platform Support](#) and escalated in all circumstances. Mention [PSS-18395](#) MASTER ISSUE when asked if it is related to an existing defect.

For both confirm and set-aside revocation decisions, the IRO is required to raise a ticket with [PACE Platform Support](#), and escalate to their Assistant Director or Team Leader, in line with the escalation process as outlined below.

The **Internal Review Case** cannot be finalised in **PACE** until the ticket has been resolved, and the **Tier Role** has been updated to reflect **Person with a Disability**.

Scenario three: Internal Review case will be actioned after the leaving the NDIS date has passed, the tier role is 'Person with a disability' and the leaving the NDIS case is open

If the IRO is making a confirm revocation decision and the **Leaving the NDIS date** has passed, they should proceed to finalise the decision and complete the **Internal Review Case** in the system.

If the IRO is making a set-aside revocation decision, they must first complete the checklist within the **Leaving the NDIS Case**. If the checklist is greyed out and the submit button is unavailable, a ticket must be raised with [PACE Platform Support](#). Mention [PSS-18395](#) MASTER ISSUE when asked if it is related to an existing defect.

The **Internal Review Case** cannot be finalised until the ticket has been resolved and the **Leaving the NDIS Case** has been closed.

Scenario four: The tier role status is N/A

If the IRO is making a set-aside revocation decision, and the **Tier Role** is **N/A**, they must first update the **Tier Role** to **Person with a Disability** before the **streaming** process can be completed.

To update the **Tier Role**:

From the **Person Account**:

1. Select the **Cases** tab, then select **New**.
2. Select **Update Person Account**, then select **Next**.
3. Complete the mandatory fields, then select **Save**. The **Update Person Account** case will open with a status of **New**.
4. Select the **Update Person Account** tab.
5. At **Who is Making the Request?**, select from the drop-down options, then select **Next**.
6. At **What would like to Update?**, select the **Person Details** checkbox, then select **Next**.
7. From the **Tier Role** drop-down menu, select **Person with a Disability**, then select **Next**.
8. Select **Submit**.
9. Confirm that the **Update Person Account** case status is now **Closed**, and the **Tier Role** on the **Person Account** reflects **Person with a Disability**.
10. Return to **Making a set aside decision** section and proceed with the remaining steps commencing at **step 2** – Complete a **Streaming** case.

Note: IROs are authorised to update the Tier Role from N/A to Person with a Disability via an Update the Person Account case only in this specific circumstances. For all other situations where the **Tier Role** is incorrect in a revocation internal review decision, the matter must be managed in accordance with the other scenarios outlined in **Appendix 7**.

PACE Platform Support Ticket Escalation Process for Tier Role defects

Where escalation regarding a **Tier Role** defect is required, IROs must first raise a ticket with [PACE Platform Support](#). Once the ticket has been submitted, it should be promptly escalated to their Assistant Director or Team Leader.

When escalating the ticket, ensure the following details are included:

- Participant name and NDIS number.
- PACE case number and case type (if applicable).
- A brief summary of the issue, the impact on case progression, and the reason for escalation.
- The Leaving NDIS date.
- PSS/PSDS/PPP number.
- ICT-SD number.
- Any additional information or relevant participant risk factors.
- Ministerial or complaints involvement (if applicable).
- Complaint PACE case number (if applicable).

Ticket Escalation Process for a Tier Role defect (AD/TL only)

To escalate a PACE Platform Support ticket that has been lodged by an IRO for a **Tier Role** defect issue, TLs and ADs are to complete the [Tier Role Status – Internal Review Decisions escalation spreadsheet](#).

Note: This escalation process applies to **Tier Role** defect issues only. All other escalations should continue to follow the usual escalations processes.

Appendix 8 – Impairment Categories

1. Open article [Impairment categories guide](#) to complete the next steps.
2. Search the **ICD 10 Code** or **Condition** name for all impairments that meets the requirements for disability, early intervention, or both.
3. Note the **Highly likely impairment category column**.
4. Consider if any of the Commonly associated impairment categories in the guide apply based on the evidence provided:

- Intellectual
- Cognitive
- Neurological
- Sensory
- Physical
- Psychosocial
- For more information, go to section **What are the categories of impairments?** in [Our Guidelines – Applying to the NDIS \(external\)](#).

Note: this is important as we only fund NDIS supports for eligible impairments that meet the requirements for disability, early intervention or both.

5. If the early intervention requirements are met, at **Which of the following meet the eligibility criteria for access?**, select options that apply for all eligible impairments that met the early intervention requirements:

- Intellectual
- Cognitive
- Neurological
- Sensory
- Physical
- One or more impairments to which a psychological disability is attributable
- Developmental Delay.

Note: the options you select will populate the impairments categories information attached to the Access Met letter.

6. If the disability requirements are met, at **Which of the following meet the eligibility criteria for access?**, select options that apply for all eligible impairments that met the disability requirements:

- Intellectual
- Cognitive
- Neurological
- Sensory
- Physical
- One or more impairments to which a psychological disability is attributable.

Note: the options you select will populate the impairments categories information attached to the Access Met letter.

IRT – Complete remaining closure tasks for an internal review

This article provides guidance for a review officer to make sure all tasks are closed on a completed internal review case.

Recent updates

20 January 2025

Updated closure steps for completing a case.

Before you start

You have completed the steps in the article [IRT - Communicate an outcome](#).

Record the implementation plan meeting offer

If an outcome phone call has not been made, or was unsuccessful, you must check if a reply to the plan implementation meeting offer has been received. If there has been a reply, refer to article [Record the implementation meeting offer outcome](#).

Close the internal review

If you have completed a **Budget Update** or **Plan Approval case** as part of the internal review decision, the **child case** and **Internal Review case** will have moved to the **completed case stage** automatically. Please only complete step one to create an **Internal Communication** to note the decision has been made. For **confirm decisions**, you will need to complete all steps below.

From the **Internal Review Case**:

1. From the **Log Activity** view, create an **Internal Communication** to note the decision has been made. Refer to article [Log an activity or internal note](#) for guidance on creating case activities. Use the correct template from either:
 - [IRT - Access and revocation internal note templates](#)
 - [IRT - Planning request internal note templates](#).

2. Once you have completed the decision and sent the outcome letter, you can now complete the Internal Review case.
3. From the Decision screen, click the **Complete** case button.
4. A close case box will appear. In the Closure Reason drop down menu, select **completed**.
5. Select the **Confirm** button.
6. A message will appear advising the case has been completed successfully. Select **Done**. The **Internal Review case** will now be completed.

IRT - Conduct a desktop review

This article provides guidance for an internal review officer, business support officer, or participant support officer to determine what information and documents need to be reviewed as part of the desktop review.

Recent updates

1 December 2025

Before you start section updated.

Before you start

You have completed the steps in the article [IRT - Self-allocate an internal review case](#).

Internal Review Officers should check if they were involved in the reviewable decision or any prior internal reviews. The decision maker can't complete a review if they were involved in the reviewable decision. If this is the case, discuss reallocation with your team leader.

Conduct a desktop review

An initial assessment of the internal review should be completed using the information available on the participant or applicant's record in **PACE**.

Validate consent

1. Navigate to the **Person Account**.
2. Select the **Relationships** tab.
3. From the **Authorised Reps** tab, in **Roles & Relationships**, confirm the person who requested the review is listed as an **Authorised Person** with a **Status** of **Active**.
4. Select **Check Authorities**.
5. Make sure the **Submit request to review a decision made by the NDIA (S100)** box is selected. If a person has the correct roles and authorities, you can continue to the heading **Validate the request lodgement date**. If the person does not have the correct authorities, continue to **step 6**.
6. Make one attempt to contact the participant, applicant, or their authorised representative to seek consent for the internal review to proceed. This attempt requires an SMS and either a phone call or email. If contact is successful and

consent is not provided, or contact is unsuccessful, and you are unable to obtain consent, proceed to **step 7**.

7. Send the **Internal Review Unauthorised Request Letter**. Refer to the article [IRT – Sending a manual letter](#).
8. Cancel the **Internal Review Case**. Refer to the heading **Cancel an internal review case** in the article [IRT - Withdraw or cancel an internal review](#).

Validate the request lodgement date and type

1. Check the request date was entered correctly by comparing the date the NDIA received any written communication or recorded contact requesting the internal review.
2. If the request was entered incorrectly, but still within 3 months of the original decision, you must cancel the **Internal Review Case**. Refer to the heading **Cancel an internal review case** in the article [IRT - Withdraw or cancel an internal review](#) and proceed to **step 2**. If the request was entered incorrectly, and the timeframe to request an internal review has expired, refer to article [IRT – Miscategorised requests](#).
3. Re-create the Internal Review Case with the valid request date. Refer to the article [Create an internal review \(s100\) case](#).
4. To confirm the request type created is correct. Refer to article [IRT – Miscategorised requests](#).

Scheme integrity

When completing the desktop review, make sure you review and check all documents for integrity issues. Refer to article [IRT – Checking for integrity](#).

If there is Scheme Integrity information, such as an **Internal Note** or an **Alert**, review the information and contact your team leader if guidance is required.

Note: If there are integrity issues, or you are seeking clarification from your team leader or the Scheme Integrity Team, do not proceed with completion of an internal review decision until a response is received.

Review the internal review case

To review details of the **Internal Review Case**, navigate to the **Person Account** and:

1. Take note of any alerts and follow any instructions detailed within the alert.

2. Review the reasons for the review request, including details such as the participant or applicant's current circumstances or changes, any identified risks, complaints, or previous escalations.
3. Check for any previous decisions and reviews.
4. Check for any open or closed cases that may impact the review. For planning internal reviews check for any requested or open other plan change requests. A variation or reassessment of a plan may also be requested after an internal review request. As part of the internal review the internal review officer has to take into consideration the facts and circumstances at the time of the review outcome.
5. Review evidence and information to support the review request, for example assessments, reports, quotes and activity history such as phone conversations.
6. Link any relevant documents related to the review to the **Internal Review Case**. Refer to article [IRT – Adding and linking evidence to an internal review case](#).
7. Consider if additional evidence is required, and if so, refer to articles [IRT – Requests for further information](#) and [IRT – Identify if further information is required \(access and revocation\)](#).
8. Determine if Technical Advice and Practice Improvement Branch (TAPIB) input is required, and if so, refer to article [Create a technical advice case](#).

Note: If you need to create a **Technical Advice Case** or **Housing Application Case** you must create these from the **Internal Review Case**.

9. Determine if a home and living support is part of the review, as you must create a **Housing Application Case**. Refer to article [Create and submit a home and living application](#).

Note: If the review relates to another open request type, for example an s47A variation or s48 reassessment plan change request, seek advice from your line manager for next steps.

10. Confirm the risk level determined at creation of the internal review request is correct. Refer to the [Matrix - Risk and escalation](#). For access internal reviews, refer to [Our Guidelines – Applying to the NDIS \(External\)](#) section **When do we make priority eligibility decisions?**

Adding a RORD Request to an internal review

Based on the information gathered during the desktop review, the **Requests for PACE Decisions** (RORD) must be entered for each of the requested supports. If a **RORD Request** is missing, or is requested at any point during the internal review process, follow these steps:

1. From the **Internal Review Case**, select the **Decision** tab.
2. Select **New Request Line**.
3. From the **Choose Decision Type** view, select **Existing Decision**.
4. Select **Next**.
5. From the **Statement of Support Requests** view, use the dropdown to select the type of statement of support request to add from the following options:
 - Funded Support
 - Funded Management
 - Plan Duration
6. Once you have selected one of the above options, a field to enter further information will appear. Once this information is entered, select **Add**.

In the **Capture Reasons for Review Request** free text box, note what is being funded. If an item was not requested as part of the review however it is being funded, insert the reason (for example, Behaviour support plan required due to restrictive practice).

Note: If selecting **Funded Supports**, you will be prompted to input the support category that needs to be added. Selecting **Specific Support Category** will make a picklist appear to select from.

Selecting **General on plan** will add a new RORD where the information be added later.

The new **RORD Request** will now be created.

Next steps

1. Refer to article [IRT - Contact the participant or applicant](#).

IRT – Contact the participant or applicant

This article provides guidance for a review officer, business support officer, or participant support officer to:

- contact a participant, applicant, or their authorised representative
- complete the unable to contact process.

Recent updates

1 December 2025

Additional step included for post and email contact.

Before you start

You have completed the steps in the article [IRT – Conduct a desktop review](#).

Contact the participant or applicant

You will need to contact the participant or applicant to clarify their request and gather additional details.

When completing an internal review, the participant or applicant must be part of the decision-making process.

When contacting a participant, applicant, or authorised representative, you must first check their preferred communication method and authorisations.

Refer to the article [Check a person's preferred contact method](#) for further information.

When contacting a participant, applicant, or authorised representative, you must also log an Activity. Activity types include:

- SMS messages
- phone calls
- emails

- face-to-face meetings.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

As the internal review team is a virtual team with a limited footprint, we do not include face-to-face meetings as part of the standard service offering. If a face-to-face meeting is requested, the review officer must discuss and explore other options, such as engaging with advocates/authorised representatives, interpreting supports, and organising specific times to call, it is determined that a face-to-face meeting may be necessary, seek assistance from your line manager to identify a pathway forward.

If during contact, there is a media threat, advise your line manager who will contact the Media Team and advise of any follow up action if required.

Phone

If a participant or applicant's preferred contact method is by phone:

1. Make one contact attempt. This attempt requires a pre-call SMS. Refer to article [IRT – Send an SMS](#). If contact is unsuccessful, leave a voicemail (if possible) and refer to the article [IRT – Unable to contact process](#).
2. If contact is successful begin by:
 - Stating your name, advising you are from the NDIA.
 - Verifying the identity of the person you are calling. Refer to article [Understand how to verify identity documents](#).
 - Acknowledging the type of internal review.
 - Listing the documents received that will be considered as part of the internal review.
 - Confirming whether the participant or applicant would like to supply further information, and if so, refer to the article [IRT – Requests for further information](#). If they do not wish to provide further information, advise them the review will progress based on the available information.
3. Confirm their preferred method of contact for the internal review outcome notification.

4. Remind the participant or applicant of the support pathways available via their Local Area Coordinator, Early Childhood Partner and/or Support Coordinator, the contact centre, and local NDIS office.
 - For planning internal reviews, this will support with understanding and implementing their plan. Check with the participant if they would like a plan implementation meeting.
 - For access internal reviews, this will assist with connecting to mainstream supports and gathering and submitting information for their internal review.

Email

If a participant or applicant's preferred contact method is email:

1. Send an email. Refer to article [IRT - Sending an email](#).
2. The next business day after the introduction email timeframe has lapsed, if there has been no response, make one last attempt via phone (if appropriate and based on the participants/authorised representatives circumstances), then proceed with the review based on the information available.

Mail

If a participant or applicant's preferred contact method is mail:

1. Send the **Internal Review Request for Information Letter** to the participant's listed address and request a reply within 14 days. Refer to the article [IRT – Sending a manual letter](#).
2. The next business day after the request for further information letter timeframe has lapsed, if there has been no response, make one last attempt via phone (if appropriate and based on the participants/authorised representatives circumstances), then proceed with the review based on the information available.

Next Steps

- For planning internal reviews, refer to article [IRT - Enacting a planning review decision](#).
- For access and revocation internal reviews, refer to article [IRT - Enact an access or revocation review decision](#).

IRT - Enacting a planning review decision

This article provides guidance for a review officer to make an internal review decision.

Recent updates

20 October 2025

Hyperlinks to other knowledge articles updated.

Before you start

You have completed the steps in the article [IRT – Contact the participant or applicant](#).

You need to understand if setting aside or varying the plan, the case will generate with or without funding periods based on the following;

S33 – Decision to approve Statement of Participant Supports:

- Before 9 October 2024: PA/PBU will generate without funding periods.
- On or after 9 October 2024: PA/PBU will generate with funding periods.

S47a – Decision to vary or not vary a plan:

- Before 9 October 2024: PA/PBU will generate without funding periods.
- On or after 9 October 2024: PA/PBU will generate with funding periods.

S48 – Decision not to reassess a plan:

- Before 9 October 2024: PA is the only option, and it will generate with funding periods because the outcome here will be a new s33 decision.

Making a planning internal review decision

From the **Internal Review Case**:

1. Select the **Decision** tab.
2. From the **Decision** tab, select the **Pending Decision** from **Request for PACE Decisions**.

Note: If a **RORD Request** is missing, or a needs to be added, refer to the heading **Adding a RORD Request to an internal review** in the article [IRT – Conduct a desktop review](#).

3. Select **Make a Decision**.
4. From the **Decision** view, complete the mandatory fields.
 - For the **Decision Name**, reflect the request (for example, Increased funding for 24 hours per year for Occupational Therapy).
 - Do not enter any text into the **Additional Information** field.
5. Select **Next – Justification**.
6. From the **Justification** view, select the relevant justification.
7. Select relevant **Sub-Justification**. Add any further **Justifications** or **Sub-Justification** by selecting **Add**.
8. Select **Next – Evidence**.
9. From the **Evidence** view, complete mandatory fields for evidence.
10. Select **Next**.
11. From the Confirmation view, select **Done**.

The decision has now been drafted.

For non-delegates, progress to the heading **Non-delegate decisions** below to send a drafted decision for approval.

Note: If you need to modify this drafted decision, select **Modify Decision**.

12. Return to the **Internal Review Case**
13. From the **Decisions** tab select, **Submit Decisions**.

14. From the **Confirmation** view, select **Next**.
15. From the **Summary** view, select **Done**.
16. From the **Decision** tab, select **Confirm manual letter has been sent**.
17. From the **Confirmation** view, select the appropriate option.
18. Select **Next**.
19. From the **Decision Letter Sent** view, select **Next**.

If an outcome phone call has been completed with the participant, record the conversation. Refer to the article [Log an activity or internal note](#) for guidance on how to create case activities.

You will now be returned to the **Internal Review Case**.

For confirmed decisions, you have now completed the process and may send the decision outcome letter. Refer to the heading **Decision letter** below.

For set aside and vary decisions, continue the process:

Before proceeding, determine the appropriate case type (**Budget Update Case** or **Plan Approval Case**) based on the points below. If unsure, consult your team leader before proceeding.

The Budget Update Case can be used to:

- Add funding to past, current and future funding periods
- Add new support categories
- Reduce funding for future funding periods

Note: this action will result in funds remaining in the past and present funding periods being funded again if the plan was to be auto extended.

- Reduce the total budget amount

- Change Fund Management at the funding component level
- Change the length of a future funding period

Regardless of the request type, the Budget Update Case with Funding Periods **cannot** be used to:

- Reduce funding in a previous or current funding period
- Change the plan Reassessment date
- Change the length of a past or current funding period
- Change the budget type of a support category (eg. flexible to stated or vice versa)
- Change instalment type of a support category (eg. from one-off to regular or vice versa)
- Remove a support category from a plan
- Remove funding for Choice and Control (as this would require the removal of a support category)
- Change the fund management of one core support if it's grouped with other core supports in a funding component
- Change the funding period length of one core support of any component (all must be changed)

When the Participant Budget Update case cannot be used to give effect to your decision, use the **Plan Approval case**.

From the **Decision** tab, select **Create Budget Update Case** or **Create a Plan Approval Case**. Both options will appear.

A child case will now be created.

Refer to the topics below to continue the process for a review of a:

- Statement of supports/s47A outcome
- Decision not to reassess a plan (s48).

Statement of supports/s47A outcome

To complete the plan approval case, refer to article [Change the draft budget](#).

To complete the budget update case with funding periods, refer to article [Action a budget update with funding periods](#).

To complete the budget update case without funding periods, refer to article [Action a budget update](#).

To understand funding periods use article: [Understand funding periods](#).

You can make use of the Plan Conversation Support Tool (PCST) to assist with calculating the new budget. Use article: [Understand and update the plan conversation support tool](#).

You may choice to apply either default, or custom distribution of funds in a funding period. Use articles:

- [Apply default distribution of funds in a budget update](#)
- [Apply custom distribution of funds in a budget update](#).

Once the plan has been updated, or a new plan is approved, you may now send the decision outcome letter. Refer to the heading **Decision letter** below.

Decision to set aside a decision not to reassess a plan (s48)

For decisions setting aside a decision not to reassess a plan (s48), the plan approval case must be manually routed to the **Plan Approval Routing Queue** for Service Delivery to complete a plan reassessment. The internal review does not consider what reasonable and necessary disability supports should be included in the new plan, only that a reassessment is warranted. Once the plan approval case has been routed, send the decision outcome letter. Refer to the heading **Decision letter** below.

Non-delegate decisions

The non-delegate may now draft the decision outcome letter.

Return to the **Internal Review Case** and from the **Decisions** tab:

1. Select **Submit for Approval**. The **Internal Review Case** will now route automatically to the **Internal Review Decision Queue** ready for delegate approval.

Once the decision is approved by a delegate, they will change the case owner back to the non-delegate.

For set aside and vary decisions, non-delegates will create a child case and complete all budget updates or create a plan approval case.

2. From the **Decision** tab, select **Create Budget Update Case** or **Create a Plan Approval Case**. Only one option will appear.

A child case will now be created and will open automatically.

3. From the **Budget Updates** tab, select **Submit for Approval**.

The **Budget Update Case** will now route automatically to the **Internal Review Decision Queue** ready for delegate approval.

When the decision is approved by the delegate, they will change the case owner back to the non-delegate.

The non-delegate may now send the decision outcome letter. Refer to the heading **Decision letter** below.

Decision letter

Refer to article [IRT – Sending a manual letter](#) for guidance on how to send the decision outcome letter.

Next steps

1. Refer to article [IRT – Communicate an outcome](#).

IRT - Explanation of a decision

This article provides guidance for an internal review officer, business support officer, or participant support officer when:

- creating an enquiry case for an explanation of a decision request
- an explanation of a decision is requested on an internal review outcome
- completing an explanation of a decision.

Recent updates

10 November 2025

Case categorisation steps updated.

Explanation of a decision

Internal review officers receive requests for explanation of decisions on previously completed internal review requests. These can be assigned by a business support officer or by other agency staff without notification.

At times, a business support officer may need to create an enquiry case for an explanation of a decision. Refer to the heading **Create an explanation of a decision enquiry case** for guidance on how to do this.

The [Participant Service Guarantee \(External\)](#) sets out that the NDIA will complete an explanation of a decision within 28 days. s47E(d) - certain operations of agencies Following a request, we need to provide an explanation of decision in the participant's or applicant's preferred format to improve the understanding of how and why the NDIA has made the decision. This may require phone call contact to discuss the reasoning as well as a letter with the reasons for the decision written in plain English.

Create an explanation of a decision enquiry case

To create an **Enquiry Case**:

1. In the **Person Account** select the **Cases** tab.
2. Select **New**.
3. From the dropdown list select **Enquiry**.

4. Select **Next**.
5. From the **New Case: Enquiry** screen, proceed to the **Categorisation** heading and at:
 - **Type**, select **Review**
 - **Category**, select **Internal Review (Access)** for access decisions or **Internal Review** for all other Internal Review decision types.
 - **Sub Category**, select **Explanation of Decision**.
6. Select **Save**. This will open the **Enquiry Case**.
7. From the **Enquiry** tab, at the Who is **Making the Request?** window and at:
 - **Requested By**, select the appropriate option
 - Case Origin, select **Internal**.
8. Select **Next**.
9. From the **Enquiry Details** window, at **Parent Case**, enter the **Internal Review Case** number that the explanation of a decision request relates to.
10. Enter the **Date/Time Received**.
11. Select **Next**.
12. At the **Has there been any risks identified that may impact the participant, nominee or NDIS associated with this enquiry?** window, select **Yes** or **No**. If **Yes** is selected, select the appropriate risk levels.
13. Select **Next**.
14. From the **Notes and Next Steps** window, at **Enquiry Notes**, enter any information relevant to the explanation of a decision request.
15. At **Enquiry Outcome**, select **Re-assign this enquiry to another user**. Once this is selected, the **Case Re-assignment Reason** and **Select User or Queue** dropdowns will appear below.
16. At **Case Re-assignment Reason**, select **Escalation**.

17. At **Select User or Queue**, select **User**. The **Case Owner** dropdown will appear. Enter the name of the internal review officer you are assigning the **Enquiry Case** to. Once assigned, the internal review officer will receive a notification in **PACE**.
18. Select **Next**.
19. From the **Review and Submit** window, review the information.
20. Select **Submit**. The **Enquiry Case** will now be submitted.

Completing an explanation of a decision

1. Review **the Internal Review Case** to determine the type of internal review decision the participant or applicant is seeking and explanation for.
2. Review your completed internal review decision by referring to the **Decisions** tab, selecting the relevant case, selecting **Justification** and **Justification Detail**.
3. Review other details on the participant or applicant's **Person Account**, to make sure you are aware of any concerns.

If you identify the request has been triaged incorrectly, you may need to contact the participant or applicant to clarify the request.

4. Confirm the requestor has the appropriate authority or consent. Refer to the article [IRT – Conduct a desktop review](#) for information on checking consent.
5. Contact the participant or applicant through their preferred contact method.
 - If their preferred contact method is via phone, make two contact attempts. One contact attempt consists of a pre-call SMS, then a phone call and a voicemail if applicable. These three items are classed as one contact. If call attempts are unsuccessful, complete the explanation of decision letter and send via their next preferred contact method.
 - If their preferred contact method is via email, complete the explanation of a decision letter and send this to the participant or applicant.
 - If their preferred contact method is mail, complete the explanation of a decision letter and post this to the participant or applicant.

Note: All contact attempts require an SMS to be sent to the participant or

applicant. Refer to the article [IRT – Send an SMS](#).

6. If required, complete the explanation of a decision letter and send via mail. Refer to article [IRT – Sending a manual letter](#). If the letter is not required, proceed to **step 7**.
7. Complete the closure tasks for the explanation of a decision tasks and make sure it is marked as completed.

IRT - Impairment categories information variation request templates

This article provides guidance for a review officer to use templates to record activities in PACE.

Recent updates

7 July 2025

Language changes from notice of impairment to impairment categories information

Templates

Recording activities within PACE is essential for information gathering, record keeping and a nationally consistent service delivery approach. Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

All references to participant in this document also refers to authorised representatives, nominees and child representatives.

Recording Internal Notes in PACE is mandatory. It is essential for information gathering, record keeping and a nationally consistent service delivery approach.

Impairment categories information is called a 'Notice of impairments' in section 32AB of the NDIS Act (the Act). We use the term impairment categories information as it's plain English.

The Act uses the term 'vary', but in correspondence, guidance and when talking to participants we use the term 'change' as it's plain English.

Internal Note Templates

s100 - Completed Outcome – Impairments categories information (s32BA)

Review of Impairments categories information decision – completed by <IRO name and Logon ID>.

Impairments categories information decision made – <dd/mm/yyyy>.

Decision Outcome – <Confirm/Set-aside>.

Recent contact made with <participant/authorised representative> and <they provided additional documents/no additional documents provided>

Based on the evidence provided,

Option 1 (set-aside): I have set aside the original decision which was to <vary/not vary> the current Impairments categories information.

OR

Option 2 (confirm): I have confirmed the original decision to <vary/not vary> the participant's Impairments categories information is correct.

Refer to the decision letter for further information.

Any relevant information or documents have been uploaded to PACE.

<Logon ID>.

s100 - Communicate Impairments categories information decision

Pre-Contact SMS Sent: <No> <Yes on dd/mm/yyyy to participant name/authorised representative name>.

Successful phone contact made with <participant/authorised representative> on <phone number>.

POI Confirmed: <Yes/No> <3 point security check – full name, address, DOB, email, organisation name, work email, work address, participant's NDIS no., participant's DOB>.

Decision outcome:

IRO provided outcome of the internal review to <participant/authorised representative>, the evidence supporting it, a brief explanation and ART rights.

IRO explained that <they'll/participant will> continue to receive NDIS supports and there's no change to their eligibility a NDIS participant. If the participant feels their

funded supports no longer meet their support needs, they can contact their my NDIS contact to discuss their plan.

Action undertaken:

Internal review outcome to be finalised with the <Basis of Decision/Impairments categories information> letter sent via <email/mail> to <participant/authorised representative>.

If applicable add information about agency risk, otherwise delete

<Describe the agency risk and the IRO has alerted team leader>.

Refer to the outcome decision letter for further information.

If applicable add information about SMS notification sent for email outcome

Notification SMS Sent for s100 outcome email sent: <Yes on dd/mm/yyyy to participant's name/authorised representative>.

Email Templates

Confirm decision – Impairments categories information

Subject Line: Outcome of Internal Review <Participant Number>

Dear <Participant/Authorised Representative>,

I am writing in response to your request for us to review our decision to <vary/not vary> <your/Participant's full name> Impairments categories information. We made this original decision on <dd/mm/yyyy>.

Instruction: Add the following if appropriate <I attempted to contact you on <dd/mm/yyyy> by <contact method>, <dd/mm/yyyy> by <contact method> and on <dd/mm/yyyy> by <contact method> to inform you of the outcome of the review>.

OR

<Instruction: Add the following if appropriate <I refer to our conversation of <dd/mm/yyyy>>.

After careful consideration of your review request and the evidence <you/Participant's first name> provided, I have confirmed that the original decision is correct. This means <your/Participant's first name> Impairments categories information will not be varied at this time.

I have attached the decision letter to this email. This document contains details of the reasons for my decision.

If <your/Participant first name's> circumstances change in the future, you can apply to vary <your/their> Impairments categories information. We'll need new evidence from <your/their> treating professional. We'll look at the new evidence to decide if we vary the Impairments categories information or not.

Kind regards,

<First name and surname initial of Internal Review Officer>.

Set-aside decision – Impairments categories information

Subject Line: Outcome of Internal Review <Participant Number>

Dear <Participant/Authorised Representative First Name>,

I am writing in response to your request for us to review our decision to <vary/not vary> <your/Participant's full name> Impairments categories information. We made this original decision on <dd/mm/yyyy>.

After careful consideration I have decided to set aside the original decision. You can find <your/Participant first name's> new Impairments categories information in this letter. This replaces any previous Impairments categories information <you/they> have received.

Kind regards,

<First name and surname initial of Internal Review Officer>.

IRT - Initial call scripts

This article provides guidance for a review officer, business support officer, or participant support officer to guide their initial call conversation and cover key topics.

Recent updates

1 December 2025

Call scripts updated.

Phone call scripts

When making initial contact with a participant or applicant, review officers must clarify the details of the internal review request and gather additional details.

Use these scripts in combination with article [Guide - Conversation Style Guide](#) to have authentic and engaging conversations.

Review officers must only use these scripts as guidance material, ensuring they are adapted to suit the conversation as required.

Initial call script for planning internal reviews

Start script:

Good morning/afternoon

My name is <review officer name>, I am from the National Disability Insurance Agency and I am calling you regarding your internal review request.

Before we begin can I please complete proof of identity with you/verify your identity to ensure your privacy?

End script.

Review officers must verify the identity of the person they are speaking with. Refer to article [Consider a request for personal information](#).

Start script:

My role as an internal review officer is to consider your current plan, including the specific supports you've asked us to review. As part of this process, I will look at all funded supports in your plan to make sure everything reflects your current circumstances.

I am a decision maker that is separate to your original decision maker. Once I have confirmed the requests relating to your review and any other information, I will be able to make a timely decision for you based on the information that we have.

I can confirm we have the following evidence available including <state briefly list of evidence provided for the internal review for example Functional Capacity Assessment report, Physiotherapy report, quote>. I will use this to assist with coming to a decision about your request.

Would you be able to provide me with details of the supports you are requesting that differs from your current plan, and the reasons why you require this support?

End script.

Other points to cover during phone call contact:

- confirm the preferred plan management type.
- confirm preference for plan duration and any relevant issues.
- if applicable, confirm any assistive technology supports that may have been claimed already and advise if decision is set-aside funding will be removed from the new plan.
- make sure any supports specifically withdrawn by the participant is included in the interaction note.
- allow time to explain or discuss keeping it to the point or relevant peripheral issues.
- acknowledge any challenges or difficulties they have experienced, for example, I'm sorry you experienced that, or I'm sorry that occurred.
- where you need to gain an understanding from lived experience you should ask questions that help you to create a picture of the person/need.

- Provide an explanation we will consider the supports being requested, and we will also review the entire statement of participant supports in the plan to ensure the participant has access to the correct supports they need.
- If the participant states that they would like to provide further information, in your conversation use your skills to set a time frame that is as soon as possible and takes into consideration the 60 day Participant Service Guarantee timeframe.
- If they can't provide the information in a timeframe to be able to make a decision within 60 days, advise them you have a requirement to make a decision within a certain timeframe and if you don't have the information by a reasonable date you will need to make your decision based on the information you have. If in the future, they obtain further information they may be able to ask for a plan change such as a reassessment or variation depending on their circumstances and they can discuss this with their NDIS contact.

Start script:

Thank you for confirming the supports you require. I can now proceed to review the statement of participant supports and the available information and come to a decision about your supports.

End script.

There may also be occasions where you can discuss the likelihood of the supports being reasonable and necessary.

Start script:

I cannot give you a specific timeframe but will aim to complete internal reviews within a 60-day timeframe from the request date.

Once I have completed the decision you will receive an outcome and decision letter in line with the NDIS Act and Rules.

If the original decision does not change, there will be no change to the plan and you will receive a decision letter which explains the decision.

If I approve any supports requested, I will make this change to your plan, and you will receive a copy with the decision letter.

As a delegate, my role is to review your current plan to ensure it continues to meet your needs. This helps confirm that your funding is appropriate and allows us to make any necessary adjustments. Depending on the outcome, your funding may be increased or adjusted to better support you.

If I find any error in funded supports I will contact you before I make my decision.

End script.

Confirm the contact details and preferred method of contact method are correct to receive the decision letter for the internal review.

Start script:

Further information regarding NDIS supports can also be found on the NDIS webpage.

Thank you and I appreciate your time today to discuss your review.

End script.

You must document the call (including key discussion points) as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

Initial call script for access and revocation internal reviews

Start script:

Good morning/afternoon

My name is < review officer name>, I am from the National Disability Insurance Agency and I am calling you in regard to your internal review request.

Before we begin can I please complete proof of identity with you/verify your identity to ensure your privacy?

End script.

Review officers must verify the identity of the person they are speaking with. Refer to article [Consider a request for personal information](#).

Start script:

My role as a review officer is to review our earlier decision that you did not meet the requirements to <become or remain> a participant of the scheme.

I am a decision maker that is separate to your original decision maker. Once I have confirmed the requests relating to your review and any other information, I will be able to make a timely decision for you based on the information that we have.

I can confirm we have the following evidence available including <state briefly list of evidence provided for the internal review for example Functional Capacity Assessment report, Physiotherapy report, quote>, I will use this to assist with coming to a decision about your request.

End script.

Other points to cover during phone call contact:

- ask if there has been any change in the applicant's situation, for example, a new primary disability or a reduction in functional capacity since the initial access request.
- acknowledge any challenges or difficulties they have experienced, for example, I'm sorry you experienced that, or I'm sorry that occurred.
- where you need to gain an understanding from lived experience you should ask questions that help you to create a picture of the person/need.

- if additional information is being provided, ensure you manage the applicant's expectations if further information is unlikely to change the outcome.
- if the applicant would like to provide further information, in your conversation use your skills to set a time frame that is as soon as possible and takes into consideration the 60 Participant Service Guarantee timeframe.
- if they can't provide the information in a timeframe to be able to make a decision within 60 days, advise them you have a requirement to make a decision within a certain timeframe and if you don't have the information by a reasonable date you will need to make your decision based on the information you have. If in the future they obtain further information they may ask for a new access request.

Advise the applicant on the steps from here, including review timeframes.

Start script:

I cannot give you a specific timeframe but will aim to complete internal reviews within a 60-day timeframe from the request date.

Once I have completed the decision you will receive an outcome and decision letter in line with the NDIS Act and Rules.

If the original decision does not change, there will be no change to your access to the scheme and you will receive a decision letter which explains the decision.

End script.

Confirm the contact details and preferred method of contact method are correct to receive the decision letter for the internal review.

Start script:

Further information regarding access to the scheme can also be found on the NDIS webpage.

Thank you and I appreciate your time today to discuss your review.

End script.

You must document the call (including key discussion points) as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

IRT - Intake of an internal review request

This article provides guidance for a business support officer, participant support officer, or internal review officer to complete the intake of an internal review request.

Recent updates

10 November 2025

Update to linked knowledge article to reflect new name

Before you start

- You have read and understood the article [Understanding an internal review](#)
- You have read and understood [Our Guideline - Reviewing our decisions \(external\)](#)
- You have completed the steps in the article [IRT - Self-allocate an internal review case](#).

Complete initial checks

Once you are assigned or have self allocated an **Internal Review Case**, you must review the key case information and complete a procedural fairness check to make sure you are an independent delegate.

Review key information

1. From the **Person Account**, select the **Details** tab.
2. Review and take note of key applicant/participant information including:
 - **Account Name**
 - **Date of Birth**
 - **Age**
 - **Address**

You may use this information to determine if you have any conflict of interest in this case.

Procedural fairness check

Procedural fairness makes sure our decisions are completed by independent delegates and are fair, respectful, and unbiased.

When completing an Internal Review, procedural fairness is applied throughout the review process so the correct decision is made according to the law.

To be an independent delegate means you:

- don't have a personal interest in the applicant/participant's status
- don't have a relationship with the applicant/participant outside the NDIA
- haven't made a previous access not met, revocation or planning decision for the applicant/participant.

Note: for more information, go to the [Policy library– Conflict of Interest](#) on the intranet.

If you identify a conflict of interest, or have determined you are not an independent delegate, you **must** reassign the work item. Contact your line manager to discuss how to reassign the work item.

Validate the internal review request

Before progressing the review request, you must review the details of the **Internal Review Case** and associated cases, documents, and alerts to make sure the request is valid, and it meets all the legal requirements of a s100 request.

For further guidance on actioning an internal review refer to the articles [Understanding an internal review](#) and [Submit a request for an internal review \(s100\)](#). The [Choose the Right Request Tool](#) can also be used to help identify what type of request an applicant/participant is making when they are requesting a review of a decision.

There are four key parts of a validation:

- Validate the applicant/participant
- Validate consent
- Validate the request category

- Validate the request lodgement date

Validate the Applicant/Participant

Before progressing the review request, you must first confirm that the request has been recorded for the correct applicant/participant and in the correct record.

To check you have the right applicant/participant:

From the **Person Account**:

1. Confirm that the applicant/participant's name, address and NDIS number on the record match any documentation submitted with the review request by comparing the documentation to the **Details** tab.

Note: if you are unsure that the request relates to the current applicant/participant's file, contact the applicant/participant to confirm they have requested the review.

If the request is not recorded against the correct record, identify the correct applicant/participant record using the name, NDIS number, address, and details of the request. You must notify your line manager and [Report a Privacy Incident](#).

Validate Consent

Before progressing the review request, you must confirm that the review requestor has the appropriate consent and authority to request a review.

A person directly affected by a reviewable decision can request the decision be reviewed by the NDIA.

Who is considered to be a directly affected person will depend on the reviewable decision type and the individual circumstances of each request.

A directly affected person may include:

- an applicant (access not met decisions, access revoked decisions)
- a participant (plan related decisions, notice of impairments decisions)

- a person with parental responsibility for a child (decisions made relating to a child under 18 years of age, decisions to appoint, or not appoint a child's representative)
- a plan or correspondence nominee, or a person seeking to be appointed as a nominee (decisions to appoint, not appoint, suspend or revoke someone's nominee status).

For more information, refer to [Our Guideline - Your privacy and information \(external\)](#).

A directly affected person or their representative can submit a request internal review using the methods outlined on the page [How to request an internal review of a decision \(external\)](#).

If an applicant wants someone to act on their behalf throughout the internal review process, you will need their consent. An applicant can choose who they want to act on their behalf. This could include a:

- family member, friend, or carer
- support worker or service provider
- residential aged care facility staff member
- treating health professional or hospital staff.

The person requesting the internal review must be the applicant/participant, their authorised representative, or a representative who has consent to act on their behalf.

If an applicant/participant is younger than 18, parental responsibility applies. This is usually the applicant's parents or legal guardian or someone else who has parental responsibility.

For an adult applicant/participant, the representative can be a:

- person the applicant/participant has given consent to act as their representative
- guardian

- person with power of attorney who can make personal and health decisions for the applicant
- person with an active advance care health directive.

Participant requested reviews

People with disability are presumed to have capacity to make decisions that affect their own lives. However, in some cases, the participant or NDIA may appoint a person or a nominee where it is possible to support, and build the capacity of participants to make their own decisions for the purposes of the National Disability Insurance Scheme (NDIS).

You must check all **Internal Notes** and the **Relationships** tab to make sure the participant does not have a nominee. There may also be an **Alert** to provide information about a nominee. If there is a nominee on file, but the review was participant requested, speak with your team leader to determine next steps.

If the review is participant requested and the participant does not have a nominee, you may progress to the heading **Validate the request lodgement date**.

If the review is not participant requested, and has been requested by someone else, progress to the heading **Check roles and authorities** to validate that the requestor has the relevant consent.

Check roles and authorities

To validate the requestor consent:

1. From the **Person Account**, select the **Relationships** tab. To view:
 - revoked, cancelled or removed authorities, go to **step 2**
 - participant authorities, go to **step 3**
 - current roles and authorities, go to **step 4**.
2. Select **Inactive Roles and Relationships** tab. Review inactive roles and authorities that are removed, cancelled or revoked.

3. Select the **Participant Authorities** tab and make sure the **Submit request to review a decision made by the NDIA (S100)** box is selected. If the review is participant requested and you have verified this box is selected, you can continue to validate the request by progressing to the headings **Validate Request Category** and **Validate the request lodgement date**.
4. If the review is not participant requested, select the **Authorised Reps** tab to view current **Roles and Relationships** and view **Role** type. Confirm the person who requested the review is listed as an **Authorised Person** with a **Status** of **Active**.
5. Select **Check Authorities** and:
 - review the **Guardian Type**. This could be a **Public Guardian, Private Guardian** or **Financial Manager**
 - make sure the **Submit request to review a decision made by the NDIA (S100)** box is selected.
6. If the review requestor has the correct roles and authorities, you can continue to validate the request by progressing to the headings **Validate Request Category** and **Validate the request lodgement date**. If the review requestor does not have the correct authorities, continue to **step 8**.
7. Make one attempt to contact the participant, applicant, or their authorised representative to seek consent for the internal review to proceed. This attempt requires an SMS and either a phone call or email. If contact is successful and consent is not provided, or contact is unsuccessful, and you are unable to obtain consent, proceed to **step 9**.
8. Send the **Internal Review Unauthorised Request Letter**. Refer to the article [IRT – Sending a manual letter](#).
9. Cancel the **Internal Review Case**. Refer to the heading **Cancel an internal review case** in the article [IRT - Withdraw or cancel an internal review](#).

Validate the Request Category

Before progressing the review request, you must confirm that the request is for a review of a reviewable decision as stated in section 99 of the NDIS Act, and not for any other request for change in participant plan (section 48 plan reassessment or section 47A plan variation).

Section 100 reviews may include:

- an access or revocation internal review
- a review of a decision to vary or not vary a Notice of impairments
- a decision to approve the statement of participant supports in a participant's plan
- a decision to vary a participant's plan
- a decision not to vary a participant's plan
- a decision not to conduct a reassessment of a participant's plan
- a decision to appoint a plan nominee

If the review request is not a valid s100 request, follow the article [IRT - Miscategorised request](#) and contact the applicant/participant to get consent to withdraw the s100 internal review and if required, use the articles [Create a plan variation \(s47A\) request](#) or [Create a plan reassessment \(s48\) request](#) to action a plan change request.

For further information on the following categories, please refer to **Appendix 1 - Review Categories** in this article:

- Second disability requests
- Valid section 100 request for decisions to vary, or not vary, or the outcome of the variation of a Notice of impairments (NOI)
- Review request with incorrect decision type.

Validate the request lodgement date

Before progressing the review request, you must confirm that the internal review request has been submitted within three months of the applicant/participant receiving notification of the outcome of the original decision. This is 3 months from the day after they receive the decision.

Note: if the review request is not within 3 months of the notice of decision, the request for review is out of time and cannot be actioned as an s100 (refer to article [IRT- Miscategorised request](#)).

However, requests outside the 3 month timeframe can be considered if there

are **extenuating circumstances**. In these cases, escalate to your line manager. The **specific reasons or circumstances** why the request would be accepted outside of the timeframes must be stated.

To validate the request lodgement date:

1. From the **Internal Review Case**, select the **Request** tab and confirm the **Date review request submitted** date is correct by comparing the date the NDIA initially received any written communication or recorded contact requesting the internal review.
2. If the **Date review request submitted** date was entered incorrectly, but still within 3 months of the original decision, you must cancel the **Internal Review Case**. Refer to the heading **Cancel an internal review case** in the article [IRT- Withdraw or cancel an internal review](#) and proceed to **step 4**.

If the **Date review request submitted** date was entered incorrectly, and the timeframe to request an internal review has expired, refer to article [IRT- Miscategorised request](#).

3. Confirm the **Decision Date** of the original decision is correct, and if not you must cancel the **Internal Review Case**. Refer to the heading **Cancel an internal review** in the article [IRT- Withdraw or cancel an internal review](#) and proceed to **step 4**.
4. Re-create the internal review with the valid request date, refer to article [Submit a request for an internal review \(s100\)](#).
5. After you create the new **Internal Review Case** you must upload all relevant information and supporting documentation from the cancelled case to the new one.

Conduct a desktop review

To support the intake of an internal review, it is important to review the applicant/participant's information to understand:

- the type/characteristic of internal review being requested
- the participant's situation and request details
- any identified alerts, risks or vulnerabilities

- if there are any in-progress or recently closed cases and decision outcomes
- the information and evidence available.

A desktop review is completed using the information and documents on the participant or applicant's record in **PACE**.

As part of the desktop review, the following applicant/participant information should be reviewed regardless of the review type.

Note: for additional considerations for access and revocation reviews or planning reviews, navigate to the headings **Additional desktop review considerations for access and revocation reviews** or **Additional desktop review considerations for planning reviews**.

Review and update the person account

If during the desktop review it is identified that incorrect details are on the applicant/participant record, this needs to be updated. Refer to the article [Update a person account](#) for process guidance.

This includes updating:

- person details (name, gender identity, indicators)
- addresses
- communication preferences (phone number and email)
- correspondence preferences (format and delivery method of correspondence)
- non-compliant behaviour (for use by Compliance/Fraud team only)
- housing and accommodation
- relationship information
- residency and visa information
- consents
- my NDIS contact
- disabilities.

Check file alerts

From the **Person Account**:

1. Review and take note of **Alerts** on the applicant/participant's record and follow any instructions detailed within the alert.

Note for Business Support Officers: BSOs may be required to undertake additional actions at this step. Please refer to the heading **Additional considerations for Business Support Officers** for further instructions.

Check for any risks, complaints, or previous escalations

From the **Person Account**:

1. Select the **Cases** tab and review any information documented in **Feedback & Complaints** and **Critical Incidents**.
2. Confirm the risk level determined at creation of the internal review request is correct. Refer to the [Escalation Prioritisation Matrix](#) and the article [Review the escalation and prioritisation matrix](#).

Note: for access internal reviews, refer to the Appendices When do we make priority eligibility decisions in [Our Guidelines – Applying to the NDIS \(external\)](#).

Note for Business Support Officers: BSOs may be required to undertake additional actions at this step. Please refer to the heading **Additional considerations for Business Support Officers** for further instructions.

Check for any open or closed cases, previous decisions or reviews

You must check for any open or closed cases that may impact the review, and for any previous decisions or reviews that have been completed.

From the **Person Account**:

1. Select the **Cases** tab and review any open or closed cases.

Note: for access internal reviews you must confirm there isn't concurrent cases open for a new access request or a review. New access requests can only be made once a review is complete. Applicants have the option to withdraw

the **Internal Review** or the **Access Request**. You must contact the applicant to confirm if they want to continue with the internal review or withdraw it and continue with the access request. Refer to the articles [IRT – Contact the participant or applicant](#) and [IRT- Withdraw or cancel an internal review](#).

Note: for planning internal reviews check for any requested or open other plan change requests. A variation or reassessment of a plan may also be requested after an internal review request. As part of the internal review the review officer has to take into consideration the facts and circumstances at the time of the review outcome.

2. Select the **Decision** tab and review any recently made decisions or any other review requests.

Review the request details

You must review the information recorded in the internal review request to determine the type of review the applicant/participant is requesting.

From the **Internal Review Case**:

1. Review the **Details** tab.
2. Review the **Request** tab.

Check the type/characteristic

You must review the applicant/participant information to determine that the correct review type and characteristics have been selected. This may include reviewing the applicant/participant's **Request for a Review of a Decision** form, any internal notes from recent enquiries, the **Decisions** tab from the **Person Account**, and the **Details** and **Request** tabs from the **Internal Review Case**.

Then, from the **Internal Review Case**:

1. Select the **Details** tab and from the **Categorisation** drop-down confirm that the correct review **Type** has been selected.

Note: access review types include **Scheme Eligibility**, **Not to vary a notice of impairment** or **Outcome of a variation**. Planning review types

include **Statement of Supports, Not to reassess a plan, Not to vary a plan,** or **Outcome of a variation.** Other review types include **Compensation Recoveries Amount, SDA Enrolment,** and **Not to extend a grace period.**

2. Confirm the correct **Characteristic** has been selected.

Note: access review case characteristics include **Access, Access Revoked, EC,** and **Notice of Impairment.** Planning review characteristics include **Home and Living, Statement of Supports, Planning,** and **EC.**

Internal review officers will have the relevant **PACE** permissions to edit the review **Type,** however they are unable to edit the review **Characteristic.**

3. If you identify that the internal review case has been created with a blank or incorrect **Characteristic,** send an email to the Operations Support and Governance team [s47E\(d\) - certain operations of agencies](#) using the email template below:

Subject: Blank/Incorrect Characteristic – <Case number>

Email Body:

Good morning/afternoon,

Please update <case number – xxxxxxx> with the following characteristic:

<Access/Access Revoked/EC/Notice of Impairment/Home and Living/Statement of Supports/ Planning>

<email signature>

Confirm the Tier Role

From the **Person Account:**

1. Confirm the **Tier Role.**

For access reviews the tier role should show **Person with a disability.** For planning internal reviews the tier role should show **Participant.**

If the tier role needs to be changed, an ICT ticket must be lodged via the [ICT Service Desk](#).

Note: you will not be able to make a decision in **PACE** until the tier role has been corrected.

Confirm the Disabilities

From the **Person Account**:

1. Review the **Disabilities** tab and note the disabilities recorded for the applicant/participant.

Confirm the impairment categories

From the **Person Account**:

1. Review the **Impairment Categories** tab and take note of any **Approved Impairment Categories**.

Note: a participant will only have impairment categories recorded if they met access on or after 1 January 2025, or have had their access revoked and were then reinstated on or after 1 January 2025.

Link any relevant documents

From the **Person Account**:

1. Review the **Documents** tab and link any relevant documents related to the review to the **Internal Review Case**. Refer to article [IRT – Adding and linking documents to an internal review case](#).

Consider if additional evidence is required

As part of the desktop review, consider if there are any key indicators to determine whether further information may be required.

Refer to articles [IRT – Requests for further information](#) and [IRT – Identify if further information is required \(access and revocation\)](#).

Check the acknowledgement letter has been sent

From the **Internal Review Case**:

1. Review the **Documents** tab for the acknowledgment letter. If the acknowledgement letter has not been sent, progress to step 2.
2. Follow the steps in the article [IRT – Sending a manual letter](#) to create and send the acknowledgement letter.

Additional desktop review considerations for Access and Revocation reviews

For Access or Revocation reviews, the following applicant/participant information should also be checked as part of the desktop review.

Scheme Integrity

As part of the desktop review, the internal review officer must check all documents for integrity issues.

If have concerns regarding document integrity, you should make a referral to the Access Integrity Management (AIM) team. The AIM team can perform verification checks on all access not met and revocation internal reviews.

Identity Verification

If you identify concerns surrounding the identity verification steps taken, follow the below steps.

Note: this referral should be made prior to the completion of the internal review outcome.

From the **Person Account**:

1. Select the **Refer to AIM** button.
2. From the **Referral Reason** drop-down menu, select the appropriate reason.
3. Complete the **Other details** section with concerns and information relating to identity verification.
4. Select **Next**.
5. Do not proceed with the decision until a response is received.

Residency Validation

If there are concerns regarding residency status, referrals to the AIM team to request validation from the Immigration database are to be made via the [AIM Hub](#).

1. Open to the [AIM Hub](#).
2. Select the **Integrity & Residency Enquiries** button.
3. Under the heading **What is your role?** select IRT Access.
4. Select your enquiry type and complete the applicable fields.
5. Once the enquiry has been submitted AIM will review the enquiry and respond via email.

Validating evidence of a disability

If there are concerns regarding validating evidence of a disability, referrals to the AIM team are to be made the [AIM Hub](#).

1. Open to the [AIM Hub](#).
2. Select the **Integrity & Residency Enquiries** button.
3. Under the heading **What is your role?** select IRT Access.
4. Select your enquiry type and complete the applicable fields.

Once the enquiry has been submitted AIM will review the enquiry and respond via email.

Confirm the legislation used in original access decision

From the **Access Decision Case**:

1. Select the **Decision** tab and check the legislation that was used at the time of the original access decision.

Note: for review of a decision to revoke a person's status as a participant, the IRO will apply the same legislation that was applied at the original eligibility reassessment decision.

Determine if technical advice is required

1. Determine if Technical Advice and Practice Improvement Branch (TAPIB) input is required and if so, refer to article [Create a technical advice case](#).

Note: Advice is required for all [mandatory requests](#) as per TAPIB instructions. Internal Review Officers may also need to seek non-mandatory advice if evidence indicates an applicant has a substantially reduced functional capacity but permanency of an impairment is not clear. It is recommended IROs discuss with their line manager.

Revocation cases only - Confirming Requests for PACE Decisions

Within the **Requests for PACE Decisions** view, confirm the correct **Name** is displaying.

From the **Internal Review case**:

1. Select the Decisions tab.
2. In the **Requests for PACE Decisions** view, if the **Name** field displays as **Eligibility Reassessment**, the Internal Review Case will need to be cancelled and recreated. Refer to the article [IRT - Complete an access or revocation Internal Review Case](#) – Appendix 4 – Cancel and recreate a revocation case.

Additional desktop review considerations for Planning reviews

For Planning reviews, the following participant information should also be checked as part of the desktop review.

Scheme Integrity

When completing the desktop review, the internal review officer must check all documents for integrity issues. Refer to article [IRT – Checking for integrity](#).

If you believe fraudulent information has been provided, or there is previously identified scheme integrity information, such as an **Internal Note** or an **Alert**, contact your team leader if further guidance is required.

Determine if technical advice is required

1. Determine if Technical Advice and Practice Improvement Branch (TAPIB) input is required and if so, refer to article [Create a technical advice case](#).

Note: if you need to create a **Technical Advice Case** you must create this from the **Internal Review Case**.

Determine if a home and living support is part of the review

1. Determine if a home and living support is part of the review, and if so, refer to article [Create and submit a home and living application](#).

Note: if the review relates to another open request type, for example an s47A variation or s48 reassessment plan change request, seek advice from your line manager for next steps.

Determine if additional RORD Request lines need to be added

Based on the information gathered during the desktop review, the **Requests for PACE Decisions** (RORD) must be entered for each of the requested supports. If a **RORD Request** is missing, or is requested at any point during the internal review process, follow these steps:

1. From the **Internal Review Case**, select the **Decision** tab.
2. Select **New Request Line**.
3. From the **Choose Decision Type** view, select **Existing Decision**.
4. Select **Next**.
5. From the **Statement of Support Requests** view, use the dropdown to select the type of statement of support request to add from the following options:
 - Funded Support
 - Funded Management
 - Plan Duration
6. Once you have selected one of the above options, a field to enter further information will appear. Once this information is entered, select **Add**.

In the **Capture Reasons for Review Request** free text box, note what is being funded. If an item was not requested as part of the review however it is being funded, insert the reason (for example, Behaviour support plan required due to restrictive practice).

Note: if selecting **Funded Supports**, you will be prompted to input the support category that needs to be added. Selecting **Specific Support Category** will make a picklist appear to select from.

Selecting **General on plan** will add a new RORD where the information be added later.

The new **RORD Request** will now be created.

Additional desktop review considerations for Business Support Officers

Business Support Officers (BSO) may be required to undertake the following additional actions as part of the intake of an internal review request and desktop review process.

Check file alerts

From the **Person Account**:

1. Review and take note of **alerts** on the applicant's record.

If the record is marked for Restricted Access, has an alert regarding Administrative Review Tribunal (ART)/a Complex Support Needs (CSN)/a Scheme Integrity (SIRT)/Compensation alert, send an email to **s47E(d) - certain operations of agencies** with the below email template.

Email template

Subject: IRB to complete desktop review

- Applicant name
- NDIS number
- <ART/CSN/SIRT/Compensation> File Alert
- Date of the alert
- Alert added by
- Section 100 request date

<email signature>

Note: access internal review requests with any of the above marked alerts are to be allocated to **s47F - personal privacy** in PACE. Planning internal reviews with any of the above marked alerts are to be allocated to **s47F - personal privacy** in PACE.

Cases over 60 days

The Internal Review Branch aims to complete decisions within 60 days. If during the desktop review you identify that the request is over 60 days, complete the a desktop review and email internal.reviews.planning@ndis.gov.au using the email template below.

Email Template

Subject: Internal review over 60 days identified

Good morning/afternoon

I am a BSO completing an intake of an <access/planning> internal review request and have identified a case over 60 days.

Case: <internal review case number>

<email signature>

Assess for risk and escalation to determine priority of request

The IRB uses the Agency endorsed [Escalation Prioritisation Matrix.docx \(ndia.gov.au\)](#) to determine the level of risk present for both participants and the Agency.

If a case is identified as high risk, complete the desktop review and Assign to 647f - personal privac
 for the escalations team to action.

Risk and plan funding periods

When assessing the level of risk on a planning review request, BSOs should also check the plan funding to determine if it is a 'new framework plan' with 'funding periods' applied. If there are no 'funding periods', the funding can be used flexibly across the life of the plan. If 'funding periods' have been applied, this means that flexibility in the use of funding is reduced, and the participant can only access the funding for the current funding period.

Scenario: Participant Tom has requested a review of his current plan. You are assessing Tom's record for risk and identify that Tom's plan has 3-month funding periods, and a total plan budget of \$300000. You also see that his current funding period is only 1 month old. Tom has used 90% of his core assistance with daily living funding for his

current funding period. As Tom has funding periods, he cannot flexibility use his core funding due to the restriction of having funding released every 3 months. In this case Tom could be placed at risk due to not being able to access and use his funding flexibly. You need to consider if this places Tom as risk of not having the support he requires.

Initial contact, clarification calls and requests for further information

Business Support Officers are required to contact the participant or applicant as part of the intake of an internal review request. An initial contact attempt is required for all review requests to clarify the applicant/participant's request and gather additional details.

For additional information for BSOs and steps for contacting the participant, completing a clarification call and issuing a request for further information, please refer to [Intake of an Internal Review Request – Additional considerations for Business Support Officers – Initial contact, clarification calls and requests for further information \(external\)](#).

Finalise intake and reassign the case to the correct queue

Once the desktop review has been completed:

1. Add an **Internal Note** in the **Internal Review Case** log activity with the following information:

Desktop Review completed by: <Login ID>

Date Received by Agency: <Initial date of request>

Request submitted by: <Person that requested the review and relationship>

Authorised Representative:<Authorised person that consented for the review – can be removed if the person that requested the review is a participant or child rep/plan nominee>

Acknowledgement letter sent: <Yes – Date>

Risk level: <Risk level>

Impact: <Describe reason for risk rating>

Type of section 100: <Enter details>

Internal comments: <Enter any relevant information for the internal review officer>

2. From the **Details** tab of the **Internal Review case**, update the **System Information –Subject** field with the most relevant descriptor as follows:

UTC Due dd/mm/yyyy

RFI due date xx/xx/xxxx

Triaged LoginID

3. From the **Details** tab of the **Internal Review case**, update the **Comments – Internal Comments** field with any additional information explaining your **Subject - Description** contents.
4. Reassign the **Internal Review Case** to the to **IRT H&L Queue** (all BAU internal reviews except Home and Living) or the **HaL HLIRT Queue** (for Home and Living internal reviews).

Next Steps

If a clarification call/contact attempts have already been completed by a Business Support Officer, the Internal Review Officer is able to progress to the next steps in the internal review process.

For Access and Revocation reviews:

- Proceed to the heading **Adding evidence to the internal review case** in the article [IRT - Complete an access or revocation Internal Review Case](#).

For Planning reviews:

- Proceed to the article [IRT – Enacting a planning review decision](#).

If a clarification call/contact attempts have not yet been completed as part of the intake process, the next steps in the internal review process are for the Internal Review Officer to contact the participant or applicant to clarify their request and gather additional details.

For Access and Revocation reviews:

- Refer to the heading **Contact the Applicant** in the article [IRT - Complete an access or revocation Internal Review Case](#).

For Planning reviews:

- Refer to article [IRT - Contact the participant or applicant](#).

Appendix 1 – Review Categories

Secondary disability requests

A secondary disability request is not a reviewable decision under section 99 of the NDIS Act.

When you receive a secondary disability request, the participant will need to be informed that the secondary disability request is not a reviewable decision, however, we can consider the statement of support requests related to that secondary disability.

If the participant only wishes to have the secondary disability considered, advise them that you will withdraw the internal review and refer their request to the relevant team for action. Follow the steps in the article [Request a participant disability change](#).

If the participant wishes to have their statement of support reviewed, this review type is out of scope. Refer to the instructions 'incorrect case type allocated' to re-allocate the case to the Internal Review Planning team.

Once the internal review decision is finalised, the internal review officer will refer the secondary disability request to the relevant team for action.

Valid section 100 request for decisions to vary, or not to vary, Notice of impairments (NOI)

From 1 January 2025, new participants to the Scheme will receive an impairment notice with the access decision when their request for access was received on or after 1 January. Existing participants whose access requests were submitted before 1 January 2025, will not have an impairment notice, these will be managed in the future with a transition plan. Existing participants pre 1 January cannot ask to be issued with a notice of impairment, therefore they will not be able to seek a variation or have a valid review in this area.

A participant who has a Notice of Impairment can ask for that NOI to be varied if they disagree with the impairments listed and want to add or change the notice. These original decisions are completed by the Scheme Eligibility Branch (SEB). SEB can decide to decline to vary the NOI or vary the NOI and issue a new one replacing the existing NOI. Both of these decisions are reviewable. A participant then has 3 months to request

an internal review if they disagree with the outcome of a request to vary their notice of impairment. An NOI internal review will be completed by the Access Internal Reviews team. Both decisions to not vary an NOI, and to vary an NOI are reviewable.

To verify if a participant had been issued a Notice of impairments:

1. Navigate to the **Access Decision** case. Check the outcome of application letter attached in **Documents**. When a person becomes an NDIS participant (access request received on or after 1 January 2025), they will automatically receive a Notice of impairments (NOI) with their Outcome of Application letter.

To verify if a participant's request to review a NOI decision may be valid:

1. Navigate to **Cases**. If a participant has requested their NOI be varied, a **Vary Impairment Categories** case will be created and closed by the Scheme Eligibility Branch (SEB). Look for the outcome of the decision including the outcome decision letter to know what is a valid internal review.
2. From the participant's **Person Account**, select **My Profile** tab, then **Impairment Categories**. If there is a not applicable message in the **Impairment Categories** tab, the participant doesn't have a Notice of impairments. See article [View Impairment Categories in the person account](#).

If a NOI has not been issued, the s100 request is not valid. Advise the participant that this is not a reviewable decision and help them to understand what they are seeking. There is no change to their eligibility as a NDIS participant, and they will continue to receive NDIS supports.

If the participant feels their funded supports no longer meet their support needs, advise the participant that they can lodge a plan change request (s48) or internal review (s100), and the review rights for each option.

If a participant's request relates to the addition of a secondary disability, follow the instructions for **Secondary disability requests**.

To withdraw a request that is not valid, follow the steps under the heading **Cancel an**

Internal Review Case in the article [IRT - Withdraw or cancel an internal review](#) to cancel the **Internal Review Case**.

Review request with incorrect decision type

If the internal review case was created from SAP CRM with incorrect category type, you must follow the steps under the heading **Cancel an Internal Review Case** in the article [IRT - Withdraw or cancel an internal review](#) to cancel the **Internal Review Case**. You must then create a new **Internal Review Case** with the correct decision type.

The incorrect category type occurred as there was no Statement of Supports option available at time of case creation. Refer to [Communique: Internal Review cases created with incorrect decision type \(external\)](#) for further information on this process.

IRT - Internal review email templates

This article provides guidance for a review officer, business support officer, or participant support officer to draft internal review emails.

Recent updates

1 December 2025

Email contact timeframes updated.

Email templates

These email templates have been created to assist review officers to communicate with participants and applicants when undertaking an Internal Review, including communicating with third parties on the behalf of a participant or applicant. These templates cover standard scenarios encountered during the review process and are a reference tool (not mandatory) for review officers. If needing to add additional information within the template, refer to article [IRT – Internal review writing guide](#) for guidance on free text sections and refer to your line manager.

Note: All references to participant and applicant in this document also refers to former participants for revocations, authorised representatives, nominees and child representatives.

Note: When inserting a date into a template, make sure the format is written day month year, for example 22 July 2022.

s100 – Initial Contact (Access and Planning)

Subject: Request for internal review of decision

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

My name is <First Name of Review Officer> and I am <progressing/managing> <your/participant/applicant's name> internal review request.

I note your current preferred method of communication is via email contact. If you would like me to call you this can be arranged. <If applicable: An interpreter can be arranged to assist with the phone call>.

You can arrange contact with me by either calling 1800 800 110 or respond to this email with some possible times or contact preferences you might have. Alternatively, please reply to this email if you have any further information or evidence that you would like to be considered for this review. I will then proceed with the review with this additional information.

If I do not hear from you by <dd/mm/yyyy> 7 days from today >, I will proceed with a decision based on the information I have available. You will receive notice of the decision outcome by letter.

<Only include this paragraph for planning internal reviews> If there is a change to your plan because of the internal review decision, you may have a plan implementation meeting to help you understand how to use your plan. Let us know if you would like a plan implementation meeting with <your/participants name> NDIS contact. We may also consider the duration of your plan as part of this review.

Thank you,

<First name and surname initial of Review Officer>

s100 – Initial contact - additional information required (Access and Planning)

Subject: Request for internal review and additional information required

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision <for <your/participant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability Insurance Agency

(NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

My name is <First Name of Review Officer> and I am <progressing/managing> <your/participant/applicant's name> internal review request.

I require further information for the internal review decision.

Please find attached a letter requesting further information in relation to <insert relevant information to request of information>. <Instruction: Complete and attach the Internal Review Further Information Request letter>

I note your current preferred method of communication is via email contact. If you would like me to call you this can be arranged. <If applicable: An interpreter can be arranged to assist with the phone call>.

You can arrange contact with me by either calling 1800 800 110 or respond to this email with some possible times or contact preferences you might have. Alternatively, please reply to this email if you have any further information or evidence that you would like to be considered for this review. I will then proceed with the review with this additional information.

If I do not hear from you by <dd/mm/yyyy> 7 days from today, I will proceed with a decision based on the information I have available. You will receive notice of the decision outcome by letter.

Thank you,

<First name and surname initial of Review Officer>

s100 – Unable to Contact (Access and Planning)

Subject: Unable to Contact - Request for internal review <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name/applicant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability

Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

My name is <first name of Review Officer> and I am managing <your/participant's name/applicant's name> internal review request.

<Option 1>: I am writing to let you know I have been unable to contact you about the review. Please see my attached letter which outlines the dates and ways I have tried to contact you, and the next steps you can take to assist with the review.

<Option 2>: Please see my attached letter which outlines the dates and ways I have tried to contact you, <the information I need from you to progress your review>, and the next steps you can take to assist with the review. **<Instruction: complete and attach the internal review further information request letter>**.

You can arrange contact with me by either calling 1800 800 110 or respond to this email with some possible times or contact preferences you might have. Alternatively, please reply to this email if you have any further information or evidence that you would like to be considered for this review. I will then proceed with the review with this additional information.

If I do not hear from you by <dd/mm/yyyy> 7 days from today, I will proceed with a decision based on the evidence/facts and circumstances I have available. You will receive notice of the decision outcome by letter sent to your email/address provided.

s100 – Unauthorised request (Access and Planning)

Subject: Request for internal review

Dear <participant name/applicant name/authorised representative name>,

We have received a request for the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** We have received a request for the National Disability Insurance Agency (NDIA) to review the earlier decision made on <dd/mm/yyyy> that <you/applicant's name> does not meet the access criteria. **OR** We have received a request for the National Disability Insurance Agency (NDIA) to review the earlier decision made on <dd/mm/yyyy> not to change <your/participant's name> plan by

doing a <reassessment/variation>. The request was submitted by <name of person who submitted the request>.

Upon review of our records, <name of person who submitted the request> does not have authority to act on <your behalf/behalf of the applicant/participant's name>.

Please confirm whether you would like to proceed with the request for a review of the decision made on <dd/mm/yyyy>. If you would like me to phone you, this can be arranged by calling 1800 800 110 or by responding to this email with some possible times or contact preferences you might have.

If I do not hear from you by <dd/mm/yyyy – 7 days from the date of the email>, the review request will be withdrawn and no further action will be taken on the request. You will receive notice confirming withdrawal of the review by letter sent to your <email/address> provided.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Email following the acknowledgement phone call (Access and Planning)

Subject Line: Further Information Request <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

As discussed, please find attached a Request for Information letter.

<Instruction: attach Request for Information letter>

Please provide this information by <dd/mm/yyyy>. If I do not hear from you by <dd/mm/yyyy>, I will proceed with a decision based on the information I have available.

If you have any questions, you can arrange contact with me by calling the NDIS Contact Centre on 1800 800 110 or by replying to this email.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Requesting further information (Access)

Subject Line: Further Information Request <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

My name is <First Name of Review Officer> and I am the Review Officer assigned to complete the review.

Please find attached a letter requesting further information from you.

Please provide this information by <dd/mm/yyyy>.

If you have any questions, you can arrange contact with me by calling the NDIS Contact Centre on 1800 800 110 or by replying to this email with some possible times or contact preferences you might have.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Extension of Further Information Request (Access and Planning)

Subject Line: Further Information Request extension <Participant Number>

Dear <participant name/applicant name/authorised representative name>, Thank you for your contact requesting an extension to provide further information. I am pleased to enable an extension to <dd/mm/yyyy>.

Please submit all documentation you would like considered prior to this date. If I do not

hear from you by <dd/mm/yyyy>, I will make a decision based on the information I have available.

Kind Regards,

<First name and surname initial of Review Officer>.

s100 – Confirming rescheduled phone appointment (Access and Planning)

Subject Line: Rescheduled phone appointment <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name/applicant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

As discussed, I am the Review Officer assigned to complete the review.

I am confirming our agreed telephone appointment on <dd/mm/yyyy> and time (AEST/AEDT)> to further discuss this review.

If you wish to make any changes to the appointment, please contact me by calling the NDIS Contact Centre on 1800 800 110 or reply to this email.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Response - a delay in an IR decision (Access and Planning)

Option 1

Subject Line: Review in progress <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name/applicant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

I acknowledge your contact with the NDIA on <dd/mm/yyyy> enquiring about the progress of your review. I am the Review Officer allocated to conduct this review and can confirm this review is still in progress. I apologise for the delay and appreciate your patience as I consider the relevant facts and legislation related to your request.

Kind regards,

<First name of Review Officer and Surname initial>.

Option 2

Subject Line: Awaiting additional evidence <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name/applicant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

I acknowledge your contact with the NDIA on <dd/mm/yyyy> enquiring about the progress of this review.

I am the Review Officer allocated to conduct this review and refer to my earlier contact on <dd/mm/yyyy> where you requested time to provide further evidence. <I have not yet received this information.>

If I do not hear from you by <dd/mm/yyyy> 7 days from today, I will proceed with a decision based on the information I have available. You will receive notice of the decision outcome by letter.

Kind regards,

<First name of Review Officer and Surname initial>.

Option 3

Subject Line: Awaiting additional evidence <Participant Number>

Dear <participant name/applicant name/authorised representative name>,

I refer to my earlier <phone call/email> on <dd/mm/yyyy> regarding the need for further evidence in relation to your request. Thank you for providing consent for me to contact <name of individual or organisation>, <who/which> I was able to contact on <dd/mm/yyyy>.

I was advised the information would be provided to me by <dd/mm/yyyy>. Once this information is received, or the date has passed, I will make a decision based on the information I have available. You will receive notice of the decision outcome by letter.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Confirming withdrawal of review request (Planning)

Subject Line: Withdrawal of Internal Review <Participant Number>

Dear <participant name/ authorised representative>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name > plan <approved/varied> on <dd/mm/yyyy>.

During our contact with <you/your authorised representative> on<dd/mm/yyyy> the internal review was requested to be withdrawn. Please find attached a letter confirming withdrawal of the review. I confirm that the National Disability Insurance Agency will not take any further action on the internal review request and no decision will be made.

There is no further action required, this email and letter is for your records only. You can ask to make changes to your plan if your circumstances change. For any changes to your plan, we need new information or evidence showing why your plan should be different. This might be assessments, reports, evidence of how you have spent your funding or other updates.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Confirming withdrawal of review request (Access/Revocation)

Subject Line: Withdrawal of Internal Review <Participant Number>

Dear <participant name/applicant name/authorised representative name>, Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

Please find attached a letter confirming withdrawal of the review.

There is no further action required. This email and letter is for your records only. Should <you/participant/applicant's name> decide to request access to the NDIS in the future, you will need to make a new access request by contacting the NDIS using one of the methods listed in the attached letter.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Requesting Further Information - treating professionals (Access/Revocation)

Subject Line: Further Information Request <Participant Number>

Dear <insert treating professionals name and/or title, For example, Dr Vaux>,

I would like to introduce myself as the Review Officer progressing the Internal Review of the decision that <insert applicants' name> did not meet the access criteria required to

become a participant of the NDIS. <Insert applicants' name> has given their consent for me to contact you directly.

I require further information in order to make the decision.

Please find attached a letter requesting further information from you. I have sent a copy of this letter to <insert applicant name>.

I have also sent this request to <insert name and profession of any other treating professionals and their relationship to the applicant example Dr Akkary, Nina's treating General Practitioner>. Please respond with the information requested.

If you have any questions, please use the contact details below and attached.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Set Aside Decision (Access Met)

Subject Line: Outcome of Internal Review <Participant Number> Dear <applicant's name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.

I have made a decision to set aside our earlier decision. This means, from <dd/mm/yyyy>, <you/applicant's name are/is> a participant of the NDIS and can access support under the NDIS.

I have attached the internal review outcome letter to this email <Instruction: If a paper copy is required add the following: <and it will also be mailed to your listed address>. The letter contains details of the next steps you need to take in preparing for <your/applicant's name> NDIS plan.

You will receive a separate letter confirming that your application to the NDIS has been

successful. This letter also includes information about the impairment category/ies for which you are a participant in the NDIS.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Confirmed Decision (Access Not Met)

Subject Line: Outcome of Internal Review <Participant Number>

Dear <applicant's name>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name do/does not meet/continue to meet> the access criteria.<Instruction: Add the following if appropriate <I attempted to contact you on <dd/mm/yyyy> by <contact method>, <dd/mm/yyyy> by <contact method> and on <dd/mm/yyyy> by <contact method> to inform you of the outcome of the review>.

OR

<Instruction: Add the following if appropriate <I refer to our conversation of <dd/mm/yyyy>>.

After careful consideration of your review request and the evidence <you/applicant's name> provided, I have decided to confirm the earlier decision. This means <you/applicant's name> will not be able to access the NDIS at this time. I have attached the decision letter to this email. This document contains details of the reasons for my decision. It may be helpful to engage with the <Local Area Coordinator/EC Partner> in your local community who will help you connect to services. This service is available even if you are not eligible for an NDIS support plan or while waiting for an outcome of a review. The <Local Area Coordinator/EC Partner>in your area is <Name of Local Area Coordinator/EC Partner> and they can be contacted on <telephone number>.

If you have new evidence about the impact of your disability on your everyday life or if your situation changes in the future, you can make a new access request by calling the NDIS Contact Centre on 1800 800 110 or contacting your local NDIA office.

Kind regards,

<First name and surname initial of Review Officer>.

s100 – Decision Letter (Planning)

Subject Line: Outcome of Internal Review <Participant Number>

Dear <Participant>,

Please find attached the outcome of your request for an internal review of a decision.

<It may be helpful to engage with a <Local Area Coordinator/EC Partner/Support Coordinator> who will help <you/participant's name> <connect to services, implement and utilise plan supports>.

If you would like a plan implementation meeting, or previously declined one and have changed your mind, please let your My NDIS contact know.

Further information can be found in the next steps section in the decision letter.

Kind regards,

<First Name and surname initial of Review Officer>.

S100 – IR case cancelled and recreated duplicate acknowledgement letter (Access and Planning)

Subject Line: Internal Review in progress <Participant Number>

Dear <Participant>,

Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision for <your/participant's name> plan <approved/varied> on <dd/mm/yyyy>. **OR** Thank you for asking the National Disability Insurance Agency (NDIA) to review the earlier decision on <dd/mm/yyyy> that <you/applicant's name> <does not meet/continue to meet> the access criteria.

I can confirm we have received your internal review request on <dd/mm/yyyy> and is currently in progress.

Due to a system error, you may receive an updated acknowledgement letter, please disregard this letter. We will be in contact in the near future to discuss your review request. OR I will proceed with a decision and advise you of the outcome as a matter of priority.

Kind regards,

<First Name and surname initial of Review Officer>

IRT - Internal review writing guide

This article provides guidance for a review officer, business support officer, or participant support officer to:

- draft internal review correspondence including completing free text sections for internal review letters
- make sure documents are easily understood by participants, applicants, and their authorised representatives.

Recent updates

17 September 2025

Updated intranet links.

Reviews Branch writing guide

This guidance outlines the writing style to be used by the Reviews Branch to assist in writing clear communication that is easily understood by applicants, participants, or their authorised representatives.

Consider the audience for correspondence

Think about who you are writing for, know your audience, tailor your content, and ask yourself:

- What is your audience's level of NDIS knowledge?
- What is your audience's literacy level likely to be?
- Is your audience time poor?
- Do they need quick, concise information?
- Does your audience have an intellectual disability?
- Is your audience from a culturally and linguistically diverse (CALD) background?
- You want to use the right name as names are important to a person's sense of self.

Plain English

Plain English is clear straight forward expression using only as many words as necessary to convey meaning. This means the writing is:

- clear – avoids unnecessary complexity
- concise – uses only as many words as necessary.

Plain English is effective because it allows the reader to:

- find what they need
- understand what they find.

Plain English provides several benefits:

- streamlines procedures and paperwork
- increases satisfaction and understanding
- reduces confusion
- creates a positive image
- saves time.

For more information refer to the [NDIA plain English standards](#).

Language used

All language and tone used by Reviews Branch must be:

- person-centred
- use positive and empowering language
- use plain language as research shows the average length of words and sentences can affect readability.
- reflect Agency narrative, aspirations and values
- be consistent with terms

- avoid using nouns made from verbs
- not confusing to the audience, use the same term for the same concept throughout your document. For example, if you call something a standard, avoid later calling it a benchmark, a guideline, or a norm.

Note: nouns made from verbs are known as 'nominalisations'. Avoid these and instead try to make actions direct and strong. Some examples include 'consider' rather than 'consideration', 'establish' rather than 'establishment' and 'discuss' rather than 'discussion'.

Remove redundancy and padding

This style of writing adds unnecessary content, making it harder for the reader to quickly find and understand information. Use familiar and simple words. Do not use long or complex words. As these words can be unfamiliar, meaning readers have to re-read or look up definitions to fully understand the meaning of the writing.

Refer to the following:

1. **Example of additional words:** All things being equal, the minister will consider each and every policy recommendation before making his complete and final decision in writing. Never at any time will a ministerial decision be made by anyone but the minister.

Example of clearer information: The Minister will consider each policy recommendation before making his final decision in writing. Ministerial decisions can only be made by the Minister.

2. Example of how the national anthem might sound in jargon:
 - Australians all let us rejoice
National stakeholders going forward should be committed to visionary communications
 - For we are young and free
For we incubate next-generation scenarios that leverage dynamic functionalities

- With golden soil and wealth for toil
With mission-critical infrastructure to maximise world-class deliverables
- Our home is girt by sea
Our brickware harnesses frictionless supply chain scenarios.

3. How the choice of words matter:

- Basically, essentially - these words don't add value. They are essentially useless.
Before: These words basically don't add value.
After: These words don't add value.
- Totally, completely, absolutely, literally, actually - without filler words.
Before: Your writing will be totally fabulous.
After: Your writing will be fabulous.
- Just - if your sentence works without it.
Before: Just don't use this word.
After: Don't use this word.
- That - this is a word you should only use when you need it for clarity.
Before: This is a word that you should only use when you need it for clarity.
After: This is a word, you should use when you when you need it for clarity.
- In order - eliminate verbiage to clean up your writing.
Before: In order to clean up your writing.
After: To clean up your writing.
- In the process of:
Before: We are in the process of learning to remove wordiness.
After: we are learning to remove wordiness.

Active Voice

Plain English uses an active voice to clearly specify who is doing what.

- **Active:** I have declined this review because the information provided does not demonstrate a need for your supports to be changed.
I (the subject) is present

Declined (the verb) upfront

Review (object) is present.

- **Passive:** The information provided does not demonstrate a need for your funded supports to be changed so the request has been declined.

Delegate (the subject) is not present

Declined (the verb) is at the end – so not telling them straight up

Review (the object) is not present.

This short [YouTube video](#) explains the difference between active and passive voice and the benefits of why we use active for correspondence.

Naming Convention

Any documents must have the following naming convention. This will assist with locating relevant information and documents. The name of the document should be:

Participant or Applicant surname, Participant or Applicant first name, NDIS number, Topic/Document Name/Document and Report Date.

For example, Smith James 4312345678 Acknowledgement Letter 2023-April-29 or Smith James 4312345678 Occupational Therapist Report 2022-April-29.

Correspondence

Some Reviews Branch correspondence contains free text options so your communication can be tailored to reflect an applicant's or participant's unique circumstances. Before you send out any correspondence read the information back. Reading back the information can help with clarity and the intent of your written information. Checking this is an important step before sending out any correspondence that contains free text.

Reach out to your line manager if you are requiring support when completing the free text field.

When emailing correspondence, please be aware of the classification you are using - Official or higher classification depending on the content of the correspondence. Refer to the [Information security](#) intranet page.

Guidance for free text sections

An internal review request for further information and outcome letters contain free text sections. This is so the information you're requesting (or the applicant, participant or authorised representative wishes to provide) or decisions made, can be written to accurately reflect the circumstances.

When you issue a decision-based letter you are doing so as a delegate of the CEO under legislation and must be careful to comply with that legislation as well as taking care to avoid any potential reputational risk to the Agency.

To support you with completing free text sections within internal review letters:

- Ensure information is objective, include facts based on evidence, and avoid personal opinions or feelings. We must make good, evidence-based decisions. Communicating the internal review decision clearly is critical as it improves the applicant's or participant's experience and understanding.
- Reference all information the participant has provided in your decision. This includes any documents or material relied on such as medical reports, comments, conversations, emails and applicant or participant submissions.
- Keep the text short, simple and in plain conversational English.
- Avoid jargon, terminology or additional information that is non-specific or does not add value to the applicant's or participant's understanding of the review outcome.
- Introduce all acronyms before using them. For example, 'Assistive Technology' (AT).
- Remove any red text. Use black Arial 12 font unless applicant or participant has requested alternate format.
- Do not include further references or duplication of information.
- Provide the basis for how you reached your decision against each criterion in the legislation. For example, if a support does not meet two of the reasonable and necessary criteria, explain your decision about both criteria.
- Do not copy wording from other documents that are not written in plain English.
- Refer and use language used in [Our Guidelines \(external\)](#). Our Guidelines are based on the NDIS Legislation and Rules and clearly explain in plain English what we consider and how we make decisions based on legislation.

- Refer to the evidence where possible provided that has resulted in review decision.
- Approved supports should be referred in terms of support hours/quantities, rather than dollar values.
- The decision on any outstanding Assistive Technology/Home Modifications is recorded on the decision letter.
- For declined supports under s34(f) for reviews planning, you may like to add information or links to relevant mainstream options.
- If your decision or request for further information was made after advice from other stakeholders within the Agency, do not refer to that stakeholder within the free text or letter.
- Usually, the free text section for explanation of your decision will be approximately 100 words. More or less words may be required in this section depending on the complexity, information, evidence and circumstances of the internal review.

Freedom of Information

All documents (including draft documents) in the possession of the NDIA and other contracted entities are subject to the FOI Act. This includes:

- emails, and Microsoft Teams conversations (whether stored on the NDIA's official record keeping system or not)
- information recorded in the NDIA Business System
- notes of meetings (both the scribe's verbatim notes and formal minutes – whether they have been adopted or not)
- deliberative papers and briefs (both in final and draft form)
- video, images and sound recordings, PowerPoint and other presentations
- documents either created by the NDIA or passed to it by third parties.

IRT - Miscategorised request

This article provides guidance for a review officer, business support officer, or participant support officer to lodge the correct case when a request has been lodged incorrectly as an internal review case.

Recent updates

20 January 2025

Administrative Review Tribunal name updated. Inclusion for staff to refer to article Understand and choose the right plan change request, for requests relating to plan continuation.

Miscategorised requests

Miscategorised requests are those lodged as an internal review s100 when it's another type of request and not a review of a reviewable decision request. These may include:

- Assistive Technology Home Modifications (ATHM)
- Plan Change Requests:
 - Change of circumstances requiring participant requested plan reassessment – s48(2) and s48(3)
 - Plan variation (section 47A).
 - Change to the participant's statement of goals and aspirations (s47)
 - Out of time s100, where an internal review request is made after 3 months from the original decision in writing
 - Where an internal review decision has already been made on the reviewable decision. For example, a second request on the same plan or when a new plan was created as a result of an s100
 - Where an external review decision has been made, and the new or varied plan is a result of the Administrative Review Tribunal (ART) outcome.
- Implementation support
- Assessments requested by the agency (excluding ATHM).

For each possible miscategorisation type you will need to contact the participant and/or their authorised representative to clarify the request and ensure the right request type they choose can be actioned. This may include withdrawing the internal review case with consent, which will impact review rights.

When contacting a participant or their authorised representative, you must first check their preferred communication method and authorisations. Refer to the article [Check a person's preferred contact method](#).

When contacting a participant, or their authorised representative, you must also log an activity. Activity types include:

- SMS messages
- phone calls
- emails
- face-to-face meeting.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

If during contact, there is a media threat, advise your line manager who will contact the Media Team and advise of any follow up action if required. If during the contact, there is information or evidence to identify situations where the request is miscategorised and needs to be escalated refer to article [Review the escalation prioritisation matrix](#) to identify the level of risk to the participant or applicant making the review request.

Select the option that most closely matches the participant or applicant's situation to identify the risk level. If there are multiple risks, the highest risk level represents the overall risk to the participant or applicant making the request. For high or extreme risks identified, advise your line manager.

Phone

1. Make one contact attempt. This attempt requires a pre-call SMS. Refer to article [IRT – Send an SMS](#).

If your phone contact is unsuccessful refer to the article [IRT – Unable to contact process](#). Refer to the relevant miscategorisation topic below for guidance and the process to lodge the correct request type.

Email

1. Send an email. Refer to article [IRT - Sending an email](#). If your email contact is unsuccessful, seek advice from your line manager before proceeding to make a decision.
2. Refer to the relevant miscategorisation topic below for guidance and the process to lodge the correct request type.

Mail

1. Send the **Internal Review Unable to Contact Letter** to the participant's listed address and request a reply within 14 days. Refer to the article [IRT – Sending a manual letter](#).
2. If your mail contact is unsuccessful, seek advice from your line manager before proceeding to make a decision.
3. Refer to the relevant miscategorisation topic below for guidance and the process to lodge the correct request type.

Miscategorised topics

Assistive technology home modifications

If the request is for a new ATHM due to a change of circumstances or there is information that would affect multiple supports within the plan or could be assessed under a plan variation, refer to the topic Plan Change Requests.

If there is evidence the ATHM has been declined within the statement of supports, this should not be considered as a miscategorisation and an internal review decision should be made. This may include where the ATHM was declined as a vary request and the participant is seeking a review of that decision.

All other requests should be returned to Service Delivery, refer to article refer to articles [Prepare to submit a plan change request](#) and [Create a participant plan change request where the legislative type isn't specified](#).

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Plan change requests

If the request appears to be for a plan reassessment or plan variation, during your contact, clarify with the participant what plan change request they are seeking. Advise the participant of their options, review rights and time frames for decision making.

The participant can request to continue with the internal review or choose a plan change request type. Where the participant chooses a plan change request, the review needs to be withdrawn. Seek the participant's agreement to withdraw the review request and to lodge a plan reassessment or variation.

Plan change requests are actioned by Service Delivery. To create a plan change case, refer to articles [Prepare to submit a place change request](#), [Create a plan reassessment \(s48\) request](#) and [Create a plan variation \(s47A\) request](#).

If the participant is seeking a review because a plan continuation, refer to article [Understand and choose the right plan change request](#).

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Change to the participant's statement of goals and aspirations

This category is used when the participant is not asking for changes to funded supports but wishes to make changes to the participant statement of goals and aspirations on the existing plan.

All requests should be returned to Service Delivery, refer to article [Create an enquiry case](#).

When creating the **Enquiry case**, at the **Categorisation** view, for:

- **Type**, select **Participant Details**
- **Category**, select **Participant Update**
- **Sub Category**, select **Goals and Statement**.

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Out of time s100

Check if/when the participant, applicant or authorised person affected by the original decision/plan received a copy of the decision in writing. They have 3 months to ask for an internal review. This is 3 months from the day after they receive the decision. If there is evidence the decision/plan was sent and the request is not within 3 months of the notice of decision, the request for review is out of time and cannot be actioned as an s100.

When contacting the participant or applicant, confirm the date they received the decision and advise them their request cannot be actioned as an internal review as the NDIS Act only allows requests for internal reviews within 3 months of the person being notified of the decision (s 100(2)). As their request was made outside of 3-months , the NDIA cannot complete an internal review.

If they have had a change of circumstances or new information, they can request this be lodged as a plan reassessment for participants or for applicants a new access request. For plan reassessments you should explain to the participant a plan reassessment is not an internal review. It is a decision about whether their circumstances have changed enough to require a reassessment of their support needs. Explain there is no guarantee they will receive a plan reassessment as a result of lodging one.

To create a plan reassessment, refer to articles [Prepare to submit a place change request](#) and [Create a plan reassessment \(s48\) request](#).

To request a new access request, refer to article [Create an enquiry case](#).

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Where an internal review decision has already been made on the reviewable decision

This applies when a set aside, vary or confirm decision has been made in an internal review case and a request for an internal review has been created. Once an internal review decision has been made, another internal review cannot be made on the same decision. There are options available to the participant or applicant if they don't agree with the decision made.

This includes asking us to explain our decision, ways the participant can use their plan and how to access supports. For more information, visit [what other options are available to you? \(external\)](#) on the [Request a review of a decision \(External\)](#) internet page.

If the participant or applicant is not happy with the internal review decision, they have which 28 days to seek an external review with the Administrative Review Tribunal.

For more information about asking for an external review of an NDIS decision, refer to the [Administrative Review Tribunal website \(External\)](#).

To create a plan change case, refer to article [Prepare to submit a plan change request](#).

To request a new access request, refer to article [Create an enquiry case](#).

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Second request on the same plan or when a new plan was created as a result of a s100

This applies only to s100 requests regarding the statement of participant supports where the plan the participant wants reviewed was either created as a result of a s100 or the decision on a previous s100 of the same plan was confirmed.

You will need to check for a confirm decision or compare the current plan date to the date the s100 was closed. If the dates are the same it was created as a result of an s100. If the plan was approved after the s100 it was not the result of an s100 and you can proceed.

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Where an external review decision has already been made on the reviewable decision

Sometimes a new or varied plan is a result of an external review with the Administrative Review Tribunal (ART) outcome. These outcomes are not reviewable by the NDIA. Check for previous cases since the internal review decision was made. There may be notes within the most recent plan change case that states the new or varied plan is a result of an ART outcome. If they need support to understand the external review decision you can refer them to the ART Case Manager.

Implementation support

This process is for when a participant only requires support implementing their plan.

If the participant is happy with the support you have provided during your conversation advise them no further action will be taken on their request.

Implementation support is provided by Service Delivery. To create an implementation case, refer to article [Create a plan implementation case](#).

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

Assessments requested by the agency (excluding ATHM)

If there is clear evidence on the plan that the delegate's intention was to fund additional assessments before considering the requested supports, on receipt of these assessments the original plan delegate needs to consider undertaking an agency-initiated plan review to consider recommendations in the assessments. This could include assessment for exploring housing options, therapy supports or Supported Disability Accommodation (SDA) eligibility.

If it is not clear the delegate's intention was to reconsider supports on receipt of certain assessments the request should be treated as an internal review request.

All requests should be returned to Service Delivery, refer to article [Create an enquiry case](#).

If the review request is incorrect, and the request needs to be withdrawn, refer to article [IRT - Withdraw an internal review](#).

IRT - Planning request internal note templates

This article provides guidance for a review officer, business support officer or participant support officer to use templates to accurately record activities for internal notes in PACE.

Recent updates

1 December 2025

Updates to initial call and clarification of review contact template.

Templates

Recording activities within **PACE** is essential for information gathering, record keeping and a nationally consistent service delivery approach. Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

Select the relevant **Internal Notes** name to use the template relating to the action completed on the **Internal Review Case**.

Note: For s100 – Completed – No change to statement of supports (confirmed decision) and s100 – Completed – Change to statement of supports – Implementation required with participant (set aside/vary decision) templates must be added into the **Handover Notes** for the **Plan Implementation**.

s100 – Withdrawn as review created in error or to follow alternate pathway

Note: This withdrawal template is for the purposes of participant requested withdrawals, including if they choose an alternate pathway.

Pre-Contact SMS Sent: <Not able to send to contact for purpose of review> <Yes on dd/mm/yyyy to nominee/child representative/guardian/participant/applicant>

Contact with: <full name> <relationship – nominee/child representative/guardian/participant/applicant>

Email/Phone number: <email or number>.

Consent confirmed: <Yes/No> <who gave consent, how – over the phone/in writing, to

whom the consent is being given, for what purpose, for how long the consent is provided>.

POI (Proof of Identity) confirmed: <Yes/No> < Provide details of the 3-point security check – full name, address, DOB, email, organisation name, work email, work address, participant's NDIS (National Disability Insurance Scheme) number, participant's DOB>.

Withdrawal confirmed by: <Full name> <relationship – nominee/child representative/guardian/participant/applicant>

Withdrawal explanation: <Detail why the internal review was withdrawn and any additional information such as review created in error> or <participant/plan nominee/child representative/guardian/decision maker> indicated they have made the decision to withdraw the internal review request and follow alternate pathway as request is s47a/s48.>

I have advised the impact of withdrawal on the review request (no decision will be made, no Administrative Review Tribunal (ART) rights to the < participant, authorised representative>, as well as relevant options discussed <list options for example linkage with community partner details, implementation of plan supports>.

Advised the National Disability Insurance Agency (NDIA) will not take any further action on the internal review request, and they will not receive a decision letter. The internal review request is withdrawn on <dd/mm/yyyy>. Advised withdrawal letter will be issued.

s100 - Request review withdrawn due to early resolution

Pre-Contact SMS Sent: <Not able to send to contact for purpose of review> <Yes on dd/mm/yyyy to nominee/child rep/guardian/participant>

Contact with: <full name> <relationship – nominee/child representative/guardian/participant>.

Email/Phone number: <email or number>.

Consent confirmed: <Yes/No> <who gave consent, how – over the phone/in writing, to whom the consent is being given, for what purpose, for how long the consent is provided>.

POI Confirmed: <Yes/No> < Provide details of the 3-point security check – full name, address, DOB, email, organisation name, work email, work address, participant's NDIS number, participant's DOB>.

Withdrawal confirmed by: <Full name> <relationship – nominee/child representative/guardian/participant>

Reason for withdrawal: < Participant/plan nominee/child representative/guardian/decision maker> indicated they have made the decision to withdraw the internal review request because of <a scheduled reassessment due in/early resolution> <Note the reason for the withdrawal and participant's understanding of the early resolution>.

Outcome: Advised the NDIA will not take any further action on their request for internal review, and they will not receive a decision letter. They will therefore not be able to appeal to the ART to change their plan. They will however still be able to ask the NDIA for a participant initiated plan reassessment at any time. Confirmed having received this information, <name of person you spoke to> would still like to withdraw the request.

Next steps informed:

As per this conversation/contact the internal review is withdrawn on <dd/mm/yyyy>. Advised withdrawal letter will be sent out via the preferred communication method by <postal address/email address abcd@xyx.com>.

s100 - Unauthorised review request

A review request for an s100 review of a reviewable decision was lodged on <dd/mm/yyyy> by an unauthorised person. <Record the detail of the unauthorised representative, relevant information>.

The Reviews Branch has withdrawn the s100 and will take no further action on this request. It was not deemed a valid request as no consent was noted on the record from the participant.

I confirm I have checked this participant record and the party that submitted the review request does not have authority to act on behalf of the participant.

If an internal review is required, please advise the requestor they will need to re-submit the s100 with the required consent.

If the participant provides consent for the review in the future, the date of the request should reflect the date a valid request was made.

The Internal Review Unauthorised Request Letter has been sent to <participant> on <insert date letter was sent>.

<Logon ID>

s100 – Initial call and clarification of review contact

Date: <dd/mm/yyyy>

Pre-Contact SMS Sent: <Not able to send to contact for purpose of review> <Yes on dd/mm/yyyy to nominee/child rep/guardian/participant>

Contact with: <full name> <relationship – nominee/child rep/guardian/participant>

Phone number: <number>

Consent confirmed: <Yes/No> <who gave consent, how – over the phone/in writing, to whom the consent is being given, for what purpose, for how long the consent is provided>

POI Confirmed: <Yes/No> < Provide details of the 3-point security check – full name, address, DOB, email, organisation name, work email, work address, participant's NDIS number, participant's DOB>.

Review requests as confirmed:

<Request/s>

For example:

Core support for 15 hours per day to assist with daily living

30 hours of Therapy per week

Funding for Assistance dog.

<Brief notes/any key points from phone conversation/ information relates to review request>.

Confirm relevant current evidence on file. All evidence provided for the internal review: <Yes/No>. <If No, provide details of what further information is to be provided>.

I have explained in addition to the above specific requested supports, we will consider the total statement of participant support and determine this is correct and if any adjustments are required to be made. This means funding could increase or decrease based on the outcome of the review. If I find an error in funded supports I will arrange contact before making my decision.

Further evidence requested by IRO: <Yes/No>

Document Listing (If required): <Insert evidence used for most recent decisions and all newly provided evidence using the naming convention: Participant surname, Participant first name, NDIS number, Topic/Document Name/Document and Report Date.>

Agreed timeframe: Occupational Therapy report/Functional capacity assessment, Letter from specialist to be provided by <dd/mm/yyyy>.

Preferred Plan Duration discussed: <24 month/12-month plan end date same as scheduled reassessment>.

Preferred Plan Management: Participant wants the new plan to be <Agency/Plan/Self-managed>.

Preferred Funding Periods: Participant has a preference of <1/3/6/12 month> funding periods.

Plan implementation meeting offer outcome: <accepted/declined>

Preferred Method of Contact for Internal Review Outcome: <Confirmed as per

current information on system by phone/email/mail> <Preferred Method of Contact Details updated> <Internal review decision agreed to be communicated by phone/email/mail>.

Next steps informed:

If no response is received by the due date, a decision will be made based on the evidence available.

Details provided to assist with gathering further evidence. Details provided include <provide relevant details about Support Coordinator/Local Area Coordinator or Early Childhood Partner>.

Once the internal review decision is made the outcome will be communicated by <phone/email/mail>.

<Logon ID>.

s100 - Unable to contact

Date: <dd/mm/yyyy>

Pre-Contact SMS Sent: <Not able to send to contact for purpose of review> <Yes on dd/mm/yyyy to participant's name/authorised representative>

Contact with: <full name> <relationship – participant/ name/authorised representative>

Phone number: <number>Contact attempt was made regarding an Internal Review via <email/phone/SMS> to <participant's name/authorised representative> on <insert phone number/email address>.

If contact was via phone, add the following sentence <Message left on voicemail> OR <No verifiable voicemail therefore no message was left>

s100 - Outcome decision - Reassess a plan (s48)

Date: <dd/mm/yyyy>

Decision Outcome: <insert decision type>

A s100 review was completed on dd/mm/yyyy in relation to the previous decision made to not <conduct a plan reassessment / not to vary the plan>.

A decision was made based on the evidence available at the time of review.

All documents relevant to the decision, including the decision letter are uploaded to PACE.

A copy of the decision letter has been emailed/posted to participant/nominee/child representative at <insert email address/address> on dd/mm/yyyy. <If email is their preferred method of communication, include the following sentence:> Notification SMS Sent for s100 outcome email sent: <Yes on dd/mm/yyyy to nominee/child rep/guardian/participant>.

If not satisfied with the decision, they may also apply to the Administrative Review Tribunal (ART) for a further external review within 28 days of receiving the letter. More details about ART are included in the letter.

Plan implementation support information was provided to the participant and they <accepted/declined> a plan implementation meeting.

Confirmed all internal notes and communications completed? <Yes/No>

<Logon ID>.

s100 – Completed Outcome - Statement of supports/Plan variation (s47A)

Date: <dd/mm/yyyy>

Decision Outcome <Set aside/Vary/Confirm>

An s100 review of <statement of support/variation s47a> was completed on: dd/mm/yyyy

Supports reviewed were:

- <List support 1>
- <List support 2, if applicable>
- <List support 3, if applicable>
- <If s47A plan variation was also included in your s100 decision, include the support request here and state in brackets at the end of the sentence (s47A request), if applicable>.

A decision was made based on the evidence available at the time of review.

All documents relevant to the decision, including the decision letter are uploaded to PACE.

A copy of the decision letter <and plan (if set aside/vary decision)> has been emailed/posted to participant/nominee/child representative at <insert email address/address> on dd/mm/yyyy. <If email is their preferred method of communication, include the following sentence:>If not satisfied with the decision, they may also apply to the Administrative Review Tribunal (ART) for a further external review within 28 days of receiving the letter.

More details about ART are included in the letter.

Plan implementation support information was provided to the participant and they <accepted/declined> a plan implementation meeting.

(If decision was to set-aside/vary also include the following):

Plan Duration:

Plan Management:

Was the PCST used as part of the plan build? <Yes/No/>

Has the PCST been attached to the record? <Yes/No/>

Removal/changes to supports: <Include any supports that were removed or changed as a result of the review and why this has occurred>

Additional Delegate notes for plan implementer: <Include any additional information the implementer will require when implementing the plan>.

Please accept this as notification the participant's record is also being returned for implementation of the plan.

Confirmed all internal notes and communications completed? <Yes/No>

<Logon ID>.

(If decision was to confirm also include the following):

There has been no change to the participant's statement of supports, the date the plan will be reassessed by or plan management method. For further information refer to the s100 Outcome of Decision letter. The participant may require additional support to access mainstream or community services <add additional information that may be relevant>.

Plan implementation support information was provided to the participant and they <accepted/declined> a plan implementation meeting.

Confirmed all internal notes and communications completed? <Yes/No>

<Logon ID>

s100 - Request to complete a plan reassessment (s48)

Date: <dd/mm/yyyy>

<Insert the following sentence if the request requires priority action: This request is identified for priority action due to potential risk or escalation and has been endorsed

by <insert logon of Team Leader/Assistant Director> who will provide a handover to <insert relevant business area> for action.>

Risk: <insert, low, medium, high, extreme>

Risk Reason: <insert reason>The Reviews Branch completed a s100 decision on <dd/mm/yyyy> and decided a plan reassessment should take place. The reason for the plan reassessment is <insert justification for reassessment>. It is the responsibility of the planning delegate to consider all reasonable and necessary supports and approve the new plan within their delegation. Please schedule a reassessment meeting with participant and undertake a plan reassessment.

Confirmed all internal notes and communications completed? <Yes/No>

<Logon ID>.

s100 - Internal review home and living advice required

Date: <dd/mm/yyyy>

Home and living advice required following s100 Decision

Risk Rating: (Low, Medium, High, Extreme).

Risk Reason: (for example, homelessness in 2 weeks, no funding in current plan).

The Reviews Branch have endorsed an internal review where home and living supports have been impacted, advice is required prior to plan approval.

Internal Review Home and Living Team - please advise if a change to the SIL or LASA calculation is required. <insert if other advice is required here>.

Decision made: (for example, s100 decision to set aside the original decision).

Review Request for: (please list reason, for example, changes to SCCP etc.).Please

refer to s100 work item XXX and Inbound Documents named XXX for further information.

Please update this Interaction Record and/or contact Reviews Branch Delegate to discuss advice.

<Logon ID>.

s100 - Explanation of decision

Date: <dd/mm/yyyy>

Pre-Contact SMS Sent: <Not able to send to contact for purpose of review> <Yes on dd/mm/yyyy to nominee/child rep/guardian/ /participant/>

Contact with: <full name> <relationship – nominee/child rep/guardian/participant/>.

Phone number: <number>

<Attempt number>: Phone/Email contact made to discuss the request for Explanation of decision, no answer, <no message was left/a voicemail message was left with Review Officer's name.

Explanation of Decision:

Review request: <list the requests>

Decision made: <confirm/set-aside>

Explanation: <Explanation provided to participant or authorised representative for outcome reached>

Would you like today's explanation of decision in writing? <yes/no>

If not satisfied with the decision, they may also apply to the Administrative Review

Tribunal (ART) for a further external review within 28 days of receiving the s100 outcome letter.

More details about ART are included in the letter.

<Logon ID>.

s100 – Higher Decision Delegate Approval Level 4

Plan submitted for approval on: <dd/mm/yyyy>

Review type: <specify s100 Review type>

Plan completed by: <Logon ID>:

NDIS number:

CASE ID number:

Outline of s100 request:

Supports proposed to be set-aside/varied as part of this Internal Review Request:

- <List support 1 category and volume/frequency>
- <List support 2, if applicable>
- <Plan management type, if applicable>
- <Plan variation decision under Section 47A, if applicable>

Supports proposed to be confirmed as part of this Internal Review Request:

- <List support 1 category and volume/frequency>
- <List support 2, if applicable>
- <Plan management type, if applicable>

- <Plan variation decision under Section 47A, if applicable>

Plan duration:

Inflation percentage:

I confirm the participant's plan management decision has been taken into consideration and they have chosen to <delete this instruction and select one option> Agency Manage/Partially Self-Manage/Plan Manage.

I have considered supports which are reasonable and necessary and these supports are funded under s34 of the NDIS Act. I have detailed in justifications my reasoning as to why supports are reasonable and necessary and included a list of materials referred to as part of the s100 decision.

s100 –Review Officer home and living assessment specialist disability accommodation
SDA Price for Approval (lowest of below as per - Implement SDA quote): \$0.00

RO HaL SDA Decision:

PACE Case: <#XXXXXXXX>

Decision Date: <dd/mm/yyyy>

SDA Type:

Location:

Design Category:

Building Type:

Maximum Price (2024/25):

SDA PACE Enrolled Dwelling:

Asset Provider:

Address:

SDA Type:

Location:

Design Category: Building Type:

Maximum Price (2024/25):

s100 - Legacy specialist disability accommodation

SDA Quote has been processed and approved in PACE by IRO HaL <LOGON ID>

As per Our Guideline - Specialist Disability Accommodation page,13, where a participant is residing in SDA prior to accessing the NDIS, they are eligible for SDA funding. However, where a participant moves from their accommodation setting, they are still eligible but will require an SDA re- assessment.

Legacy Enrolled Dwelling:

Legacy ID: Asset Provider:

Address:

SDA Type:

Location:

Design Category:

Building Type:

Max Price:

IRT - Remove a non-NDIS Support

This article provides guidance for an internal review officer to identify and remove a non-NDIS support from a participant plan when making a decision to set-aside or vary the statement of supports.

Recent updates

1 December 2025

Hyperlinks and process for confirming updated.

Before you start

You have completed the steps in the article - [IRT – Contact the participant or applicant](#).

Is the support a NDIS support?

When a review officer is making a decision to set-aside or vary a statement of supports, they must consider if all the existing funded supports are NDIS supports.

To determine if a support is a NDIS support, internal review officers can refer to our guidelines:

- [What does NDIS fund? \(external\)](#)
- [Supports that are NDIS Supports \(external\)](#)
- [Supports that are not NDIS Supports \(external\)](#).

Locating specified supports in a participant plan

Each support item that has been funded in a participant's plan will be justified in the plan approval justifications and plan comments.

- Internal review officers should review each budget item justification and plan comments to confirm if a non-NDIS support is funded in a participant's current plan. The budget item justifications and plan comments will explain what has been funded and the intention of a support item.

To locate the budget item justifications and plan comments:

1. From the **Plan Approval case**, select each individual support category line from the **Flexible Budget** and **Stated Budget**.
2. View the **Justification** for each budget item.
3. Select **Next**.
4. View the **Plan Comments** for each budget item.

What do I do if I identify a non-NDIS support in a participant plan?

If a participant has been funded for a support that is not on the list of [Supports that are NDIS Supports \(external\)](#), or is specified on the list of [Supports that are not NDIS Supports \(external\)](#), and the plan was approved before 3 October 2024, do not remove the support.

If a participant has been funded for support that is not on the list of [Supports that are NDIS Supports \(external\)](#), or is specified on the list of [Supports that are not NDIS Supports \(external\)](#), and the plan was approved on or after 3 October 2024, the internal review officer must remove the support when varying or setting aside the statement of supports.

If a support is being removed from a plan, the plan comment that references this support must be removed.

Legislative Exclusions

There are three supports, services or items which cannot be funded under any circumstances. Sexual services, alcohol and drugs are legislatively excluded in the NDIS Act 2013 s10(9), and if these are identified in a participant's plan they must be removed regardless of when the plan was approved.

What if I am confirming the original decision?

If an internal review officer is confirming the statement of supports decision, do not remove any of the funded supports. If you identify a participant has received a non-NDIS support in error, speak to your team leader about the different pathways available when a non-NDIS support has been included, but we are making a confirm decision.

Removing a non-NDIS Support from a participant plan

To remove a non-NDIS support from a plan, refer to **Remove a support category from the approved plan** and/or **Adjust a support category** in the article [Change the draft budget](#).

How to determine the value of the support being removed?

The value of the supports that have been funded in a participant's plan is specified in the justification and/or plan comments, and in the plan conversation support tool (PCST).

If the value of the non-NDIS support to be removed is not specified in the justification and/or plan comments, or PCST discuss an appropriate value with your team leader.

What if the non-NDIS support has already been claimed and/or the removal of the support results in a negative budget?

If the non-NDIS support has already been claimed by the participant, the support must still be removed from the plan and the plan comment deleted.

Upon removal of a non-NDIS support, if the total amount in a budget category is displaying as a negative balance, a **Plan Approval case** will be required to action the decision. Internal review officers will need to raise a [3P Support Suite ticket](#) requesting that a **Plan Approval case** be created.

Note: When submitting the ticket via the Service Desk you will need to select the option to **Share** the ticket for tracking. Refer to your team leader for who this is to be shared with.

Call guidance scripts

Initial call

Refer to articles – [IRT- Contact the participant or applicant](#) and [IRT - Initial call scripts](#).

As part of the initial contact to a participant to clarify their internal review request and gather additional details, the internal review officer should advise the participant of the following:

- As part of the internal review of the supports in your plan, we are also required to consider if all the existing funded supports are NDIS supports.
- This is in line with the legislation changes that occurred on the 3rd of October 2024.
- If it is identified that you have been funded for support that is not on the list of [Supports that are NDIS Supports \(external\)](#), or is specified on the list of [Supports that are not NDIS Supports \(external\)](#), or is specified as a legislative exclusion, it is likely that this support will be removed from your plan.

- Information regarding what is and is not a NDIS support can be found on the NDIS webpage and Our Guidelines.

Outcome call

Refer to article – [IRT – Communicate an outcome](#).

As part of the contact to a participant to inform them of the outcome of the internal review, if an internal review officer has removed a non-NDIS support from the plan they should advise the participant of the following:

- The internal review process identified that you were funded a non-NDIS support.
- This support has been removed from your plan because it is not on the list of [Supports that are NDIS Supports \(external\)](#) or is specified on the list of [Supports that are not NDIS Supports \(external\)](#), or is specified as a legislative exclusion.

IRT – Requests for further information

This article provides guidance for a review officer, business support officer, or participant support officer to request further information from a participant or applicant.

Recent updates

20 January 2025

Request for further information process steps updated.

Requests for further information guidance

When completing an internal review, you may need to request further information from the participant or applicant, or they may request to supply additional information.

Where the participant or applicant has indicated they do not intend to provide further information, and the review officer finds that further information will not materially change the decision, further information should not be requested.

When completing further information requests, review officers must manage the participant or applicant's expectations, so they don't expect a favourable outcome on the provision of the evidence.

The NDIA does not generally fund requested information, including assessments and reports that may assist in completing an internal review. Review officers are to discuss this with participants or applicants if asked and seek support from their line manager if needed.

Timeframes for return of requested evidence

The standard timeframe is 28 days for the return of further evidence or information. This is not a legislative timeframe but is considered a reasonable timeframe for procedural fairness in an administrative review.

Evidence can be returned by replying to the request for information email with the related documents attached. Inform them to note their full name and NDIS number in

the email subject. If it is preferred to return the information by mail, provide the address, GPO Box 700, Canberra ACT 2601.

If information is provided prior to the timeframe expiring, review officers need to make contact to confirm all documents have been received, and that there are no further documents to be provided. If there are no further documents to provide, review officers can then progress with the review.

It is recommended that review officers set an alert to remind them to check for the return of evidence. Searching PACE using the participant NDIS number will allow review officers to locate any returned evidence that may be sitting in enquiries.

Requests for extensions

When a participant or applicant asks for extra time to provide further evidence there must be a clear reason for the review officer to agree. Examples of reasons may include:

- Specialist appointment or Allied Health Professional appointment has been booked but has not yet occurred.
- Local or State Emergencies or severe weather events impacting on gathering of evidence.
- Rural or remote geographical impacts (visiting specialists).
- Changes to caring arrangements, including informal supports, due to death, serious illness or injury of informal supports, or significant and unexpected deterioration of disability-related functional capacity.
- Risk to self, others, community, or agency reputation.
- A participant or applicant is living in an emergency declared region which has been affected by a recent emergency.
- A participant or applicant requires a specialist appointment and there is a long wait for appointments.
- Unstable or fragile arrangements can also be considered (for example risk of relinquishment of a child).
- Participants or applicants who do not have any disability specific supports in place and are re-entering the community after a long-term residential stay (for

example prison release, mental health treatment release, newly acquired significant disability or spinal cord injury).

- Recent or upcoming hospital admission or discharge.

s47E(d) - certain operations of agencies

If an extended timeframe for further information will lead the internal review becoming older than 60 days, consult with your line manager for endorsement of the timeframe extension.

Requesting further information process

This process is for further information requests only. For unable to contact refer to article [IRT - Unable to contact process](#).

From the **Internal Review Case**:

1. Select the **Decision** tab.
2. Select **Request Further Information (RFI)**.
3. At request for further information screen type the information you are requesting, including from who and why, into the free text box. List each item you are requesting and separate with a comma.
4. Select **next**.

Note: The information you type will appear in the letter, please ensure you format this so it is readable.

5. At recipient detail screen select **next**.
6. At preview options screen, do you want to preview the document before sending? Select **yes**. From the select a recipient for preview drop down menu, select the Participant/applicant, then select **next**.
7. Once you have previewed the document, select **next**.

8. At the confirm correspondence screen, select **submit correspondence**.
9. At the confirm correspondence screen, select **next**.

The chevron will now move to **Requested further info**.

The request for information letter will be automatically sent to the participant/applicant and will be added to the documents tab. **Note:** A manual letter will need to be created for plan nominees or authorised representative as per article [IRT – Sending a manual letter](#). The manual letter should reflect the same information in the auto-generated RFI letter. For example, the same 28 day timeframe should be reflected in a manual letter, as well as selecting the same enquiries@ndis.gov.au return email address.

Document the further information request as an **Internal Note**. Refer to article [Log an activity or internal note](#).

Make sure you do not progress the review before the further information request or unable to contact timeframe has elapsed. For approved timeframe extensions for further information requests, leave the chevron in **Requested further info**.

Moving the chevron back to in progress

Once the information is returned, or the further information request timeframe has elapsed, you must move the chevron back to in progress.

From the **Internal Review Case**:

1. Select the **Progress Case** button.
2. A confirmation box will appear advising the case has been progressed successfully. Select **Done**.

The chevron will now move to **In Progress**.

Next steps

- For planning internal reviews, refer to article [IRT - Enacting a planning review decision](#).
- For access and revocation internal reviews, refer to article [IRT - Enact an access or revocation review decision](#).

IRT - Translating, interpreting and alternate format requests

This article provides guidance for review officers, business support officers, and participant support officers to arrange for translation and interpreting services for communication with participants and applicants.

Recent updates

17 September 2025

Intranet links updated.

Alternate communication methods

The Agency is committed to communicating with participants or applicants in their preferred method of communication. Reviews Branch staff need to support participants and applicants to communicate in their preferred method. Refer to the articles [Check a person's preferred contact method](#) and [Guide - Assisting communication](#).

Translating documents to another language

Refer to the article [Guide - How to request a participant plan in a language other than English \(LOTE\)](#).

Using an interpreting service

Refer to the article [Book translation and interpreter services](#).

Increasing the font size of a document

If a letter needs an increased font size, please follow the below steps:

1. Forward an email to [Operations Support and Governance](#).
2. Include the **Subject** as: **Action | Font size change request**.
3. Attach the letter to the email as a word document.
4. Advise of the font size required.

IRT – Unable to contact process

This article provides guidance for a review officer, business support officer, or participant support officer to complete the unable to contact process.

Recent updates

1 July 2024

- updated user role name
- updated Next Steps section.

Unable to contact process

If you are unable to contact the participant or applicant, you must follow the unable to contact process:

1. Send the unable to contact letter via email or mail. Refer to article [IRT – Sending a manual letter](#).
2. The next business day after the unable to contact timeframe has lapsed, if correspondence or a response to the email or letter has not been received, a final phone call attempt is required. This includes sending a pre-call SMS, refer to article [IRT - Send an SMS](#).
3. If phone call contact is unsuccessful, proceed with the internal review based on the information available.

Next steps

- If contact attempts are unsuccessful, progress to enact the article [IRT - Enacting a planning review decision](#) or [IRT - Enacting an access or revocation review decision](#).
- If contact is successful, complete the remaining steps in the article [IRT – Contact the participant or applicant](#).

IRT - Verifying age and residency

This article provides guidance for a review officer to:

- make a decision on the age requirements
- make a decision on the residence requirements.

Recent updates

8 September 2025

Updates to Verifying residency.

Added links to IRT – Setting up VEVO login details and IRT – Complete a VEVO check.

Verifying age and residency

When completing an access or revocation internal review, at times, an applicant may not provide consent to verify age and residency through Centrelink, may not have a Centrelink customer reference number, or Centrelink information may be incorrect or out of date. In this circumstance, an internal review officer must confirm age and residency through documentary evidence.

Verifying age

To be eligible for the NDIS, an applicant must be younger than 65 on the day they apply.

When checking an applicant's age, their date of birth must match one of the following documents:

- Full birth certificate (an extract is not acceptable)
- My First Health Record ('Blue Book' in some states) signed by a doctor or midwife (only for a newborn under 3 months of age)
- Passport biodata page (the page that has their photograph on it) from a current passport or a passport that expired within the last 2 years (but was not cancelled)
- Proof of age card issued by state licensing authorities
- Driver's license

- Adoption papers
- ImmiCard.

Verifying residency

To meet the residency requirements, an applicant must be an Australian citizen or permanent resident and live in Australia.

When checking an applicant's residence status, it must match one of the following:

- Full Australian birth certificate (an extract is not acceptable) (See below for additional documents required if the applicant was born on or after 20 August 1986.).
- Australian passport biodata (the page that has their photograph on it) from a current passport or a passport that expired in the last two years (but was not cancelled).
- Australian citizenship or naturalisation certificate.
- Overseas passport or travel document which includes a valid Australian Permanent Residency Visa or Protected Special Category Visa.

If the applicant was born in Australia on or after 20 August 1986, check that the citizenship status matches one of the following documents:

- Australian passport issued on or after 1 January 2000 in the applicant's name, valid for at least 2 years
- Australian citizenship certificate
- full Australian birth certificate (an extract is not acceptable).

If these are not available, proof of one parent's Australian citizenship is required and must match one of the following documents:

- full Australian birth certificate from one parent* (an extract is not acceptable), showing the parent was born in Australia before 20 August 1986; or

- Australian passport from one parent* before the applicant's birth, valid for at least 2 years and issued on or after 20 August 1986; or
- Australian citizenship certificate from one parent*, showing they were an Australian citizen before the applicant's birth.

Note: if the parent was born on or after 20 August 1986, the applicant will also need to provide proof that one of their grandparents was an Australian citizen before this date. If the applicant can only provide partial evidence, such as their own birth certificate without any other documents listed above, discuss their circumstances with your line manager to consider the most appropriate alternatives.

If the evidence does not match the above requirements and the applicant has provided a passport, visa grant notification or Immi Card, you may be able to verify visa status in the [Visa Entitlement Verification Online \(VEVO\) system \(external\)](#). Complete the check and save the VEVO result to the **Internal Review Case**. Refer to [IRT – Setting up VEVO login details \(DOCX 64KB\)](#) and [IRT – Complete a VEVO check \(DOCX 62KB\)](#).

Note: New Zealand citizens who enter Australia on a New Zealand passport are granted a Special Category Visa (TY-444) (Temporary Visa). A Special Category Visa holder is protected if they:

- were in Australia on 26 February 2001; or
- were in Australia for at least 12 months in the 2 years before 26 February 2001 and returned to Australia after that day.

There are two ways to obtain documentary evidence the applicant has a protected Special Category Visa. Both options need to show a visa class/subclass TY-444 and have a grant date of 26 February 2001 or before.

1. VEVO Check online (the Applicant must have a valid passport or ImmiCard to obtain a VEVO check).
2. Receive an IMMI Grant Notification.

IRT - Weighing evidence of disability

This article provides guidance for a review officer to understand how to weigh evidence of disability.

Recent updates

1 July 2024

- updated user role name
- information links updated.

Weighing evidence of disability

When completing an internal review, review officers will see a range of different types of evidence from varying health professionals and providers. When weighing the relevance and importance of the evidence of disability provided, the two main considerations a review officer needs to make are:

- How old is the evidence
- Who is providing the evidence.

For information refer to:

- refer to [Types of disability evidence \(External\)](#)
- [Plan reassessment reports \(External\)](#).

IRT - What will be considered as part of an internal review

This article provides guidance for a review officer, business support officer, or participant support officer to understand what information to consider as part of a planning or access internal review.

Recent updates

1 July 2024

Removed Before you start section.

What will be considered as part of a planning or access internal review

When completing an internal review, [Our Guidelines \(External\)](#) state we will make our decision based on the facts and circumstances at the time of our internal review decision.

The internal review will consider:

- any evidence from the original decision
- reasons for the original decision
- additional information that has been provided for the internal review
- the facts and circumstances of the participant or applicant at the time of making the internal review decision (for example, this means we can consider any changes since the original decision was made, such as a change of primary disability, a change in the participant's capacity to do things for themselves, or an ongoing change to the participant's living situation, which may result in changes to supports needs)
- The NDIS Act, Our Guidelines, and endorsed internal guidance.

Further considerations for planning reviews

As part of the internal review, the Reviews Branch will review the request/s based on the support/s that the participant wishes to raise or is dissatisfied with, as well as any dependencies or related supports.

The participant may request a review of all the funded supports in the plan. They may also identify a specific support they are seeking funding for. While it is preferable for the participant to have raised any specific requests with the original decision maker, it is not compulsory. Therefore, there does not have to be an explicit request for a support made, plan management type or length of plan during the planning process for it to be considered as part of the internal review.

During a planning meeting the participant does not have to specifically identify the supports they wish to be included in their plan. It is the planner's and review officer's responsibility to gather and review all information before making a decision about what funded supports are included in the participant's plan. In some situations, a participant may prefer to have a plan reassessment or plan variation undertaken first before proceeding with their internal review. In these cases, the review officer should seek to understand the circumstances and make sure all options are well understood before enabling the participant's preferred pathway. Refer to [Our Guideline – Changing your plan \(external\)](#).

Similarly, if new quotes, reports, or assessments requested by the original delegate are submitted as part of the internal review process these can be considered if that is the preferred pathway for the participant. This could include functional capacity assessment, assistive technology or home modifications quote or reports that has been provided between the original decision and the internal review request. It is important the participant understands the impact of their decision to their review rights. Refer to [Our Guidelines - Reviewing our decisions \(external\)](#).

Submit a request for an internal review (s100)

This article provides guidance for all NDIA staff and partners to:

- check authority to request an internal review
- understand the internal review request
- create an internal review (s100) case
- complete and submit an internal review (s100) case
- understand the next steps once you submit the case.

Recent updates

15 December 2025

Guidance updated to include link to new article Understand highly likely and commonly associated impairment categories.

Before you start

You have:

- read and understood relevant sections of [Our Guideline – Reviewing our decisions \(external\)](#), for example **What are internal and external reviews?**
- read and understood article [Understanding an internal review](#)
- checked for any open or closed plan change and internal review cases that may impact the review. Reviewed any cases you find to determine whether an internal review is required
- if the internal review relates to an access not met decision, checked whether there are any new access requests from the participant.

Note: the access request case won't progress if there's an internal review of an access decision in progress.

Check authority to request an internal review

Check if the person asking for an internal review request has authority to do so. You can **only** start an internal review request from an authorised representative with valid consent to submit the request on behalf of the participant or applicant.

You may receive an internal review request from:

- the applicant or participant
- their plan nominee or child representative
- a court or tribunal appointed decision maker
- a person who has express consent to act on behalf of the applicant or participant
- an applicant who has had an access not met or access revoked decision made.

Check identity and consent

You **must** check the identity of the person requesting the internal review.

1. Tell the person you need to confirm their details before proceeding. To learn more about how to complete the security check, go to article [Consider a request for personal information](#).
2. Check the applicant or participant has given express consent for a person to request an internal review on their behalf. Check the consent is current. Use article [Check consent, nominee, child representative or self-representation authorities](#).

Note: talk to your team leader if you're unsure if a person has the authority or consent to request a review. Your team leader may also seek advice from privacy@ndis.gov.au.

3. If the person tells you they have consent and PACE:
 - doesn't validate this, you **can't** proceed. Go to section **Unauthorised request for an internal review** in this article
 - validates this, continue to section **Understand the internal review request** in this article.

Note: you must check and update consent or any relationship recorded in SAP CRM that may not have transitioned to PACE.

Unauthorised request for an internal review

An unauthorised representative is someone who doesn't have consent or authority to act on behalf of the participant or applicant.

They aren't:

- the applicant's or participant's legal guardian, plan nominee or child representative
- a court appointed decision maker
- allowed to act on behalf of the applicant or participant.

You can only start an internal review request from an authorised representative with consent to do so. If they don't have authority or consent, tell them you're unable to process their request. To learn more, go to [Our Guideline – Your privacy and information \(external\)](#).

Understand the internal review request

When a participant, applicant or authorised representative requests an internal review, first check if it's the right choice for them under the legislation. Internal review is the right option when the participant or applicant doesn't agree with a reviewable decision we've made in the last 3 months. This is a review of a reviewable decision (RoRD), which are mostly managed by the Reviews branch. The exception is Debt related RoRDs.

An internal review is different to when the participant's:

- circumstances have changed
- plan no longer meets their needs
- plan has errors in it.

If the person's request is about a plan change, you'll need to let them know their request isn't an internal review. To learn more, go to article [Understand and choose the right plan change request](#).

If the participant has had a change of circumstances, you can create a plan change request. To learn more about plan change requests, go to article [Prepare to submit a plan change request](#).

Use the Request Questionnaire to understand whether an internal review is necessary

Check the pathway requested is the correct request for the person using the **Enquiry case Request Questionnaire**:

1. In the **Person Account**, go to the **Details** tab. Select **Create Enquiry**.
2. Complete **Who is Making the Request?**, select **Next**.
3. Complete **Enquiry Details**. At **Enquiry Type**, select **Review**.
4. At **Category**, select **Choose the Right Request**. Select **Next**.
5. Complete **Risk Matrix**, select **Next**.
6. Complete **Request Questionnaire**. The answers you provide will determine the next steps.

Internal review types

The type of internal review case you create will depend on which decision the participant, applicant or authorised representative is requesting an internal review of. You'll need to select the right decision type and characteristics when creating an internal review case. This is important as the options you select will impact the scope of the review, and its place in the **Internal Review Routing Queue**.

Only decisions legislated as reviewable decisions can be reviewed. You can create an internal review request using the below case types in PACE.

Scheme Eligibility

- access not met
- access revoked
- not to specify a period, the access assessor requested more information and didn't specify a due date.

Statement of Supports

- to approve the statement of supports in a participant's plan, (including compensation reduction amounts).

Debt

- to not waive or write off a debt
- to waive or write off a debt.

Provider arrangements

- relating to the registration of an NDIS provider. Including refusing to register a person, impose conditions and suspend or revoke a provider's registration.

SDA Enrolment

- to enrol or not enrol a Specialist Disability Accommodation dwelling.

Compensation Recoveries Amount

- s111, s116
- the CEO proposes to recover a compensation amount
- not to treat a compensation payment as being fixed or settled.

Nominee

- appoint a plan nominee
- appoint a correspondence nominee
- cancel or suspend a nominee.

Child Representative

- in relation to a person, for state or territory minister parental responsibility for a child
- make or not to make a decision because it doesn't apply to a child
- parental responsibility for a child.

Not to extend a grace period

- to suspend a participant's plan while they're not in Australia.

Not to reassess a plan

- s48
- to not reassess a participant's plan.

Not to vary a plan

- to not vary a participant's plan.

Outcome of a variation

- s47A
- to vary a participant's plan.

Not to vary a notice of impairment (or vary a notice of impairment)

Impairment categories information is called a 'Notice of impairments' in section 32BA of the NDIS Act (the Act). When talking to participants we use the term 'impairment categories information'.

A participant can apply to change their impairment categories at any time. The Act uses the term 'vary', but in guidance and when talking to participants we use the term 'change' as it's plain English. Any change to the participant's current impairment categories information is a delegate decision. The decision to vary or not vary (change) the participant's impairment categories information is a reviewable decision under the Act.

The only relevant case **Type** you can select in PACE is **Not to vary a notice of impairment**. Select this option for internal reviews of decisions to either:

- not change (not vary) impairment categories information
- change (vary) impairment categories information.

Create an internal review (s100) case

Complete the required checks before creating an internal review case

Before creating an internal review case, you must check and update (if required) the participant's or applicant's preferred contact method. To learn more, go to article [Check a person's preferred contact method](#).

When an authorised representative, participant or applicant requests an internal review, first check all open and completed cases on the person record for the same request.

If there's no existing request for the same decision, you'll need to create an internal review case in PACE.

Create an internal review case

To create an internal review case, complete the following PACE steps.

Navigate to the **Person Account**:

1. Select the **Cases** tab.
2. Select **New**.
3. Select **Internal Review**.
4. Select **Next**.
5. Select the relevant **Case Origin**.
6. Select the appropriate **Type** from the drop-down list. To understand each type, go to section **Internal review types** in this article.
7. Select **Save**. The internal review case will now show as **Draft**.

Complete and submit an internal review (s100) case

Initiate Request

1. From the **Internal Review** case, select the **Request** tab.
2. From the **Initiate Request** screen, select **Date review request received (DD/MM/YYYY)**.

Note: backdate the request to when it was first received.

3. Select the relevant circle below **Who is requesting review?**

Note: if selecting **Authorised Representative**, use **Selected Contact** field to record the relevant authorised representative making the request.

4. Select **Next**.
5. If you're submitting an internal review for a decision made:
 - relating to compensation, not to extend a grace period or eligibility reassessment revocation, go to section **Complete Decisions screen for SAP CRM decisions, and all compensation decisions and decisions not to extend a grace period or a revocation decision** in this article

- in PACE, **excluding** compensation decisions, go to section **Complete Decisions screen for PACE decisions excluding compensation** in this article
- in SAP CRM, go to section **Complete Decisions screen for SAP CRM decisions, and all compensation decisions and decisions not to extend a grace period or a revocation decision** in this article.

Complete Decisions screen for PACE decisions excluding compensation

1. From the **Decisions** screen, identify the relevant decision from **Decision Log**. **Don't** use any filters.
2. Set **Original decision date** to **Any** to view all decisions.
3. Check which decision the review request relates to, and carefully select the most relevant decision by selecting the circle next to the relevant **Decision Name**.

Note: for decisions relating to changing or not changing impairment categories information, some decisions may be split over 2 **Vary Impairment Categories** cases. This will appear as 2 decisions at this step. If this is the case, select the most recent decision, and record all relevant detail in the case before it's submitted.

4. Select **Next**.
5. From the **Sub-Decisions** view, select the checkbox next to all relevant **Sub-Decisions** for review. You can select all by selecting the checkbox next to **Decision Name** in the table heading.

Note: review the specific details of the review request to identify all the relevant sub- decisions. These must be entered as separate sub-decisions.

6. Select **Next**.
7. Continue to section **Add request details** in this article.

Complete Decisions screen for SAP CRM decisions, and all compensation decisions and decisions not to extend a grace period or a revocation decision

1. From the **Decisions** screen, select **Decisions from SAP CRM**.
2. At the **Type** drop-down list, select the relevant option.
3. Select **New**.

4. At the **Decision Name** drop-down list, select the relevant option.
5. At the **Original Decision Date** field, select the date (calendar).

Note: if the request is over 3 months:

- at the **Reason for selecting decision over 100 days** drop-down list, select the relevant option
- you must record the reason in the **Provide details of why you are submitting this request outside of 100 days** free text field.

Note: for the extension of the grace period, please insert the date the extension was declined.

6. Record **Decision Reference**.

Note: you'll find the decision reference number in the **Pathway** tab of the relevant plan in SAP CRM.

7. Search the name of the delegate in **Original Decision User Name**. For the extension of the grace period, add enquiry case and enquiry case number.

Note: if original user isn't showing, tick **Unable to find original decision maker user ID**. Record email address of original user in **Decision user code**.

8. Select **Save**.

Note: if the original decision is outside of 100 days, you must get your team leader's approval to submit the request.

9. Select **Next**.

10. If you're submitting the case for:

- an access not met or statement of support reviewable decision, continue to section **Add request details for SAP CRM access not met or statement of support decisions** in this article

- all other SAP CRM reviewable decisions, continue to section **Add request details** in this article.

Add request details for SAP CRM access not met or statement of support decisions

Use the below steps for SAP CRM access not met, revocation or statement of support reviewable decisions.

1. From the **Add Request Details** screen, **Original Decision** will be displayed at the top of the page. All the selected sub-decisions will show under **Requests**.
2. In the **Requests** section, you'll need to select **Delete Request** to remove the internal review request. This'll allow the original decision to appear.
3. Select **Add new request** in the **Original Decision to be Reviewed** section to add each of the requests being reviewed.
4. Select **Existing Decision**, select **Next**.
5. Select the type of support request using the drop-down under **Which type of Statement of Support Request would you like to add?**
6. Complete all mandatory fields.
7. Select **Add**.
8. From the **Requests** section, complete all mandatory fields for each sub-decision under **Requests**. When recording free text request details, be specific about **why** the requestor is asking for a review, and **what** outcome they're expecting.
9. Select **Save**.
10. Select **Next**.
11. Continue to section **Add documents** in this article.

Add request details

1. From the **Add Request Details** screen, the **Original Decision** will be displayed at the top of the page. All the selected sub-decisions will show under **Requests**.

Note: if the **Requests** section is empty, select **Add new request** to include relevant information.

2. Complete all mandatory fields for each sub-decision under **Requests**. When recording free text request details, be specific about **why** the requestor is asking for a review, and **what** outcome they're expecting.
3. Select **Save**.
4. If required, you can add a new request by selecting **Add new request** from the **Original Decision** box. If you're:
 - adding a new impairment category, go to **step 5**
 - for all other decisions, complete all mandatory fields when you add a new request, including a **Reason for Request**. Then select **Save**. Go to **step 9**.
5. Select the **Eligibility Criteria** under the impairment category the request relates to.
6. Select the impairment category you're requesting to add.

Note: read [Our Guideline – Applying to the NDIS \(external\)](#) section **What happens after we decide?** and articles [Descriptions of impairment categories](#), [Understand highly likely and commonly associated impairment categories](#) and [Impairment categories guide](#).

7. Select **Add**. The impairment category will appear in the **Requests** menu.
8. Include the **Reason for Request**. Select **Save**.
9. When you've saved all requests, select **Next**.

Add documents

You **must** attach supporting evidence and include as much information as possible about the review request. You'll need to ask if they'll be providing any new evidence or if there's any existing information they'd like us to reconsider. If further information is needed for the review, record this in the request. All this information will allow the review officer to better understand the review request.

1. From the **Documents** screen, select **Add Documents** to upload new documents. For more information, go to article [Add documents to a case](#).

Note: you must attach supporting evidence and include as much information as

possible about the review request. This will allow the review officer to better understand the review request.

2. Select **Link Documents** to link documents from the **Person Account** to the **Internal Review** case.
3. Select **Next**.

Complete Risk Matrix

1. From the **Risk Matrix** screen, select **Yes** or **No** at **Has there been any risks identified that may impact the participant, nominee or NDIS associated with this request?**. If you select:
 - **Yes**, go to **step 2**
 - **No**, go to **step 5**.
2. Select the risks that most closely matches the risk you've identified.
3. Select **Yes** for each risk you identify, select **No** for the risks that aren't applicable.
4. Select **LOW**, **MEDIUM**, **HIGH** or **EXTREME** for each of the risks you select. Select the level that most closely matches the risk you've identified.
5. Select **Next**.

Depending on the risks you've selected, PACE may prompt you to add further information about the identified risk.

Note: if you need to escalate an existing request for an internal review, go to article [Escalating a request for internal review \(s100\)](#).

Complete Request Summary

1. From the **Request Summary** screen, check the recorded information.

Note: to update any information, select **Previous** to return to the relevant section and update it.

2. If everything is correct, select **Next**.

Submit internal review request

1. From the **Submit Internal Review Request** screen, complete the **Call Notes** free text field if applicable. If you enter any notes here, an associated note will be created.
2. Select **Submit**. The status of the internal review will change to **New**.

Next steps

1. After you submit the request for an internal review, an acknowledgement letter will be sent to the person or their authorised representative.

Note: if the participant has a statutory guardian and the relationship is established with an organisation account, you'll need to manually send the auto-created **Internal Review Acknowledgement** letter to the statutory guardian. To do this, go to article [Send a letter to a statutory guardian or trustee](#).

2. The internal review will be routed to the **Internal Review Routing Queue**. The case will be allocated to an Internal Review officer with the appropriate skill tags to complete the work.

Note: an exception to this is Debt related internal reviews. These will be routed to the Debt team.

Understanding an internal review

This article provides guidance for all NDIA staff and partners to understand:

- what is a request for an internal review
- who can submit a request for internal review
- when can an internal review request be submitted
- what happens once a request for internal review is submitted
- how internal review requests are prioritised.

Recent updates

3 April 2025

Minor update to reflect change to article title: Create an internal review (s100) for all PACE decisions and SAP CRM access not met and statement of support decisions excluding compensation to Submit a request for an internal review (s100).

What is a request for an internal review

If an applicant or participant is unhappy with an NDIA decision, they can sometimes ask us to review our decision. This is called an **internal review**. The Reviews branch manages internal reviews. A delegate who didn't make the original decision will complete the internal review.

The Review Officer considers the evidence and information related to the decision, then decides to either:

- set aside the original decision (make a new decision)
- vary the original decision (make some changes)
- confirm the original decision (make no changes).

Not all NDIA decisions are reviewable. The list of reviewable decisions is under section 99 of the [NDIS Act \(external\)](#). The most common decisions that can be reviewed are:

- Access not met (s 99(1) - 1). A person requests access to the NDIS, but we decide they don't meet the access criteria to become a participant.
- Access revoked (s 99(1) - 3). A person was once a participant of the NDIS, then had an eligibility review and was found not to meet the access criteria. So their status as a participant was revoked.
- Statement of supports (s 99(1) - 4). A participant is unhappy with the NDIS funded supports in the approved plan, the plan duration or the plan management decision.
- Not to review a plan (s 99(1) - 6). The participant has requested a variation to their plan under s47A of the NDIS Act and the NDIA decided not to vary that plan.

You can learn more in [Our Guideline - Reviewing our decisions \(external\)](#)

Who can submit a request for internal review

A directly affected person with authority can request an internal review. For most cases relating to a participant, a directly affected person can be:

- an applicant that had an access not met or access revoked decision
- a participant that doesn't agree with a reviewable decision about their plan
- an appointed nominee or child representative of a participant that doesn't agree with a reviewable decision about their plan
- a person affected by a decision to appoint, not appoint, suspend or revoke nominee or child representative status.

Other directly affected persons can include:

- providers affected by an NDIA decision specifically relating to a provider
- a person affected by an NDIA decision relating to debts.

A person with valid authority or consent may request an internal review on the behalf of a directly affected person. Authority can take the form of valid child representative, nominee or guardian permissions. Otherwise, we need consent from the directly affected person, preferably in writing. This can include:

- a consent form signed by the directly affected person
- an email confirming the directly affected person giving their consent to lodge the review
- an internal note documenting a telephone conversation with the directly affected person where they provided consent.

You can learn more in [Our Guideline - Your privacy and information \(external\)](#).

A directly affected person or their representative can submit a request for an internal review. Use the [Request for a Review of a Decision form \(external\)](#). They can also ask in person or on the phone, or by sending a request by letter or email.

When can an internal review request be submitted

A request for an internal review **must** be made within 3 months of receiving the original reviewable decision. We can't conduct an internal review if a person requests one more than 3 months after the date of the original reviewable decision.

We may need more evidence or supporting documentation to consider a request for additional supports. Communicate this to the requestor when submitting an internal review request.

To create an internal review, refer to [Submit a request for an internal review \(s100\)](#).

What happens once a request for internal review is submitted

When an internal review request is submitted, PACE sends an automated acknowledgement letter using the preferred communication method to confirm we've received the request.

Note: if the participant has a statutory guardian and the relationship is established with an organisation account, you'll need to manually send the auto-created **Internal Review Acknowledgement** letter to the statutory guardian. To do this, go to article [Send a letter to a statutory guardian or trustee](#).

If the review request is not considered valid, the Reviews branch will discuss other

options and next steps with the person who requested the review. This may be because the request:

- was lodged by an unauthorised person
- doesn't relate to a reviewable decision, or
- was submitted more than 3 months after the original decision.

If the request is valid, the request will be assigned to a Review Officer.

The Review Officer will contact the person who requested the review to acknowledge the request and to clarify aspects of the internal review.

The Review Officer will review the facts, laws and NDIA policies related to the original decision. They will determine what the correct or preferable decision is. The Review Officer will also consider any new information provided.

The Review Officer aims to complete the internal review within 60 days as outlined in the [Participant Service Guarantee \(external\)](#). The Review Officer will provide the outcome and reasons for the internal review decision in writing.

How internal review requests are prioritised

s47E(d) - certain operations of agencies
[Redacted text block containing multiple lines of blacked-out content]

For more information, refer to article [Escalating a request for internal review \(s100\)](#).

IRT - Complete an internal review of a decision to vary impairments categories information

This article provides guidance for an internal review officer to complete an internal review of a decision to vary Impairments categories information.

Recent updates

7 July 2025

Name change and language updates.

Before you start

You have:

- read [Our Guidelines - Applying to the NDIS \(external\)](#), including sections:
- **What happens after we decide?**
- **How do we weigh evidence of disability?**
- **What happens after we decide?**

Conduct a desktop review

An initial assessment of the internal review should be completed using the information available on the participant's record in PACE.

Review the participant's record

From the **Person Account**:

1. Take note of any **Alerts**.
2. Within the **Details** tab, confirm the **Identity Confirmation Status**. Refer to article [Understand the identity confirmation status](#).
3. Review the **Disabilities** tab in the **Person Account** to consider what disabilities met the requirements for disability, early intervention, or both.

Review the participant's impairment categories

Review and take note of the participant's current **Impairment Categories**. To review the participant's **Impairment Categories**:

1. Follow the steps in the article [View Impairment Categories in the Person Account](#).
2. Take note of the participant's **Approved Impairment Categories**.

Review the request details

From the **Internal Review Case**:

1. Review the **Details** tab.
2. Review the **Request** tab.

Validate consent

From the **Person Account**:

1. Select the **Relationships** tab.
2. From the **Authorised Reps** tab, in **Roles & Relationships**, confirm the person who requested the review is listed as an **Authorised Person** with a **Status of Active**.
3. Select **Check Authorities** to make sure the **Submit request to review a decision made by the NDIA (S100)** box is selected. If a person has the correct roles and authorities, you can continue to the heading **Contact the participant**. If the person does not have the correct authorities, continue to step 4.

Note: Select the **Relationships** tab for relationship details and parental responsibility when completing an internal review for a child.

4. Make one attempt to contact the participant, or their authorised representative to seek consent for the internal review to proceed. This attempt requires an SMS and either a phone call or email. If contact is successful and consent is not provided, or contact is unsuccessful and you are unable to obtain consent, proceed to step 6.
5. Send the Internal Review Unauthorised Request Letter. Refer to the article [IRT – Sending a manual letter](#).
6. Cancel the **Internal Review Case**. Refer to the heading **Cancel an Internal Review Case** in the article [IRT - Withdraw or cancel an internal review](#).

Contact the participant

You will need to contact the participant to clarify their request and gather additional details.

When completing an internal review, the participant must be part of the decision-making process.

When contacting a participant or authorised representative, you must first check their preferred communication method and authorisations. Refer to the article [Check a person's preferred contact method](#) for further information.

When contacting a participant, or authorised representative, you must also log an Activity. Activity types include:

- SMS messages
- phone calls
- emails
- face-to-face meetings.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

As the Reviews Branch is a virtual team with a limited footprint, we do not include face-to-face meetings as part of the standard service offering. If a face-to-face meeting is requested, the review officer must discuss and explore other options, such as engaging with advocates/authorised representatives, interpreting supports, and organising specific times to call. If it is determined that a face-to-face meeting may be necessary, seek assistance from your line manager to identify a pathway forward.

If during contact, there is a media threat, advise your line manager who will contact the Media Team and advise of any follow up action if required.

Phone

If the participant's preferred contact method is by phone:

1. Make one contact attempt. This attempt requires a pre-call SMS. Refer to **Appendix 1 – SMS process**. If contact is unsuccessful, leave a voicemail (if possible) and refer to the article [IRT – Unable to contact process](#).
2. If contact is successful begin by:
 - Stating your name, advising you are from the NDIA.
 - Verifying the identity of the person you are calling. Refer to the article [Understand how to verify identity documents](#).
 - Acknowledging the type of internal review.
 - Listing the documents received that will be considered as part of the internal review.
 - Confirming whether the participant would like to supply further information, and if so, refer to the article [IRT – Requests for further information](#). If they do not wish to provide further information, advise them the review will progress based on the available information.
3. Confirm their preferred method of contact for the internal review outcome notification.
4. Remind the participant of the support pathways available via their Local Area Coordinator, Early Childhood Partner and/or Support Coordinator, the contact centre, and local NDIS office. This will assist with connecting to mainstream supports and gathering and submitting information for their internal review.

Email

If a participant's preferred contact method is email:

1. Send an email. **Refer to Appendix 2 – Email process**.
2. The next business day after the introduction email timeframe has lapsed, if there has been no response, proceed with the review based on the information available.

Mail

If a participant's preferred contact method is mail:

1. If appropriate send the Internal Review Request for Information Letter to the participant's listed address and request a reply within 14 days. Refer to the article [IRT – Sending a manual letter](#).
2. The next business day after the request for further information letter timeframe has lapsed, if there has been no response, proceed with the review based on the information available.

Review the application

Review the evidence

1. From the **Person Account**, select the **Documents** tab.
2. From the **Internal Review Case**, select the **Evidence** tab.

Note: make sure you review all evidence in the **Internal Review Case** and **Person Account**.

Make a decision

1. Using the available evidence, decide what impairments meet the requirements for disability, early intervention or both.

Note:

- you will also need to consider if there are any other impairments that meet the requirements for disability or early intervention, including developmental delay (under early intervention) for a child younger than 6.
- if you need to add or remove any impairments from the **Disabilities** tab, this will be completed in a later step.
- if you decide that the participant no longer meets the access requirements for disability, early intervention, or both, continue to the heading **Record your decision** and make a decision to not vary the categories of impairments. You must also refer the participant for an eligibility reassessment by following the steps in the article [Complete an eligibility reassessment referral](#), making sure you **only** use sections **Create the Eligibility Reassessment case** and **Complete the eligibility reassessment referral**. If the participant has been on the scheme for less than 12 months, you can create the eligibility reassessment referral, however an eligibility reassessment can't

commence until 14 months after the initial access decision.

2. Use the article [Impairment categories guide](#) to help you decide which categories apply for all eligible impairments that meet the requirements for disability, early intervention, or both.
3. Search the **ICD Code** or **Condition name** for all eligible impairments.
4. Note the impairment listed in the **Required impairment category** column and consider if any of the **Optional impairment categories** meet the requirements for disability, early intervention, or both.

Record your decision

From the **Internal Review Case**:

1. Select the **Decision** tab.
2. From **Request for PACE Decisions**, select **Pending Decision**. The **RORD Request** will open on a new screen.
3. Select **Make a Decision**.
4. From the **Decision** view, complete the mandatory fields.
5. Select **Next – Justification**.
6. From the **Justification** view, select relevant **Justification** and **Sub-Justification**.
7. Select **Next – Evidence**.
8. From the **Evidence** view, complete mandatory fields for evidence.
9. Select **Next**.
10. From the **Confirmation** view, select **Done**.
11. Return to the **Internal Review Case** and from the **Decisions** tab select **Submit Decisions**.
12. From the **Confirmation** view, select **Next**.
13. From the **Summary** view, select **Done**.
14. From the **Decision** tab, select **Confirm manual letter has been sent**.
15. From the **Confirmation** view, select the appropriate option.
16. Select **Next**.

17. From the **Decision Letter Sent** view, select **Next**. You will now be returned to the **Internal Review Case**.
18. Send the decision outcome letter, refer to the article [IRT – sending a manual letter](#).
19. The participant or their authorised representative who requested the review will need to be informed of the outcome. **Refer to Appendix 3 – Communicate an outcome** for guidance on communicating the decision outcome.

Complete closure tasks

From the **Internal Review Case**:

1. From the **Log Activity** view, create an Internal Communication to note the decision has been made using the correct template from. Refer to the article [Log an activity or internal note](#) for guidance on creating case activities.
2. From the **Details** view, in the banner, select the **Complete Case** button.
3. At **Closure Reasons** options, from the drop down menu, select **Completed**.
4. Closure comments can be added to advise of the decision
5. Select **Confirm** and then select **Done**.
6. From the **Person Account** navigate to the **Cases** tab and check **Open Cases** to see if any other cases relevant to the internal review have a status of **New** or **In Progress**. These cases can be **Closed** or marked **Completed** if there is no further action required.

Check the Disabilities tab

The **Disabilities** tab in the **Person Account** must include all disabilities that meet the requirements for disability, early intervention, or both, as this supports planning.

There may be disabilities that you need to add or remove.

1. From the **Person Account**, select **My Profile**.
2. Select the **Disabilities** tab.
3. Review **Active status** to see what disabilities are current.

4. If required, use articles [Update a person account](#) to:

- add disabilities that meet the eligibility requirements
- remove any disabilities that don't meet the eligibility requirements by adding an **End Date**.

Check the participant's Approved Impairment Categories

To check that the participant's **Impairment Categories** have updated correctly in line with your decision:

1. Follow the steps in the article [View Impairment Categories in the Person Account](#).
2. Review the participant's **Approved Impairment Categories**. Make sure that these have updated correctly.

Note: if the **Approved Impairment Categories** do not match your intended decision outcome, please speak to your team leader.

Appendix

Appendix 1 – SMS Process

All contact methods and attempts require internal review officers to send a text message to the participant.

When sending an SMS:

- Make sure the SMS is sent one hour before contact is made.
- Consider appropriate contact times based on varying time zones, gazetted public holidays, and other relevant factors such as school drop off and pick up times.

For every SMS sent, make sure you log an activity to record your SMS contact and include the following:

- which SMS template was sent
- why the SMS was sent
- details of who the NCC need to direct the call to if the SMS sent asks the person to call us.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

Send an SMS

In **PACE**:

1. From **Open Cases**, select the case you want to send an SMS from.
2. From the **Activity** panel, select **Send SMS**. The **Mobile Number** will populate from the **Person Account**.

Note: If you're sending an SMS from the case you're working in, it will use the mobile number on the person account linked to that case. If the person has an authorised representative, the mobile number won't populate from the authorised representative's account. For more information regarding this, refer to the heading **Understand who an SMS will send to** in the article [Send an SMS in PACE](#).

3. At **Select an SMS Template**, select the type of SMS you want to send from the drop down list.
 - **Unable to contact**
 - **We are going to call you.**

Note: **You have an appointment** and **You have missed an appointment** SMS templates are not used in the internal review process.

4. Select **Next**.
5. Review the message in **Preview of SMS**. If the message:

- Is correct, select **Send SMS**. Progress to **step 6**.
- Needs to be changed, select **Select another template**. Go back to **step 3**.

6. Once the SMS has successfully been sent, select **Finish**.

Appendix 2 – Email

To send an email in PACE, navigate to the **Activity** window:

1. Select the **Email** tab.
2. In **From**, select the account you would like to send your email from.

Note: participant contact must be sent from enquiries@ndis.gov.au.

3. In **To**, enter the email address, or addresses, you would like to send your email to. You may select the **Cc** button if you would like to add the **Cc** field.
4. In **Sensitivity Label Category**, select the appropriate classification.
5. In **Subject**, enter the subject of your email.
6. Complete body of the email, using the [IRT – Internal review email templates](#) as required.
7. Select **Send**.
8. Document the email contact as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

Appendix 3 – Communicate an outcome

The participant, or their authorised representative who requested the review will need to be informed of the outcome. This includes information about how and why the decision was made, where to seek further assistance if required and their review rights. You must document this contact as an **Internal Communication**. Refer to the article [Log an activity or internal note](#).

When contacting a participant, or authorised representative, you must first check their preferred communication method. Refer to article [Check a person's preferred contact method](#).

If making phone contact, refer to article [Guide - Conversation style guide](#) for guidance on how to have authentic and engaging conversations.

Phone

1. Make one attempt to contact the participant. This attempt requires a pre-call SMS. Refer **Appendix 1 – SMS process**. If contact is unsuccessful, and if the internal review is a priority or escalation, further outcome contact attempts may be required.
2. If contact is successful begin by:
 - stating your name, advising you are from the NDIA
 - verifying the identity of the person you are calling, refer to article [Understand how to verify identity documents](#).
3. Communicate the outcome of the decision by explaining:
 - what evidence was reviewed
 - the reasons for the decision, referencing the appropriate legislation and guidelines.
4. Explain that there is no change to the participant's eligibility for the scheme, and if the participant feels their funded supports no longer meet their supports needs, they can contact their my NDIS contact to discuss their plan.
5. Advise the participant of their Administration Review Tribunal (ART) rights. Explain that ART applications must be lodged within 28 days of the internal review decision date. A Disability Advocate may also be able to help them with lodging an external review. Refer them to the ART website or provide the ART phone number if required (1800 228 333).
6. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

Email

Send an email with the outcome internal review letter attached. Refer to **Appendix 2 – Email process** and article [IRT – Sending a manual letter](#).

Mail

Send the outcome internal review letter to the participant's mailing address. Refer to article [IRT – Sending a manual letter](#).

IRT - Complete an internal review of a decision to vary impairments categories information

This article provides guidance for an internal review officer to complete an internal review of a decision to vary Impairments categories information.

Recent updates

7 July 2025

Name change and language updates.

Before you start

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- read [Our Guidelines - Applying to the NDIS \(external\)](#), including sections:
- **What happens after we decide?**
- **How do we weigh evidence of disability?**
- **What happens after we decide?**

Conduct a desktop review

An initial assessment of the internal review should be completed using the information available on the participant's record in PACE.

Review the participant's record

From the **Person Account**:

1. Take note of any **Alerts**.
2. Within the **Details** tab, confirm the **Identity Confirmation Status**. Refer to article [Understand the identity confirmation status](#).
3. Review the **Disabilities** tab in the **Person Account** to consider what disabilities met the requirements for disability, early intervention, or both.

Review the participant's impairment categories

Review and take note of the participant's current **Impairment Categories**. To review the participant's **Impairment Categories**:

1. Follow the steps in the article [View Impairment Categories in the Person Account](#).
2. Take note of the participant's **Approved Impairment Categories**.

Review the request details

From the **Internal Review Case**:

1. Review the **Details** tab.
2. Review the **Request** tab.

Validate consent

From the **Person Account**:

1. Select the **Relationships** tab.
2. From the **Authorised Reps** tab, in **Roles & Relationships**, confirm the person who requested the review is listed as an **Authorised Person** with a **Status of Active**.
3. Select **Check Authorities** to make sure the **Submit request to review a decision made by the NDIA (S100)** box is selected. If a person has the correct roles and authorities, you can continue to the heading **Contact the participant**. If the person does not have the correct authorities, continue to step 4.

Note: Select the **Relationships** tab for relationship details and parental responsibility when completing an internal review for a child.

4. Make one attempt to contact the participant, or their authorised representative to seek consent for the internal review to proceed. This attempt requires an SMS and either a phone call or email. If contact is successful and consent is not provided, or contact is unsuccessful and you are unable to obtain consent, proceed to step 6.
5. Send the Internal Review Unauthorised Request Letter. Refer to the article [IRT – Sending a manual letter](#).
6. Cancel the **Internal Review Case**. Refer to the heading **Cancel an Internal Review Case** in the article [IRT - Withdraw or cancel an internal review](#).

Contact the participant

You will need to contact the participant to clarify their request and gather additional details.

When completing an internal review, the participant must be part of the decision-making process.

When contacting a participant or authorised representative, you must first check their preferred communication method and authorisations. Refer to the article [Check a person's preferred contact method](#) for further information.

When contacting a participant, or authorised representative, you must also log an Activity. Activity types include:

- SMS messages
- phone calls
- emails
- face-to-face meetings.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

As the Reviews Branch is a virtual team with a limited footprint, we do not include face-to-face meetings as part of the standard service offering. If a face-to-face meeting is requested, the review officer must discuss and explore other options, such as engaging with advocates/authorised representatives, interpreting supports, and organising specific times to call. If it is determined that a face-to-face meeting may be necessary, seek assistance from your line manager to identify a pathway forward.

If during contact, there is a media threat, advise your line manager who will contact the Media Team and advise of any follow up action if required.

Phone

If the participant's preferred contact method is by phone:

1. Make one contact attempt. This attempt requires a pre-call SMS. Refer to **Appendix 1 – SMS process**. If contact is unsuccessful, leave a voicemail (if possible) and refer to the article [IRT – Unable to contact process](#).
2. If contact is successful begin by:
 - Stating your name, advising you are from the NDIA.
 - Verifying the identity of the person you are calling. Refer to the article [Understand how to verify identity documents](#).
 - Acknowledging the type of internal review.
 - Listing the documents received that will be considered as part of the internal review.
 - Confirming whether the participant would like to supply further information, and if so, refer to the article [IRT – Requests for further information](#). If they do not wish to provide further information, advise them the review will progress based on the available information.
3. Confirm their preferred method of contact for the internal review outcome notification.
4. Remind the participant of the support pathways available via their Local Area Coordinator, Early Childhood Partner and/or Support Coordinator, the contact centre, and local NDIS office. This will assist with connecting to mainstream supports and gathering and submitting information for their internal review.

Email

If a participant's preferred contact method is email:

1. Send an email. **Refer to Appendix 2 – Email process**.
2. The next business day after the introduction email timeframe has lapsed, if there has been no response, proceed with the review based on the information available.

Mail

If a participant's preferred contact method is mail:

1. If appropriate send the Internal Review Request for Information Letter to the participant's listed address and request a reply within 14 days. Refer to the article [IRT – Sending a manual letter](#).
2. The next business day after the request for further information letter timeframe has lapsed, if there has been no response, proceed with the review based on the information available.

Review the application

Review the evidence

1. From the **Person Account**, select the **Documents** tab.
2. From the **Internal Review Case**, select the **Evidence** tab.

Note: make sure you review all evidence in the **Internal Review Case** and **Person Account**.

Make a decision

1. Using the available evidence, decide what impairments meet the requirements for disability, early intervention or both.

Note:

- you will also need to consider if there are any other impairments that meet the requirements for disability or early intervention, including developmental delay (under early intervention) for a child younger than 6.
- if you need to add or remove any impairments from the **Disabilities** tab, this will be completed in a later step.
- if you decide that the participant no longer meets the access requirements for disability, early intervention, or both, continue to the heading **Record your decision** and make a decision to not vary the categories of impairments. You must also refer the participant for an eligibility reassessment by following the steps in the article [Complete an eligibility reassessment referral](#), making sure you **only** use sections **Create the Eligibility Reassessment case** and **Complete the eligibility reassessment referral**. If the participant has been on the scheme for less than 12 months, you can create the eligibility reassessment referral, however an eligibility reassessment can't

commence until 14 months after the initial access decision.

2. Use the article [Impairment categories guide](#) to help you decide which categories apply for all eligible impairments that meet the requirements for disability, early intervention, or both.
3. Search the **ICD Code** or **Condition name** for all eligible impairments.
4. Note the impairment listed in the **Required impairment category** column and consider if any of the **Optional impairment categories** meet the requirements for disability, early intervention, or both.

Record your decision

From the **Internal Review Case**:

1. Select the **Decision** tab.
2. From **Request for PACE Decisions**, select **Pending Decision**. The **RORD Request** will open on a new screen.
3. Select **Make a Decision**.
4. From the **Decision** view, complete the mandatory fields.
5. Select **Next – Justification**.
6. From the **Justification** view, select relevant **Justification** and **Sub-Justification**.
7. Select **Next – Evidence**.
8. From the **Evidence** view, complete mandatory fields for evidence.
9. Select **Next**.
10. From the **Confirmation** view, select **Done**.
11. Return to the **Internal Review Case** and from the **Decisions** tab select **Submit Decisions**.
12. From the **Confirmation** view, select **Next**.
13. From the **Summary** view, select **Done**.
14. From the **Decision** tab, select **Confirm manual letter has been sent**.
15. From the **Confirmation** view, select the appropriate option.
16. Select **Next**.

17. From the **Decision Letter Sent** view, select **Next**. You will now be returned to the **Internal Review Case**.
18. Send the decision outcome letter, refer to the article [IRT – sending a manual letter](#).
19. The participant or their authorised representative who requested the review will need to be informed of the outcome. **Refer to Appendix 3 – Communicate an outcome** for guidance on communicating the decision outcome.

Complete closure tasks

From the **Internal Review Case**:

1. From the **Log Activity** view, create an Internal Communication to note the decision has been made using the correct template from. Refer to the article [Log an activity or internal note](#) for guidance on creating case activities.
2. From the **Details** view, in the banner, select the **Complete Case** button.
3. At **Closure Reasons** options, from the drop down menu, select **Completed**.
4. Closure comments can be added to advise of the decision
5. Select **Confirm** and then select **Done**.
6. From the **Person Account** navigate to the **Cases** tab and check **Open Cases** to see if any other cases relevant to the internal review have a status of **New** or **In Progress**. These cases can be **Closed** or marked **Completed** if there is no further action required.

Check the Disabilities tab

The **Disabilities** tab in the **Person Account** must include all disabilities that meet the requirements for disability, early intervention, or both, as this supports planning.

There may be disabilities that you need to add or remove.

1. From the **Person Account**, select **My Profile**.
2. Select the **Disabilities** tab.
3. Review **Active status** to see what disabilities are current.

4. If required, use articles [Update a person account](#) to:

- add disabilities that meet the eligibility requirements
- remove any disabilities that don't meet the eligibility requirements by adding an **End Date**.

Check the participant's Approved Impairment Categories

To check that the participant's **Impairment Categories** have updated correctly in line with your decision:

1. Follow the steps in the article [View Impairment Categories in the Person Account](#).
2. Review the participant's **Approved Impairment Categories**. Make sure that these have updated correctly.

Note: if the **Approved Impairment Categories** do not match your intended decision outcome, please speak to your team leader.

Appendix

Appendix 1 – SMS Process

All contact methods and attempts require internal review officers to send a text message to the participant.

When sending an SMS:

- Make sure the SMS is sent one hour before contact is made.
- Consider appropriate contact times based on varying time zones, gazetted public holidays, and other relevant factors such as school drop off and pick up times.

For every SMS sent, make sure you log an activity to record your SMS contact and include the following:

- which SMS template was sent
- why the SMS was sent
- details of who the NCC need to direct the call to if the SMS sent asks the person to call us.

Refer to article [Log an activity or internal note](#) for guidance on creating case activities.

Send an SMS

In **PACE**:

1. From **Open Cases**, select the case you want to send an SMS from.
2. From the **Activity** panel, select **Send SMS**. The **Mobile Number** will populate from the **Person Account**.

Note: If you're sending an SMS from the case you're working in, it will use the mobile number on the person account linked to that case. If the person has an authorised representative, the mobile number won't populate from the authorised representative's account. For more information regarding this, refer to the heading **Understand who an SMS will send to** in the article [Send an SMS in PACE](#).

3. At **Select an SMS Template**, select the type of SMS you want to send from the drop down list.
 - **Unable to contact**
 - **We are going to call you.**

Note: **You have an appointment** and **You have missed an appointment** SMS templates are not used in the internal review process.

4. Select **Next**.
5. Review the message in **Preview of SMS**. If the message:

- Is correct, select **Send SMS**. Progress to **step 6**.
- Needs to be changed, select **Select another template**. Go back to **step 3**.

6. Once the SMS has successfully been sent, select **Finish**.

Appendix 2 – Email

To send an email in PACE, navigate to the **Activity** window:

1. Select the **Email** tab.
2. In **From**, select the account you would like to send your email from.

Note: participant contact must be sent from enquiries@ndis.gov.au.

3. In **To**, enter the email address, or addresses, you would like to send your email to. You may select the **Cc** button if you would like to add the **Cc** field.
4. In **Sensitivity Label Category**, select the appropriate classification.
5. In **Subject**, enter the subject of your email.
6. Complete body of the email, using the [IRT – Internal review email templates](#) as required.
7. Select **Send**.
8. Document the email contact as an **Internal Communication**. Refer to article [Log an activity or internal note](#).

Appendix 3 – Communicate an outcome

The participant, or their authorised representative who requested the review will need to be informed of the outcome. This includes information about how and why the decision was made, where to seek further assistance if required and their review rights. You must document this contact as an **Internal Communication**. Refer to the article [Log an activity or internal note](#).

When contacting a participant, or authorised representative, you must first check their preferred communication method. Refer to article [Check a person's preferred contact method](#).

If making phone contact, refer to article [Guide - Conversation style guide](#) for guidance on how to have authentic and engaging conversations.

Phone

1. Make one attempt to contact the participant. This attempt requires a pre-call SMS. Refer **Appendix 1 – SMS process**. If contact is unsuccessful, and if the internal review is a priority or escalation, further outcome contact attempts may be required.
2. If contact is successful begin by:
 - stating your name, advising you are from the NDIA
 - verifying the identity of the person you are calling, refer to article [Understand how to verify identity documents](#).
3. Communicate the outcome of the decision by explaining:
 - what evidence was reviewed
 - the reasons for the decision, referencing the appropriate legislation and guidelines.
4. Explain that there is no change to the participant's eligibility for the scheme, and if the participant feels their funded supports no longer meet their supports needs, they can contact their my NDIS contact to discuss their plan.
5. Advise the participant of their Administration Review Tribunal (ART) rights. Explain that ART applications must be lodged within 28 days of the internal review decision date. A Disability Advocate may also be able to help them with lodging an external review. Refer them to the ART website or provide the ART phone number if required (1800 228 333).
6. Advise a written notice of the decision will be issued by mail or email. Refer to article [IRT – Sending a manual letter](#).

Email

Send an email with the outcome internal review letter attached. Refer to **Appendix 2 – Email process** and article [IRT – Sending a manual letter](#).

Mail

Send the outcome internal review letter to the participant's mailing address. Refer to article [IRT – Sending a manual letter](#).

IRT - Create an internal review case for compensation recoveries decision

This article provides guidance for Compensation Branch staff to:

- check authority to request an internal review
- create an internal review case for reviewing decisions relating to recovering an amount or special circumstances decisions relating to a recovery.

Recent updates

20 October 2025

New resource.

Before you start

You have:

- read and understood relevant sections of [Our Guidelines \(external\)](#), for example **What are internal and external reviews?**
- read and understood article [Understanding an internal review](#).

Check for a pre-existing internal review case

Prior to creating a new internal review case you will need check if there is a pre-existing internal review case or any open case enquiries in regards to an internal review.

Check authority to request an internal review

You will need to check if the person asking for an internal review has authorisation to do so. You can only start an internal review request from an authorised representative if they have valid consent to submit the request on behalf of the participant or applicant.

A directly affected party such as a compensation payer or insurer may submit a request without consent as they are not making the request on behalf of the participant. Refer to article [Check consent, nominee, child representative or self-representation authorities](#).

You may receive an internal review request from:

- the participant

- their plan nominee or child representative
- a court or tribunal appointed decision maker
- a person who has express consent to act on behalf of the participant, this may include the participant's legal representative or financial trustee
- another directly affected party, such as the compensation payer or insurer.

Validate consent

1. Navigate to the **Person Account**.
2. Select the **Relationships** tab.
3. From the **Authorised Reps** tab, in **Roles & Relationships**, confirm the person who requested the review is listed as an **Authorised Person** with a **Status** of **Active**.

Note: Where the party requesting the review is not an authorised person within PACE, (the compensation payer or insurer), they will not have a relationship.

4. Select **Check Authorities**.
5. Make sure the **Submit request to review a decision made by the NDIA (S100)** authority is listed. If relevant consent authorisation cannot be verified, check **Documents** for any consent forms or legal orders that have yet to be processed. If a person has the correct roles and authorities, you can continue to the heading **Validate the request lodgement date**. If the person does not have the correct authorities, continue to **step 6**.
6. Make one attempt to contact the participant or their authorised representative to seek consent for the internal review to proceed. This attempt requires an SMS and either a phone call or email. If contact is successful and consent is not provided, or contact is unsuccessful, and you are unable to obtain consent, proceed to **step 7**.
7. Send the **Internal Review Unauthorised Request Letter**. Refer to the article [IRT – Sending a manual letter](#).
8. Withdraw the **Internal Review Case**. Refer to the heading **Withdraw an internal review case** in the article [IRT - Withdraw or cancel an internal review](#). A withdrawal letter is not required to be sent.

Create an internal review case

To create an internal review case, complete the following steps:

From the **Person Account**:

1. Select **Cases** tab.
2. Select **New**.
3. Select **Internal Review, Review of a Reviewable decision**.
4. Select **Next**.
5. Select relevant **Case Origin**.
6. From the **New Case: Internal Review** view, at **Categorisation**, for the **Type** select **Compensation Recoveries Amount**.
7. Log an internal note advising who requested the review and confirm they are a directly affected party using the template the below. Refer to article [Log an activity or internal note](#).

Requester <enter entity name> is a directly affected party. Consent is in attached documents.

8. At **System Information**, in the **Subject** field, enter **REC**.
9. Select **Save**. The internal review will now show as **Draft**.

Initiate Request

From the **Internal Review** case:

1. Select **Request** tab.

From **Initiate Request** view:

1. Select **Date review request received**.

Note: you can backdate the request by selecting a date in the past. If backdating, you must complete the mandatory free text field under **Provide a reason why the request is being backdated and reference evi**

dence.

2. At **Who is requesting review?**, select the relevant option. If the legal representative or compensation payer or insurer is requesting the review, select **participant**.

Note: if selecting **Authorised Representative**, use **Selected Contact** field to record the relevant authorised representative making the request.

3. Select **Next**.

From **Decisions** view:

1. Select Decisions from SAP CRM.
2. At the Type drop-down list, select **Compensation Recoveries Amount**.
3. Select **New**.
4. At the **Decision Name** drop-down list, select **Compensation**.
5. Select **New**.

From the **Reviewable SAP CRM decisions** window:

1. At the **Decision Name** drop-down list, select the relevant option:
 - **Recover an amount** – select this option for a section 111 request. This will be a request for an internal review of a decision to recover a compensation amount under s111 of the NDIS Act.
 - **Compensation payment** – select this option for a section 116 request. This will be a request for an internal review of a special circumstances decision not to treat the whole or part of a compensation payment as not having been fixed by a judgement or settlement made under s116 of the NDIS Act.

Note: only select either of the above two options. Do not use the other 4 options in the dropdown menu.

Note: if a review of both an s111 and s116 decision, a separate internal review case will need to be created for each decision type.

2. At the **Original Decision Date** field, select the date the original decision was made. Confirm the correct original decision date by checking the date on the Recovery Notice or the Special Circumstances decision letter.
3. At **Decision Reference**, enter the **Enquiry Case** number that was created to record the original decision made by the Compensation Branch delegate, to give a Recovery Notice under s111 or the Special Circumstances outcome under s116.
4. At **Original Decision User Name**, enter the delegate name.

Note: if original user is not showing, tick **Unable to find original decision maker user ID**. Record email address of original user in **Decision user code**.

5. Select **Save**.
6. Select **Next**.

From the **Requests view**:

1. In the **Reason Information** field, enter a summary of the request be specific about **why** the requestor is asking for a review, and **what** outcome they are expecting.
2. Select **Save**.
3. Select **Next**.

Add documents

You must add or link all documents that were used by the Compensation Branch delegate to make the original decision as well as any supporting evidence and relevant consent forms. Include as much information as possible about the original decision and the review request, including documents and file notes of phone calls containing relevant information. If further information is to be provided for the review, you'll need to

record this in the request. All this information will allow for the review officer to better understand the review request.

1. For s111 Recovery Notice reviews, look at the Recovery Decision Form and the list of documents noted on here can be added or linked to the case, including:
 - Claim finalisation document - judgement, consent judgment, or deed/deed of release
 - Recovery notice
 - Recovery invoice
 - Recovery decision form
 - Medicare notice (if received)
 - Centrelink recovery notice (if received)
 - Statement of Claim
 - Heads of damages/Statement of particulars
 - Breakdown of Supports report
 - Updated Breakdown of Supports report with the same period
 - File notes of any phone calls containing information relating to pre-existing injury/recovery
 - Any emails containing information about pre-existing injury/recovery
 - Pre existing injury assessment
 - Medical evidence
 - Request for Technical Support outcome email.

2. For s116 Special circumstances reviews where it was decided not to treat the whole or part of a compensation payment as having been fixed by a judgement or settlement, look at the Request for Technical support (RTS) Submission and/or the Special Circumstances decision form (if there is one) and the list of documents noted on here can be added or linked to the case, including:

- Special circumstances request – this could be a Special Circumstances Application form (SCAF), a letter or email
- Supporting evidence provided with the special circumstances request or subsequent information provided
- File notes of any phone calls containing information relating to special circumstances
- Any emails containing information about special circumstances
- Statement of claim
- Heads of damages / Statement of Particulars
- Medicare notice (if received)
- Centrelink recovery notice (if received)
- Financial evidence (if applicable)
- Special Circumstances Decision Form (if applicable)
- Special Circumstances Outcome letter
- Request for Technical Support submission
- Request for Technical Support outcome email
- Breakdown of Supports report
- Updated Breakdown of Supports report with the same period.

From **Documents** view:

1. Select **Add Documents** to upload new documents. For more information, go to article [Add documents to a case](#).

Note: you must attach supporting evidence and include as much information as possible about the review request. This will allow the review officer to better understand the review request.

2. Select **Next**.

Risk matrix

From **Risk Matrix** view:

1. Select **Yes** or **No** when asked **Has there been any risks identified that may impact the participant, no minee or NDIS associated with this request?** If you select **No**, continue to step 5.
2. If **Yes**, select the risks that most closely matches the risk you've identified.
3. Select **Yes** for each risk you identify, select **No** for the risks that aren't applicable.
4. Select **LOW, MEDIUM, HIGH** or **EXTREME** for each of the risks you select. Select the level that most closely matches the risk you've identified.
5. Once you've completed the form, select **Next**.

Depending on the risks you've selected, PACE may prompt you to add further information about the identified risk.

Request summary

From **Request Summary** page:

1. Check the recorded information.

Note: if any information needs to be corrected or added, select the relevant section to return to and enter the update.

2. If everything is correct, select **Next**.

Submit internal review request

From **Submit Internal Review Request** view:

1. If applicable, complete the **Call Notes** free text field.
2. Select **Submit**. The status of the internal review will change to **New**.

Note: once you select the **Submit** button, the **Case Owner** will show as PSR Intermediate System Queue. Refresh the page and then the **Case Owner** will change to Internal Review Routing Queue.

Next steps

The internal review will be automatically routed to the internal review routing queue to be allocated to a review officer with the appropriate skill tags to complete the work.

IRT – Identify if further information is required (access and revocation)

This article provides guidance for a review officer to identify steps through key indicators.

Recent updates

1 July 2024

Removed Next steps section.

Identifying key indicators

When completing an access or revocation internal review, review officers need to consider key indicators as part of their desktop review to determine whether further information is required.

Examples of key indicators are, but not limited to:

- An applicant relies on prescribed aides and devices for most tasks most of the time (other than a common item).
- An applicant has a [List B \(External\)](#) impairment.
- Applicant demonstrates a reliance or noted deterioration requiring the support/intervention of other people for most tasks most of the time.
- Applicant is unable to perform tasks or actions needed to participate in an activity.
- Sections of the access criteria are met (for example, an applicant has a substantial reduction in functional capacity).
- A new or recent diagnosis has been provided.
- The applicant has a degenerative condition.

Review officers need to identify whether these key indicators exist for an applicant and if this will lead to a confirmed or set-aside decision. This will determine the appropriate pathway for the internal review. During the review, information or evidence provided may change the path of the review.

There are two primary examples as to how to progress an internal review:

- Option 1 - original decision is likely to be confirmed.
- Option 2 – original decision is likely to be set-aside with additional evidence.

Note: During initial contact, information can be gathered to determine next steps, including whether seeking additional information is required.

Option 1

If an internal review has no key indicators, the outcome is likely to be confirmed even if the applicant provides further evidence.

Before progressing, a review officer must make sure:

- Information and evidence provided for the internal review clearly indicates the original decision was correct.
- The impairment is not a [List A \(External\)](#), [List B \(External\)](#) or [List D \(External\)](#) impairment.
- Sections of the access criteria are not met (for example, a recent assessment will not meet the access criteria for permanence).
- The evidence-based treatments and therapies have not been trialled or ruled out by treating practitioners.
- Other than a new assessment impairment or rapid deterioration in functional capacity, the applicant is unlikely to meet the access requirements.
- The applicant has indicated they do not intend to provide further information or evidence in support of their review.

While a review officer does not need to request further information for an **Option 1** review, they must make sure the applicant is provided the opportunity to supply further information. If the applicant wishes to provide further evidence, refer to article [IRT - Requests for further information](#).

Option 2

If an internal review has key indicators and the original decision may be set-aside with additional evidence, the review officer must seek additional evidence. Refer to article [IRT - Requests for further information](#).

A review officer may speak to an applicant directly to gather supplementary functional information or try to seek consent to contact an applicant's health professional (where appropriate) to confirm information.

IRT - Update and approve a plan for an s100 decision on statement of participant supports before 9 October 2024

This article provides guidance for a review officer (internal review officer) to:

- update and approve the proposed budget for an s100 decision on a statement of participant supports before 9 October 2024
- generate the plan

Recent updates

1 December 2025

Updated justification character limit.

Before you start

You have:

- read and understood [Our Guidelines – Creating your plan \(external\)](#)
- read and understood [Our Guidelines – Changing your plan \(external\)](#)
- read and understood [Our Guidelines – Reasonable and necessary supports \(external\)](#)
- read and understood article [Understand milestones in a case](#)
- confirmed you are approving a plan for an s100 decision on a statement of participant supports before 9 October 2024.
- contacted the participant to clarify the review request, refer to article [IRT – Contact the participant or applicant](#).
- completed your **Internal Review Case** for a set-aside or vary plan decision.
- select the **Send manual letter** button and then selected the **Create Plan Approval Case** button.

Note: Do not send decision letter out at this stage. These steps are only for a **Plan Approval Case**. If your request is related to a **Budget Update Case**, refer to article [Action a budget update](#).

Actions required for Plan Approval

Select **View Child Case**. This will direct you into the **Plan Approval Case**.

Plan Duration

The **Plan Approval Case** will open on the **Draft Budget** tab. Before making any changes, check that the **Plan Approval Case** is assigned to you and reassign case owner to yourself if needed.

Note: All plans including first plans, scheduled and unscheduled reassessments, must be 12 months (1 year) or less. If setting aside or varying a plan without funding periods, you will need to ensure the plan length is 12 months (1 year) or less. Longer plan durations can only be given on new framework plans where funding periods have been introduced. Refer to article [Change plan duration](#).

Change Plan Duration: In the Plan Approval Case

1. Select the **Draft Budget** tab.
2. Select **Change Plan Duration**.

Draft Budget – add or adjust funding, complete plan comments, and justifications

1. Select **Draft Budget** tab.
2. The **Plan Approval Case** will automatically transfer over all funding in the participant's active plan from **SAP CRM**. For any **Support Categories** which are not being adjusted as part of the internal review, you will need to check that funding in the **Plan Approval Case** is correct and is within the correct category in **PACE** by referring to relevant articles, for example Home and Living, Assistive Technology – Maintenance, Repair and Rental supports.
3. Copy and paste the existing justification from **SAP CRM**. There may be some core budgets that have a \$0 amount. These will still require a justification, even if they do not meet reasonable and necessary (R&N) as all core budgets are flexible in **PACE**.
4. If a support in the **Core Budget Category** has a \$0 amount include the following comment:

This support category was not changed as part of the of the s100 Internal Review Request. \$0 budget entered into **PACE** as per approved process. This budget was not available in **SAP CRM** as participant does not require funding for this support.

5. If the funding in **PACE** is different to that in **SAP CRM** you need to adjust it to the correct amount. To complete this section, you will need to refer to **SAP CRM** to:

Check funding in the Determine the funded supports and Finalise plan and approve tabs.

Adding funding and justifications including funding for new Support Categories

Refer to relevant article for example [Support Categories](#) regarding the support to be added into **PACE** if a new **Support Category** is to be added:

1. Select **New Support Category** button. This will open the **Add New Budget Line** window.
2. Start typing the support name into the **Support Category** field, then select the correct option from the drop-down menu.
3. Enter the funding into **Amount**. The **Plan conversation support tool** can be used to assist with these calculations.
4. For any **Support Categories** which are being adjusted as part of the internal review, you will need to recalculate the funding in the **Draft Budget** to include any funding added or removed as part of the Internal Review decision.

Note: Make sure you include all the supports together that are included in that **Support Category**.

5. Select the **Instalment Type** as:
 - **Recurring**, the **Amount** will be the **annual** amount for this support.
 - **Regular**, the **Amount** will be the **monthly** amount for this support.
 - **Once-Off**, the **Amount** will be the **total** amount for this support.

6. Add the new amount to be funded.

Note: Hover over the **Information** icon to view this information.

7. For **TSP Variance Reason**, select the appropriate option from the drop-down list.

If the support meets all the NDIS funding criteria under the **Justifications** heading, select the checkbox to confirm this.

- Record the **Justification** in the free text fields (character limit of 1500 characters). For justifications which exceed the 1500-character limit, save the justification in a Word document with the naming convention case_number_plan_justification_dd-mm-yyyy. Upload the document to the case under **Documents**. Reference the document within the justification field.

- Use template:

As part of the s100 review, I have found these supports meet s34 reasonable and necessary criteria in the NDIS Act and NDIS Rules. I have made a decision to vary the current level of funding.

Note: For some supports this might automatically populate for example, Support Coordination, Transport and Choice and Control. Edit the justification to make it specific to the participant.

- Select the second check box to add evidence. For **Evidence Type**, select **Other**.

- In the **Evidence Explanation** free-text field, paste the list of Reviewed Materials from your drafted letter.

- Select **Save** to close the window. A **Plan Comments** window will now open.

- Select the correct options in line with the funding provided.

Note: These comments will appear on the Participant's plan.

- Once all **Plan Comments** have been added, select next and this will return you to the **Plan Approval Case**.

Note: Repeat this process for each **Support Category** that you need to adjust.

Note: If you need to remove a **Support Category**, select **Remove Support from Budget** button.

- Navigate to **Fund Management** tab to enter **Fund Management Decision**. Refer to article [Make fund management decision](#).

16. If required, Record Bank Details:

- If there is self-managed funding or recurring transport payments in the budget, you will need to ensure the bank account details for the participant or nominee are recorded.
- If there are no bank details, an error message will prompt you to record them. You will need to complete an **Update Bank Details** case. Refer to article [Before you update bank account details](#).

Note: PACE will set up a periodic payment schedule to the nominated bank account if there is a recurring **Transport Support Category**, so it is important to make sure bank details are recorded prior to the plan being approved.

17. Save and upload the **Plan conversation support** tool used to **Documents** folder within the Internal Review Case.

Handover Notes

Handover notes are required to be completed prior to approving the proposed plan approval budget, however they cannot be edited once they have been saved.

Enter the **s100 Completed - Change to statement of supports - Implementation required with participant (Set aside/vary decision)** template into the **Supporting Notes** field.

Finalising and gaining Plan Approval for non-delegate or labour hire staff

1. From the **Draft Budget** tab, select **Ready for plan meeting**.
2. Select **Yes** and **Next**, then select **Close**.
3. This will take you to the next window which will display the option **Approve Proposed Budget**. The case will require Team Leader and or Delegate approval.
4. Inform your Team Leader of the case status, **Plan Approval Case is ready for review and approval**.
5. The case should be changed to your Team Leader's name as **Case Owner** and email notification of this can be sent to the Team Leader.

Template for email:

<**Subject Line**>: Plan Approval <case number> for delegate approval

<**Email body**>:

Hi <Name>,

Plan Approval <case number> assigned to you for delegate approval on <Date>.

Supports Reviewed:

1. <request one>
2. <request two>

Changes to funded supports/plan management:

Funding added/varied:

Funding removed:

Kind regards,

6. Once the **Plan Approval case** has been approved by a delegate the option will appear to generate the final plan.

Generate the plan

In the **Plan approval case**

1. Select **Generate final plan**
2. Review the participant's or recipient's details in the preview screen then select **Next**. If you need to update details on the **Person Account**, refer to article [Update a Person Account](#).
3. At the **Preview Option** in the drop-down menu, select **Yes**.
4. Select the participant's or recipient's name from the drop-down menu. Select **Next**.
5. A preview of the plan will generate. Review the plan approval cover letter and the plan for any errors before you select **Next**. You can also download the document as a PDF or Word document to review.
6. At **Correspondence Confirmation**, select **Take me to the Previous Options** if you want to view another recipient and return to step 4. Otherwise, select **Submit Correspondence**. PACE will send the correspondence to the participant, their nominee or child representative by their preferred contact method. Go to article [Check a person's preferred contact method](#).
7. A message will appear saying **Your correspondence generation process has been initiated**.

8. Select **Next**.
9. A message will appear saying **Plan has been generated successfully**.
10. Select **close**.
11. Once the plan has been generated, both the **Plan Approval Case** and **Internal Review Case** will move to the **Closed** case stage. You might need to refresh your browser for the case stage to update.

Send a copy of the internal review letter and participant plan

You must send the following two documents to the participant:

- The internal review outcome letter
- Their NDIS plan.

To prepare the internal review outcome letter, refer to article [IRT - Sending a manual letter](#).

Note: If sending through post, place the participants plan behind the internal review outcome letter. If sending through email, attach both documents to the email in **PACE**.

For remaining closure tasks, please refer to article [IRT – Complete remaining closure tasks for an internal review](#).

Finalising and gaining Plan Approval for delegates only

Approve funding in the Plan Approval Case

1. From the **Draft Budget** tab, select **Ready for plan meeting**. Select **Yes** and **Next**, then select **Close**.
2. Select **Approve Proposed Budget**. In the pop-up window, select **Yes** and **Next**, then **Approve** to approve the funding.

Note: Once you complete this step, you will no longer be able to make changes to the decision/s in the internal review case.

3. If the plan is above your delegation, you will be prompted to submit for HDD. The HDD **internal note** is to be completed and owner changed to the HDD delegate

within the Reviews Branch. Refer to article [IRT - Planning request internal note templates](#).

4. Select **Generate final plan**.
5. Review the participant's or recipient's details in the **Preview** screen then select **Next**. If you need to update details on the **Person Account**, refer to article [Update a Person Account](#).
6. At the **Preview** option in the drop-down menu, select **Yes**.
7. Select the participant's or recipient's name in the drop-down menu. Select **Next**.
8. A preview of the plan will generate. Review the plan approval cover letter and the plan for any errors before you select **Next**. You can also download the document as a PDF or Word document to review.
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10. A message will appear saying **Your correspondence generation process has been initiated**.
11. Select **Next**.
12. A message will appear saying **Plan has been generated successfully**.
13. Select **close**.

Once the plan has been generated, both the **Plan Approval Case** and **Internal Review Case** will move to the **Closed** case stage. You might need to refresh your browser for the case stage to update.

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For remaining closure tasks, please refer to article [IRT – Complete remaining closure tasks for an internal review](#).