Descriptions of impairment categories

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This article provides guidance for an access delegate to understand the impairment categories when deciding what categories to select for a person that meets the eligibility requirements.

1 Recent updates

14 October 2024
New guidance to:

- reflect legislation changes from 3 October 2024
- understand the impairment categories when deciding what categories to select for a person that meets the eligibility requirements.

2 Impairment categories

1. **Intellectual**Such as how you speak and listen, read and write, solve problems, and process and remember information.

An intellectual impairment may be considered a developmental disorder as it becomes apparent at an early age[1]. Without these skills, a person needs additional supports to succeed at school, work, or independent life. Conditions such as down's syndrome and cerebral palsy may be associated with intellectual impairments.

2. **Cognitive**Such as how you think, learn new things, use judgment to make decisions, and pay attention.

Cognitive impairment involves various aspects of high-level mental functions and processes such as attention, memory, knowledge, decision-making, planning, reasoning, judgment, perception, comprehension, language, and visuospatial function . There are some similarities with intellectual impairments however, cognitive impairments generally become apparent at a later stage in life and are associated with brain injury or pathology[1]. Conditions such as dementia and traumatic brain injury may cause cognitive impairments.

3. **Neurological**Such as how your body functions.

Neurological impairments happen when there's a change in function of the nervous system, which includes the brain and spinal cord[2]. Damage to either or both areas can affect the way the nervous system processes information. Parkinsons disease, epilepsy and multiple sclerosis[3] are conditions which have a neurological basis.

4. **Sensory**Such as how you see or hear.

Sensory impairment most commonly relates to hearing or visual loss but can include all senses[2].

5. **Physical**Such as the ability to move parts of your body.

Physical impairment may cause limitations in posture control, moving and coordinating parts of the body or in stamina[2]. There are many conditions which can cause a physical impairment including amputation of a limb, arthritis, multiple sclerosis, heart disease.

6. **Psychosocial**This means you have reduced capacity to do daily life activities and tasks due to your mental health.

Participants with a psychosocial impairment may find it hard to engage in education, training and employment or engage with the community. Mental health conditions such as bipolar affective disorder and schizophrenia are commonly associated with psychosocial impairments[1] but other conditions such as autism could also have associated psychosocial impairments.

To learn more about impairment categories, go to article Impairment categories guide.

3 References

[1] The Diagnostic and Statistical Manual of Mental Disorders (5th edition. DSM-5, American Psychiatric Association, 2013).
[2] International Classification of Functioning, Disability, and Health: ICF. Geneva. World Health Organisation, 2001.
[3] World Health Organisation (WHO), (1983). The ICD-10 classification of mental and behavioural disorders. World Health Organisation.

Impairment categories guide

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This article provides guidance for an access delegate to understand what impairment categories to select for a person that meets the eligibility requirements.

1 Recent updates

14 October 2024
New guidance to:

- reflect legislation changes from 3 October 2024
- decide what impairment categories to select for a person that meets the eligibility requirements.

2 Impairments categories guide

Impairments are a loss of or damage to a body's function. When we assess an impairment to meet access, we look at:

- the body's function
- the body's structure
- how they think and learn.

To learn more about impairment categories go to article Descriptions of impairment categories.

The following list provides you with information on:

- the condition
- the ICD 10 Code
- the **required** impairment category for access assessors to select
- **optional**
  impairment categories to select as relevant, based on evidence provided with access request.

3 Conditions

3.1 Autism (ASD)

1. **Autism** – includes Rett and Asperger Syndrome
   ICD 10 Codes: F84.0, F84.2, F84.5
   Required impairment category: Neurological
   Optional impairment categories: Intellectual, cognitive, physical, psychosocial

3.2 Acquired brain injury

1. **Glioblastoma** **ICD 10 Code:** G71.9
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, physical, psychosocial
2. **Hypoxic brain injury** **ICD 10 Code:** 93.1
   Required impairment category: Neurological
   Optional impairment categories: Physical, psychosocial
3. **Traumatic brain injury** – also called head injury and acquired brain damage
   ICD 10 Code: T90
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, physical, psychosocial

3.3 Intellectual disability

1. **Mild intellectual disability** **ICD 10 Codes:** F70
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive
2. **Moderate intellectual disability** **ICD 10 Codes:** F71
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, physical, psychosocial
3. **Severe intellectual disability** **ICD 10 Codes:** F72
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, physical, psychosocial
4. **Profound intellectual disability** **ICD 10 Codes:** F73
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, physical, psychosocial
5. **Unspecified intellectual disability** **ICD 10 Codes:** F79
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, sensory, physical, psychosocial
6. **Pervasive developmental disorder** **ICD 10 Codes:** F84.8
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, sensory, psychosocial
7. **Microcephaly** **ICD 10 Codes:** Q02
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, neurological, sensory, physical
8. **Other congenital brain conditions –** for example, tuberous sclerosis
   ICD 10 Codes: Q04
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, neurological, physical

9. **Spina bifida** **ICD 10 Codes:** Q05
   Required impairment category: Physical
   Optional impairment categories: Intellectual, cognitive, sensory, neurological
10. **Foetal alcohol syndrome** **ICD 10 Codes:** Q86.0
    Required impairment category: Neurological
    Optional impairment categories: Intellectual, cognitive, sensory, physical, psychosocial
11. **Foetal alcohol spectrum disorder (FASD)** **ICD 10 Codes:** Q86.0D
    Required impairment category: Neurological
    Optional impairment categories: Intellectual, cognitive, sensory, physical, psychosocial
12. **Cornelia de Lange syndrome** **ICD 10 Codes:** Q87.1
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial
13. **Prader Willi syndrome** **ICD 10 Codes:** Q87.1
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, physical, psychosocial
14. **Coffin-Lowry syndrome** **ICD 10 Codes:** Q87.8
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial
15. **Other congenital conditions (causing intellectual disability)** **ICD 10 Codes:** Q89
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial
16. **Edwards syndrome** **ICD 10 Codes:** Q91
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial
17. **Patau syndrome** **ICD 10 Codes:** Q91
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial
18. **Cri du Chat syndrome** **ICD 10 Codes:** Q93.4
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, sensory, physical
19. **Angelman syndrome** **ICD 10 Codes:** Q93.5
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, sensory, physical
20. **Other chromosomal syndromes (including Kabuki & Williams syndromes)** **ICD 10 Codes:** Q99
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial
21. **Fragile X syndrome** **ICD 10 Codes:** Q99.2
    Required impairment category: Intellectual
    Optional impairment categories: Cognitive, neurological, sensory, physical, psychosocial

3.4 Cerebral Palsy

1. **Cerebral palsy** **ICD 10 Codes:** G80
   Required impairment category: Physical
   Optional impairment categories: Intellectual, cognitive, neurological, sensory

3.5 Down Syndrome

1. **Down syndrome** **ICD 10 Codes:** Q90
   Required impairment category: Intellectual
   Optional impairment categories: Cognitive, physical

3.6 Hearing Impairment

1. **Hearing loss** **ICD 10 Codes:** H90
   Required impairment category: Sensory
   Optional impairment categories: Cognitive
2. **Congenital hearing condition** **ICD 10 Codes:** Q16.9
   Required impairment category: Sensory
   Optional impairment categories: Cognitive

3.7 Visual Impairment

1. **Albinism** **ICD 10 Codes:** E70.3
   Required impairment category: Sensory
   Optional impairment categories: Not applicable
2. **Visual impairment (including blindness)** **ICD 10 Codes:** H54
   Required impairment category: Sensory
   Optional impairment categories: Not applicable
3. **Congenital eye conditions** **ICD 10 Codes:** Q15.9
   Required impairment category: Sensory
   Optional impairment categories: Not applicable

3.8 Other Sensory - Speech

1. **Other sensory - speech** **ICD 10 Codes:** R47
   Required impairment category: Sensory
   Optional impairment categories: Physical

3.9 Multiple Sclerosis

1. **Multiple Sclerosis** **ICD 10 Codes:** G35
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, physical, psychosocial

3.10 Other Neurological

1. **Alzheimer's disease** **ICD 10 Codes:** F00
   Required impairment category: Cognitive
   Optional impairment categories: Neurological, physical, psychosocial
2. **Unspecified dementia** **ICD 10 Codes:** F03
   Required impairment category: Cognitive
   Optional impairment categories: Neurological, physical, psychosocial
3. **Huntington disease** **ICD 10 Codes:** G10
   Required impairment category: Physical
   Optional impairment categories: Cognitive, neurological, psychosocial
4. **Motor neurone disease** **ICD 10 Codes:** G12.2
   Required impairment category: Physical
   Optional impairment categories: Cognitive, neurological, sensory, psychosocial
5. **Parkinson's disease** **ICD 10 Codes:** G20
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, physical, psychosocial
6. **Epilepsy – Mandatory TAPIB** **ICD 10 Codes:** G40
   Required impairment category: Neurological
   Optional impairment categories: Intellectual, cognitive, psychosocial
7. **Muscular dystrophy** **ICD 10 Codes:** G71.0
   Required impairment category: Physical
   Optional impairment categories: Neurological
8. **Other Neurological – List A and List C** **ICD 10 Codes:** G99
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, sensory, physical

3.11 Stroke

1. **Stroke** **ICD 10 Codes:** I69
   Required impairment category: Physical
   Optional impairment categories: Cognitive, neurological, sensory, psychosocial

3.12 Other Physical

1. **Rheumatoid arthritis** **ICD 10 Codes:** M05
   Required impairment category: Physical
   Optional impairment categories: Not applicable
2. **Other arthritis – mandatory TAPIB** **ICD 10 Codes:** M12
   Required impairment category: Physical
   Optional impairment categories: Not applicable
3. **Other physical** **ICD 10 Codes:** M95
   Required impairment category: Physical
   Optional impairment categories: Psychosocial
4. **Multiple traumatic amputations** **ICD 10 Codes:** T05
   Required impairment category: Physical
   Optional impairment categories: Psychosocial
5. **Myopathy** **ICD 10 Codes:** G72.9
   Required impairment category: Physical
   Optional impairment categories: Not applicable

3.13 Psychosocial disability

1. **Schizophrenia** **ICD 10 Codes:** F20
   Required impairment category: Psychosocial
   Optional impairment categories: Cognitive
2. **Schizoaffective disorder** **ICD 10 Codes:** F25.9
   Required impairment category: Psychosocial
   Optional impairment categories: Cognitive
3. **Bipolar affective disorder** **ICD 10 Codes:** F31
   Required impairment category: Psychosocial
   Optional impairment categories: Cognitive
4. **Major depressive illness** **ICD 10 Codes:** F32
   Required impairment category: Psychosocial
   Optional impairment categories: Cognitive
5. **Other anxiety disorders** **ICD 10 Codes:** F41
   Required impairment category: Psychosocial
   Optional impairment categories: Cognitive
6. **Obsessive-compulsive disorder** **ICD 10 Codes:** F42
   Required impairment category: Psychosocial
   Optional impairment categories: Not applicable
7. **Post traumatic stress disorder** **ICD 10 Codes:** F43
   Required impairment category: Psychosocial
   Optional impairment categories: Cognitive
8. **Borderline personality disorder** **ICD 10 Codes:** F60.3
   Required impairment category: Psychosocial
   Optional impairment categories: Not applicable
9. **Tourette syndrome** **ICD 10 Codes:** F95.2
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, physical, psychosocial
10. **Other psychosocial disorders** **ICD 10 Codes:** F99
    Required impairment category: Psychosocial
    Optional impairment categories: Cognitive
11. **Anorexia** **ICD 10 Codes:** R63
    Required impairment category: Psychosocial
    Optional impairment categories: Cognitive, physical

3.14 Spinal Cord Injury

1. **Malignant neoplasm of spinal cord complete and incomplete** **ICD 10 Codes:** C72.5, C72.7
   Required impairment category: Physical
   Optional impairment categories: Neurological, sensory
2. **Spinal cord injury (complete)** **ICD 10 Codes:** T09.5
   Required impairment category: Physical
   Optional impairment categories: Neurological, sensory, psychosocial
3. **Spinal cord injury (incomplete)** **ICD 10 Codes:** T09.7
   Required impairment category: Physical
   Optional impairment categories: Neurological, sensory, psychosocial

3.15 Other

1. **Malignant neoplasm of brain** **ICD 10 Codes:** C71
   Required impairment category: Neurological
   Optional impairment categories: Cognitive, psychosocial
2. **Metastatic cancer** **ICD 10 Codes:** C79.9
   Required impairment category: Physical
   Optional impairment categories: Cognitive
3. **Malignant neoplasm of blood or immune disease** **ICD 10 Codes:** C96
   Required impairment category: Physical
   Optional impairment categories: Cognitive
4. **Autoimmune disorders** **ICD 10 Codes:** D89.9
   Required impairment category: Physical
   Optional impairment categories: Cognitive
5. **Obesity – mandatory TAPIB** **ICD 10 Codes:** E66
   Required impairment category: Physical
   Optional impairment categories: Psychosocial
6. **Classical phenylketonuria** **ICD 10 Codes:** E70.0
   Required impairment category: Cognitive
   Optional impairment categories: Psychosocial
7. **Disorders of pyruvate metabolism and gluconeogenesis** **ICD 10 Codes:** E74.4
   Required impairment category: Intellectual
   Optional impairment categories: Neurological, physical
8. **Other metabolic disorders** **ICD 10 Codes:** E88
   Required impairment category: Intellectual
   Optional impairment categories: Neurological, physical
9. **Dementia – rapidly progressing** **ICD 10 Codes:** F03.9
   Required impairment category: Cognitive
   Optional impairment categories: Not applicable
10. **Functional neurological disorder (FND) – mandatory TAPIB** **ICD 10 Codes:** F44.4
    Required impairment category: Neurological
    Optional impairment categories: Cognitive, sensory, physical
11. **Other language disorder** **ICD 10 Codes:** F80
    Required impairment category: Cognitive
    Optional impairment categories: Not applicable
12. **Peripheral neuropathy – does NOT require TAPIB** **ICD 10 Codes:** F90.0
    Required impairment category: Neurological
    Optional impairment categories: Sensory, physical
13. **Oppositional defiant disorder (ODD)** **ICD 10 Codes:** F91.3
    Required impairment category: Cognitive
    Optional impairment categories: Psychosocial
14. **Other hereditary ataxias** **ICD 10 Codes:** G11.8
    Required impairment category: Neurological
    Optional impairment categories: Cognitive, sensory, physical
15. **Dementia – early onset** **ICD 10 Codes:** G30.0
    Required impairment category: Cognitive
    Optional impairment categories: Not applicable
16. **Plegia** **ICD 10 Codes:** G83.1
    Required impairment category: Physical
    Optional impairment categories: Neurological

17. **Chronic pain – mandatory TAPIB** **ICD 10 Codes:** G89.4
    Required impairment category: Physical
    Optional impairment categories: Sensory, psychosocial
18. **Postural Orthostatic Tachycardia Syndrome (POTS) – mandatory TAPIB** **ICD 10 Codes:** I49.8
    Required impairment category: Neurological
    Optional impairment categories: Physical
19. **Lymphoedema – mandatory TAPIB** **ICD 10 Codes:** I89.0
    Required impairment category: Physical
    Optional impairment categories: Not applicable
20. **Chronic lung disease** **ICD 10 Codes:** J44.9
    Required impairment category: Physical
    Optional impairment categories:
21. **Chronic Obstructive Pulmonary Disease (COPD) – mandatory TAPIB** **ICD 10 Codes:** J44.9A
    Required impairment category: Physical
    Optional impairment categories: Not applicable
22. **Osteoarthritis – mandatory TAPIB** **ICD 10 Codes:** M19.9
    Required impairment category: Physical
    Optional impairment categories: Not applicable
23. **Systemic lupus erythematosus** **ICD 10 Codes:** M32
    Required impairment category: Physical
    Optional impairment categories: Not applicable
24. **Ankylosing spondylitis** **ICD 10 Codes:** M45
    Required impairment category: Physical
    Optional impairment categories: Not applicable
25. **Fibromyalgia** **ICD 10 Codes:** M79.7
    Required impairment category: Physical
    Optional impairment categories: Sensory
26. **Renal failure** **ICD 10 Codes:** N18
    Required impairment category: Physical
    Optional impairment categories:
27. **Ehlers Danlos – does NOT require TAPIB** **ICD 10 Codes:** Q79.6
    Required impairment category: Physical
    Optional impairment categories: Not applicable
28. **Dyslexia** **ICD 10 Codes:** R48
    Required impairment category: Cognitive
    Optional impairment categories: Psychosocial
29. **Childhood apraxia of speech** **ICD 10 Codes:** R48.2
    Required impairment category: Neurological
    Optional impairment categories: Cognitive
30. **Short stature** **ICD 10 Codes:** R62.5
    Required impairment category: Physical
    Optional impairment categories: Not applicable
31. **Amputation – single limb or upper/lower limb** **ICD 10 Codes:** Z89
    Required impairment category: Physical
    Optional impairment categories: Cognitive, sensory, psychosocial
32. **Amputation – multiple** **ICD 10 Codes:** Z89.1
    Required impairment category: Physical
    Optional impairment categories: Cognitive, sensory, psychosocial

Access Practice Guide – Previous NDIS Act 2013 (C19)

The content of this document is OFFICIAL.

This guide assists the Scheme Eligibility Branch to assess new applicants' eligibility for the National Disability Insurance Scheme (NDIS).

This guide is designed to be used with the Access and Eligibility Reassessment (ER) Decision Tree to make legislatively correct access decisions.

1. Recent updates

Date	What's changed
October 2024	Clarified that this document only applies to the previous version of the NDIS Act 2013 (C19)

2. Checklist

Topic	Checklist
Pre-requisites	You have read: ❑ Section 21, 22, 23, 24 and 25 of the previous National Disability Insurance Act 2013 (C19) ❑ NDIS Becoming a Participant Rules 2016 ❑ Operational Guidelines - NDIS You are working through: ❑ Access and ER Decision Tree
Actions	❑ 3. Are you making an Access or ER decision ❑ 4. Access – Age Requirements ❑ 5. Access – Residence Requirements ❑ 6. Access – Streamlined Decisions ❑ 7. Access – Disability Requirements ❑ 8. Access – Early Intervention Requirements ❑ 9. ER – Residence Requirements

Topic	Checklist
	❑ 10. ER – Streamlined Decisions ❑ 11. ER – Disability Requirements ❑ 12. ER – Early Intervention Requirements ❑ 13. Related procedures or resources ❑ 14. Feedback ❑ 15. Version control

3. Are you making an Access or ER decision?

For Access decisions, go to Section 4. Access – Age Requirements

For ER decisions, you must use the practise guide for the Current NDIS Act 2013

4. Access – Age Requirements

4.1 Does the applicant meet the age requirements?

Legislation

Section 22 Age requirements

A person meets the age requirements if the person was aged under 65 when the access request in relation to the person was made.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the applicant was aged under 65 when their access request was received as valid (that is, complete); or
- the applicant is non-defined and their data was received by the NDIA prior to their 65th birthday.

Applicants that meet the age requirements	Go to Section 5.1 Does the applicant meet the residence requirements?
Applicants that do not meet the age requirements	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

5. Access – Residence Requirements

5.1 Does the applicant meet the residence requirements?

Legislation

Section 23 Residence requirements

(1) A person meets the residence requirements if the person:
- (a) resides in Australia; and
- (b) is one of the following:
  - (i) an Australian citizen;
  - (ii) the holder of a permanent visa;
  - (iii) a special category visa holder who is a protected SCV holder.

(2) In deciding whether or not a person resides in Australia, regard must be had to:
- (a) the nature of the accommodation used by the person in Australia; and
- (b) the nature and extent of the family relationships the person has in Australia; and
- (c) the nature and extent of the person's employment, business or financial ties with Australia; and
- (d) the nature and extent of the person's assets located in Australia; and
- (e) the frequency and duration of the person's travel outside Australia; and
- (f) any other matter relevant to determining whether the person intends to remain permanently in Australia.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the applicant:

- lives in Australia for most of the year; and
- is an Australian Citizen; or
- is the holder of a permanent visa; or
- is the holder of a protected Special Category Visa (SCV)

Applicants that meet the residency requirements	Go to Section 6.1 - List A
Applicants that do not meet the residency requirements	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

6. Access – Streamlined Decisions

6.1 List A

List A conditions that are likely to meet the disability requirements.

Note: A person does not need to have a condition on List A to become a participant of the NDIS.

For further information, refer to Our Guidelines - Do you meet the disability requirements?

Applicants under the age of 7

Applicants that have a condition on List A	Are likely to meet the disability requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not have a condition on List A	Go to Section 6.3 - List D

Applicants aged 7 and over

Applicants that have a condition on List A	Are likely to meet the disability requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not have a condition on List A	Go to Section 6.2 - List B

6.2 List B

Where an applicant has been diagnosed with a condition on List B, they will be considered to have a disability attributable to one or more conditions that are likely to result in a permanent impairment.

For applicants diagnosed with a condition on List B, you will only need to assess whether the applicant:

- has substantially reduced functional capacity to perform one or more activities;
- is affected in their capacity for social or economic participation; and
- is likely to require support under the NDIS for their lifetime.

Note: A person does not need to have a condition on List B to become a participant in the NDIS.

For further information, refer to Our Guidelines - Is your impairment likely to be permanent?

For applicants under the age of 7

Applicants that have a condition on List B	Go to Section 8.3 - Does the applicant meet Section 25(1)(b)?
Applicants that do not have a condition on List B	Go to Section 8.1 - Does the applicant meet Section 25(1)(a)?

For applicants aged 7 and over

Applicants that have a condition on List B	Go to Section 7.3 - Does the applicant meet Section 24(1)(c)?
Applicants that do not have a condition on List B	Go to Section 7.1 - Does the applicant meet Section 24(1)(a)?

6.3 List D

Where a child under the age of 7 has been diagnosed with a condition on List D, they will meet the early intervention requirements without further assessment.

Note: A child does not need to have a List D condition to become a participant of the NDIS.

For further information, refer to Our Guidelines - Do you need early intervention?

For applicants under the age of 7

Applicants that have a condition on List D	Meet the early intervention requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not have a condition on List D	Go to Section 8.1 - Developmental Delay

6.4 0-25 Hearing Impairments

An applicant meets the early intervention requirements without further assessment if they:

- are aged between birth and 25 years of age; and

- have confirmed results from a specialist audiological assessment (including electrophysiological testing when required) consistent with auditory neuropathy or hearing loss ≥ 25 decibels in either ear at 2 or more adjacent frequencies, which is likely to be permanent.

What to consider

This streamlined access approach for early intervention acknowledges a rich body of evidence that recognises that early intervention supports up to and including the age of 25 is critical for people with hearing impairment as the developing brain requires consistent and quality sound input and other support over that period to develop normally and ameliorate the risk of lifelong disability.

This same body of evidence suggests that brain development and language capability have been achieved by the age of 26. Therefore, adults aged 26 years and over are not immediately accepted to be likely to benefit from the same early intervention approach because there is no requirement to support the development of the auditory pathways. Adults aged 26 years and over with hearing impairment will therefore be assessed normally, on a case-by-case basis, having regard to the availability of all relevant evidence.

For further information, refer to Our Guidelines - What about people aged between 0 and 25 with a hearing impairment?

For applicant aged under 7

Applicants that meet the hearing impairment criteria	Meet the early intervention requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet the hearing impairment criteria	Go to Section 6.2 - List B impairments

For applicants aged 7 and over

Applicants that meet the hearing impairment criteria	Meet the early intervention requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet the hearing impairment criteria	Go to Section 8.2 - Does the applicant meet Section 25(1)(a)?

7. Access – Disability Requirements

7.1 Does the applicant meet Section 24(1)(a)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(a) the person has a disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments or the person has one or more impairments to which a psychosocial disability is attributable

…

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the applicant has a disability (a reduction or loss in their ability to do things); and
- their disability is caused by an impairment (a loss or significant change in their body's functions or structure, or how they think and learn); and
- the impairment is intellectual, cognitive, neurological, sensory, or physical in nature.

Note: Where an applicant has been diagnosed with a List A or List B condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate both that the applicant has an impairment, and that the impairment is resulting in a disability?
- Does the evidence demonstrate that the applicant is reduced in their ability to do things, however this reduction cannot be reasonably attributed to an impairment?
- Does the evidence demonstrate that the applicant has a loss or significant change in one of their body's functions or structure, or in how they think and learn; however, there is no indication that this is causing a reduction or loss in their ability to do things?

Note: A diagnosis is not required to meet this criterion: if the evidence shows the person has a disability caused by a relevant impairment, then they will meet 24(1)(a) – this is because we assess based on the impairment/functional impact.

For further information, refer to Our Guidelines - Is your disability caused by an impairment?

Applicants under the age of 7

Applicants that meet Section 24(1)(a)	Go to Section 7.2 - Does the applicant meet Section 24(1)(b)?
Applicants that do not meet Section 24(1)(a)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

Applicants aged 7 or over

Applicants that meet Section 24(1)(a)	Go to Section 7.2 - Does the applicant meet Section 24(1)(b)?
Applicants that do not meet Section 24(1)(a)	Go to Section 6.4 - 0-25 Hearing Impairments

7.2 Does the applicant meet Section 24(1)(b)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(b) The impairment or impairments are, or are likely to be, permanent

…

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the applicant has a:

- permanent impairment; or
- likely permanent impairment.

Note: Where an applicant has been diagnosed with a List A or List B condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant has completed all available and appropriate treatment options, and that there are no recommended treatment options likely to remedy the impairment?
- Does the evidence contain recommendations for treatments which have not been demonstrated to have been explored?
- Does the evidence indicate that the applicant requires further treatment, and that this treatment has some prospect of success?
- Does the evidence demonstrate that the applicant requires ongoing treatment, but that it is for maintenance purposes only?
- Does the evidence demonstrate that the impairment is degenerative in nature, and that treatment will not improve the impairment?

In answering the above questions, does the evidence contain sufficient information addressing:

- What treatments have been undertaken and what were the outcomes?
- If there are evidence-based treatments not undertaken, why were they considered and deemed unsuitable?
- What further/ongoing treatments have been recommended and what are the expected outcomes of these treatments?

For further information, refer to Is your impairment likely to be permanent? | NDIS

Applicants under the age of 7

Applicants that meet Section 24(1)(b)	Go to Section 7.3 - Does the applicant meet Section 24(1)(c)?
Applicants that do not meet Section 24(1)(b)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

Applicants aged 7 and over

Applicants that meet Section 24(1)(b)	Go to Section 7.3 - Does the applicant meet Section 24(1)(c)?

Applicants that do not meet Section 24(1)(b)	Are not eligible for disability or early intervention support from the NDIS. If they do not meet this criterion, they automatically do not meet Section 25(1)(a). Please follow the process in knowledge article Make an Access Decision.

7.3 Does the applicant meet Section 24(1)(c)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(c) The impairment or impairments result in substantially reduced functional capacity to undertake one or more of the following activities: The impairment or impairments result in substantially reduced functional capacity to undertake one or more of the following activities:

(i) communication;

(ii) social interaction;

(iii) learning

(iv) mobility

(v) self-care

(vi) self-management

…

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the permanent impairment, or permanent impairments combined, results in substantially reduced functional capacity in one or more of the following activities:

- Communication: how they speak, write or use sign language and gestures.
- Social interaction: how they make and keep friends, interact with the community, and cope with feelings and emotions in social situations.
- Learning**:** how they learn, understand and remember new things, and practise and use new skills.

- Mobility: how they move around home and the community and how they get in and out of bed or a chair.
- Self-care: how they partake in personal care, hygiene, grooming, eating and drinking, and health.
- Self-management (if older than 6): how they organise their life, make decision, solve problems and manage money.

Note: When an applicant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant is unable to participate effectively or completely (i.e., across the whole or majority of tasks) in one or more activities, without formally prescribed equipment?
- Does the evidence demonstrate that the applicant is unable to participant effectively or completely in one or more activities, and usually requires the assistance of another person?
- Does the evidence demonstrate that the applicant would be unsafe to complete one or more tasks required to participate in an activity without formally prescribed equipment or assistance from another person?
- Does the evidence indicate that the applicant is able to participate in each activity effectively by using commonly used items?
- Does the evidence indicate that the applicant is able to participate in each activity effectively, albeit more slowly or in a different way?
- Would completing tasks more slowly or in a modified way, or using commonly used items, relieve the applicant's need for personal assistance?

In answering the above questions, does the evidence contain sufficient information addressing:

- What specific tasks the applicant cannot complete without support?
- Why the applicant requires support?
- How often the applicant requires support, and what that support looks like?

For further information, refer to Our Guidelines - Does your impairment substantially reduce your functional capacity?

Applicants under the age of 7

Applicants that meet Section 24(1)(c)	Go to Section 7.4 - Does the applicant meet Section 24(1)(d)?
Applicants that do not meet Section 24(1)(c)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

Applicants aged 7 and over

Applicants that meet Section 24(1)(c)	Go to Section 7.4 - Does the applicant meet Section 24(1)(d)?
Applicants that do not meet Section 24(1)(c)	Go to Section 6.4 - 0-25 Hearing Impairments

7.4 Does the applicant meet Section 24(1)(d)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(d) The impairment or impairments affect the person's capacity for social or economic participation.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the permanent impairment, or permanent impairments combined, affects the applicant's social or economic participation.

Note: Where an applicant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant's social participation (e.g., their capacity to play sport, go to the movies, see friends, etc.) is affected by their permanent impairment/s - in any way?

- Does the evidence demonstrate that the applicant's economic participation (e.g., their capacity to travel, to find or maintain voluntary or paid work, etc.) is affected by their permanent impairment - in any way?
- Does the evidence demonstrate that the applicant's social and economic participation is not impacted in any way, and that they can fully engage without any assistance?

For further information, refer to Our Guidelines - Does your impairment affect your social, work or study life?

Applicants under the age of 7

Applicants that meet Section 24(1)(d)	Go to Section 7.5 - Does the applicant meet Section 24(1)(e)?
Applicants that do not meet Section 24(1)(c)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

Applicants aged 7 and over

Applicants that meet Section 24(1)(d)	Go to Section 7.5 - Does the applicant meet Section 24(1)(e)?
Applicants that do not meet Section 24(1)(d)	Go to Section 6.4 - 0-25 Hearing Impairments

7.5 Does the applicant meet Section 24(1)(e)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(e) The person is likely to require support under the National Disability Insurance Scheme for the person's lifetime.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the applicant:

- will require the support of the NDIS for their lifetime; or

- is likely to require the support of the NDIS for their lifetime.

Note: Where an applicant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant is likely to require disability supports that are not clinical in nature, and that focus on their functional ability, for their lifetime?
- Does the evidence demonstrate that the applicant will likely be substantially reduced in their functional capacity (in a relevant activity) for their lifetime, despite any interventions?
- Are there any recommendations for interventions that are likely to improve the applicant's functional capacity, and reduce their future need for disability related supports?
- If the applicant is a child or young adult, does the evidence indicate that significant functional improvements can be expected - either as they develop, or through interventions?
- Does the applicant's need for support relate to a health condition, and is that support more appropriately funded by the health system?

For further information, refer to Our Guidelines - Does your impairment affect your social, work or study life?

Applicants under the age of 7

Applicants that meet Section 24(1)(e)	Meet the disability requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet Section 24(1)(e)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

Applicants aged 7 and over

Applicants that meet Section 24(1)(e)	Meet the disability requirements.

	Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet Section 24(1)(e)	Go to Section 6.4 - 0-25 Hearing Impairments

8. Access - Early Intervention Requirements

For children under the age of 7 they are first assessed against the early intervention criteria. If they do not meet, then assess them against the disability requirements.

For applicants aged 7 or above, only assess their eligibility for early intervention supports if they have not met the disability requirements.

Before you commence the assessment, you must ensure the applicant meets both the age requirements and residency requirements.

8.1 Developmental Delay

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(a) the person:

(iii) is a child with who has developmental delay

Section 9 Definitions

Developmental delay means a delay in the development of a child under 6 years of age that:

(a) is attributable to a mental or physical impairment or a combination of mental and physical impairments; and

(b) results in substantial reduction in functional capacity in one or more of the following areas of major life activity:

(i) self-care;

(ii) receptive and expressive language;

(iii) cognitive development;

(iv) motor development; and

(c) results in the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services that are of extended duration and are individually planned and coordinated.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the child is younger than 6 on the day we determine they have developmental delay.

For further information, refer to Our Guidelines - What about children younger than 6 with developmental delay?

Applicants that meet the Developmental Delay criteria	Meet the early intervention requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet the Developmental Delay criteria and do not have a hearing impairment	Go to Section 6.2 - List B
Applicants that do not meet the Developmental Delay criteria and have a hearing impairment	Go to Section 6.4 - 0-25 Hearing Impairments

8.2 Does the applicant meet Section 25(1)(a)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(a) the person:

(i) has one or more identified intellectual, cognitive, neurological, sensory or physical impairments that are, or are likely to be, permanent; or

(ii) has one or more identified impairments to which a psychosocial disability is attributable and that are, or are likely to be, permanent

…

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the applicant has an impairment (a loss or significant change in their body's functions or structure, or how they think and learn); and
- the impairment is intellectual, cognitive, neurological, sensory, or physical in nature; and

- the impairment is, or is likely to be, permanent.

Note: When an applicant is diagnosed with a condition on List B or List D, they meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant has completed all available and appropriate treatment options, and that there are no recommended treatment options likely to remedy the impairment?
- Does the evidence contain recommendations for treatments which have not been demonstrated to have been explored?
- Does the evidence indicate that the applicant requires further treatment, and that this treatment has some prospect of success?
- Does the evidence demonstrate that the applicant requires ongoing treatment, but that it is for maintenance purposes only?
- Does the evidence demonstrate that the impairment is degenerative in nature, and that treatment will not improve the impairment?

In answering the above questions, does the evidence contain sufficient information addressing:

- What treatments have been undertaken and what were the outcomes?
- If there are evidence-based treatments not undertaken, why were they considered and deemed not suitable?
- What further/ongoing treatments have been recommended and what are the expected outcomes of these treatments?

For further information, refer to Our Guidelines - Do you need early intervention?

Applicants aged under 7

Applicants that meet Section 25(1)(a)	Go to Section 8.3 - Does the applicant meet Section 25(1)(b)?
Applicants that do not meet Section 25(1)(a)	Are not eligible for early intervention. You will now assess them against the disability requirements.

	Go to Section 7.1 - Does the applicant meet Section 24(1)(a)?

Applicants aged 7 and over

Applicants that meet Section 25(1)(a)	Go to Section 8.3 - Does the applicant meet Section 25(1)(b)?
Applicants that do not meet Section 25(1)(a)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

8.3 Does the applicant meet Section 25(1)(b)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(b) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by reducing the person's future needs for supports in relation to disability

…

When is this criterion considered met?

This criterion is considered met if evidence on the record shows that early intervention supports for the applicant's permanent impairment/s will reduce their need for disability-related supports in the future.

Note: If an applicant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Does the evidence contain specific recommendations for early intervention, and indicate that this intervention will mean the applicant needs less disability supports in the future?
- Does the evidence note which specific supports the applicant will no longer require should early intervention be undertaken?

- Does the evidence indicate that early intervention is likely to result in greater independence for the applicant?
- If the applicant has accessed intervention before, is the outcome noted? Did previous intervention reduce their need for disability related supports?
- Is the recommended support of a functional nature, or capacity building in nature?
- In answering the above questions, does the evidence contain sufficient information addressing:
- How the applicant's impairment is likely to impact them over time?
- What supports the applicant will require if they don't receive intervention?
- What supports the applicant currently requires, and what supports (if any) the applicant is likely to require after intervention?

For further information, refer to Our Guidelines - How will early intervention help you?

For applicants aged under 7

Applicants that meet Section 25(1)(b)	Go to Section 8.4 - Does the applicant meet Section 25(1)(c)?
Applicants that do not meet Section 25(1)(b)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 7.1 - Does the applicant meet Section 24(1)(a)?

For applicants aged 7 and over

Applicants that meet Section 25 (1)(b)	Go to Section 8.4 - Does the applicant meet Section 25(1)(c)?
Applicants that do not meet Section 24(1)(c)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

8.4 Does the applicant meet Section 25(1)(c)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(c) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by:

(i) mitigating or alleviating the impact of the person's impairment upon the functional capacity of the person to undertake communication, social interaction, learning, mobility, self-care or self-management; or

(ii) preventing the deterioration of such functional capacity; or

(iii) improving such functional capacity; or

(iv) strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer.

…

When is this criterion considered met?

- This criterion is considered met if evidence on the record shows early intervention supports will help the applicant by:
- addressing the impact of their impairment on their ability to move around, communicate, socialise, learning, look after themselves, or organise their life
- preventing their functional capacity from getting worse
- improving their functional capacity
- supporting their informal supports to build their skills to help the applicant.

Note: If an applicant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will mitigate or alleviate the impact of the applicant's permanent impairment on their functional capacity?
- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will prevent the applicant's functional capacity from declining?
- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will improve the applicant's functional capacity?

- Does the evidence indicate that intervention is likely to strengthen the sustainability of informal supports available to the person, and result in a decreased need for formal disability related supports?

In answering the above questions, does the evidence contain sufficient information addressing:

- How the applicant's impairment is likely to impact them over time?
- What supports the applicant will require if they don't receive intervention?
- What supports the applicant currently requires, and what supports (if any) the applicant is likely to require after intervention?

For further information, refer to Our Guidelines - How will early intervention help you?

For applicants aged under 7

Applicants that meet Section 25(1)(c)	Go to Section 8.5 - Does the applicant meet Section 25(3)?
Applicants that do not meet Section 25(1)(c)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 7.1 - Does the applicant meet Section 24(1)(a)?

For applicants aged 7 and over

Applicants that meet Section 25(1)(c)	Go to Section 8.5 - Does the applicant meet Section 25(3)?
Applicants that do not meet Section 25(1)(c)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

8.5 Does the applicant meet Section 25(3)?

Legislation

Section 25 Early intervention requirements

(3) … the person does not meet the early intervention requirements if the CEO is satisfied that early intervention support for the person is not most appropriately funded or provided through the National Disability Insurance Scheme, and is more appropriately funded or provided through other general systems of service delivery or support services offered by a person, agency or body, or through systems of service delivery or support services offered:

(a) as part of a universal service obligation; or

(b) in accordance with reasonable adjustments required under a law dealing with discrimination on the basis of disability.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows early intervention supports are most appropriately funded by the NDIS.

Note: If an applicant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

Whether or not funding is available through other general systems is not the test of whether it is most appropriately funded or provided through the NDIS. For example, the fact that the health system does not adequately fund what is essentially clinical treatment (or some other form of support that is more appropriately funded through the health system) does not make it the responsibility of the NDIS.

For further information, refer to Our Guidelines - Is your early intervention most appropriately funded by the NDIS?

For applicants aged under 7

Applicants that meet Section 25(3)	Meet the early intervention requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet Section 25(3)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 7.1 - Does the applicant meet Section 24(1)(a)?

For applicants aged 7 and over

Applicants that meet Section 25(3)	Meet the early intervention requirements. Please follow the process in knowledge article Make an Access Decision.
Applicants that do not meet Section 25(3)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge article Make an Access Decision.

9. Related procedures or resources

- National Disability Insurance Scheme Act 2013
- National Disability Insurance Scheme (Becoming a Participant) Rules 2016
- Our Guidelines - Applying to the NDIS
- KA – Make an access decision
- KA – Complete an Eligibility Check
- KA – Finalise an Eligibility Reassessment decision
- Access and ER Decision Tree

10. Feedback

If you would like to provide feedback about this guidance material, please discuss with your team leader who can send a request to s47E(d) - certain operations of agencies@ndis.gov.au.

11. Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CH0026	New resource	APPROVED	2022-10-31
2.0	GMQ132	Updated hyperlink	APPROVED	2023-02-16
3.0	CH0026	Class 2 Approval	APPROVED	2024-09-04
4.0	CH0026	Class 2 Approval	APPROVED	2024-11-28

Access and Eligibility Reassessment (ER) Practice Guide – Current NDIS Act 2013

The content of this document is OFFICIAL.

This guide assists the Scheme Eligibility Branch to assess new applicants' eligibility and determine if existing participants remain eligible for the National Disability Insurance Scheme (NDIS).

This guide is designed to be used with the Access and Eligibility Reassessment (ER) Decision Tree to make legislatively correct decisions for all eligibility reassessments and any initial access requests received on or after **3 October 2024**. If you are making an access decision for a request received before **3 October 2024**, refer to Access Practice Guide Previous NDIS Act 2013 (C19).

1. Recent updates

Date	What's changed

July 2025	• Guidance on 24(1)e and 25(1)d has been rewritten to focus on 'NDIS Supports' as per the current legislation.
	• Minor formatting and grammatical changes
	• Enhanced the Access and Eligibility Reassessment (ER) pathways to clear up any errors and ensure that all Streamlined Decisions are factored in,
	• Changed the ER Questions to align with the July system update in PACE. This means:
	  ○ Early Intervention is assessed after the Streamlined Decision questions for all participants, not just those under 7
	  ○ A participant can now meet access for both Early Intervention and Disability simultaneously.

2. Checklist

Topic	Checklist
Pre-requisites	1. You have read: ❑ Section 21, 22, 23, 24 and 25 of the current NDIS Act 2013 ❑ NDIS Becoming a Participant Rules 2016 ❑ Our Guidelines - NDIS 2. You need to determine which legislation applies and ensured you are reading the correct Practice Guidance resource. **Note:** All eligibility reassessments are assessed under the current National Disability Insurance Act 2013. If you are assessing: • based on the previous NDIS Act 2013 (C19) – go to Access Practice Guide Previous NDIS Act 2013 (C19) • based on current NDIS Act 2013 – continue to Section 3. Are you making an Access or ER decision? 3. You are working through: ❑ Access and ER Decision Tree
Actions	❑ 3. Are you making an Access or ER decision ❑ 4. Access – Age Requirements ❑ 5. Access – Residence Requirements ❑ 6. Access – Streamlined Decisions ❑ 7. Access – Early Intervention Requirements ❑ 8. Access – Disability Requirements ❑ 9. ER – Residence Requirements ❑ 10. ER – Streamlined Decisions ❑ 11. ER – Early Intervention Requirements ❑ 12. ER – Disability Requirements ❑ 13. Related procedures or resources ❑ 14. Feedback ❑ 15. Version control

3. Are you making an Access or ER decision?

For Access decisions, go to Section 4. Access – Age Requirements

For ER decisions, go to Section 9. ER – Residence Requirements

4. Access – Age Requirements

4.1 Does the applicant meet the age requirements?

Legislation

Section 22 Age requirements

A person meets the age requirements if the person was aged under 65 when the access request in relation to the person was made.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the applicant was aged under 65 when their access request was received as valid (that is, complete)

Applicants that meet the age requirements	Go to Section 5.1 Does the applicant meet the residence requirements?
Applicants that do not meet the age requirements	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

5. Access – Residence Requirements

5.1 Does the applicant meet the residence requirements?

Legislation

Section 23 Residence requirements

(1) A person meets the residence requirements if the person:
- (a) resides in Australia; and
- (b) is one of the following:
  - (i) an Australian citizen;
  - (ii) the holder of a permanent visa;
  - (iii) a special category visa holder who is a protected Special Category Visa (SCV) holder.

(2) In deciding whether or not a person resides in Australia, regard must be had to:

(a) the nature of the accommodation used by the person in Australia; and
(b) the nature and extent of the family relationships the person has in Australia; and
(c) the nature and extent of the person's employment, business or financial ties with Australia; and
(d) the nature and extent of the person's assets located in Australia; and
(e) the frequency and duration of the person's travel outside Australia; and
(f) any other matter relevant to determining whether the person intends to remain permanently in Australia.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the applicant:

- lives in Australia for most of the year; and
- is an Australian Citizen; or
- is the holder of a permanent visa; or
- is the holder of a protected Special Category Visa (SCV)

Applicants that meet the residence requirements	Go to Section 6.1 - List A
Applicants that do not meet the residence requirements	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

6.Access – Streamlined Decisions

6.1 List A

List A conditions that are likely to meet the disability requirements.

Note: A person does not need to have a condition on List A to become a participant of the NDIS.

For further information, refer to Our Guidelines - Do you meet the disability requirements?

Applicants that have a condition on List A	Are likely to meet the disability requirements. Go to Section 6.2 0-25 Hearing Impairments to assess if the applicant also meets early intervention.

Applicants that do not have a condition on List A	Go to Section 6.2 0-25 Hearing Impairments

6.2 0-25 Hearing Impairments

An applicant meets the early intervention requirements without further assessment if they:

- are aged between birth and 25 years of age; and
- have confirmed results from a specialist audiological assessment (including electrophysiological testing when required) consistent with auditory neuropathy or hearing loss ≥ 25 decibels in either ear at 2 or more adjacent frequencies, which is likely to be permanent.

What to consider

This streamlined access approach for early intervention acknowledges a rich body of evidence that recognises that early intervention supports up to and including the age of 25 is critical for people with hearing impairment as the developing brain requires consistent and quality sound input and other support over that period to develop normally and ameliorate the risk of lifelong disability.

This same body of evidence suggests that brain development and language capability have been achieved by the age of 26. Therefore, adults aged 26 years and over are not immediately accepted to be likely to benefit from the same early intervention approach because there is no requirement to support the development of the auditory pathways. Adults aged 26 years and over with hearing impairment will therefore be assessed normally, on a case-by-case basis, having regard to the availability of all relevant evidence.

For further information, refer to Our Guidelines - What about people aged between 0 and 25 with a hearing impairment?

Applicants that have a List A condition who are under 7

Applicants that meet the hearing impairment criteria	Meets the disability (List A) and early intervention requirements Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that don't meet the hearing impairment criteria	Go to 6.3 List D

Applicants that have a List A condition who are over 7

Applicants that meet the hearing impairment criteria	Meets the disability (List A) and early intervention requirements Go to the knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that don't meet the hearing impairment criteria	Go to Section 6.5 List B

Applicants that DON'T have a List A condition who are over 7

Applicants that meet the hearing impairment criteria	Meets the early intervention requirements Go to Section 6.5 List B
Applicants that don't meet the hearing impairment criteria	Go to Section 6.5 List B

Applicants that DON'T have a List A condition who are under 7

Applicants that meet the hearing impairment criteria	Meets the early intervention requirements Go to Section 6.5 List B
Applicants that don't meet the hearing impairment criteria	Go to Section 6.3 List D

6.3 List D

Where a child under the age of 7 has been diagnosed with a condition on List D, they will meet the early intervention requirements without further assessment.

Note: A child does not need to have a List D condition to become a participant of the NDIS.

For further information, refer to Our Guidelines - Do you need early intervention?

Applicants that have a List A condition who are under 7

Applicants that have a condition on List D	Meets the disability (List A) and early intervention requirements

	Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that don't have a condition on List D	Go to Section 6.4 Developmental Delay

Applicants under the age of 7 who DON'T have a List A condition who are under 7

Applicants that have a condition on List D	Meet the early intervention requirements. Go to Section 8. Access Disability Requirements
Applicants that do not have a condition on List D	Go to Section 6.4 Developmental Delay

6.4 Developmental Delay

Legislation

Section 25 Early intervention requirements

(1) A person ***meets the early intervention requirements*** if:

(a) the person is a child who has developmental delay; and

(b) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by reducing the person's future needs for supports in relation to disability; and

(c) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by:

(i) mitigating or alleviating the impact of the person's impairment upon the functional capacity of the person to undertake communication, social interaction, learning, mobility, selfcare or self-management; or

(ii) preventing the deterioration of such functional capacity; or

(iii) improving such functional capacity; or

(iv) strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer; and

(d) the CEO is satisfied any early intervention supports that would be likely to benefit the person as mentioned in paragraphs (b) and (c) would be NDIS supports for the person.

Section 9 Definitions

Developmental delay means a delay in the development of a child **under 6 years of age** that:

(a) is attributable to a mental or physical impairment or a combination of mental and physical impairments; and

(b) results in substantial reduction in functional capacity in one or more of the following areas of major life activity:

(i) self-care;

(ii) receptive and expressive language;

(iii) cognitive development;

(iv) motor development; and

(c) results in the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services that are of extended duration and are individually planned and coordinated.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the child is **younger than 6** on the day we determine they have developmental delay.

For further information, refer to Our Guidelines - What about children younger than 6 with developmental delay?

Applicants that have a List A condition who are under 7

Applicants that meet the Developmental Delay criteria	Meets the disability (List A) and early intervention requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that don't meet the Developmental Delay criteria	Go to Section 6.5 – List B

Applicants that DON'T have a condition on List A who are under 7

Applicants that meet the Developmental Delay criteria	Meet the early intervention requirements. Go to Section 6.5 - List B
Applicants that do not meet the Developmental Delay criteria	Go to Section 6.5 - List B

6.5 List B

Where an applicant has been diagnosed with a condition on List B, they will be considered to have a disability attributable to one or more conditions that are likely to result in a permanent impairment.

For applicants diagnosed with a condition on List B, you will only need to assess whether the applicant:

- has substantially reduced functional capacity to perform one or more activities;
- is affected in their capacity for social or economic participation; and
- is likely to require support under the NDIS for their lifetime.

Note: A person does not need to have a condition on List B to become a participant in the NDIS.

For further information, refer to Our Guidelines - Is your impairment likely to be permanent?

For applicants who meet any of the following and DON'T have a condition on List A:

- **0-25 Hearing Loss**
- **List D**
- **Developmental Delay criteria**

Applicants that have a condition on List B	Go to Section 8.3 Does the applicant meet 24(1)c?
Applicants that do not have a condition on List B	Go to Section 8 Disability Access – Disability Requirements

For applicants who DON'T meet the criteria for any of the following:

- **0-25 Hearing Loss**
- **List D**
- **Developmental Delay**

Applicants that have a condition on List B	Go to Section 7.2 Does the applicant meet 25(1)b
Applicants that do not have a condition on List B	Go to Section 7 Early Intervention requirements

7 Access - Early Intervention Requirements

For children under the age of 7 they are first assessed against the early intervention criteria. If they do not meet, then assess them against the disability requirements.

Before you commence the assessment, you must ensure the applicant meets both the age requirements and residency requirements.

7.1 Does the applicant meet Section 25(1)(a)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(a) the person:

(i) has one or more identified intellectual, cognitive, neurological, sensory or physical impairments that are, or are likely to be, permanent; or

(ii) has one or more identified impairments to which a psychosocial disability is attributable and that are, or are likely to be, permanent

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the applicant has an impairment (a loss or significant change in their body's functions or structure, or how they think and learn); and
- the impairment is intellectual, cognitive, neurological, sensory, physical or psychosocial in nature; and
- the impairment is, or is likely to be, permanent.

Note: When an applicant is diagnosed with a condition on List B or List D, they meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant has completed all available and appropriate treatment options, and that there are no recommended treatment options likely to remedy the impairment?
- Does the evidence contain recommendations for treatments which have not been demonstrated to have been explored?

- Does the evidence indicate that the applicant requires further treatment, and that this treatment has some prospect of success?
- Does the evidence demonstrate that the applicant requires ongoing treatment, but that it is for maintenance purposes only?
- Does the evidence demonstrate that the impairment is degenerative in nature, and that treatment will not improve the impairment?

In answering the above questions, does the evidence contain sufficient information addressing:

- What treatments have been undertaken and what were the outcomes?
- If there are evidence-based treatments not undertaken, why were they considered and deemed not suitable?
- What further/ongoing treatments have been recommended and what are the expected outcomes of these treatments?

For further information, refer to Our Guidelines - Do you need early intervention?

Applicants that meet Section 25(1)(a)	Go to Section 7.2 - Does the applicant meet Section 25(1)(b)?
Applicants that do not meet Section 25(1)(a)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 8.1 - Does the applicant meet Section 24(1)(a)? **Note**: If the applicant has a List A condition, they are eligible under the disability requirements and you can proceed to knowledge articles Prepare to make an access decision and Submit an access decision

7.2 Does the applicant meet Section 25(1)(b)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(b) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by reducing the person's future needs for supports in relation to disability

When is this criterion considered met?

This criterion is considered met if evidence on the record shows that early intervention supports for the applicant's permanent impairment/s will reduce their need for disability-related supports in the future.

Note: If an applicant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Does the evidence contain specific recommendations for early intervention, and indicate that this intervention will mean the applicant needs less disability supports in the future?
- Does the evidence note which specific supports the applicant will no longer require should early intervention be undertaken?
- Does the evidence indicate that early intervention is likely to result in greater independence for the applicant?
- If the applicant has accessed intervention before, is the outcome noted? Did previous intervention reduce their need for disability related supports?
- Is the recommended support of a functional nature, or capacity building in nature?
- In answering the above questions, does the evidence contain sufficient information addressing:
- How the applicant's impairment is likely to impact them over time?
- What supports the applicant will require if they don't receive intervention?
- What supports the applicant currently requires, and what supports (if any) the applicant is likely to require after intervention?

For further information, refer to Our Guidelines - How will early intervention help you?

Applicants that meet Section 25(1)(b)	Go to Section 7.3 - Does the applicant meet Section 25(1)(c)?

Applicants that do not meet Section 25(1)(b)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 8.1 - Does the applicant meet Section 24(1)(a)? **Note**: If the applicant has a List A condition, they are eligible under the disability requirements and you can proceed to knowledge articles Prepare to make an access decision and Submit an access decision

7.3 Does the applicant meet Section 25(1)(c)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(c) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by:

(i) mitigating or alleviating the impact of the person's impairment upon the functional capacity of the person to undertake communication, social interaction, learning, mobility, self-care or self-management; or

(ii) preventing the deterioration of such functional capacity; or

(iii) improving such functional capacity; or

(iv) strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer.

When is this criterion considered met?

- This criterion is considered met if evidence on the record shows early intervention supports will help the applicant by:
- addressing the impact of their impairment on their ability to move around, communicate, socialise, learning, look after themselves, or organise their life
- preventing their functional capacity from getting worse
- improving their functional capacity
- supporting their informal supports to build their skills to help the applicant.

Note: If an applicant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will mitigate or alleviate the impact of the applicant's permanent impairment on their functional capacity?
- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will prevent the applicant's functional capacity from declining?
- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will improve the applicant's functional capacity?
- Does the evidence indicate that intervention is likely to strengthen the sustainability of informal supports available to the person, and result in a decreased need for formal disability related supports?
- In answering the above questions, does the evidence contain sufficient information addressing:
- How the applicant's impairment is likely to impact them over time?
- What supports the applicant will require if they don't receive intervention?
- What supports the applicant currently requires, and what supports (if any) the applicant is likely to require after intervention?

For further information, refer to Our Guidelines - How will early intervention help you?

Applicants that meet Section 25(1)(c)	Go to Section 7.4 - Does the applicant meet Section 25 (1)(d)?
Applicants that do not meet Section 25(1)(c)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 8.1 - Does the applicant meet Section 24(1)(a)? **Note**: If the applicant has a List A condition, they are eligible under the disability requirements and you can

	proceed to knowledge articles Prepare to make an access decision and Submit an access decision

7.4 Does the applicant meet section 25(1)(d)?

Legislation

Section 25 Early intervention requirements

(d) … any early intervention supports that would be likely to benefit the person as mentioned in paragraphs (b) and (c) would be NDIS supports for the person.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows that early intervention supports required are NDIS supports.

Note: If an applicant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Can any of the supports which have been recommended be considered 'NDIS Supports'? For the list of NDIS Supports see Supports that are NDIS Supports.

If **none** of the recommended supports are on the NDIS Supports list, or they are **all** supports the NDIS will not fund, then the applicant will not meet this criterion. For the list of supports the NDIS will not fund see Supports that are not NDIS Supports. Remember that you only need to have at least **one** support on the Supports that are NDIS Supports list to meet this criterion.

For further information, refer to What does the NDIS fund?

For applicants who do not have a List A impairment

Applicants that meet Section 25(1)(d)	Meet the early intervention requirements. Make note of this, as you will now assess them against the disability requirements. Go to Section 8.1 - Does the applicant meet Section 24(1)(a)?
Applicants that do not meet Section 25(1)(d)	Are not eligible for early intervention. You will now assess them against the disability requirements.

	Go to Section 8.1 - Does the applicant meet Section 24(1)(a)?

For applicants who have a List A impairment

Applicants that meet Section 25(1)(d)	Meet the disability and early intervention requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that do not meet Section 25(1)(d)	Are not eligible for early intervention, **however** do satisfy the disability requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

8 Access – Disability Requirements

8.1 Does the applicant meet Section 24(1)(a)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(a) the person has a disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments or the person has one or more impairments to which a psychosocial disability is attributable.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the applicant has a disability (a reduction or loss in their ability to do things); and
- their disability is caused by an impairment (a loss or significant change in their body's functions or structure, or how they think and learn); and
- the impairment is intellectual, cognitive, neurological, sensory or physical in nature, or
- they have a psychosocial disability (a reduced capacity to do daily life activities and tasks due to their mental health).

Note: Where an applicant has been diagnosed with a List A or List B condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate both that the applicant has an impairment, and that the impairment is resulting in a disability?
- Does the evidence demonstrate that the applicant is reduced in their ability to do things, however this reduction cannot be reasonably attributed to an impairment?
- Does the evidence demonstrate that the applicant has a loss or significant change in one of their body's functions or structure. however, there is no indication that this is causing a reduction or loss in their ability to do things?

Note: A diagnosis is not required to meet this criterion: if the evidence shows the person has a disability caused by a relevant impairment, then they will meet 24(1)(a) – this is because we assess based on the impairment/functional impact.

For further information, refer to Our Guidelines - Is your disability caused by an impairment?

If the person does NOT meet the Early Intervention criteria

Applicants that meet Section 24(1)(a)	Go to Section 8.2 - Does the applicant meet Section 24(1)(b)?
Applicants that do not meet Section 24(1)(a)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision.

If the person does meet the Early Intervention criteria

Applicants that meet Section 24(1)(a)	Go to Section 8.2 - Does the applicant meet Section 24(1)(b)?
Applicants that do not meet Section 24(1)(a)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

8.2 Does the applicant meet Section 24(1)(b)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(b) The impairment or impairments are, or are likely to be, permanent

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the applicant has a:

- permanent impairment; or
- likely permanent impairment.

Note: Where an applicant has been diagnosed with a List A or List B condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant has completed all available and appropriate treatment options, and that there are no recommended treatment options likely to remedy the impairment?
- Does the evidence contain recommendations for treatments which have not been demonstrated to have been explored?
- Does the evidence indicate that the applicant requires further treatment, and that this treatment has some prospect of success?
- Does the evidence demonstrate that the applicant requires ongoing treatment, but that it is for maintenance purposes only?
- Does the evidence demonstrate that the impairment is degenerative in nature, and that treatment will not improve the impairment?

In answering the above questions, does the evidence contain sufficient information addressing:

- What treatments have been undertaken and what were the outcomes?
- If there are evidence-based treatments not undertaken, why were they considered and deemed unsuitable?

- What further/ongoing treatments have been recommended and what are the expected outcomes of these treatments?

For further information, refer to Is your impairment likely to be permanent? | NDIS

If the person does NOT meet the Early Intervention criteria

Applicants that meet Section 24(1)(b)	Go to Section 8.3 - Does the applicant meet Section 24(1)(c)?
Applicants that do not meet Section 24(1)(b)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

If the person does meet the Early Intervention criteria

Applicants that meet Section 24(1)(	Go to Section 8.3 - Does the applicant meet Section 24(1)(c)?
Applicants that do not meet Section 24(1)(b)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

8.3 Does the applicant meet Section 24(1)(c)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(c) The impairment or impairments result in substantially reduced functional capacity to undertake one or more of the following activities: The impairment or impairments result in substantially reduced functional capacity to undertake one or more of the following activities:

(i) communication;

(ii) social interaction;

(iii) learning

(iv) mobility

(v) self-care

(vi) self-management

…

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the permanent impairment, or permanent impairments combined, results in substantially reduced functional capacity in one or more of the following activities:

- Communication: how they speak, write or use sign language and gestures.
- Social interaction: how they make and keep friends, interact with the community, and cope with feelings and emotions in social situations.
- Learning**:** how they learn, understand and remember new things, and practise and use new skills.
- Mobility: how they move around home and the community and how they get in and out of bed or a chair.
- Self-care: how they partake in personal care, hygiene, grooming, eating and drinking, and health.
- Self-management (if older than 6): how they organise their life, make decision, solve problems and manage money.

Note: When an applicant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant is unable to participate effectively or completely (i.e. across the whole or majority of tasks) in one or more activities, without formally prescribed equipment?
- Does the evidence demonstrate that the applicant is unable to participate effectively or completely in one or more activities, and usually requires the assistance of another person?

- Does the evidence demonstrate that the applicant would be unsafe to complete one or more tasks required to participate in an activity without formally prescribed equipment or assistance from another person?
- Does the evidence indicate that the applicant is able to participate in each activity effectively by using commonly used items?
- Does the evidence indicate that the applicant is able to participate in each activity effectively, albeit more slowly or in a different way?
- Would completing tasks more slowly or in a modified way, or using commonly used items, relieve the applicant's need for personal assistance?

In answering the above questions, does the evidence contain sufficient information addressing:

- What specific tasks the applicant cannot complete without support?
- Why the applicant requires support?
- How often the applicant requires support, and what that support looks like?

For further information, refer to Our Guidelines - Does your impairment substantially reduce your functional capacity?

If the person does NOT meet the Early Intervention criteria

Applicants that meet Section 24(1)(c)	Go to Section 8.4 - Does the applicant meet Section 24(1)(d)?
Applicants that do not meet Section 24(1)(c)	Are not eligible for disability support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

If the person does meet the Early Intervention criteria

Applicants that meet Section 24(1)(c)	Go to Section 8.4 - Does the applicant meet Section 24(1)(d)?
Applicants that do not meet Section 24(1)(c)	Are not eligible for disability, **however** do satisfy the early intervention requirements.

	Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

8.4 Does the applicant meet Section 24(1)(d)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(d) The impairment or impairments affect the person's capacity for social or economic participation.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the permanent impairment, or permanent impairments combined, affects the applicant's social or economic participation.

Note: Where an applicant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant's social participation (e.g. their capacity to play sport, go to the movies, see friends, etc.) is affected by their permanent impairment/s - in any way?
- Does the evidence demonstrate that the applicant's economic participation (e.g., their capacity to travel, to find or maintain voluntary or paid work, etc.) is affected by their permanent impairment - in any way?
- Does the evidence demonstrate that the applicant's social and economic participation is not impacted in any way, and that they can fully engage without any assistance?

Note: There is no threshold that the person's permanent impairment affects their social or economic participation. It just needs to be affected.

For further information, refer to Our Guidelines - Does your impairment affect your social, work or study life?

If the person does NOT meet the Early Intervention criteria

Applicants that meet Section 24(1)(d)	Go to Section 8.5 - Does the applicant meet Section 24(1)(e)?
Applicants that do not meet Section 24(1)(d)	Are not eligible for disability support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

If the person does meet the Early Intervention criteria

Applicants that meet Section 24(1)(d)	Go to Section 8.5 - Does the applicant meet Section 24(1)(e)?
Applicants that do not meet Section 24(1)(d)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

8.5 Does the applicant meet Section 24(1)(e)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(e) The person is likely to require NDIS supports under the National Disability Insurance Scheme for the person's lifetime.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the applicant:

- will likely require NDIS supports under the National Disability Insurance Scheme for their lifetime.

Note: Where an applicant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the applicant is likely to require NDIS Supports, for their lifetime?

- Does the evidence demonstrate that the applicant will likely be substantially reduced in their functional capacity (in a relevant activity) for their lifetime, despite any interventions?
- Are there any recommendations for interventions that are likely to improve the applicant's functional capacity, and reduce their future need for disability related supports?
- If the applicant is a child or young adult, does the evidence indicate that significant functional improvements can be expected - either as they develop, or through interventions?
- Does the applicant's need for support only relate to supports which the NDIS does not fund?

If **none** of the recommended supports are on the NDIS Supports list, or they are **all** supports the NDIS will not fund, then the applicant will not meet this criterion. For the list of supports the NDIS will not fund see Supports that are not NDIS Supports. Remember that you only need to have at least **one** support on the Supports that are NDIS Supports list to meet this criterion.

For further information, refer to What does NDIS fund and Our Guidelines - Does your impairment affect your social, work or study life?

If the person does NOT meet the Early Intervention criteria

Applicants that meet Section 24(1)(e)	Meet the disability requirements. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that do not meet Section 24(1)(e)	Are not eligible for disability support from the NDIS. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

If the person does meet the Early Intervention criteria

Applicants that meet Section 24(1)(e)	Eligible for both disability and early intervention. Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision
Applicants that do not meet Section 24(1)(e)	Are not eligible for disability, **however** do satisfy the early intervention requirements.

	Please follow the process in knowledge articles Prepare to make an access decision and Submit an access decision

9 ER – Residence Requirements

9.1 Does the participant continue to meet the residence requirements?

Legislation

Section 23 Residence requirements

(1) A person meets the residence requirements if the person:
- (a) resides in Australia; and
- (b) is one of the following:
  - (i) an Australian citizen;
  - (ii) the holder of a permanent visa;
  - (iii) a special category visa holder who is a protected SCV holder.

(2) In deciding whether or not a person resides in Australia, regard must be had to:
- (a) the nature of the accommodation used by the person in Australia; and
- (b) the nature and extent of the family relationships the person has in Australia; and
- (c) the nature and extent of the person's employment, business or financial ties with Australia; and
- (d) the nature and extent of the person's assets located in Australia; and
- (e) the frequency and duration of the person's travel outside Australia; and
- (f) any other matter relevant to determining whether the person intends to remain permanently in Australia.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the participant:

- lives in Australia for most of the year; and
- is an Australian Citizen; or
- is the holder of a permanent visa; or
- is the holder of a protected Special Category Visa (SCV)

Participants that continue to meet the residence requirements	Go to Section 10.1 - List A

Participants that no longer meet the residence requirements	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in: • knowledge article KA – Complete an Eligibility Check, or • knowledge article KA – Finalise an Eligibility Reassessment decision **Note**: You will still need to assess both early intervention and disability. This is to ensure the participant understands all the criteria they do not meet.

10 ER – Streamlined Decisions

10.1 List A

List A conditions that are likely to meet the disability requirements.

Note: A person does not need to have a condition on List A to become a participant of the NDIS.

For further information, refer to Our Guidelines - Do you meet the disability requirements?

Participants that have a condition on List A	Meets the disability requirements. You will also need to assess the early intervention criteria. Go to Section 10.2 – 0-25 Hearing Impairments
Participants that do not have a condition on List A	Go to Section 10.2 – 0-25 Hearing Impairments

10.2 0-25 Hearing Impairments

An applicant meets the early intervention requirements without further assessment if they:

- are aged between birth and 25 years of age; and

- have confirmed results from a specialist audiological assessment (including electrophysiological testing when required) consistent with auditory neuropathy or hearing loss ≥ 25 decibels in either ear at 2 or more adjacent frequencies, which is likely to be permanent.

What to consider

This streamlined access approach for early intervention acknowledges a rich body of evidence that recognises that early intervention supports up to and including the age of 25 is critical for people with hearing impairment as the developing brain requires consistent and quality sound input and other support over that period to develop normally and ameliorate the risk of lifelong disability.

This same body of evidence suggests that brain development and language capability have been achieved by the age of 26. Therefore, adults aged 26 years and over are not immediately accepted to be likely to benefit from the same early intervention approach because there is no requirement to support the development of the auditory pathways. Adults aged 26 years and over with hearing impairment will therefore be assessed normally, on a case-by-case basis, having regard to the availability of all relevant evidence.

For further information, refer to Our Guidelines - What about people aged between 0 and 25 with a hearing impairment?

Participants that have a List A condition who are under 7

Participants that meet the hearing impairment criteria	Meets the disability (List A) and early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check • knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that don't meet the hearing impairment criteria	Go to Section 10.3 List D

Participants that have a List A condition who are over 7

Participants that meet the hearing impairment criteria	Meets the disability (List A) and early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check • knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that don't meet the hearing impairment criteria	Go to Section 10.5 – List B

Participants that DON'T have a List A condition who are over 7

Participants that meet the hearing impairment criteria	Meets the early intervention requirements. To start assessing the disability requirements go to Section 10.5 – List B
Participants that don't meet the hearing impairment criteria	Go to Section 10.5 – List B

Participants that DON'T have a List A condition who are under 7

Participants that meet the hearing impairment criteria	Meets the early intervention requirements. To start assessing the disability requirements go to Section 10.5 – List B
Participants that don't meet the hearing impairment criteria	Go to Section 10.3 – List D

10.3 List D

Where a child under the age of 7 has been diagnosed with a condition on List D, they will meet the early intervention requirements without further assessment.

Note: A child does not need to have a List D condition to become a participant of the NDIS.

For further information, refer to Our Guidelines - Do you need early intervention?

Participants that have a List A condition who are under 7

Participants that have a condition on List D	Meets the disability (List A) and early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check • knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that don't have a condition on List D	Go to Section 10.4 Developmental Delay

Participants under the age of 7 who DON'T have a List A condition who are under 7

Participants that have a condition on List D	Meet the early intervention requirements. To start assessing the disability criteria go to Section 10.5 - List B
Participants that do not have a condition on List D	Go to Section 10.4 Developmental Delay

10.4 Developmental Delay

Legislation

Section 25 Early intervention requirements

(1) A person ***meets the early intervention requirements*** if:

(a) the person is a child who has developmental delay; and

(b) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by reducing the person's future needs for supports in relation to disability; and

(c) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by:

(i) mitigating or alleviating the impact of the person's impairment upon the functional capacity of the person to undertake communication, social interaction, learning, mobility, selfcare or self-management; or

(ii) preventing the deterioration of such functional capacity; or

(iii) improving such functional capacity; or

(iv) strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer; and

(d) the CEO is satisfied any early intervention supports that would be likely to benefit the person as mentioned in paragraphs (b) and (c) would be NDIS supports for the person.

Section 9 Definitions

Developmental delay means a delay in the development of a child under 6 years of age that:

(d) is attributable to a mental or physical impairment or a combination of mental and physical impairments; and

(e) results in substantial reduction in functional capacity in one or more of the following areas of major life activity:

(i) self-care;

(ii) receptive and expressive language;

(iii) cognitive development;

(iv) motor development; and

(f) results in the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services that are of extended duration and are individually planned and coordinated.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the child is younger than 6 on the day we determine they have developmental delay.

For further information, refer to Our Guidelines - What about children younger than 6 with developmental delay?

Participants that have a List A condition who are under 7

Participants that meet the Developmental Delay criteria	Meets the disability (List A) and early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check

	• knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that don't meet the Developmental Delay criteria	Go to Section 10.5 – List B

Participants that DON'T have a condition on List A who are under 7

Participants that meet the Developmental Delay criteria	Meet the early intervention requirements. To assess the disability criteria go to Section 10.5 – List B
Participants that do not meet the Developmental Delay criteria	Go to Section 10.5 – List B

10.5 List B

Where an applicant has been diagnosed with a condition on List B, they will be considered to have a disability attributable to one or more conditions that are likely to result in a permanent impairment.

For applicants diagnosed with a condition on List B, you will only need to assess whether the applicant:

- has substantially reduced functional capacity to perform one or more activities;
- is affected in their capacity for social or economic participation; and
- is likely to require support under the NDIS for their lifetime.

Note: A person does not need to have a condition on List B to become a participant in the NDIS.

For further information, refer to Our Guidelines - Is your impairment likely to be permanent?

For participants who MEET any of the following and DON'T have a condition on List A:

- **0-25 Hearing Loss**
- **List D**
- **Developmental Delay criteria**

Participants that have a condition on List B	Go to Section 12.3 – Does the participant meet Section 24(1)c?
Participants that do not have a condition on List B	Go to Section 12 – Disability Requirements

For participants who DON'T meet the criteria for any of the following:

- **0-25 Hearing Loss**
- **List D**
- **Developmental Delay**

Participants that have a condition on List B	Go to Section 11.2 - Does the participant meet Section 25(1)b?
Participants that do not have a condition on List B	Go to Section 11 Early Intervention Requirements

11 ER – Early Intervention Requirements

11.1 Does the participant meet Section 25(1)(a)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(a) the person:

(i) has one or more identified intellectual, cognitive, neurological, sensory or physical impairments that are, or are likely to be, permanent; or

(ii) has one or more identified impairments to which a psychosocial disability is attributable and that are, or are likely to be, permanent

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the participant has an impairment (a loss or significant change in their body's functions or structure, or how they think and learn); and
- the impairment is intellectual, cognitive, neurological, sensory, or physical in nature; and

- the impairment is, or is likely to be, permanent.

Note: Where a participant is diagnosed with a condition on List B or List D, they meet this criterion without further assessment.

- **What to consider**
- Does the evidence demonstrate that the participant has completed all available and appropriate treatment options, and that there are no recommended treatment options likely to remedy the impairment?
- Does the evidence contain recommendations for treatments which have not been demonstrated to have been explored?
- Does the evidence indicate that the participant requires further treatment, and that this treatment has some prospect of success?
- Does the evidence demonstrate that the participant requires ongoing treatment, but that it is for maintenance purposes only?
- Does the evidence demonstrate that the impairment is degenerative in nature, and that treatment will not improve the impairment?

In answering the above questions, does the evidence contain sufficient information addressing:

- What treatments have been undertaken and what were the outcomes?
- If there are evidence-based treatments not undertaken, why were they considered and deemed not suitable?
- What further/ongoing treatments have been recommended and what are the expected outcomes of these treatments?

For further information, refer to Our Guidelines - Do you need early intervention?

Participants that meet Section 25(1)(a)	Go to Section 11.2 – Does the participant meet Section 25(1)b?
Participants that do not meet Section 25(1)(a)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 12 – Disability Requirements

	Note: If the participant has a List A condition, they are eligible under the disability requirements and you can proceed to: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

11.2 Does the participant meet Section 25(1)(b)?

Legislation

Section 25 Early intervention requirements

(2) A person meets the early intervention requirements if:

(b) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by reducing the person's future needs for supports in relation to disability

When is this criterion considered met?

This criterion is considered met if evidence on the record shows that early intervention supports for the participant's permanent impairment/s will reduce their need for disability-related supports in the future.

Note: Where a participant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Does the evidence contain specific recommendations for early intervention, and indicate that this intervention will mean the participant needs less disability supports in the future?
- Does the evidence note which specific supports the participant will no longer require should early intervention be undertaken?
- Does the evidence indicate that early intervention is likely to result in greater independence for the participant?
- If the participant has accessed intervention before, is the outcome noted? Did previous intervention reduce their need for disability related supports?
- Is the recommended support of a functional nature, or capacity building in nature?

In answering the above questions, does the evidence contain sufficient information addressing:

- How the participant's impairment is likely to impact them over time?
- What supports the participant will require if they don't receive intervention?
- What supports the participant currently requires, and what supports (if any) the participant is likely to require after intervention?

For further information, refer to Our Guidelines - How will early intervention help you?

Participants that meet Section 25(1)(b)	Go to Section 11.3 – Does the participant meet Section 25(1)c?
Participants that do not meet Section 25(1)(b)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 12 – Disability Requirements **Note**: If the participant has a List A condition, they are eligible under the disability requirements and you can proceed to: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

11.3 Does the participant meet Section 25(1)(c)?

Legislation

Section 25 Early intervention requirements

(1) A person meets the early intervention requirements if:

(c) the CEO is satisfied that provision of early intervention supports for the person is likely to benefit the person by:

(i) mitigating or alleviating the impact of the person's impairment upon the functional capacity of the person to undertake communication, social interaction, learning, mobility, self-care or self-management; or

(ii) preventing the deterioration of such functional capacity; or

(iii) improving such functional capacity; or

(iv) strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer.

When is this criterion considered met?

- This criterion is considered met if evidence on the record shows early intervention supports will help the participant by:
- addressing the impact of their impairment on their ability to move around, communicate, socialise, learning, look after themselves, or organise their life
- preventing their functional capacity from getting worse
- improving their functional capacity
- supporting their informal supports to build their skills to help the participant.

Note: Where a participant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will mitigate or alleviate the impact of the participant's permanent impairment on their functional capacity?
- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will prevent the participant's functional capacity from declining?
- Does the evidence contain specific recommendations for early intervention, and detail how this intervention will improve the participant's functional capacity?
- Does the evidence indicate that intervention is likely to strengthen the sustainability of informal supports available to the person, and result in a decreased need for formal disability related supports?
- In answering the above questions, does the evidence contain sufficient information addressing:
- How the participant's impairment is likely to impact them over time?

- What supports the participant will require if they don't receive intervention?
- What supports the participant currently requires, and what supports (if any) the participant is likely to require after intervention?

For further information, refer to Our Guidelines - How will early intervention help you?

Participants that meet Section 25(1)(c)	Go to Section 11.4 – Does the participant meet Section 25(1)d?
Participants that do not meet Section 25(1)(c)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 12 – Disability Requirements **Note**: If the participant has a List A condition, they are eligible under the disability requirements and you can proceed to: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

11.4 Does the participant meet Section 25(1)(d)?

Legislation

Section 25 Early intervention requirements

(d) … any early intervention supports that would be likely to benefit the person as mentioned in paragraphs (b) and (c) would be NDIS supports for the person.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows early intervention supports required are NDIS supports.

Note: Where a participant has been diagnosed with a condition on List D, they meet this criterion without further assessment.

What to consider

- Can at least some of the supports which have been recommended be considered 'NDIS Supports'? For the list of NDIS Supports see Supports that are NDIS Supports.

If **none** of the recommended supports are on the NDIS Supports list, or they are **all** supports the NDIS will not fund, then the participant will not meet this criterion. For the list of supports the NDIS will not fund see Supports that are not NDIS Supports. Remember that you only need to have at least **one** support on the Supports that are NDIS Supports list to meet this criterion.

For further information, refer to What does the NDIS fund?

For participants who do not have a List A impairment

Participants that meet Section 25(1)(d)	Meet the early intervention requirements. Make note of this, as you will now assess them against the disability requirements. Go to Section 12 – Disability Requirements
Participants that do not meet Section 25(1)(d)	Are not eligible for early intervention. You will now assess them against the disability requirements. Go to Section 12 – Disability Requirements

For participants who have a List A impairment

Participants that meet Section 25(1)(d)	Meets the disability (List A) and early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that do not meet Section 25(1)(d)	Are not eligible for early intervention, **however** do satisfy the disability requirements. Please follow the process in either:

	• knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

12 ER - Disability Requirements

12.1 Does the participant meet Section 24(1)(a)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(a) the person has a disability that is attributable to one or more intellectual, cognitive, neurological, sensory or physical impairments or the person has one or more impairments to which a psychosocial disability is attributable

When is this criterion considered met?

This criterion is considered met if evidence on the record shows:

- the participant has a disability (a reduction or loss in their ability to do things); and
- their disability is caused by an impairment (a loss or significant change in their body's functions or structure, or how they think and learn); and
- the impairment is intellectual, cognitive, neurological, sensory, or physical in nature, or
- they have a psychosocial disability (a reduced capacity to do daily life activities and tasks due to their mental health).

Note: Where a participant has been diagnosed with a List A or List B condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate both that the participant has an impairment, and that the impairment is resulting in a disability?
- Does the evidence demonstrate that the participant is reduced in their ability to do things, however this reduction cannot be reasonably attributed to an impairment?

- Does the evidence demonstrate that the participant has a loss or significant change in one of their body's functions or structure, however, there is no indication that this is causing a reduction or loss in their ability to do things?

  Note: A diagnosis is not required to meet this criterion: if the evidence shows the person has a disability caused by a relevant impairment, then they will meet 24(1)(a) – this is because we assess based on the impairment/functional impact.

For further information, refer to Our Guidelines - Is your disability caused by an impairment?

If the person does NOT meet the Early Intervention criteria

Participants that meet Section 24(1)(a)	Go to Section 12.2 – Does the participant meet Section 24(1)b?
Participants that do not meet Section 24(1)(a)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

If the person does meet the Early Intervention criteria

Participants that meet Section 24(1)(a)	Go to Section 12.2 – Does the participant meet Section 24(1)b?
Participants that do not meet Section 24(1)(a)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

12.2 Does the participant meet Section 24(1)(b)?

Legislation

Section 24 Disability requirements

(2) A person meets the disability requirements if:

(b) The impairment or impairments are, or are likely to be, permanent

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the participant has a:

- permanent impairment; or
- likely permanent impairment.

Note: Where a participant has been diagnosed with a List A or List B condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the participant has completed all available and appropriate treatment options, and that there are no recommended treatment options likely to remedy the impairment?
- Does the evidence contain recommendations for treatments which have not been demonstrated to have been explored?
- Does the evidence indicate that the participant requires further treatment, and that this treatment has some prospect of success?
- Does the evidence demonstrate that the participant requires ongoing treatment, but that it is for maintenance purposes only?
- Does the evidence demonstrate that the impairment is degenerative in nature, and that treatment will not improve the impairment?

In answering the above questions, does the evidence contain sufficient information addressing:

- What treatments have been undertaken and what were the outcomes?
- If there are evidence-based treatments not undertaken, why were they considered and deemed unsuitable?

- What further/ongoing treatments have been recommended and what are the expected outcomes of these treatments?

For further information, refer to Is your impairment likely to be permanent? | NDIS

If the person does NOT meet the Early Intervention criteria

Participants that meet Section 24(1)(b)	Go to Section 12.3 – Does the participant meet Section 24(1)c?
Participants that do not meet Section 24(1)(b)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

If the person does meet the Early Intervention criteria

Participants that meet Section 24(1)(b)	Go to Section 12.3 – Does the participant meet Section 24(1)c?
Participants that do not meet Section 24(1)(b)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

12.3 Does the participant meet Section 24(1)(c)?

Legislation

Section 24 Disability requirements

(2) A person meets the disability requirements if:

(c) The impairment or impairments result in substantially reduced functional capacity to undertake one or more of the following activities:

(i) communication;

(ii) social interaction;

(iii) learning

(iv) mobility

(v) self-care

(vi) self-management

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the permanent impairment, or permanent impairments combined, results in substantially reduced functional capacity in one or more of the following activities:

- Communication: how they speak, write or use sign language and gestures.
- Social interaction: how they make and keep friends, interact with the community, and cope with feelings and emotions in social situations.
- Learning**:** how they learn, understand and remember new things, and practise and use new skills.
- Mobility: how they move around home and the community and how they get in and out of bed or a chair.
- Self-care: how they partake in personal care, hygiene, grooming, eating and drinking, and health.
- Self-management (if older than 6): how they organise their life, make decision, solve problems and manage money.

Note: When a participant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the participant is unable to participate effectively or completely (i.e., across the whole or majority of tasks) in one or more activities, without formally prescribed equipment?

- Does the evidence demonstrate that the participant is unable to participant effectively or completely in one or more activities, and usually requires the assistance of another person?
- Does the evidence demonstrate that the participant would be unsafe to complete one or more tasks required to participate in an activity without formally prescribed equipment or assistance from another person?
- Does the evidence indicate that the participant is able to participate in each activity effectively by using commonly used items?
- Does the evidence indicate that the participant is able to participate in each activity effectively, albeit more slowly or in a different way?
- Would completing tasks more slowly or in a modified way, or using commonly used items, relieve the participant's need for personal assistance?

In answering the above questions, does the evidence contain sufficient information addressing:

- What specific tasks the participant cannot complete without support?
- Why the participant requires support?
- How often the participant requires support, and what that support looks like?

For further information, refer to Our Guidelines - Does your impairment substantially reduce your functional capacity?

If the person does NOT meet the Early Intervention criteria

Participants that meet Section 24(1)(c)	Go to Section 12.4 – Does the participant meet Section 24(1)d?
Participants that do not meet Section 24(1)(c)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

If the person does meet the Early Intervention criteria

Participants that meet Section 24(1)(c)	Go to Section 12.4 – Does the participant meet Section 24(1)d?
Participants that do not meet Section 24(1)(c)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

12.4 Does the participant meet Section 24(1)(d)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(d) The impairment or impairments affect the person's capacity for social or economic participation.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the permanent impairment, or permanent impairments combined, affects the participant's social or economic participation.

Note: Where a participant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the participant's social participation (e.g., their capacity to play sport, go to the movies, see friends, etc.) is affected by their permanent impairment/s - in any way?
- Does the evidence demonstrate that the participant's economic participation (e.g., their capacity to travel, to find or maintain voluntary or paid work, etc.) is affected by their permanent impairment - in any way?

- Does the evidence demonstrate that the participant's social and economic participation is not impacted in any way, and that they can fully engage without any assistance?

Note: There is no threshold that the person's permanent impairment affects their social or economic participation. It just needs to be affected.

For further information, refer to Our Guidelines - Does your impairment affect your social, work or study life?

If the person does NOT meet the Early Intervention criteria

Participants that meet Section 24(1)(d)	Go to Section 12.5 – Does the participant meet Section 24(1)e?
Participants that do not meet Section 24(1)(d)	Are not eligible for disability or early intervention support from the NDIS. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

If the person does meet the Early Intervention criteria

Participants that meet Section 24(1)(d)	Go to Section 12.5 – Does the participant meet Section 24(1)e?
Participants that do not meet Section 24(1)(d)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

12.5 Does the participant meet Section 24(1)(e)?

Legislation

Section 24 Disability requirements

(1) A person meets the disability requirements if:

(e) The person is likely to require NDIS supports under the National Disability Insurance Scheme for the person's lifetime.

When is this criterion considered met?

This criterion is considered met if evidence on the record shows the participant:

- will require or is likely to require NDIS supports for their lifetime.

Note: Where a participant has been diagnosed with a List A condition, they will meet this criterion without further assessment.

What to consider

- Does the evidence demonstrate that the participant is likely to require NDIS Supports, for their lifetime?
- Does the evidence demonstrate that the participant will likely be substantially reduced in their functional capacity (in a relevant activity) for their lifetime, despite any interventions?
- Are there any recommendations for interventions that are likely to improve the participant's functional capacity, and reduce their future need for disability related supports?
- If the participant is a child or young adult, does the evidence indicate that significant functional improvements can be expected - either as they develop, or through interventions?
- Does the participant's need for support only relate to supports which the NDIS does not fund?

If **none** of the recommended supports are on the NDIS Supports list, or they are **all** supports the NDIS will not fund, then the participant will not meet this criterion. For the list of supports the NDIS will not fund see Supports that are not NDIS Supports. Remember that you only need to have at least **one** support on the Supports that are NDIS Supports list to meet this criterion.

For further information, refer to What does NDIS fund and Our Guidelines - Does your impairment affect your social, work or study life?

If the person does NOT meet the Early Intervention criteria

Participants that meet Section 24(1)(e)	Meet the disability requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that do not meet Section 24(1)(e)	Are not eligible for disability support from the NDIS. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

If the person does meet the Early Intervention criteria

Participants that meet Section 24(1)(e)	Eligible for both disability and early intervention. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision
Participants that do not meet Section 24(1)(e)	Are not eligible for disability, **however** do satisfy the early intervention requirements. Please follow the process in either: • knowledge article KA – Complete an Eligibility Check; or • knowledge article KA – Finalise an Eligibility Reassessment decision

13 Related procedures or resources

- National Disability Insurance Scheme (Becoming a Participant) Rules 2016
- Current NDIS Act 2013
- Our Guidelines - Applying to the NDIS
- KA – Prepare to make an access decision
- KA – Submit an access decision
- KA – Complete an Eligibility Check
- KA – Finalise an Eligibility Reassessment decision
- Access and ER Decision Tree

14 Feedback

If you would like to provide feedback about this guidance material, please discuss with your team leader who can send a request to s47E(d) - certain operations of agencies@ndis.gov.au.

15 Version control

Version	Amended by	Brief Description of Change	Status	Date
1.0	CH0026	New resource	APPROVED	2024-10-02
2.0	VWK542	Class 1 Approval Minor formatting error corrected in ER streamlined cohorts regarding numbering	APROVED	2024-10-10
3.0	CH0026	Class 2 Approval	APPROVED	2024-11-28
4.0	LXO144	Class 2 approval	APPROVED	2025-07-04

Review and update the participant's disabilities in the vary impairment categories case

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

- link all available evidence relating to the participant's disabilities
- review and update the update disabilities tab in the vary impairment categories case.

1 Recent updates

7 July 2025
New article about completing the update disabilities tab in the vary impairment categories case.

2 Before you start

Impairment categories information is called a 'Notice of impairments' in section 32BA of the NDIS Act (the Act).

A participant can apply to change their impairment categories at any time. 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. Any changes to the participant's current impairment categories information are a delegate decision. The decision to vary or not vary (change) the participant's impairment categories information is a reviewable decision under the Act.

You have:

- created the vary impairment categories case using article Create a vary impairment categories case.

If you are submitting an application to change the participant's current impairment categories information, you have:

- received at least one piece of disability evidence with the application or have checked for disability evidence already on the person account. Use article What evidence of disability is required to check, if you have relevant evidence to upload.

3 Link all available evidence relating to the participant's disabilities

Link all available evidence relating to the participant's disabilities to the case.

1. Check for all available evidence related to the participant's disabilities using article Check for outstanding eligibility information and evidence.
2. Use article What evidence of disability is required to confirm the evidence required.
3. In the **Vary Impairment Categories** case, select the **Evidence** tab.
4. Use article Add and link evidence to a case to either:
    - link relevant **Evidence Type - Disability** to the case, using section **Link evidence to a case**
    - upload and link new **Evidence Type - Disability** evidence, if the participant has provided this for an update to their disabilities or impairment categories.

4 Review and update the Update Disabilities tab in the Vary Impairment Categories case

All staff and partners can submit a request to update the participant's disabilities in the **Update Disabilities** tab. A delegate will review the submitted request to decide whether the participant's disabilities should be updated.

4.1 Update current disabilities information

1. In the **Update Disabilities** tab, review available evidence against the **Current disabilities** table.
2. If you need to update information for the participants current disabilities, select the **Update** button.
3. The **Disabilities** screen will open. Make any updates required, then select **Save**.
4. The updated disability will display in the **Update Disabilities Requests** table with a **Request Status** of **Requested**. After you submit this request, a delegate will review this update. They will decide whether to approve it or not.
5. Based on the available evidence, if you need to add a new disability, go to section **Add a new disability**.
6. If you don't need to add a new disability, select **Save**, and continue to section **Next steps**.

4.2 Add a new disability

1. In the **Update Disabilities** tab, select **Add Disability**. The **Add Disability** screen will open.
2. In the **Add Disability** screen, add the condition and impairment information.
3. If the disability is a primary disability, select **Primary Disability** checkbox.
4. **If you're an access delegate**, check if you have the correct evidence to select the **Verified evidence of disability** checkbox. **Don't** use the **Verified evidence of disability** checkbox if you are not an access or National Planning Support Team (NPST) delegate.

   The **Verified evidence of disability** checkbox can only be selected when you have:

   - evidence provided by a treating profession to confirm the disability and
   - verified the treating professional's details using article Check treating professional details and Australian Health Practitioner Regulation Agency (external).

5. Enter today's date at the **Start Date**. Do not future date the primary disability.

   Note: there can't be multiple primary disabilities.

6. Enter **Onset Date**, if known. Do not enter an **End Date**.

   Note: if the disability has an end date, it will no longer show in the participant's **Person Account**. Only add an end date if it is no longer appropriate to list on the participant's record, for example, if it was added in error.

7. Select the evidence type from the **Evidence** drop-down list, then select **Save**.
8. The new disability will display in the **Update disability request** table with a **Request Status** of **Requested**. For any updates select the **Update** button.
9. Select **Save**.

Previous disabilities that are no longer part of the participants eligibility to the NDIS are in the in the **Historical disabilities** table. Even if this disability no longer relates to the participant, it forms part of the **Historical disabilities**.

5 Next steps

1. If you are progressing:

    - an application to change the participant's impairment categories information, continue to article Submit an application to change the participant's impairment categories information. A delegate will then review the updates made in the update disabilities tab using article Decide whether to change the participant's impairment categories information
    - a request to issue impairment categories information for a participant with no impairment categories assigned, continue to article Submit a request to issue impairment categories information for the participant. A delegate will then review the updates made in the update disabilities tab using article Issue the participant's impairment categories information. **IMPORTANT: Do not submit a request to issue impairment categories to a participant with no impairment categories assigned. This section of the article is read only (hyperlinks not active) in preparation for transition to new framework planning (NFP)**.

2. If you need to withdraw the vary impairment categories case, use article Withdraw a vary impairment categories case.

Impairment categories guide

SGP KP Publishing

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This article provides guidance for all NDIA staff and partners to understand which impairment categories to select for a person that meets the eligibility requirements.

1 Recent updates

7 July 2025
Guidance language update. There is new language for **required impairment category** or **optional impairment categories**. This is now **Highly likely impairment category** and **commonly associated impairment categories**.

2 Impairments categories guide

Impairments are a loss of or damage to a body's function. When we assess an impairment to meet access, we look at:

- the body's function
- the body's structure
- how they think and learn.

To learn more about impairment categories go to article Descriptions of impairment categories.

The following list provides you with information on the:

- condition
- ICD 10 Codes
- highly likely impairment category for access assessors to select
- commonly associated impairment categories to select as relevant, based on evidence provided.

3 Conditions

3.1 Autism (ASD)

1. **Autism** – includes Rett and Asperger Syndrome

   ICD 10 Codes: F84.0, F84.2, F84.5
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Intellectual, cognitive, physical, psychosocial

3.2 Acquired brain injury

1. **Glioblastoma**
   ICD 10 Code: G71.9
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

2. **Hypoxic brain injury**
   ICD 10 Code: 93.1
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Physical, psychosocial

3. **Traumatic brain injury** – also called head injury and acquired brain damage

   ICD 10 Code: T90
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

3.3 Intellectual disability

1. **Mild intellectual disability**
   ICD 10 Code: F70
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive

2. **Moderate intellectual disability**
   ICD 10 Code: F71
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, physical, psychosocial

3. **Severe intellectual disability**
   ICD 10 Code: F72
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, physical, psychosocial

4. **Profound intellectual disability**
   ICD 10 Code: F73
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, physical, psychosocial

5. **Unspecified intellectual disability**
   ICD 10 Code: F79
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, sensory, physical, psychosocial

6. **Pervasive developmental disorder**
   ICD 10 Code: F84.8
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, sensory, psychosocial

7. **Microcephaly**
   ICD 10 Code: Q02
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical

8. **Other congenital brain conditions –** for example, tuberous sclerosis

   ICD 10 Code: Q04
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, physical

9. **Spina bifida**
   ICD 10 Code: Q05
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Intellectual, cognitive, sensory, neurological

10. **Foetal alcohol syndrome**
    ICD 10 Code: Q86.0
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Intellectual, cognitive, sensory, physical, psychosocial

11. **Foetal alcohol spectrum disorder (FASD)**
    ICD 10 Code: Q86.0D
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Intellectual, cognitive, sensory, physical, psychosocial

12. **Cornelia de Lange syndrome**
    ICD 10 Code: Q87.1
    Highly likely impairment category: Intellectual
    Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

13. **Prader Willi syndrome**
    ICD 10 Code: Q87.1
    Highly likely impairment category: Intellectual
    Commonly associated impairment categories: Cognitive, neurological, physical, psychosocial

14. **Coffin-Lowry syndrome**
    ICD 10 Code: Q87.8

Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

15. **Other congenital conditions (causing intellectual disability)**
ICD 10 Code: Q89
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

16. **Edwards syndrome**
ICD 10 Code: Q91
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

17. **Patau syndrome**
ICD 10 Code: Q91
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

18. **Cri du Chat syndrome**
ICD 10 Code: Q93.4
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, sensory, physical

19. **Angelman syndrome**
ICD 10 Code: Q93.5
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, sensory, physical

20. **Other chromosomal syndromes (including Kabuki & Williams syndromes)**
ICD 10 Code: Q99
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

21. **Fragile X syndrome**
ICD 10 Code: Q99.2
Highly likely impairment category: Intellectual
Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

3.4 Cerebral Palsy

1. **Cerebral palsy**
ICD 10 Code: G80
Highly likely impairment category: Physical
Commonly associated impairment categories: Intellectual, cognitive, neurological, sensory

3.5 Down Syndrome

1. **Down syndrome**
   ICD 10 Code: Q90
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, physical

3.6 Hearing Impairment

1. **Hearing loss**
   ICD 10 Code: H90
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Cognitive

2. **Congenital hearing condition**
   ICD 10 Code: Q16.9
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Cognitive

3.7 Visual Impairment

1. **Albinism**
   ICD 10 Code: E70.3
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Not applicable

2. **Visual impairment (including blindness)**
   ICD 10 Code: H54
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Not applicable

3. **Congenital eye conditions**
   ICD 10 Code: Q15.9
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Not applicable

3.8 Other Sensory – Speech

1. **Other sensory – speech**
   ICD 10 Code: R47
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Physical

3.9 Multiple Sclerosis

1. **Multiple Sclerosis**
   ICD 10 Code: G35
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

3.10 Other Neurological

1. **Alzheimer's disease**
   ICD 10 Code: F00
   Highly likely impairment category: Cognitive
   Commonly associated impairment categories: Neurological, physical, psychosocial

2. **Unspecified dementia**
   ICD 10 Code: F03
   Highly likely impairment category: Cognitive
   Commonly associated impairment categories: Neurological, physical, psychosocial

3. **Huntington disease**
   ICD 10 Code: G10
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Cognitive, neurological, psychosocial

4. **Motor neurone disease**
   ICD 10 Code: G12.2
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Cognitive, neurological, sensory, psychosocial

5. **Parkinson's disease**
   ICD 10 Code: G20
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

6. **Epilepsy – Mandatory TAPIB**
   ICD 10 Code: G40
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Intellectual, cognitive, psychosocial

7. **Muscular dystrophy**
   ICD 10 Code: G71.0
   Highly likely impairment category: Physical
   Commonly associated impairment category: Neurological

8. **Other Neurological – List A and List C**
   ICD 10 Code: G99
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, sensory, physical

3.11 Stroke

1. **Stroke**
   ICD 10 Code: I69
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Cognitive, neurological, sensory, psychosocial

3.12 Other Physical

1. **Rheumatoid arthritis**
   ICD 10 Code: M05
   Highly likely impairment category: Physical
   Commonly associated impairment category: Not applicable

2. **Other arthritis – mandatory TAPIB**
   ICD 10 Code: M12
   Highly likely impairment category: Physical
   Commonly associated impairment category: Not applicable

3. **Other physical**
   ICD 10 Code: M95
   Highly likely impairment category: Physical
   Commonly associated impairment category: Psychosocial

4. **Multiple traumatic amputations**
   ICD 10 Code: T05
   Highly likely impairment category: Physical
   Commonly associated impairment category: Psychosocial

5. **Myopathy**
   ICD 10 Code: G72.9
   Highly likely impairment category: Physical
   Commonly associated impairment category: Not applicable

3.13 Psychosocial disability

1. **Schizophrenia**
   ICD 10 Code: F20
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

2. **Schizoaffective disorder**
   ICD 10 Code: F25.9
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

3. **Bipolar affective disorder**
   ICD 10 Code: F31
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

4. **Major depressive illness**
   ICD 10 Code: F32
   Highly likely impairment category: Psychosocial
   Commonly associated impairment categories: Cognitive

5. **Other anxiety disorders**
   ICD 10 Code: F41
   Highly likely impairment category: Psychosocial
   Commonly associated impairment categories: Cognitive

6. **Obsessive-compulsive disorder**
   ICD 10 Code: F42
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Not applicable

7. **Post traumatic stress disorder**
   ICD 10 Code: F43
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

8. **Borderline personality disorder**
   ICD 10 Code: F60.3
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Not applicable

9. **Tourette syndrome**
   ICD 10 Code: F95.2
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

10. **Other psychosocial disorders**
    ICD 10 Code: F99
    Highly likely impairment category: Psychosocial
    Commonly associated impairment category: Cognitive

11. **Anorexia**
    ICD 10 Code: R63
    Highly likely impairment category: Psychosocial
    Commonly associated impairment categories: Cognitive, physical

3.14 Spinal Cord Injury

1. **Malignant neoplasm of spinal cord complete and incomplete**
   ICD 10 Code: C72.5, C72.7
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Neurological, sensory

2. **Spinal cord injury (complete)**
   ICD 10 Code: T09.5
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Neurological, sensory, psychosocial

3. **Spinal cord injury (incomplete)**
   ICD 10 Code: T09.7
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Neurological, sensory, psychosocial

3.15 Other

1. **Malignant neoplasm of brain**
   ICD 10 Code: C71
   Highly likely impairment category: Neurological

Commonly associated impairment categories: Cognitive, psychosocial

2. **Metastatic cancer**
   ICD 10 Code: C79.9
   Highly likely impairment category: Physical
   Commonly associated impairment category: Cognitive

3. **Malignant neoplasm of blood or immune disease**
   ICD 10 Code: C96
   Highly likely impairment category: Physical
   Commonly associated impairment category: Cognitive

4. **Autoimmune disorders**
   ICD 10 Code: D89.9
   Highly likely impairment category: Physical
   Commonly associated impairment category: Cognitive

5. **Obesity – mandatory TAPIB**
   ICD 10 Code: E66
   Highly likely impairment category: Physical
   Commonly associated impairment category: Psychosocial

6. **Classical phenylketonuria**
   ICD 10 Code: E70.0
   Highly likely impairment category: Cognitive
   Commonly associated impairment category: Psychosocial

7. **Disorders of pyruvate metabolism and gluconeogenesis**
   ICD 10 Code: E74.4
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Neurological, physical

8. **Other metabolic disorders**
   ICD 10 Code: E88
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Neurological, physical

9. **Dementia – rapidly progressing**
   ICD 10 Code: F03.9
   Highly likely impairment category: Cognitive
   Commonly associated impairment category: Not applicable

10. **Functional neurological disorder (FND) – mandatory TAPIB**
    ICD 10 Code: F44.4
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Cognitive, sensory, physical

11. **Other language disorder**
    ICD 10 Code: F80
    Highly likely impairment category: Cognitive
    Commonly associated impairment category: Not applicable

12. **Peripheral neuropathy – does NOT require TAPIB**
    ICD 10 Code: F90.0

Highly likely impairment category: Neurological
Commonly associated impairment categories: Sensory, physical

13. **Oppositional defiant disorder (ODD)**
    ICD 10 Code: F91.3
    Highly likely impairment category: Cognitive
    Commonly associated impairment category: Psychosocial

14. **Other hereditary ataxias**
    ICD 10 Code: G11.8
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Cognitive, sensory, physical

15. **Dementia – early onset**
    ICD 10 Code: G30.0
    Highly likely impairment category: Cognitive
    Commonly associated impairment category: Not applicable

16. **Plegia**
    ICD 10 Code: G83.1
    Highly likely impairment category: Physical
    Commonly associated impairment category: Neurological

17. **Chronic pain – mandatory TAPIB**
    ICD 10 Code: G89.4
    Highly likely impairment category: Physical
    Commonly associated impairment categories: Sensory, psychosocial

18. **Postural Orthostatic Tachycardia Syndrome (POTS) – mandatory TAPIB**
    ICD 10 Code: I49.8
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Physical

19. **Lymphoedema – mandatory TAPIB**
    ICD 10 Code: I89.0
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

20. **Chronic lung disease**
    ICD 10 Code: J44.9
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

21. **Chronic Obstructive Pulmonary Disease (COPD) – mandatory TAPIB**
    ICD 10 Code: J44.9A
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

22. **Osteoarthritis – mandatory TAPIB**
    ICD 10 Code: M19.9
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

23. **Systemic lupus erythematosus**
    ICD 10 Code: M32
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

24. **Ankylosing spondylitis**
    ICD 10 Code: M45
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

25. **Fibromyalgia**
    ICD 10 Code: M79.7
    Highly likely impairment category: Physical
    Commonly associated impairment category: Sensory

26. **Renal failure**
    ICD 10 Code: N18
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

27. **Ehlers Danlos – does NOT require TAPIB**
    ICD 10 Code: Q79.6
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

28. **Dyslexia**
    ICD 10 Code: R48
    Highly likely impairment category: Cognitive
    Commonly associated impairment category: Psychosocial

29. **Childhood apraxia of speech**
    ICD 10 Code: R48.2
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Cognitive

30. **Short stature**
    ICD 10 Code: R62.5
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

31. **Amputation – single limb or upper/lower limb**
    ICD 10 Code: Z89
    Highly likely impairment category: Physical
    Commonly associated impairment categories: Cognitive, sensory, psychosocial

32. **Amputation – multiple**
    ICD 10 Code: Z89.1
    Highly likely impairment category: Physical
    Commonly associated impairment categories: Cognitive, sensory, psychosocial

Review and update the participant's disabilities in the vary impairment categories case

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Table of Contents

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

- link all available evidence relating to the participant's disabilities
- review and update the update disabilities tab in the vary impairment categories case.

1 Recent updates

8 September 2025
Guidance updated to:

- remove steps for issuing impairment categories information to a participant with no impairment categories assigned. The vary impairment categories case is only used for an application to change the participant's impairment categories information
- add information about primary disabilities in section Add a new disability
- explain when an end date should be added to a disability in sections Update current disabilities information and Add a new disability.

2 Before you start

Impairment categories information is called a 'Notice of impairments' in section 32BA of the NDIS Act (the Act).

A participant can apply to change their impairment categories at any time. This includes to add or remove an impairment category. 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. 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.

You have:

- created the vary impairment categories case using article Create a vary impairment categories case
- received at least one piece of disability evidence with the application or checked for disability evidence already on the person account. Use article What evidence of disability is required to check, if you have relevant evidence to upload.

3 Link all available evidence relating to the participant's disabilities

Link all available evidence relating to the participant's disabilities to the case.

1. Check for all available evidence related to the participant's disabilities using article Check for outstanding eligibility information and evidence.
2. Use article What evidence of disability is required to confirm the evidence required.
3. In the **Vary Impairment Categories** case, select the **Evidence** tab.
4. Use article Add and link evidence to a case to either:
    - link relevant **Evidence Type - Disability** to the case, using section **Link evidence to a case**
    - upload and link new **Evidence Type - Disability** evidence, if the participant has provided this for an update to their disabilities or impairment categories.

4 Review and update the Update Disabilities tab in the Vary Impairment Categories case

All staff and partners can submit a request to update the participant's disabilities in the **Update Disabilities** tab. A delegate will review the submitted request to decide whether the participant's disabilities should be updated.

4.1 Update current disabilities information

1. In the **Update Disabilities** tab, review available evidence against the **Current Disabilities** table.
2. If you need to update information for the participants current disabilities, select **Update**.
3. The **Disabilities** screen will open. Make any updates required, then select **Save**.

   Note: you should only add an **End Date** if it's no longer appropriate to list the disability on the participant's record, for example, if it was added in error.

4. The updated disability will display in the **Update Disabilities Requests** table with a **Request Status** of **Requested**. After you submit this request, a delegate will review this update. They will decide whether to approve it or not.
5. Based on the available evidence, if you:

   - need to add a new disability, go to section **Add a new disability**
   - don't need to add a new disability, select **Save** and continue to section **Next steps**.

4.2 Add a new disability

1. In the **Update Disabilities** tab, select **Add Disability**. The **Add Disability** screen will open.
2. In the **Add Disability** screen, add the condition and impairment information.
3. If the disability is a primary disability, select **Primary Disability** checkbox.

   Note: the primary disability is the reported disability condition with the greatest impact on a person's daily life. There can only be one reported condition selected as the primary disability.

4. **If you're an access delegate**, check if you have the correct evidence to select the **Verified evidence of disability** checkbox. **Don't** use the **Verified evidence of disability** checkbox if you're not an access delegate or National Planning Support Team (NPST) delegate.

   The **Verified evidence of disability** checkbox can only be selected when you have:

   - evidence provided by a treating profession to confirm the disability and
   - verified the treating professional's details using article Check treating professional details and the website Australian Health Practitioner Regulation Agency (external).

5. Enter today's date at the **Start Date**. Do not future date the primary disability.

6. Enter **Onset Date**, if known. Do not enter an **End Date**.

   Note: you should only add an end date if it's no longer appropriate to list the disability on the participant's record, for example, if it was added in error.

7. Select the evidence type from the **Evidence** drop-down list, then select **Save**.
8. The new disability will display in the **Update Disabilities Requests** table with a **Request Status** of **Requested**. To make any changes, select **Update**.
9. Select **Save**.

Previous disabilities that are no longer part of the participant's eligibility to the NDIS are in the **Historical Disabilities** table. Even if this disability no longer relates to the participant, it forms part of the **Historical Disabilities**.

5 Next steps

1. Continue to article Submit an application to change the participant's impairment categories information. A delegate will then review the updates made in the update disabilities tab using article Decide whether to change the participant's impairment categories information.
2. If you need to withdraw the vary impairment categories case, use article Withdraw a vary impairment categories case.

Review and update the participant's disabilities in the vary impairment categories case

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Table of Contents

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

- link all available evidence relating to the participant's disabilities
- review and update the update disabilities tab in the vary impairment categories case.

1 Recent updates

15 December 2025
Guidance updated to:

- add link to new article Understand the disabilities tab in the person account in section Before you start
- clarify primary disability, Onset date and End Date in the vary impairment categories case.

2 Before you start

Impairment categories information is called a 'Notice of impairments' in section 32BA of the NDIS Act (the Act).

A participant can apply to change their impairment categories at any time. This includes to add or remove an impairment category. 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. 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.

You have:

- read article Understand the disabilities tab in the person account
- created the vary impairment categories case using article Create a vary impairment categories case
- received at least one piece of disability evidence with the application or checked for disability evidence already on the person account. Use article What evidence of disability is required to check, if you have relevant evidence to upload.

3 Link all available evidence relating to the participant's disabilities

Link all available evidence relating to the participant's disabilities to the case.

1. Check for all available evidence related to the participant's disabilities using article Check for outstanding eligibility information and evidence.
2. Use article What evidence of disability is required to confirm the evidence required.
3. In the **Vary Impairment Categories** case, select the **Evidence** tab.
4. Use article Add and link evidence to a case to either:
    - link relevant **Evidence Type - Disability** to the case, using section **Link evidence to a case**
    - upload and link new **Evidence Type - Disability** evidence, if the participant has provided this for an update to their disabilities or impairment categories.

4 Review and update the Update Disabilities tab in the Vary Impairment Categories case

All staff and partners can submit a request to update the participant's disabilities in the **Update Disabilities** tab. A delegate will review the submitted request to decide whether the participant's disabilities should be updated.

4.1 Update current disabilities information

1. In the **Update Disabilities** tab, review available evidence against the **Current Disabilities** table.
2. If you need to update information for the participants current disabilities, select **Update**.
3. The **Disabilities** screen will open. Make any updates required, then select **Save**.

   Note: you should only add an **End Date** if it's no longer appropriate to list the disability on the participant's person account, for example, if it was added in error or they no longer experience the impairment.

4. The updated disability will display in the **Update Disabilities Requests** table with a **Request Status** of **Requested**. After you submit this request, a delegate will review this update. They will decide whether to approve it or not.
5. Based on the available evidence, if you:

   - need to add a new disability, go to section **Add a new disability**
   - don't need to add a new disability, select **Save** and continue to section **Next steps**.

4.2 Add a new disability

1. In the **Update Disabilities** tab, select **Add Disability**. The **Add Disability** screen will open.
2. In the **Add Disability** screen, add the condition and impairment information.
3. If the disability usually has or may have the greatest impact on a person's daily life, select **Primary Disability** checkbox.

   Note: there can only be one primary disability.

4. **If you're an access delegate**, check if you have the correct evidence to select the **Verified evidence of disability** checkbox. **Don't** use the **Verified evidence of disability** checkbox if you're not an access delegate or National Planning Support Team (NPST) delegate.

   The **Verified evidence of disability** checkbox can only be selected when you have:

   - evidence provided by a treating profession to confirm the disability and
   - verified the treating professional's details using article Check treating professional details and the website Australian Health Practitioner Regulation Agency (external).

5. Enter today's date at the **Start Date**. Don't future date the disability.

6. Enter **Onset Date**, if known. This is the date the participant acquired the disability. This might be based on available evidence such as a date on a medical report. Don't enter an **End Date**.

   Note: you should only add an end date if it's no longer appropriate to list the disability on the participant's record, for example, if it was added in error or they no longer experience the impairment.

7. Select the evidence type from the **Evidence** drop-down list, then select **Save**.
8. The new disability will display in the **Update Disabilities Requests** table with a **Request Status** of **Requested**. To make any changes, select **Update**.
9. Select **Save**.

Previous disabilities that are no longer part of the participant's eligibility to the NDIS are in the **Historical Disabilities** table. Even if this disability no longer relates to the participant, it forms part of the **Historical Disabilities**.

5 Next steps

1. Continue to article Submit an application to change the participant's impairment categories information. A delegate will then review the updates made in the update disabilities tab using article Decide whether to change the participant's impairment categories information.
2. If you need to withdraw the vary impairment categories case, use article Withdraw a vary impairment categories case.

Impairment categories guide

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Table of Contents

This article provides guidance for all NDIA staff and partners to understand which impairment categories to select for a person that meets the disability or early intervention requirements.

1 Recent updates

15 December 2025
Guidance updated to reflect new and updated impairment categories information in the Impairment validation report. Added link to new article: Understand highly likely and commonly associated impairment categories.

2 Using the Impairments categories guide

Before you consider adding an impairment category, check if you need to request advice from TAPIB. For more information see TAPIB Mandatory and Non-Mandatory Advice Requests.

Access delegates will determine a participant's impairment categories following an access met decision, or an application to change impairment categories information.

Impairments are a loss of or damage to a body's function. When we assess an impairment to meet access, we look at:

- the body's function
- the body's structure
- how the person thinks and learns.

Evidence from national and international sources, and peak organisation websites were reviewed to determine the impairments related to disability-related conditions or diagnoses. These sources include the:

- International Classification of Diseases (ICD)
- International Classification of Functioning, Disability and Health (ICF)
- Diagnostic and Statistical Manual of Mental Disorders (DSM-5)
- National Institute of Health (NIH)
- Australian Government: Australian Institute of Health and Welfare (AIHW).

To learn more about:

- impairment categories, go to article Descriptions of impairment categories
- highly likely and commonly associated impairment categories, go to article Understand highly likely and commonly associated impairment categories.

3 Conditions

The following list provides you with information on the:

- condition
- ICD 10 Codes
- highly likely impairment category for access assessors to select
- commonly associated impairment categories for access assessors to select as relevant, based on evidence provided.

Note: if the participant's condition isn't listed here, consider the evidence to determine which impairment categories apply to their impairment or impairments.

Impairment categories may also relate to the participant when the condition isn't listed in this guide, as long as:

- there is evidence of this, and
- they cover impairments for which the participant meets the disability or early intervention eligibility requirements.

You may wish to use the **Ctrl+F** function on your keyboard to find specific conditions in this guide.

Note: if a child is younger than 6 with developmental delay, then the impairment categories don't apply.

3.1 Autism (ASD)

1. **Autism - ASD - includes Asperger syndrome**
   ICD 10 Codes: F84.0, F84.5
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Intellectual, cognitive, physical, psychosocial

3.2 Acquired brain injury

1. **Glioblastoma**
   ICD 10 Code: G71.9
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

2. **Hypoxic brain injury**
   ICD 10 Code: G93.1
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

3. **Traumatic brain injury – also called head injury and acquired brain damage**
   ICD 10 Code: T90

Highly likely impairment category: Neurological
Commonly associated impairment categories: Cognitive, physical, psychosocial

4. **Stroke**
   ICD 10 Code: I69
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, sensory, psychosocial

5. **Malignant neoplasm of brain**
   ICD 10 Code: C71
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, psychosocial

3.3 Intellectual disability

1. **Mild intellectual disability**
   ICD 10 Code: F70
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, psychosocial

2. **Moderate intellectual disability**
   ICD 10 Code: F71
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, physical, psychosocial

3. **Severe intellectual disability**
   ICD 10 Code: F72
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, physical, psychosocial

4. **Profound intellectual disability**
   ICD 10 Code: F73
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, physical, psychosocial

5. **Unspecified intellectual disability**
   ICD 10 Code: F79
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

3.4 Other conditions/syndromes with intellectual disability

1. **Microcephaly**
   ICD 10 Code: Q02
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical

2. **Other congenital brain conditions – for example, tuberous sclerosis**
   ICD 10 Code: Q04
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, physical

3. **Cornelia de Lange syndrome**
   ICD 10 Code: Q87.1
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

4. **Prader Willi syndrome**
   ICD 10 Code: Q87.1
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, physical, psychosocial

5. **Coffin-Lowry syndrome**
   ICD 10 Code: Q87.8
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

6. **Other congenital conditions causing intellectual disability**
   ICD 10 Code: Q89
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

7. **Edwards syndrome**
   ICD 10 Code: Q91
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

8. **Patau syndrome**
   ICD 10 Code: Q91
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

9. **Cri du Chat syndrome**
   ICD 10 Code: Q93.4
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Cognitive, sensory, physical

10. **Angelman syndrome**
    ICD 10 Code: Q93.5
    Highly likely impairment category: Intellectual
    Commonly associated impairment categories: Cognitive, neurological, physical

11. **Other chromosomal syndromes - including Kabuki & Williams syndromes**
    ICD 10 Code: Q99
    Highly likely impairment category: Intellectual
    Commonly associated impairment categories: Cognitive, neurological, sensory,

physical, psychosocial

12. **Fragile X syndrome**
    ICD 10 Code: Q99.2
    Highly likely impairment category: Intellectual for males, cognitive for females
    Commonly associated impairment categories: Cognitive, neurological, sensory, physical, psychosocial

13. **Down syndrome**
    ICD 10 Code: Q90
    Highly likely impairment category: Intellectual
    Commonly associated impairment categories: Cognitive, physical, sensory

3.5 Hearing impairment

1. **Hearing loss**
   ICD 10 Code: H90
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Cognitive

2. **Congenital hearing condition**
   ICD 10 Code: Q16.9
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Cognitive

3.6 Vision

1. **Albinism**
   ICD 10 Code: E70.3
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Not applicable

2. **Visual impairment - including blindness**
   ICD 10 Code: H54
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Not applicable

3. **Congenital eye conditions**
   ICD 10 Code: Q15.9
   Highly likely impairment category: Sensory
   Commonly associated impairment category: Not applicable

3.7 Other sensory

1. **Deaf Blindness – dual sensory impairment**
   ICD 10 Code: Z73.82
   Highly likely impairment category: Sensory
   Commonly associated impairment categories: Cognitive, psychosocial

2. **Other sensory – speech**
   ICD 10 Code: R47

Highly likely impairment category: Sensory
Commonly associated impairment category: Physical

3.8 Neurological

1. **Multiple sclerosis**
   ICD 10 Code: G35
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, sensory, physical, psychosocial

2. **Rett syndrome**
   ICD 10 Code: 84.2
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Intellectual, cognitive, physical, psychosocial

3. **Cerebral palsy**
   ICD 10 Code: G80
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Intellectual, cognitive, physical, sensory

4. **Huntington disease**
   ICD 10 Code: G10
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

5. **Motor neurone disease**
   ICD 10 Code: G12.2
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, sensory, psychosocial

6. **Parkinson's disease**
   ICD 10 Code: G20
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, sensory, physical, psychosocial

7. **Epilepsy**
   ICD 10 Code: G40
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Intellectual, cognitive, psychosocial

8. **Muscular dystrophy**
   ICD 10 Code: G71.0
   Highly likely impairment category: Neurological
   Commonly associated impairment category: Physical

9. **Other Neurological – List A and List C**
   ICD 10 Code: G99
   Highly likely impairment category: Neurological

Commonly associated impairment categories: Cognitive, sensory, physical

10. **Tourette syndrome**
    ICD 10 Code: F95.2
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Cognitive, physical, psychosocial

11. **Peripheral neuropathy**
    ICD 10 Code: F90.0
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Sensory, physical

12. **Plegia**
    ICD 10 Code: G83.1
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Physical

13. **Spina bifida**
    ICD 10 Code: Q05
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Intellectual, cognitive, sensory, physical

14. **Fetal alcohol syndrome**
    ICD 10 Code: Q86.0
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Intellectual, cognitive, sensory, physical, psychosocial

15. **Fetal alcohol spectrum disorder (FASD)**
    ICD 10 Code: Q86.0D
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Intellectual, cognitive, sensory, physical, psychosocial

16. **Attention deficit hyperactive disorder (ADHD)**
    ICD 10 Code: F90
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Cognitive

17. **Developmental language disorder**
    ICD 10 Code: F80.9
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Not applicable

18. **Chronic regional pain syndrome**
    ICD 10 Code: G90.5
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Physical

19. **Brachial plexus injury**
    ICD 10 Code: S14.3
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Physical

20. **Dysgraphia**
    ICD 10 Code: F81.8
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Physical

21. **Functional seizures**
    ICD 10 Code: F44.5
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Psychosocial

3.9 Other physical

1. **Rheumatoid arthritis**
   ICD 10 Code: M05
   Highly likely impairment category: Physical
   Commonly associated impairment category: Not applicable

2. **Other arthritis**
   ICD 10 Code: M12
   Highly likely impairment category: Physical
   Commonly associated impairment category: Not applicable

3. **Other physical**
   ICD 10 Code: M95
   Highly likely impairment category: Physical
   Commonly associated impairment category: Psychosocial

4. **Multiple traumatic amputations**
   ICD 10 Code: T05
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Cognitive, neurological, psychosocial

5. **Myopathy**
   ICD 10 Code: G72.9
   Highly likely impairment category: Physical
   Commonly associated impairment category: Not applicable

6. **Amputation – single limb or upper/lower limb**
   ICD 10 Code: Z89
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Cognitive, neurological, psychosocial

7. **Amputation – multiple**
   ICD 10 Code: Z89.1
   Highly likely impairment category: Physical
   Commonly associated impairment categories: Cognitive, neurological, psychosocial

8. **Diabetes mellitus**
   ICD 10 Code: E14
   Highly likely impairment category: Physical
   Commonly associated impairment category: Sensory

9. **Human immune deficiency virus (HIV)**
   ICD 10 Code: B22

Highly likely impairment category: Physical
Commonly associated impairment category: Cognitive

10. **Other unspecified infectious diseases**
    ICD 10 Code: B99
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

3.10 Psychosocial

1. **Schizophrenia**
   ICD 10 Code: F20
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

2. **Schizoaffective disorder**
   ICD 10 Code: F25.9
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

3. **Bipolar affective disorder**
   ICD 10 Code: F31
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

4. **Major depressive illness**
   ICD 10 Code: F32
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

5. **Other anxiety disorders**
   ICD 10 Code: F41
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

6. **Obsessive-compulsive disorder**
   ICD 10 Code: F42
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Not applicable

7. **Post traumatic stress disorder (PTSD)**
   ICD 10 Code: F43
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

8. **Borderline personality disorder**
   ICD 10 Code: F60.3
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Not applicable

9. **Other psychosocial disorders**
   ICD 10 Code: F99
   Highly likely impairment category: Psychosocial
   Commonly associated impairment category: Cognitive

10. **Anorexia**
    ICD 10 Code: R63
    Highly likely impairment category: Psychosocial
    Commonly associated impairment categories: Cognitive, physical

3.11 Spinal cord injury

1. **Malignant neoplasm of spinal cord complete and incomplete**
   ICD 10 Codes: C72.5, C72.7
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Sensory, physical

2. **Spinal cord injury (complete)**
   ICD 10 Code: T09.5
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Sensory, physical, psychosocial

3. **Spinal cord injury (incomplete)**
   ICD 10 Code: T09.7
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Physical, sensory, psychosocial

3.12 Other

1. **Metastatic cancer**
   ICD 10 Code: C79.9
   Highly likely impairment category: Physical
   Commonly associated impairment category: Cognitive

2. **Malignant neoplasm of blood or immune disease**
   ICD 10 Code: C96
   Highly likely impairment category: Physical
   Commonly associated impairment category: Cognitive

3. **Autoimmune disorders**
   ICD 10 Code: D89.9
   Highly likely impairment category: Physical
   Commonly associated impairment category: Cognitive

4. **Obesity**
   ICD 10 Code: E66
   Highly likely impairment category: Physical
   Commonly associated impairment category: Psychosocial

5. **Classical phenylketonuria**
   ICD 10 Code: E70.0
   Highly likely impairment category: Cognitive
   Commonly associated impairment category: Psychosocial

6. **Disorders of pyruvate metabolism and gluconeogenesis**
   ICD 10 Code: E74.4
   Highly likely impairment category: Intellectual

Commonly associated impairment categories: Neurological, physical

7. **Other metabolic disorders**
   ICD 10 Code: E88
   Highly likely impairment category: Intellectual
   Commonly associated impairment categories: Neurological, physical

8. **Functional neurological disorder (FND)**
   ICD 10 Code: F44.4
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, sensory, physical

9. **Other language disorder**
   ICD 10 Code: F80
   Highly likely impairment category: Cognitive
   Commonly associated impairment category: Not applicable

10. **Oppositional defiant disorder (ODD)**
    ICD 10 Code: F91.3
    Highly likely impairment category: Psychosocial
    Commonly associated impairment category: Cognitive

11. **Other hereditary ataxias**
    ICD 10 Code: G11.8
    Highly likely impairment category: Neurological
    Commonly associated impairment categories: Cognitive, sensory, physical

12. **Chronic pain**
    ICD 10 Code: G89.4
    Highly likely impairment category: Physical
    Commonly associated impairment categories: Neurological, sensory, psychosocial

13. **Postural Orthostatic Tachycardia Syndrome (POTS)**
    ICD 10 Code: I49.8
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Physical

14. **Lymphoedema**
    ICD 10 Code: I89.0
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

15. **Chronic lung disease**
    ICD 10 Code: J44.9
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

16. **Chronic Obstructive Pulmonary Disease (COPD)**
    ICD 10 Code: J44.9A
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

17. **Osteoarthritis**
    ICD 10 Code: M19.9

Highly likely impairment category: Physical
Commonly associated impairment category: Not applicable

18. **Systemic lupus erythematosus**
    ICD 10 Code: M32
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

19. **Ankylosing spondylitis**
    ICD 10 Code: M45
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

20. **Fibromyalgia**
    ICD 10 Code: M79.7
    Highly likely impairment category: Physical
    Commonly associated impairment category: Neurological

21. **Renal failure**
    ICD 10 Code: N18
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

22. **Ehlers Danlos**
    ICD 10 Code: Q79.6
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

23. **Dyslexia**
    ICD 10 Code: R48
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Cognitive

24. **Childhood apraxia of speech**
    ICD 10 Code: R48.2
    Highly likely impairment category: Neurological
    Commonly associated impairment category: Cognitive

25. **Short stature**
    ICD 10 Code: R62.5
    Highly likely impairment category: Physical
    Commonly associated impairment category: Not applicable

26. **Conduct Disorder (CD)**
    ICD 10 Code: F91.9
    Highly likely impairment category: Psychosocial
    Commonly associated impairment category: Cognitive

3.13 Dementia related conditions

1. **Alzheimer's disease**
    ICD 10 Code: F00
    Highly likely impairment category: Neurological

Commonly associated impairment categories: Cognitive, physical, psychosocial

2. **Unspecified dementia**
   ICD 10 Code: F03
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

3. **Dementia – rapidly progressing**
   ICD 10 Code: F03.9
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

4. **Dementia – early onset**
   ICD 10 Code: G30.0
   Highly likely impairment category: Neurological
   Commonly associated impairment categories: Cognitive, physical, psychosocial

Understand highly likely and commonly associated impairment categories

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Table of Contents

This article provides guidance for an access delegate to:

- understand impairment categories
- understand highly likely and commonly associated impairment categories
- understand how to assign impairment categories when you make an access decision
- understand how to add a new impairment category after a participant has met access

1 Recent updates

15 December 2025
New article to support understanding of how highly likely and commonly associated impairment categories are applied based on the participant's impairments.

2 Before you start

Impairment categories information is called a 'Notice of impairments' in section 32BA of the NDIS Act (the Act).

A participant can ask to change their impairment categories at any time. This includes to add or remove an impairment category. 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.

Only access delegates assign participant's impairment categories.

You:

- are determining a participant's impairment categories following an access met decision, or an application to change impairment categories information and

You have read:

- and understood Our Guideline – Applying to the NDIS (external), sections **What are the categories of impairments?**, **What happens after we decide?** and **How do we weigh evidence of disability?**
- article Descriptions of impairment categories.

Note: the examples in this article are for information only. They are provided to support understanding and don't include all potential scenarios.

3 Understand impairment categories

A participant's impairment categories information may include one or multiple impairment categories.

Where a participant has multiple impairments which relate to a single impairment category, one impairment category is recorded. However, when a participant has one impairment that impacts multiple impairment categories, all relevant impairment categories are recorded. More categories doesn't mean more support needs.

Note: we use the terms highly likely and commonly associated impairment categories. This is internal language only. When talking to participants, use either impairment categories, or impairment categories information.

When considering adding any impairment categories, they must be:

- supported by the participant's disability related evidence
- relevant to how the participant meet's the disability or early intervention requirements. For more information go to sections **Impairment categories when the participant meets the disability requirements**, and **Impairment categories when the participant meets the early intervention requirements**.

3.1 Impairment categories when the participant meets the disability requirements

If the participant meets the disability requirements, the highly likely or commonly associated impairment category needs to cover an impairment that:

- is likely to be permanent
- substantially reduces the participant's functional capacity
- affects the participant's ability to work, study or take part in social life
- likely needs NDIS support for the participant's lifetime.

For more information go to Our Guideline – Applying to the NDIS (external), section **Do you meet the disability requirements?**

3.2 Impairment categories when the participant meets the early intervention requirements

If the participant meets the early intervention requirements, the highly likely or commonly associated impairment category needs to cover an impairment that:

- is likely to be permanent
- will likely benefit from early intervention supports and
- the early intervention supports needed are NDIS supports.

Note: if a child is younger than 6 with developmental delay, then the impairment categories don't apply.

For more information go to Our Guideline – Applying to the NDIS (external), section **Do you need early intervention?**

4 Understand highly likely and commonly associated impairment categories

In most cases, apply the **highly likely impairment category** or categories for the condition or conditions that meet the disability or early intervention requirements. Other impairment categories can also be relevant to the participant's condition. Consider the **commonly associated impairment category** or categories.

Article Impairment categories guide includes the highly likely and commonly associated impairment categories associated with a participant's condition. You can also add an impairment category not listed in this guide, as long as:

- you have evidence of this, and
- it covers an impairment that meets the disability or early intervention requirements.

Where a participant has more than one impairment, you must assess the functional impact of each impairment in the context of all the participant's impairments cumulative impact. For example, a person might have an intellectual disability and a different permanent impairment which causes difficulty moving. On its own the impairment that causes difficulty moving might not result in substantially reduced functional capacity in any activity area. But because of the person's intellectual disability, they may not be able to use recommended strategies or equipment without support. This means we would consider the functional impacts of the physical impairment in the context of the functional impacts of the intellectual disability. For more information, go to section **Example – assigning impairment categories for multiple impairments that combined meet disability requirements** in this article.

Note: if the participant's condition isn't listed in the guide, consider the evidence to determine the most appropriate impairment categories that apply.

4.1 Highly likely impairment categories

Highly likely impairment categories are categories that research tells us are most likely to be associated with a condition. These categories apply to the permanent impairment the participant met the disability or early intervention requirements for.

A participant can have multiple impairments which relate to a single impairment category. In this case, record only one impairment category. For more information go to section **Example - multiple impairments related to the same impairment category** in this article.

4.2 Commonly associated impairment categories

In addition to the highly likely impairment categories, you must consider applying any commonly associated impairment categories. The evidence must indicate it's relevant to the permanent impairment the participant meets the disability or early intervention requirements for. Two people with the same condition may have different impairment categories applied because of how the condition presents for them.

If the participant applies to change their impairment categories information, go to section **Understand how to add an impairment category after a participant has met access** in this article.

5 Understand how to assign impairment categories when you make an access decision

The following examples include assigning highly likely and commonly associated impairment categories to a participant's impairment categories information when you make an access met decision.

5.1 Example – Multiple sclerosis - neurological and cognitive impairment categories

Hailey meets the disability requirements because she has multiple sclerosis. This means the highly likely impairment category is neurological.

Hailey provides evidence that because of her multiple sclerosis, she has difficulty with her memory and concentration causing substantially reduced functional capacity in communication and learning. The delegate decides Hailey has a permanent neurological impairment caused by multiple sclerosis. The delegate also decides that Hailey's multiple sclerosis causes a permanent cognitive impairment.

This means the delegate will apply the commonly associated category cognitive. Hailey's impairment categories information will include the impairment categories neurological and cognitive. These apply equally in their impairment categories information and are not defined as highly likely or commonly associated on their record.

5.2 Example – Multiple sclerosis - neurological and physical impairment categories

Alex meets the disability requirements because they have multiple sclerosis. This means the highly likely impairment category is neurological.

Alex also provides evidence that because of their multiple sclerosis, they have a lack of muscle control and coordination of their movements (ataxia). This results in a substantially reduced functional capacity to move around, and Alex needs to use a gait aid to help with walking.

The delegate decides Alex has a permanent neurological impairment caused by multiple sclerosis, and a physical impairment due to difficulty moving their body.

This means the delegate will apply the commonly associated category physical. Alex's impairment categories information will include the impairment categories neurological and physical. These apply equally in their impairment categories information and are not defined as highly likely or commonly associated on their record.

5.3 Example – assigning impairment categories for multiple impairments that combined meet disability requirements

Joy applies to access the NDIS and provides evidence of impairments associated with moderate intellectual disability and rheumatoid arthritis.

The access delegate considers the combined impact of all of Joy's permanent impairments. They are satisfied Joy has substantially reduced functional capacity in activity of self-care due to

the combined impact of Joy's intellectual disability and rheumatoid arthritis. On its own, Joy's rheumatoid arthritis would not cause substantially reduced capacity to self-care. However, due to Joy's intellectual disability, she is unable to use adaptive strategies to physically complete self-care tasks independently.

The delegate records the highly likely impairment categories intellectual and physical. These categories cover the impairments for which Joy meets the disability requirements.

5.4 Example – assigning 2 highly likely impairment categories for multiple impairments that meet the disability requirements

Ahmed applies to access the NDIS and provides evidence of impairments associated with a moderate intellectual disability and profound hearing loss.

The delegate is satisfied that the impairments caused by Ahmed's intellectual disability and hearing loss meet the disability requirements.

The delegate records 2 highly likely impairment categories for Ahmed. These categories are Intellectual and Sensory. Ahmed's impairment category information will state Intellectual and Sensory.

5.5 Example - multiple impairments related to the same impairment category

Mei was diagnosed with fusion of the cervical spine after birth. Later in life, Mei had a below-knee amputation.

Mei provides evidence that they have permanent damage to their body functions. This is due to limited range of motion in the neck and upper spine, and the partial loss of a lower limb.

Although Mei has two separate impairments, Mei's impairment categories information will include only the physical impairment category This covers the impairments related to Mei's fusion of the cervical spine and below-knee amputation.

6 Understand how to add an impairment category after a participant has met access

A participant can apply to change their impairment categories at any time. This includes adding or removing an impairment category.

When a participant applies to add an impairment category, you don't need to review the permanence and functional impact of existing impairments. You **do** need to check the impact of the existing impairment on any new impairments.

As an access delegate, you will consider the available evidence to make a decision about whether you change the impairment categories or not.

The following examples demonstrate adding an impairment category when the participant asks to change their impairment categories information.

6.1 Example - decision to add an impairment category

Omar meets the disability requirements for an intellectual disability.

Omar's impairment categories information states intellectual and cognitive to cover the impairments they experience associated with intellectual disability.

Omar's nominee contacts the NDIA to advise that Omar has recently been diagnosed with Parkinson's disease. They'd like to change Omar's impairment categories information to reflect this.

As part of the request, Omar's nominee provides diagnostic information from Omar's neurologist. This evidence demonstrates Omar's Parkinson's disease results in a permanent impairment and is having a substantial impact on his functional capacity. Omar's nominee also provides evidence of the functional impact Omar experiences from his Parkinson's disease, impacting his neurological functioning.

The access delegate considers the application and evidence. They decide to change the impairment categories information. This is because Omar's Parkinson's disease results in a permanent impairment which causes substantial reduction in functional capacity.

The delegate adds the neurological impairment category. Omar is given a new impairment categories information which now also includes the neurological impairment category, along with the intellectual and cognitive impairment categories.

6.2 Example – decision to not add an impairment category

Ali has autism and meets the disability requirements. Ali's highly likely impairment category is neurological. Ali also has intellectual recorded as a commonly associated category.

Ali's child representative applies to add the sensory category to Ali's impairment categories information. They give us evidence that says due to Ali's autism, they have sensory processing difficulties.

The delegate reviews the evidence and looks at the relevant guidance including Our Guideline –

Applying to the NDIS (external). The delegate confirms that we usually use the sensory category when a participant has a condition such as vision or hearing loss. Sensory processing difficulties however relate to the neurological category, which involves how the brain processes sensory information like sound, touch, movement, and taste.

The delegate decides not to change Ali's impairment category information. Even though we haven't added the sensory impairment category, Ali might still get NDIS supports for her sensory processing difficulties. The supports would need to relate to her permanent impairment.

Impairment Categories Guidance Table

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The contents of this document are OFFICIAL.

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Revised Impairment Categorisation Guidance.

(The following guide should be used in consultation with TAPIB advice. Mandatory and Non-Mandatory Advice Requests - Technical Advice and Practice Improvement Branch)

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
Autism				
Autism (ASD – includes Asperger syndrome)	84.0 84.5	Neurological	Intellectual Cognitive Physical Psychosocial	
Acquired Brain Injury				
Glioblastoma	G71.9	Neurological	Cognitive Physical Psychosocial	
Hypoxic brain injury	G93.1	Neurological	Cognitive Physical Psychosocial	
Traumatic brain injury (also called head injury and acquired brain damage)	T90	Neurological	Cognitive Physical Psychosocial	
Stroke	I69	Neurological	Cognitive Physical Sensory Psychosocial	
Malignant neoplasm of brain	C71	Neurological	Cognitive Psychosocial	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
Intellectual disability				
Mild intellectual disability	F70	Intellectual	Cognitive Neurological Psychosocial	
Moderate intellectual disability	F71	Intellectual	Cognitive Neurological Physical Psychosocial	
Severe intellectual disability	F72	Intellectual	Cognitive Neurological Physical Psychosocial	
Profound intellectual disability	F73	Intellectual	Cognitive Neurological Physical Psychosocial	
Unspecified intellectual disability	F79	Intellectual	Cognitive Neurological Sensory Physical Psychosocial	
Other conditions/syndromes with intellectual disability				
Global developmental delay	84.01	Intellectual	Neurological Physical Cognitive	Category added to ensure consistent approach for assigning impairment when GDD is listed as

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
				the primary impairment.
Microcephaly	Q02	Intellectual	Cognitive Neurological Sensory Physical	
Other congenital brain conditions (e.g. tuberous sclerosis)	Q04	Intellectual	Cognitive Neurological Physical	
Cornelia de Lange syndrome	Q87.1	Intellectual	Cognitive Neurological Sensory Physical Psychosocial	
Prader Willi syndrome	Q87.1	Intellectual	Cognitive Neurological Physical Psychosocial	
Coffin-Lowry syndrome	Q87.8	Intellectual	Cognitive Neurological Sensory Physical Psychosocial	
Other congenital conditions (causing intellectual disability)	Q89	Intellectual	Cognitive Neurological Sensory Physical Psychosocial	
Edwards syndrome	Q91	Intellectual	Cognitive Neurological Sensory	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
			Physical Psychosocial	
Patau syndrome	Q91	Intellectual	Cognitive Neurological Sensory Physical Psychosocial	
Cri du Chat syndrome	Q93.4	Intellectual	Cognitive Sensory Physical	
Angelman syndrome	Q93.5	Intellectual	Cognitive Neurological Physical	
Other chromosomal syndromes (including Kabuki & Williams syndromes)	Q99	Intellectual	Cognitive Neurological Sensory Physical Psychosocial	
Fragile X syndrome	Q99.2	Intellectual For males Cognitive for females	Cognitive Neurological Sensory Physical Psychosocial	
Down Syndrome	Q90	Intellectual	Cognitive Physical Sensory	
Hearing				
Hearing Loss	H90	Sensory	Cognitive	
Congenital Hearing condition	Q16.9	Sensory	Cognitive	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
Vision				
Albinism	E70.3	Sensory		
Visual impairment (incl blindness)	H54	Sensory		
Congenital eye conditions	Q15.9	Sensory		
Other Sensory				
Deaf Blindness (dual sensory impairment)	Z73.82	Sensory	Cognitive Psychosocial	
Other sensory - speech	R47	Sensory	Physical	
Neurological				
Multiple sclerosis	G35	Neurological	Cognitive Sensory Physical Psychosocial	
Rett Syndrome	84.2	Neurological	Intellectual Cognitive Physical Psychosocial	
Cerebral Palsy	G80	Neurological	Intellectual Cognitive Physical Sensory	
Huntington disease	G10	Neurological	Cognitive Physical Psychosocial	
Motor neuron disease	G12.2	Neurological	Cognitive Physical Sensory Psychosocial	
Parkinson's disease	G20	Neurological	Cognitive	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
			Sensory Physical Psychosocial	
Epilepsy	G40	Neurological	Intellectual Cognitive Psychosocial	
Muscular dystrophy	G71.0	Neurological	Physical	
Other Neurological Other Neurological – List A Other Neurological – List C	G99	Neurological	Cognitive Sensory Physical	
Tourette syndrome	F95.2	Neurological	Cognitive Physical Psychosocial	
Peripheral neuropathy	F90.0	Neurological	Sensory Physical	
Plegia	G83.1	Neurological	Physical	
Spina Bifida	Q05	Neurological	Intellectual Cognitive Sensory Physical	
Foetal alcohol syndrome Foetal alcohol spectrum disorder (Q86.0D)	Q86.0 Q86.0D	Neurological	Intellectual Cognitive Sensory Physical Psychosocial	
Attention deficit hyperactive disorder (ADHD)	F90	Neurological	Cognitive	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
Developmental Language disorder	F80.9	Neurological		
Other physical				
Rheumatoid arthritis	M05	Physical		
Other arthritis	M12	Physical		
Other Physical	M95	Physical	Psychosocial	
Multiple traumatic amputations	T05	Physical	Cognitive Neurological Psychosocial	
Myopathy	G72.9	Physical		
Amputation - Single limb or upper/lower limb	Z89	Physical	Cognitive Neurological Psychosocial	
Amputation - Multiple	Z89.1	Physical	Cognitive Neurological Psychosocial	
Psychosocial				
Schizophrenia	F20	Psychosocial	Cognitive	
Schizoaffective disorder	F25.9	Psychosocial	Cognitive	
Bipolar affective disorder	F31	Psychosocial	Cognitive	
Major depressive illness	F32	Psychosocial	Cognitive	
Other anxiety disorders	F41	Psychosocial	Cognitive	
Obsessive-compulsive disorder	F42	Psychosocial		
Post traumatic stress disorder	F43	Psychosocial	Cognitive	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
Borderline personality disorder	F60.3	Psychosocial		
Other psychosocial disorders	F99	Psychosocial	Cognitive	
Anorexia	R63	Psychosocial	Cognitive Physical	
Spinal Cord Injury				
Malignant neoplasm of spinal cord complete and incomplete	C72.5 C72.7	Neurological	Sensory Physical	
Spinal cord injury (Complete)	T09.5	Neurological	Sensory Physical Psychosocial	
Spinal cord injury (Incomplete)	T09.7	Neurological	Physical Sensory Psychosocial	
Other				
Metastatic cancer	C79.9	Physical	Cognitive	
Malignant neoplasm of blood or immune disease	C96	Physical	Cognitive	
Autoimmune disorders	D89.9	Physical	Cognitive	
Obesity	E66	Physical	Psychosocial	
Classical Phenylketonuria	E70.0	Cognitive	Psychosocial	
Disorders of pyruvate metabolism and gluconeogenesis	E74.4	Intellectual	Neurological Physical	
Other metabolic disorders	E88	Intellectual	Neurological Physical	
Functional neurological disorder (FND)	F44.4	Neurological	Cognitive Sensory	

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
			Physical	
Functional Seizures	F44.5	Neurological	Psychosocial	
Other Language disorder	F80	Cognitive		
Oppositional Defiant Disorder (ODD)	F91.3	Psychosocial	Cognitive	
Other hereditary ataxias	G11.8	Neurological	Cognitive Sensory Physical	
Chronic pain	G89.4	Physical	Neurological Sensory Psychosocial	
Postural Orthostatic Tachycardia Syndrome (POTS)	I49.8	Neurological	Physical	
Lymphoedema	I89.0	Physical		
Chronic lung disease	J44.9	Physical		
Chronic Obstructive Pulmonary Disease (COPD)	J44.9A	Physical		
Osteoarthritis	M19.9	Physical		
Systemic lupus erythematosus	M32	Physical		
Ankylosing spondylitis	M45	Physical		
Fibromyalgia	M79.7	Physical	Neurological	
Renal failure	N18	Physical		
Ehlers Danlos	Q79.6	Physical		
Dyslexia	R48	Neurological	Cognitive	
Childhood apraxia of speech	R48.2	Neurological	Cognitive	
Short stature	R62.5	Physical		

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version
Diabetes Mellitus	E14	Physical	Sensory	
Human Immune Deficiency Virus (HIV)	B22	Physical	Cognitive	
Chronic Regional Pain Syndrome	G90.5	Neurological	Physical	
Brachial Plexus injury	S14.3	Neurological	Physical	
Other unspecified infectious diseases	B99	Physical		
Dysgraphia	F81.8	Neurological	Physical	
Conduct Disorder (CD)	F91.9	Psychosocial	Cognitive	
Dementia related conditions				
Alzheimer's disease	F00	Neurological	Cognitive Physical Psychosocial	
Unspecified dementia	F03	Neurological	Cognitive Physical Psychosocial	Highly likely changed from cognitive to neurological for consistency with aetiology.
Dementia - Rapidly progressing	F03.9	Neurological	Cognitive Physical Psychosocial	Highly likely changed from cognitive to neurological for consistency with aetiology.
Dementia - Early Onset	G30.0	Neurological	Cognitive Physical Psychosocial	Highly likely changed from cognitive to neurological for consistency with aetiology.

Condition	ICD 10 code	Highly likely	Commonly associated	Change from previous version

Version Control Table

Version	Amended by	Brief description of change	Status	Date
2	Tina s47F - personal privacy	Changes to impairment categories based on DRO feedback	APPROVED	08/09/2025
3	Rebecca s47F - personal privacy	Change dementia-related categories to ensure “commonly associated” aligns with aetiology. Add GDD as a condition to support assignment of impairment categories at access.	To be approved	02/02/2026