

2026–27 Budget Estimates

Supplementary Brief: SB26-000012

Title: Eligibility Reassessments

Witness: Amity Durham, Deputy Chief Executive Officer,
Children, Specialised Services and Scheme Interfaces

Talking Points

- Eligibility Reassessments (ER) have been part of the Scheme since it began. They help keep the Scheme sustainable by making sure support is still needed, especially for children who enter through early intervention, which offers time-limited support to reduce the need for lifelong NDIS support.
- The NDIA received Reform for Outcomes (RFO) funding to establish a dedicated ER team of up to 120 Full-Time Equivalent (FTE) staff. The related RFO expenditure was \$5.9 million in 2023–24 and \$16.0 million in 2024–25. The increased resourcing resulted in higher completion of ER work from 2024 into 2026.
- In early 2025, the NDIA implemented changes to improve participant experience of ER in response to community feedback. Improvements include increasing the response timeframe from 28 days to 90 days and redevelopment of simpler ER letters through engagement with participants, advisory groups and disability and carer organisations.
- ER case volumes grew to 43,734 in early 2025 with implementation of the 90 days response time which delayed processing. After resuming at scale from late June 2025, volumes decreased to 17,074 at 31 March 2026.
- Between 1 January and 31 March 2026, 28% of participants referred for ER had their eligibility revoked.

Key headline facts and figures

- As of **31 March 2026**, there were **17,074 ER cases** awaiting assessment. Of these:
 - 782 ER referrals were awaiting initial assessment
 - 16,292 were awaiting final decision, including cases awaiting participant response and those ready for final assessment.
- Between 1 January and 31 March 2026, there were **16,924 ER decisions finalised**. Of these:
 - 79% (13,294) were for participants aged 0-8
 - 21% (3,630) were for participants aged 9+
 - 38% (6,479) resulted in revocation
 - 54% (9,208) had a change of eligibility status from section 25 (early intervention) to section 24 (disability)
 - 7% (1,237) maintained their existing eligibility status.
- Of the ER decisions for participants aged **0-8** (13,294):
 - 3% (527) maintained their existing eligibility status
 - 28% (5,011) resulted in revocation
 - 58% (7,756) had their eligibility status changed from section 25 (early intervention) to section 24 (disability).
- The average number of revocations per week was 498 (25%) compared to 116 (15%) per week across the same period in 2025.
- The ER team completed on average **2,023 cases per week**.
- As at 31 March 2026, the ER workforce was **206.42 FTE**, with an additional **21.83 FTE** temporarily supporting from the access team.

- At 31 March 2026, 167,787 children younger than 9 had an NDIS plan, making up 22% of Scheme participants. Of these children, 40% are part of the Scheme under the developmental delay requirements.
- Of current commenced ERs (17,185), 65% (11,113) relate to children with developmental delay aged 6 and over, 7% (1,190) relate to children with developmental delay under 6, 12% (2,145) relate to children with global developmental delay, and 23% (2,737) relate to other disabilities and includes non-children with developmental delay and global developmental delay.

Background

- The ER process is aimed at ensuring the NDIA has the correct evidence on record to allow us to support participants with the most appropriate long-term outcomes.
- A participant's eligibility for the Scheme can be checked at any time where evidence suggests they may no longer be eligible. There are no automated decisions in the ER process, and the Agency will consider all information provided to make an informed decision.
- The ER process is separate from the planning process and can occur concurrently. During an ER, there is no pause in the planning process and the participant can continue to use the funds in their plan.
- ERs are particularly relevant for children who have entered the Scheme under the early intervention criteria (section 25) where early childhood supports are delivered with the aim to improve outcomes for children early in life. ERs also assess whether participant support needs are permanent, and they need to remain on the Scheme.
- The NDIA progressed ER outcomes for a high volume of NDIS participants, particularly children during the second half of 2025. In line with this, the NDIA updated external communications on the NDIS website to amplify the purpose of early intervention.

The table below outlines the number of ERs completed from 1 January 2026 to 31 March 2026 by outcome and by individual age from 0-4, 5 to 18, and 19+.

Age band	Early Intervention to Permanent Disability (s25 to s24)	Maintained Access Status	Access Revoked	Total (excluding withdrawn)	Withdrawn
0 to 4	647	38	3	688	647
5	814	35	4	853	814
6	3,801	210	1,543	5,554	3,801
7	1,773	159	1,940	3,872	1,773
8	721	85	1,521	2,327	721
9	265	60	383	708	265
10	111	25	165	301	111
11	84	19	101	204	84
12	60	26	51	137	60
13	56	25	60	141	56
14	36	27	48	111	36
15	45	21	26	92	45
16	38	15	23	76	38
17	38	18	22	78	38
18	40	18	20	78	40
19+	679	456	569	1,704	679
Total (5+)	8,561	1,199	6,476	16,236	8,561
Total (all ages)	9,208	1,237	6,479	16,924	9,208

- From 1 January 2026 to 31 March 2026:
 - The total annualised plan committed supports of ERs completed was **\$498 million** (rounded to the nearest million).
 - The average annualised plan committed supports of ERs completed was **\$29,400**.
- For participants who had their access revoked from the NDIS because of an ER between 1 January 2026 to 31 March 2026, the total annualised value of their budgets was **\$125 million** (rounded to the nearest million), with average value of their budgets at \$19,300 (rounded to the nearest hundred).
- The most common group where access was revoked are child participants who entered under the early intervention requirements with developmental delay who have surpassed the age threshold (6 years), have lower plan budgets and higher levels of function.

Work pool reduction strategies

- Attracting and maintaining the target workforce delayed achievement of backlog reduction, in addition to implications of business system transition and scale back to implement process improvements.
- The ER work pool is currently at a balanced business-as-usual level and ER output is meeting the inflow of referrals. Strategies underway to continue to maintain this balance and future proof against the possibility of future backlogs are:
 - Sustainable staffing – 32 delegates were realigned to ER from 1 October 2025 to 31 March 2026 bringing total ER staffing numbers to 169 FTE at 31 March 2026. The increase in FTE beyond the initial allocation was related to RFO underspend.
 - Building ER capability across broader Scheme Eligibility Branch delegate teams to support a flexible workforce that can be assigned to work types according to greatest need.
 - Continued system enhancements, staff training and refined process resources.
 - Work pool monitoring and data cleansing.

Eligibility reassessment process overview

- The NDIS business system will auto generate an ER case in the following instances:
 - Where a child with developmental delay turns 6
 - Where a child with global developmental delay turns 7
 - Where a participant who entered the Scheme under the early intervention hearing pathway turns 26.

- These cases still need to be actioned and submitted to the Scheme Eligibility Branch by a planner. Manual referrals can also be made and represent a much smaller portion of referrals (approximately 30%). NDIA staff and partners make ER referrals guided by a referral checklist aligned to the access requirements, including the Lists. Scheme Eligibility Branch delegates assess the referral and all evidence available to check whether:
 - the participant continues to meet the access requirements, and their access status should be maintained, or
 - the participant continues to meet the access requirements, and their access status should be changed from disability to early intervention, or from early intervention to disability, or to both disability and early intervention, or
 - an ER should be commenced.
- If an ER is commenced, the NDIA will make contact via phone (minimum of 3 contacts over 2 days) and in writing to advise the participant that an ER has commenced, to explain the eligibility requirements, and to outline the ER process. If the participant cannot be reached over the 3 attempts, the ER commencement letter is still sent.
- If an ER commences, the participant has 90 days to respond and can provide evidence to inform the decision on whether they continue to meet the eligibility requirements. They can request an extension of time to respond to an ER. The delegate will consider the request and if appropriate, apply an extension period. Reasons to request an extension include but are not limited to:
 - Delay in getting information from their treating health professional
 - Personal crisis (death in family, domestic violence)
 - Participant hospitalised due to non-related condition
 - Psychotic episode
 - Participant is overseas
 - Participant is incarcerated or going through legal processes
 - Natural disasters.

- If a person does not respond or request an extension, then the decision will be progressed following the 90-day period, at which time the NDIA will assess all evidence available to determine whether:
 - the participant continues to meet the eligibility requirements, and their access status should be maintained, or
 - the participant continues to meet the eligibility requirements, and their access status should be changed from disability to early intervention, or from early intervention to disability, or to both disability and early intervention, or
 - the participant no longer meets the eligibility requirements, and their access to the Scheme should be revoked.
- Before they are finalised, all revocation decisions are checked for correctness and procedural fairness by a dedicated quality officer. The procedural fairness check is to make sure a participant or nominee is aware of the ER, have received communications and had an opportunity to respond.
- If a person's access to the Scheme is revoked, their plan will end 28 days after the revocation decision or on the participant's plan end date (whichever comes first).
- The Scheme Eligibility Branch will notify participants via phone and in writing of the outcome of the ER. Where access has been revoked, participant review rights are explained along with referral for connection with our partners in the community to support mainstream linkages.

2026–27 Budget Estimates

Supplementary Brief: SB26-000013

Title: Children's Access to the NDIS and Support in Early Childhood

Witness: Amity Durham, Deputy Chief Executive Officer,
Children, Specialised Services and Scheme Interfaces

Talking Points

Children in the NDIS

- The NDIA acknowledges the early years in a child's development are important for ensuring all children, and especially those with developmental delay or disability reach their full potential.
- The NDIS provides early intervention support for children younger than 9 through a specialised pathway which provides supports aimed at building child and family capacity to enable the best possible start in life. The underlying goal of early intervention is to reduce the need for supports over time and improve outcomes for children and their families.
- In addition to funded supports for children who meet access for the Scheme, Early Childhood Partners in the Community can provide early connections support for children with disability younger than 9, and for children younger than 6 experiencing developmental concerns, without needing to apply for access to the NDIS.
- More children are entering the Scheme than was originally projected. Children younger than 15 accounted for over two thirds (67%) of new participants entering the Scheme as at 31 March 2026.
- Around half of all new Scheme entrants (52%) are children younger than 9; with 93% accessing the Scheme for developmental delay, global developmental delay or autism. More than half the children with developmental delay and global developmental delay continue in the Scheme after being diagnosed with autism spectrum disorder.

Reforming the pathway for children in the NDIS

- Children with permanent and significant disability will continue to be supported through the NDIS. Children who are already on the Scheme will continue to receive supports, subject to usual arrangements, including eligibility reassessments.
- The NDIA is designing a new pathway for the Scheme to deliver better outcomes and evidence-based supports for children younger than 9 years old through New Framework Planning and in response to the Independent Review of the NDIS (NDIS Review).
- An investment of \$4.527 million over 2 years was announced in December 2024 for the NDIA to reform the NDIS pathway to better support children with developmental delay and disability. This funding is enabling design of the New Framework Planning pathway for children, and engagement with parents and carers of young children with lived experience of the NDIS, the broader disability community and advice from sector experts.
- The NDIA is working closely with the Department of Health, Disability and Ageing (DHDA) and states and territories to ensure Scheme reforms for children, including Rule changes and the transition to New Framework Planning, are sequenced in a way that minimises the impact on children and families, and complements the Thriving Kids program.

Key headline facts and figures

As at 31 March 2026:

- The NDIS supports 774,456 participants. Of these, 21.6% or 167,787 are children younger than 9.
- A further 22,128 children accessed early connections throughout the quarter ending 31 March 2026.
- 97% of children younger than 9 who sought access to the Scheme were deemed eligible.
- Around half of new scheme entrants (52%) are children younger than 9, with 93% entering the Scheme with developmental delay (4,638 children), global developmental delay (1,506 children) or autism (2,860 children) during Quarter 3 2025–26.
- In March 2026 there were 67,071 children younger than 9 in the NDIS with developmental delay, 18,755 with global developmental delay and 63,674 with a primary disability of autism.
- The NDIS supports 338,099 participants who have autism – this is 44% of all participants. Participants aged younger than 9 make up 19% (63,674) of all participants with autism.
- The NDIS supports 10,080 participants with ADHD. For 1,090 participants, ADHD is a primary disability. For 8,990 participants, ADHD is a non-primary disability. 7,160 (71%) of all participants with ADHD are aged 18 or younger. 845 (8%) of all participants with ADHD are aged 8 or younger.
- Average annualised committed supports for children younger than 9 were \$27,800 and average payments were \$19,000.
- Average annualised committed supports for a child younger than 9 with autism were \$29,300 and average payments were \$22,500.
- The utilisation of committed supports as at 31 March 2026 for participants younger than 9 was 65%.
- Children younger than 9 formed the highest percentage of participants (22%) (167,787 children) compared to other age groups.

Background

Mid-Year Economic and Fiscal Outlook (MYEFO) funding

- In 2024–25 MYEFO, \$4.5 million across 2 years was provided to the NDIA to design and consult on an early intervention pathway for children in the NDIS under 9. This funding commenced 1 July 2025. The funding comprised 10 Average Staffing Levels (ASL) positions over 2 years, as well as \$500k in 2025–26 and \$500k in 2026–27 to engage experts/consultants.
- In 2023–24 MYEFO, \$3.6 million over two years was provided to the NDIA to support work to design and consult on a system of best practice early childhood supports outside of the NDIS and develop definitions of ‘substantial developmental delay’ and ‘likely to benefit’.
- The MYEFO funding has been invested in employing staff with expertise in policy, reform and service design as well as support for co-design and consultation. This funding has supported:
 - The development of early concepts for a new children’s pathway and an initial ‘end-to end’ early intervention pathway design.
 - The establishment of the Children’s Expert Advisory Group (CEAG) in July 2024 with 12 meetings held as at 31 March 2026, as well as dedicated workshops with the group on substantial developmental delay and likely to benefit, co-design, children’s pathway design and navigators.
 - The stand-up of a parent and carer group (20 parents and carers) to provide lived experience input into the design including 13 meetings and surveys in 2025.
 - Co-design activities with around 80 parents and carers that have led to developing early concepts for the new children’s pathway and ensures that lived experience voices are at the heart of design.
 - Significant internal consultation to develop early concepts for the new design, including a multi-disciplinary team bringing together various staff from across the NDIA with expertise including in operations.
 - Engagement on early design concepts with states and territories, NDIA Independent Advisory Council’s Children, Young People and Families Reference Group, the NDIA’s Autism Advisory Group and the NDIA’s Disability Representative and Carer Organisations Forum.

- This funding will continue to support design of the NDIS pathway for children, codesign and consultation and engagement with the disability sector. This includes pathway design that accommodates specific cohorts such as First Nations children and children with specific needs who are currently supported through specialised pathways, such as hearing. The funding will also support the design of new access arrangements and the approach to support needs assessment for children through the pathway and market analysis to inform market design for the provision of best practice, evidence based early intervention supports across the ecosystem (NDIS and Thriving Kids).

Early childhood partners

- Children younger than 9 are supported by an early childhood partner (excluding children living in remote or very remote locations). Early childhood partners provide early connections (such as linkages with mainstream and community supports or early supports services).
- Early childhood partners are the main contact for families and engage in information gathering to determine the best way to support children and families. Information gathering may inform Scheme access decisions, as well as decisions relating to NDIS plan funding.
- When a child meets access to the Scheme, a plan delegate from the dedicated National Early Childhood Branch will review the available information to determine reasonable and necessary supports for the child. They will have a conversation with the family to explain their child's NDIS plan funding and how this has been determined.
- As at 31 March 2026, the National Early Childhood delegate branch within the NDIA had a total of 590 Full-Time Equivalent (FTE) staff.
- Once the plan delegate approves the NDIS plan, the early childhood partner will support the family to implement their plan and provide regular check-ins.
- Early childhood partners who are well established in communities and have experience in working with families, deliver the NDIA's early childhood approach, including:
 - Information for families
 - Connection to mainstream and community supports and services
 - Provision of Early Supports for children younger than 6 with developmental concerns
 - Assistance to request access to the NDIS where appropriate.
- Current early childhood partner agreements are in place until 30 June 2027. No decision has been made on services after this date. Future services will be considered in the context of the Thriving Kids reform agenda and are subject to decisions of government.

Plan and eligibility reassessments

- Under current legislative provisions, a plan reassessment can be initiated by the Agency either at the end of the current plan or at a specified time; or a participant can initiate a reassessment if their circumstances have changed and the current plan no longer meets their needs.
- During the plan reassessment process, a planner may vary the current plan or approve a new plan depending on the participant's needs. While the timeframe for a plan reassessment is based on the individual's circumstances, plans will be reassessed at least every 5 years.
- The number of completed plan reassessments for all participants has stabilised (48,281 for the December 2025 quarter and 47,081 for the March 2026 quarter). Prior to this, the number of plan reassessments were decreasing up to December 2023 due to the plan continuation approach and then started to increase in volume up to September 2024 due to more requests from participants for a reassessment of their plan (59,714 for the December 2024 quarter and 54,408 for the March 2025 quarter).
- As a result of plan reassessments, 35.5% of all participant plans (33.1% for children aged 0-8 years) had a reduction in plan budgets as at 31 March 2026.
- 64.2% of all participants had an increase in plans (66.3% for children aged 0-8 years) and 0.3% remained unchanged (0.56% for children aged 0-8 years) as at 31 March 2026.
- Early intervention supports such as capacity building supports are a key pillar of the NDIS and provide an early investment to increase participant (or family) independence and reduce reliance on NDIS funding over time. For children, it is generally expected that plan values reduce in line with improved outcomes.
- The Agency may check a participant's eligibility if evidence suggests they may no longer be eligible for the Scheme and may not meet the residence, disability or early intervention requirements. For children who met access to the Scheme under the developmental delay provisions (which requires a child to be under the age of 6 to meet the requirements), their eligibility will be checked when they turn 6, to ascertain whether the child needs to remain on the Scheme under the disability or early intervention requirements.

2026–27 Budget Estimates

Supplementary Brief: SB26-000014

Title: Justice Interface

Witness: Amity Durham, Deputy Chief Executive Officer,
Children, Specialised Services and Scheme Interfaces

Talking Points

Justice Interface

- Every Australian, regardless of their criminal history, is entitled to access government services, including the NDIS if they meet the age, residency and disability requirements.
- State and territory justice systems are responsible for all criminal matters, including imposing conditions on individuals who may be a risk to themselves or others while in the community. These conditions are issued by the courts.
- The NDIS is not responsible for managing community corrections or supervising participants who are on community-based orders. The justice system provides specialised forensic oversight and risk assessments for participants transitioning to the community and ensures they comply with orders.
- The NDIA is responsible for ensuring reasonable and necessary disability supports are funded and available to support a participant's successful transition back to the community.
- The NDIA's justice service offer includes a national Justice Planning Team (JPT) and a national Justice Liaison Team (JLT).
- The JPT provides specialised planning support to eligible participants interfacing with the justice system, to ensure they can access the disability supports they need, if required while in custody and when transitioning to the community.

- Justice planners provide a specialised service under a caseload management approach to support participants in custodial settings or residing in the community who continue to interface with justice.
- Justice Liaison Officers (JLOs) are the primary point of contact for NDIS within the justice system, working alongside state and territory government justice services, to support existing and prospective participants in adult, youth, and forensic settings.
- JLOs work offsite at some correctional facilities on a regular basis (weekly/fortnightly/monthly) and establish engagement with new stakeholders according to their needs.
- The JPT and JLOs, in collaboration with stakeholders, support successful transition for participants from a custodial environment, ensuring that participants have access to the reasonable and necessary disability specific supports they require.
- The Justice Advisory Panel (Panel) is an expert advisory group who examine policy and systemic issues between state and federal governments at the justice interface. The Panel does not make decisions about participants, prospective participants and NDIS plans. Eligibility, planning and funded support decisions remain with NDIA delegates, with assistance from expert internal advisors.

High Risk and Forensic Participants

- An individual may be considered '**high risk**' if that individual (regardless of age) has been charged with or convicted of an offence, or detailed under the relevant state or territory legislation or provisions that include or relate to:
 - Serious, dangerous or high-risk offences
 - Death, risk of death, serious harm or violence, including sexual violence
 - Other high risk, dangerous or serious offences including interference with justice, serious property damage or terrorism equivalents.
- **Forensic participants** are identified as being subject to a lawful forensic order after being assessed as unfit to plead, unfit to stand trial or 'mentally incompetent', as per the relevant state and territory legislation.

- When the NDIA is aware a participant is currently under a state or territory high-risk or forensic lawful order:
 - An alert is placed on the participant's NDIS record
 - The participant is supported by a JLO and justice planner.
- Justice planners and JLOs proactively engage with participants, guardians and key stakeholders to ensure reasonable and necessary supports and support coordination are funded and in place prior to release, enabling a well-supported transition from custodial or forensic settings into the community and effective engagement with the NDIS and related supports.

Key headline facts and figures

As at 31 March 2026:

- Nationally, the JLT supports over **5,400** current and prospective participants in custodial or forensic settings.
- Nationally, the JPT supports **2,874** participants. Of these:
 - **290** are classified as forensic participants
 - **210** participants are classified as high-risk offenders.
- No participants in the high-risk or forensic cohorts are currently self-managing their NDIS plans.
- The NDIA's Justice Teams have a total of **151** staff. Of these:
 - **49** are JLOs
 - **68** are specialised justice planners.

Background

The plan management type for justice participant plans

- In October 2024 section 44 of the *National Disability Insurance Scheme Act 2013* (NDIS Act) introduced new provisions that prohibit participants and plan nominees from self-managing a plan if they have been convicted of an offence in Australia punishable by imprisonment for 2 years or more, or involves fraud or dishonestly (relevant offence).
- The NDIA is taking steps to ensure greater plan oversight by directly managing participants' NDIS plans, requiring the use of registered NDIS providers.
- The NDIA continues to work with states and territories on information sharing mechanisms related to these plan management controls. This includes work to develop an understanding of the relevant offences in each jurisdiction and how this information can be shared in a timely, secure, and legally compliant manner.

High-risk and forensic participants at 31 March 2026

State and territories	Identified forensic participants	Identified high-risk participants
Australian Capital Territory	9	
New South Wales	87	41
Northern Territory	15	11
Queensland	11	49
South Australia	74	35
Tasmania	7	2
Victoria	63	51
Western Australia	24	21
Total	290	210

Data sharing arrangements

- Following a section 55 notice to produce information sent to all state and territory agencies in June 2024, all jurisdictions except Western Australia provided data on NDIS participants who were, or had recently been, held in custodial settings for 12 months or more.
- The data was used to cross-check against NDIA data to identify prospective and current participants who had involvement with the justice system and who presented a material risk to the community.
- The NDIA continues to negotiate data sharing arrangements with states and territories to facilitate ongoing, secure and legal sharing of information relating to participants, or prospective participants, engaged with the justice system.

Justice Advisory Panel

- The Justice Advisory Panel commenced in September 2024 and has held 10 bi-monthly meetings to date. The Panel tenure will be completed in August 2026, where it is anticipated advice about interface improvement opportunities will be provided to the Agency.

Participants in Custody

- Participants with a justice interface often require coordinated, cross-system support to transition safely from custodial or forensic settings into the community. This may involve the NDIS, justice, health and mental health services, housing, and other mainstream systems.
- Clear delineation of responsibilities ensures participants receive appropriate, continuous support.

Funding Responsibilities

Category	Description	Examples
What the NDIS funds	In line with s10 of the NDIS Act and Schedule 1, Item 3, the NDIS funds time-limited disability-related supports that prepare for and enable a safe transition to the community. Supports must relate to functional impairment and must not	Capacity Building – Support Coordination / Specialist Support Coordination Purpose: Link participants to appropriate supports and coordinate complex systems (housing, health, community supports) Capacity Building – Peer support and Capability Development Purpose: Build rapport with disability

Category	Description	Examples
	duplicate justice system responsibilities.	providers pre-release to ensure a coordinated and smooth transition post release. Capacity Building – Allied Health Assessments (disability-related only) Purpose: Inform evidence-based planning aligned to functional need This could include: Functional Capacity Assessment (FCA), Positive Behaviour Support Plan (PBSP), Functional Behaviour Assessment (FBA).
What the NDIS does not fund	Supports that are the responsibility of justice or health and mental health systems, or relate to day-to-day care, supervision, risk management, or justice decision-making (Schedule 2, Item 21 – Justice).	• Daily care and supervision in custody • Clinical services in secure forensic settings • Offence-related programs Compliance monitoring (e.g. parole conditions) • Pre-sentence assessments Secure accommodation for community protection
What the NDIS may fund (discretionary)	Limited, short-term and transition-specific supports directly related to a participant's disability that are necessary to enable safe transition. Considered case-by-case and must not duplicate justice responsibilities.	• Short-term intensive transition supports – this may be applicable to participants that have leave of absence and are building capability within the community prior to release. The NDIS may fund a Disability Support Worker to work alongside Justice to support the participant with day release to ensure a smooth transition to a disability support model.

Example in Practice

- A participant with intellectual disability is preparing for release without established mainstream and community supports.
- While in custody, the justice system provides all daily care, supervision, and clinical services.
- The NDIS may fund:
 - Support coordination to establish mainstream services and connect to disability supports providers
 - Pre-release engagement with identified Disability Support Provider
 - Allied health assessments to inform disability support needs.
- These supports are disability-related, and transition-focused, and do not duplicate justice system functions.
- Public safety responsibilities primarily sit with justice, corrections, police and other s/t agencies. The NDIS funds disability supports; it does not replace those broader community safety functions.

2026–27 Budget Estimates

Supplementary Brief: SB26-000015

Title: Hospital Discharge

Witness: Amity Durham Deputy Chief Executive Officer,
Children, Specialised Services and Scheme Interfaces

Talking Points

- The NDIA prioritises the safe and timely discharge of NDIS participants from hospitals.
- Since the start of 2025, the Agency has stabilised the timeframe between average days an NDIS participant becomes medically ready for discharge and reported discharge.
- In February 2026, the average timeframe from medically ready for discharge to discharge was 16 days with a median of zero days (excluding long-term mental health patients).
- This represents 55% of participants being discharged on the day they are medically ready and 60% of participants being discharged within 24 hours of being medically ready. The remaining 40% typically experience delays due to the complexity in their circumstances.
- A Hospital Discharge Operational Plan was fully implemented in 2022 driving improved hospital discharge performance. A further operational plan has been co-developed with states and territories to maintain momentum and was jointly agreed by the NDIA and state and territory health officials in November 2025.
- The NDIA has established a National Working Group (working group) with state and territory health officials to develop the new operational plan and improve the hospital discharge pathway. The working group meets quarterly and has met during 2026 in February and May 2026.

- One focus of the working group is to streamline the way hospitals provide clinical information and evidence for NDIS planning. Effective discharge planning is reliant on health leads from the hospitals supplying accurate and complete evidence in a timely manner. This work is focused on ensuring hospitals have clear and consistent requirements to reduce delays caused by additional information requests.

Key headline facts and figures

- Improvements delivered by the NDIA over the past 2 years have resulted in significant reductions in the average and median number of days between NDIS participants being medically ready for discharge and their actual discharge date.
- The average number of days between a NDIS participant being medically ready for discharge and being discharged was 16 days in February 2026.
- As at 28 February 2026, the NDIA contacted 97% of participants within 4 days of being notified of their hospitalisation.
- In 2025, the NDIA supported 14,483 participants to safely discharge from hospital. In 2026, (as at 28 February) the NDIA has supported 1,547 participants to safely discharge from hospital.
- Since January 2025, the timeframe between medically ready for discharge and reported discharge was consistently between 15 to 18 days, compared to 23 days in December 2024.

Hospital admissions

- The NDIA is aware of participants being admitted to hospital for non-medical reasons, mainly through provider relinquishment or due to a breakdown in relationships with informal supports.
- The NDIA's Hospital Interface and diversion teams work closely with health departments and hospitals to divert NDIS participants from hospital prior to, or when, they present to the emergency department through an established escalation process.

- The NDIA has seen a consistent positive downward trend in hospital interface escalations since they peaked in October 2025 at 125 referrals down to 83 in February 2026. Of the 83 referrals, 76 resulted in successful diversion from hospital admission.

Background

- The NDIA has successfully implemented all initiatives under the initial Hospital Discharge Operational Plan, as presented to Disability Reform Ministerial Council (DRMC) in July 2022, including:
 - Strengthened connections and continuous engagement with hospitals with the hospital liaison officer (HLO) network, and through discussions with senior executives.
 - Approving medium term accommodation for participants with delays impacting their access to disability-related supports.
 - Streamlining planning via a specialised planning pathway for participants in hospital.
- As at 28 February 2026, the NDIA has over 207 specialised staff, including 87 planners and 94 HLOs, working together with hospital leads to discharge participants from hospital when they are medically ready. These staff have delegation and decision-making authority to approve plans at a local level.
 - HLOs work with hospital staff to ensure the NDIS has the necessary information for discharge planning. The team of specialised hospital discharge planners prioritise participants' plans in hospitals to help them discharge in a safe and timely way.
- The NDIA provides regular hospital discharge outcome data to disability ministers through the DRMC and direct to jurisdictions outside of the DRMC cadence. The NDIA is also providing more detailed data, including hospital-level data, to states and territories on end-to-end timeframes for NDIS participants. The timeframes reported to states and territories include timeframes for notification or provision of health information to support discharge.
- Since November 2024, the NDIA has worked with health officials to revise hospital discharge and reporting metrics, focusing on enhancing information sharing to resolve issues and providing appropriate support to participants. The group has agreed to the introduction of additional performance reporting to disability ministers to improve visibility of the time taken along the pathway and dependencies to achieving timely hospital discharge.
 - At the 7 November 2025 DRMC meeting, disability ministers were provided with an overview of work underway to support safe and timely hospital discharge of NDIS participants and agreed to continue working on revised performance indicators. The NDIA will return to the DRMC with revised performance metrics in mid 2026.

- The NDIA and health officials have also established quarterly executive meetings to progress and monitor initiatives, barriers to timely discharge, and discussions to revise reporting metrics.

Hospital Discharge Figures

- There has been recent media commentary regarding NDIS participants occupying beds in hospitals despite being medically ready to discharge.
- The number of participants in the hospital discharge pathway in the last 12 months has ranged between 2,797-3,066 (all admission types). In February 2026, the number recorded as medically ready nationally was 853 with the highest number of medically ready in the 12-month period being 1,027 in April 2025. This figure is significantly lower than what is often reported in the media.
- This is partly due to discrepancies in reporting methodology. The NDIA only records the number of participants referred to the pathway and relies on information from health to make any changes to funding in a participant's NDIS plan.
- Approximately, 30-35% of referrals to the pathway are for new participants where the NDIA works with health to gather information and build the participant's first NDIS plan.
- The NDIA is working closely with state and territory health teams to encourage early notification to the NDIA and streamlining the receipt of information to support with testing eligibility and to support plan funding decisions.

2026–27 Budget Estimates

Supplementary Brief: SB26-000016

Title: Palliative Care

Witness: Amity Durham, Deputy Chief Executive Officer,
Children, Specialised Services and Scheme Interfaces

Talking Points

- The NDIA appreciates this is a very complex and sensitive matter, and we are committed to working with participants and their representatives through a person-centred and participant focused approach to the NDIS and palliative care matters.
- It is important governments work together to meet the needs of people with disability who also require support from palliative care systems.
- The NDIA continues to see people applying for the NDIS whose primary need is palliative supports resulting from a life-limiting condition, terminal illness or chronic disease.
- On 3 April 2024, the NDIA implemented a priority pathway for people with a terminal illness and disability not currently receiving NDIS support to rapidly test their eligibility. Measures include escalation management, improved decision-making timeframes and the removal of barriers and delays to accessing disability supports if required.
- As part of the priority pathway, the NDIA aims to make a decision within 5 business days of receiving a complete application, on whether a person with a terminal illness is eligible to access the NDIS for disability supports.
- If someone with terminal illness and disability meets access to the NDIS, the NDIA aims to approve their first plan within 30 calendar days of becoming a participant.
- The NDIS funds disability related supports, including where a person has a terminal illness and disability. The NDIS does not fund supports that are more appropriately provided by another support system.

- The provision of palliative care supports for people with life-limiting conditions continues to be the responsibility of state and territory health and community systems.

Key headline facts and figures

- The expected average annualised plan cost of participants with a terminal illness supported by the pathway since its commencement in April 2024 is estimated to be approximately \$220,000.
- There has been a steady increase in people meeting access to the pathway since its commencement.
- From 1 January to 31 March 2026, an average of 94 people per month approached the NDIA to test their eligibility for access to the NDIS and disclosed terminal illness as their primary disability.
- The pathway has supported 1,915 unique applicants in total since commencement in April 2024, of which:
 - 326 applicants have approached the pathway more than once, and
 - 1,548 have met NDIS access.
- As at 31 March 2026, the Aged Care and Hospital Interface Branch is supporting 567 NDIS participants in the priority pathway.
- The remaining participants who have met access to the Scheme via the pathway are either deceased or no longer have active interface with the palliative health care system.

Background

- The NDIA has not changed its guidance to funding reasonable and necessary supports for NDIS participants. Decisions continue to be made in line with the *National Disability Insurance Scheme Act 2013*, the NDIS Rules and Operational Guidelines.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000034

Title: Fuel Supply

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- The NDIA is closely monitoring the fuel supply chain impacts on disability services, and is taking action to prepare in accordance with the Australian Government's National Fuel Security Plan (the Plan).
- Australia is currently operating at Level 2 of the Plan ("Keep Australia Moving") and the NDIA is actively planning for potential escalation to Levels 3 or 4, should National Cabinet decide to escalate.
- The NDIA is working closely with the Department of Health, Disability and Ageing (DHDA) to ensure that appropriate policy interventions are identified and available in the event that additional government action is required to ensure the continuity of critical supports.
- As of 8 May 2026, the NDIA has not made any changes to participant budgets or travel-related support pricing.
- Questions on fuel supply policy, or on the operation of the National Fuel Security Plan, should be referred to the Department of Climate Change, Energy, the Environment and Water and to the Department of the Prime Minister and Cabinet, respectively.

Headline facts and figures

- Over 290,000 NDIS participants received one or more **critical supports** in the last 12 months. Of these 5,900 participants reside in remote and very remote regions.
- Almost 138,000 service providers delivered critical supports in the last 12 months, including over 3,700 providers supporting remote and very remote regions.
- Between 1 April 2026 and 1 May 2026, the Agency's National Contact Centre received 24 calls relating to fuel supply concerns.

Background

National Fuel Security Plan summary:

- The National Fuel Security Plan (external) was endorsed by National Cabinet on 31 March 2026.
- The Plan has four levels – Level 1 being the lowest and Level 4 requiring the strongest action:
 - Level 1: Plan and prepare
 - Level 2: Keep Australia moving
 - Level 3: Take targeted action
 - Level 4: Protect critical services for all Australians.
- The current setting is Level 2 of the Plan, with Whole-of-Government contingency planning underway for a potential escalation in level.
- The Australian Government is working with overseas suppliers, other nations and industry to secure additional fuel supplies.
- The 'Every Little Bit Helps' national advertising campaign (external) is supporting the delivery of the Plan to ensure a consistent national response and encouraging people to reduce fuel use through voluntary and practical actions (external).

Governance and Coordination

- The NDIA is part of Whole of Australian Government briefings, including forums coordinated by the National Emergency Management Agency (NEMA) and Prime Minister and Cabinet, and other key government stakeholders.
- The Agency is well positioned to respond to a change in Government posture and remains aligned with other frontline service agencies (e.g. Services Australia).

Impact on Services and Participants

- NDIA contingency planning prioritises participant safety and the continuity of critical supports, with particular consideration given to remote and very remote participants who may experience greater fuel related impacts to services due to travel distances and provider access.
- Following on from the recent DSOG discussion regarding increasing fuel prices and supply, please note there is currently no change to National Disability Insurance Scheme (NDIS) pricing or support budgets.
- As relevant decisions are made by Government the NDIA will implement those decisions as appropriate.
- While fuel is not an NDIS support, NDIS funding may cover some travel costs where this is reasonable and needed to deliver a support. NDIS providers can continue to claim for non-labour travel costs in accordance with the [NDIS Pricing Arrangements and Price Limits \(external\)](#).
- If a participant's situation changes significantly due to increased fuel prices and they are at risk without immediate support, they should contact the NDIA to discuss their current situation.
- Modelling is underway to identify key rural and remote regions that may come under increased pressure from fuel supply shortage due to thin markets and/or significant geographical coverage.

Engagement with Providers and the Market

- The NDIA continues to contribute to sector wide engagement on fuel supply issues being led by DHDA. In addition, the NDIA continues to engage with the provider sector on fuel supply issues through the NDIA's usual engagement channels and forums.
- While the NDIA is aware providers were initially concerned with access to fuel in regional areas, as the Government has worked to address fuel concerns, these have reduced. At present, the NDIA is not aware of any gaps in disability support due to fuel supply. This is consistent with broader Government advice that Australia is not facing an imminent fuel supply issue.
- There have been no systemic provider issues identified to date, albeit providers are actively seeking to recoup increased fuel expenditure via State and Federal Government lobbying, Fair Work Commission submission, and cost pass-through mechanisms to participants. DHDA and the Agency are closely monitoring the latter.
- As of 8 May 2026, the NDIA has not made any changes to participant budgets or travel related support pricing. As relevant decisions are made by the Australian Government the NDIA will implement those decisions as appropriate, including assessing the impact and the support needed for participants and providers.

- NDIS providers can continue to claim for non-labour travel costs. The NDIA considers that up to \$0.99 per kilometre is reasonable to claim for non-labour travel costs. A higher amount may be claimed if it reflects the provider's actual costs and the participant agrees in advance before the service is delivered.
- If a participant's situation changes significantly due to increased fuel prices and they are at risk without immediate support, they should contact the NDIA to discuss their current situation.

Workforce and Operational Arrangements

- The Agency is aligned with Australian Government directions on minimising travel.
- Attendance at Whole-of-Government forums is ensuring consistency and alignment in the Agency's response preparedness and communications.
- The NDIA's existing flexible work arrangements align with contingencies to minimise impacts on staff should the Plan move to Level 3 or 4.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000035

Title: Agency Operating Budget

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- The NDIA's estimated operating expenditure budget for 2026–27 is \$2,767.1 million, marginally down from an estimated actual spend for 2025–26 of \$2,860.6 million.
- The 2026–27 Budget reinforces and builds on previously announced reforms by providing additional detail and targeted investment to support implementation. It sits alongside broader reforms across health, disability and aged care.
- It confirms the Australian Government's focus on improving service quality, making eligibility clearer, reducing fraud and exploitation, and slowing cost growth.
- The Budget also sets a more sustainable growth path for the NDIS, so it can continue to support participants into the future.
- The Budget provides \$1.7 billion over 5 years (and \$110.9 million per year ongoing), across a number of agencies, from 2025–2026 to implement a range of measures to secure the NDIS for future generations. This includes:
 - \$436.0 million in 2026–2027 for the NDIA to continue to support NDIS participants. This funding will enable the Agency to maintain continuity in critical frontline services and operations.
 - \$358.5 million over 5 years from 2025–26 to develop and implement a new enrolment and digital payment system to improve payment integrity and reduce fraud and non-compliant payments.
 - \$280.1 million over 5 years from 2025–26 (and \$53.0 million per year ongoing) to continue the Fraud Fusion Taskforce and invest in the NDIA to continue to detect and respond to fraud and non-compliant payments

- \$270.1 million in 2026–27 to prepare for the roll-out and implementation of new framework planning from 1 April 2027
- \$182.6 million over 4 years from 2026–27 (and \$46.1 million per year ongoing) to introduce mandatory registration of high-risk NDIS providers, with costs partially offset by \$27.1 million over three years from 2027–28 (and \$5.4 million per year ongoing) in receipts from expanded cost recovery arrangements
- \$49.4 million over 4 years from 2026–27 to commission plan management and support coordination services for NDIS participants to reduce fraud and improve service quality for participants
- \$48.4 million over 3 years from 2025–26 to the Department of Health, Disability and Ageing and the NDIA to support consultation on and implementation of NDIS reforms
- \$21.7 million over 4 years from 2026–27 (and \$5.8 million ongoing) to support the NDIS Quality and Safeguard Commission's (NDIS Commission) regulatory and compliance activities, with costs to be met from within the existing resourcing of the NDIS Commission
- \$15.9 million over 4 years from 2026–27 (and \$6.0 million ongoing) for Disability Representative Organisations to support community engagement on the design and implementation of reforms, with costs to be partially met from within the existing resources of the NDIA and the Department of Health, Disability and Ageing
- \$14.7 million over two years from 2026–27 to extend supplementary funding for the NDIS Appeals program
- \$3.3 million in 2026–27 to establish a Technical Advisory Group to provide expertise on the design of functional capacity assessment tools and instruments.
- The NDIA's estimated Average Staffing Level for 2026–27 is 9,840, down from the 2025–26 forecast ASL of 10,509.

- Changes to the Agency's scheme expenses budget (Program 1.1), and operating expenses budget (Program 1.2) between the 2025–26 Portfolio Budget Statements and the 2026–27 Portfolio Budget Statements are outlined in the tables below:

Agency budget movements - PBS 2025–26 to PBS 2026–27

Program 1.1: Reasonable and Necessary Supports for Participants¹

Expenses (\$ million)	2025–26	2026–27	2027–28	2028–29	2029–30
Start: 2025–26 PBS	49,828.9	53,654.2	57,635.8	62,242.0	67,159.1
Measures			(0.1)	(0.1)	(0.1)
Permanent Migration Program planning levels	**	**2	(0.1)	(0.1)	(0.1)
Other variations	875.9	304.3	490.7	218.5	110.1
Scheme Estimates Update	875.9	304.3	490.7	218.5	110.1
Equals: 2025–26 PAES	50,704.8	53,958.4	58,126.4	62,460.5	67,269.1
Measures	-	(2,026.0)	(7,477.7)	(11,903.4)	(16,664.8)
Securing the NDIS for future generations	-	(2,026.0)	(7,477.7)	(11,903.4)	(16,664.8)
Other variations	598.0	1,771.4	3,139.0	3,716.5	4,176.9
Scheme Estimates Update	598.0	1,771.4	3,139.0	3,716.5	4,176.9
Final position: 2026–27 PBS	51,302.8	53,703.8	53,787.7	54,273.6	54,781.2

¹ Note: Differences may occur due to rounding.

² Not zero but rounds to zero.

Program 1.2: Agency Costs and General Supports³

Expenses (\$ million)	2025–26	2026–27	2027–28	2028–29	2029–30
Start: 2025–26 PBS	2,856.7	1,766.7	1,644.7	1,669.5	1,813.5
Measures	(37.8)	(88.5)	(82.8)	(77.0)	43.8
Savings from External Labour	(61.0)	(131.4)	(124.7)	(119.8)	-
Strengthening the NDIS – Crackdown on Fraud	23.2	43.0	41.9	42.9	43.8
Permanent Migration Program planning levels	**4	**	**	**	**
Other variations	32.6	239.5	(29.3)	(30.9)	(29.6)
Revision to interest earnings (internally funded)	32.6	241.0	(32.2)	(32.4)	(32.8)
Economic parameter updates		(1.5)	2.9	1.5	3.2
Equals: 2025–26 PAES	2,851.6	1,917.7	1,532.5	1,561.7	1,827.7
Measures	-	740.8	42.7.	31.2	(115.1)
Reducing Spending on Consultants, Contractors and Labour Hire, and Non-wages Expenses	-	(7.1)	(6.1)	(6.7)	(153.4)
Securing the NDIS for future generations ⁵	-	747.9	48.8	37.9	38.3
Other variations	9.0	108.6	34.9	35.1	35.0
Revision to interest earnings (internally funded)	9.0	105.7	30.8	30.9	31.7
Economic parameter updates	-	2.9	4.1	4.2	3.3
Final Position: 2026–27 PBS	2,860.6	2,767.1	1,610.1	1,628.0	1,747.6

** Not zero but rounds to zero

³ Note: Differences may occur due to rounding.

⁴ ** Not zero but rounds to zero.

- Not included in the above table are the financial impacts of the announcement of \$358.5 million (\$354.0 for the NDIA) over 5 years from 2025–26 to develop and implement a new enrolment and digital payment system to improve payment integrity and reduce fraud and non-compliant payments. Funding for this measure is held in the Contingency Reserve.

⁵ * Includes \$436m to address agency cliff in 2026–27 only. Also includes impact of transfer of 6.5m in 2028–29 and \$6.6m in 2029–30 of Voices for People with Disability to DHDA in those years.

2026–27 Budget Estimates

Hot Issues Brief: SB26-000036

Title: NDIA Workforce

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- The NDIA is delivering a significant and complex reform agenda on behalf of the Australian Government, and our workforce is key to delivering on that.
- We will align our workforce to support reform delivery while prioritising services and support for participants, within the approved resourcing and staffing levels.
- It's important to remember the reforms will occur over some years, and we are focused on ensuring we have the right skills in the right areas at the right times, rather than sheer numbers.
- The Agency's headline approved staffing level will reduce slightly from 2025–26 levels. Additional support will also be provided by some contractor positions to help deliver time-limited projects.
- The Agency will manage this carefully, ensuring critical and frontline roles continue to be filled while managing our staffing level down to the approved level.
- In the first instance, our plan is to manage the reduction in our staffing levels through natural attrition and disciplined approaches to recruitment, and we are not planning for any involuntary reductions.
- One of the measures announced in the budget is expected to require additional staffing, so our final workforce numbers are likely to be closer to current staffing levels than the figures announced so far. We'll share further details when we can.
- The budget announcements mean we will have significant work ahead of us, and the Agency will evolve over coming months to make sure we are operating efficiently and effectively within our budget.

- As changes are considered, we are committed to genuine consultation with staff and the union on any proposed changes to roles and teams before decisions are made.

Key headline facts and figures

- Our total workforce increased 1.2% (232) to Q3 FY 2025–26 to 18,861 however the Agency reached its peak workforce size in its history in Q2 FY 2025–26. Current workforce as at 31 March 2026:
 - APS Workforce increased 4.0% (423 headcount) to 11,024
 - Labour Hire (LH) decreased -14.8% (-208) to 1,193
 - System Access/Consultants increased 37% (105) to 389
 - Partners in the Community decreased -3.1% (-144) to 4,569
 - Partner Contact Centre increased 2.3% (36) to 1,571
 - Service Delivery Partners (Navigators) increased 40% (4) to 14.
- Our Labour Hire (LH) workforce decreased -4.9% (-61) in Q3 2025–26. This is the result of:
 - 109 LH new commencements
 - 46 LH transitioning to APS
 - 134 LH separations (exc. transitions to APS).
- Our Agency Average Staffing Level (ASL):
 - Target for 2025–26 is 10,052 as per Portfolio Budget Statement (PBS)
 - As at 31 March 2026 (2025–26 YTD) is 10,513
 - ASL projection is 10,520 (2025–26).

Workforce composition trends

The Agency has experienced significant movements in Labour Hire (LH) and APS staffing since 2024 (introduction of Strategic Commissioning Framework (SCF) was March 2024).

Date	Labour Hire (HC)	APS (FTE)
March 2024	1,826	6,927
July 2024	2,003	7,843
July 2025	1,345	10,345
March 2026	1,193	10,673

Key insights:

- LH numbers have steadily declined -38.8% (-757 since July 2024)
- APS numbers have increased 40.5% (+3,178 since July 2024).

Progress against the Strategic Commissioning Framework (SCF)

SCF conversion commitments -

- **Total planned conversions:** 1,376 (2024–26)
 - 2024/25: 1,032
 - 2025/26: 64.

Additional ASL allocated for SCF: 1,406.

Adjustment to 2025–26 targets:

The 2025–26 conversion target was reduced from **344 to 64**, reflecting operational requirements, workforce demand and available budget.

Conversions delivered

- **2024–25:** 1,034 LH roles converted to APS.
- Despite the volume of conversions, LH levels **did not reduce proportionately** due to:
 - NPP-funded roles requiring LH engagement
 - Continued business needs for short-term, specialist, or surge capacity.

Primary reasons cited for 2024/25 LH engagements:

- Urgent temporary backfill - **48%**
- Period of high demand - **24%**
- Recruitment unsuccessful - **9%**
- Temporary need for specialised skills - **19%**.

NPP funded roles requiring LH engagements

- Over FY 2025–26 to date, 227 (40.5%) of LH engagements were directly attributable to NPP funded roles
- Over this same period, 170 (24.5%) of LH workers attributed to NPP funded roles have ceased.

Background

- The Australian Government has invested significantly in the NDIA's workforce since financial year the 2022-23 financial year. This investment has seen 117% growth of the Agency workforce which has now hit its peak workforce size. This investment is scaled in line with Scheme growth to deliver the NDIS effectively and implement the Government's reforms. This investment has allowed the Agency to:
 - Meet rising demand for services to NDIS participants,
 - Reduce growth of the NDIS, down from 22% actual growth in 2022 to an expected 8% in 2026–27,
 - Create fairer and simpler pathways for NDIS participants to access the disability supports they need, including through the introduction of support needs assessments in 2026,
 - Improve the integrity of the Scheme through improvements to Scheme systems, payment checks and establishing the Fraud Fusion Taskforce, and
 - Build the capability of the Australian Public Service (APS) by reducing reliance on contractors and consultants, in line with the Government's previous election commitments.
- The Agency's workforce grew to support initiatives including the Reform for Outcomes program, the implementation of New Planning Framework and continued work on the Crackdown on Fraud program.
- The Agency NDIA has strengthened the staffing levels of our frontline staff workforce and employed over 800 specialists working to combat fraud and boost integrity.
- 23% of NDIA staff identify as having an ongoing disability.
- In the 2024–2025, operating expenses as a percentage of NDIS participant expenditure were 5.5%, well below the Productivity Commission's suggested range of 7% to 10%.
- The reliance on labour hire workers has reduced at the NDIA since the establishment of the Strategic Commissioning Framework. When the Framework was announced in March 2024, labour hire made up 20% of the NDIA's total workforce, as of 31 March 2026 this has reduced to 9.8% of the NDIA's total workforce, demonstrating the NDIA's commitment to investing in a skilled and secure APS workforce. The ongoing workforce increased from 76% of the total workforce in March 2024 to 87% in March 2026.
- For 2024–25, the NDIA set a target under the Strategic Commissioning Framework to convert 1,032 labour hire roles to APS roles and achieved this by converting 1,034 roles over this period.

- In September 2025, in line with Australian Public Service Commission (APSC) reporting requirements, the NDIA confirmed a target for the 2025–26 financial year to convert a further 64 labour hire roles to APS roles, which has been achieved
- As of 31 March 2025, the NDIA had 1,193 labour hire workers, with 459 of these in time limited roles aligned to defined budget measures.
- The NDIA considers work undertaken by the National Contact Centre (NCC) to be core work. Consistent with the Strategic Commissioning Framework's principles, the NDIA uses external workforces to supplement Australian Public Service (APS) resources for core work, to address demand fluctuations, to manage demand for services, and to administer programs within the Agency's budget allocation.
- As part of the Agency's commitment to building internal capability and responding to increased workloads, 528 staff in the NCC are now APS employees. The NDIA prioritises APS staff for complex and delegate frontline roles, ensuring NDIS participant outcomes remain the focus and services remain efficient and high quality.
- As required by the Strategic Commissioning Framework, the NDIA will continue to consider how to reduce reliance on external workforces within resource allocation and while managing surges in demand.
- The pay and conditions of outsourced NCC workers is managed by their respective employer.
- Further detail on the National Contact Centre is covered in the NCC Estimates Brief.

2026–27 Budget Estimates

Supplementary Brief: SB26-000037

Title: Staff Safety and Security

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- The NDIA is committed to ensuring we keep staff and visitors to our sites safe. No role or interaction should place NDIA staff at risk, and the Agency continues to strengthen both immediate controls and longer-term capability to protect its workforce.
- NDIA staff may withdraw from any interaction where they feel unsafe, and the NDIA strongly encourages any staff who are feeling unsafe to report their experience to their manager or through other available reporting channels.
- The NDIA proactively commissioned former Victoria Police Commissioner, Graham Ashton to conduct a review (Ashton Review) into our safety and security system to ensure that the Agency's safety and security environment keeps staff safe and secure.
- The NDIA has acted early and decisively, implementing immediate, impactful safety measures and established interim measures to treat the risks and recommendations flagged by the Ashton Review.
- The NDIA now has a multiyear program underway to enhance the safety and security of our sites, as part of a program of reform focused on physical security, psychosocial safety and workforce wellbeing.
- The 36 recommendations translate to 49 deliverables/initiatives. Of these, 33 have been completed or are currently rolling out, and a further 16 will be fully completed by February 2027.

- The NDIA prioritised the highest impact activities including:
 - reinforcing reasonable behaviour with signage and authority to disengage,
 - mental health capability to support identifying and responding to issues,
 - embedded clinicians to support high risk roles and teams,
 - deployment of security guards, and
 - range of physical measures including update design standards to reflect recommendations applying to all new leases and refurbishments and rolling program to refit existing sites.

Key headline facts and figures

- 1,819 Work Health and Safety (WHS) incidents were reported in the 12-month period to 31 March 2026 – a 92% increase from the previous 12-month period to 31 March 2025 (948 incidents). This increase occurred alongside a 4.6% (540) increase in the NDIA workforce and a 10% (71,323) increase in participants in the Scheme in the 12-month period to 31 March 2026.
- In response to the significant rise in work health and safety incidents, particularly those driven by participant aggression and mental stress, the Agency has prioritised immediate and practical actions to manage risks.
- Aggression (participant, support coordinators, providers, family/carers) towards staff (161% increase from 1 April 2023 to 31 March 2024) and mental stress (8% increase from 1 April 2023 to 31 March 2024) were the leading causes, reflecting external risks. There have been no serious physical injuries reported related to aggression.
- As at 31 March 2026, 3,550 staff have completed or enrolled to complete mental health first aid and/or compassionate foundations training. These initiatives strengthen the Agency's capacity to recognise early signs of mental health challenges and respond effectively, ensuring staff are equipped with practical skills to support colleagues and maintain a safe, resilient workplace.

- The Agency has deployed security officers to all NDIA sites, enhanced physical protections for both staff and participants and enabled quicker responses in high-risk situations, as well as stronger follow-ups when incidents occur.
- Over the next 12 months, the Agency will deliver key enhancements, including establishing an internal clinical workforce to strengthen staff wellbeing, piloting a social work model of care to support participants with elevated behaviours, and implementing site managers to provide local governance and improve safety oversight.

Background

What has been done:

- The NDIA has updated design standards in line with the Ashton Review and is rapidly applying these to all new leases and refurbishments, with a rolling program underway to retrofit existing sites.
 - This work consists of upgrades to reception counters, respectful behaviour signage, rear egress doors for staff in all participant conversation rooms, privacy film for reception areas, more robust front of house furniture and a review of CCTV cameras.
 - The Agency has recently undertaken refurbishment works in 8 locations with another 12 under construction or in design.
- The Agency will continue to work closely with co-located entities, particularly Services Australia, to ensure alignment and safety in all locations we operate.

Key Measures Delivered:

- Site and digital safety has been improved through installation of reasonable behaviour signage in all NDIA standalone sites, and respectful behaviour messaging embedded in the My NDIS App and Participant Portal.
- The NDIA has introduced practical measures to keep staff safe and well, including enhanced training to manage psychosocial incidents and respond to aggression, immediate psychological safety supports, strengthened processes for quarantining harmful online material, and personal security assistance including help with protection orders where needed.

- The NDIA has strengthened the ability to recognise and respond to psychosocial risks and increased support for staff in high-risk roles. Key measures include 24-hour clinical referral for staff in distress, embedded clinical support for high-risk teams, expanded Employee Assistance Program (EAP) access to include labour hire workers, ongoing mental health and suicide prevention training, and specialised WHS and psychosocial training for leaders. These initiatives ensure staff have timely access to expert support when needed, and a trauma-informed approach, reinforcing safety and wellbeing across the Agency.

Key upcoming deliverables in 2026:

- Improving Lone Worker Protection capability by providing staff working off-site with safety devices, improved risk assessment processes and rapid assistance options.
- Establishing an internal clinical workforce to proactively support staff, embed clinical expertise and continuing to build a psychologically safe workplace for staff and participants.
- Implementing a Social Work Model of care to support participants experiencing elevated behaviours or emotional distress.
- These initiatives will be completed by November 2026 to embed a consistent, enterprise-wide approach to strengthen staff and agency safety, wellbeing and security.

2026–27 Budget Estimates

Supplementary Brief: SB26-000038

Title: Investments in NDIA

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- Since the October 2022 Budget, the Australian Government has provided investments totalling approximately \$4.2 billion in funding to the NDIA to support scheme reform and improvements over the 5 years between 2022–23 and 2026–27.
- The investment is helping us to improve the experience of participants, uplift our capability, capacity, systems and processes, and continue supporting participants by delivering the Scheme, as well as to provide ongoing APS employment for staff.
- This includes:
 - **\$204 million** over 5 years to 2026–27, in the October 2022 Budget, with **380 ASL each year** to improve the delivery of services to participants and acquit the Government's commitment to increase ongoing APS employment at the Agency.
 - **\$58 million** over 4 years to 2025–26 in the October 2022 Budget, with **96 ASL each year**, to establish a cross-agency Fraud Fusion Taskforce.
 - **\$391 million** over 2 years to 2023–24 in the October 2022 Budget, to the NDIA to enhance its capability and introduce an expert pathway for resolving disputes about NDIA decisions.
 - More than **\$720 million** in the May 2023–24 Budget with **722 ASL for 2023–24** to improve the capability and capacity of our frontline workforce, improve planning practices, implement a new lifetime planning approach, improve the way we provide home and living supports, and improve our compliance monitoring and fraud prevention.

- **\$492 million** in the 2023–24 Mid-Year Economic and Fiscal Outlook (MYEFO) with **943 ASL for 2024–25** to continue supporting participants.
- **\$78 million** in the 2023–24 Additional Estimates **with 211 additional ASL in 2024–25** to improve participant experience, to design and consult on better home and living options, to improve early childhood supports and to repair the market.
- **\$82 million** in the 2024–25 Budget with **51 additional ASL in 2024–25** as initial funding for the Crack Down on Fraud (CDoF) Program.
- **\$15 million** in the 2024–25 Budget with **12 additional ASL in 2025–26** to design a new pathway for people with a disability navigate services.
- **\$894 million** in the 2024–25 MYEFO with **1,054 ASL in 2025–26** to ensure the NDIA can continue to support participants, to boost fraud detecting IT systems, and to begin implementation of the new planning framework.
- **\$17 million** in the 2025–26 Budget with **106 ASL in 2025–26** (along with \$151 million retained in the Contingency Reserve and subsequently released to the NDIA in the context of the 2025–26 MYEFO) to further safeguard the integrity of the NDIS.
- **\$436 million** in the 2026–27 Budget with **2,557 ASL for 2026–27** to continue supporting participants.
- **\$263 million** in the 2026–27 Budget with **824 ASL for 2026–27** to prepare for the roll-out and implementation of new framework planning from 1 April 2027.
- **\$143 million** in the 2026–27 Budget with **202 ASL for 2026–27** to continue the Fraud Fusion Taskforce and invest in the NDIA to continue to detect and respond to fraud and non-compliant payments.
- **\$41 million** in the 2026–27 Budget to commission plan management and support coordination services for NDIS participants to reduce fraud and improve service quality for participants.
- **\$351 million** in the 2026–27 Budget to develop and implement a new enrolment and digital payment system to improve payment integrity and reduce fraud and non-compliant payments. Partial funding for this measure will be held in the Contingency Reserve.

Background

The following table provides a summary of the financial and ASL information, as they relate to the NDIA only, of the key investments announced by the Government since the March 2022–23 Budget.

Item	Date	Announcement	2022–23	2023–24	2024–25	2025–26	2026–27	Total
1.	25-Oct-22 (October 2022–23 Budget)	Investing in Frontline Service Delivery - NDIA Component <u>(Budget Paper No. 2 (External) - page 81)</u>						
		The Government will provide \$500.2 million over 4 years from 2022–23 (and \$145.6 million per year ongoing) for an additional 1,080 staff to improve the delivery of Government services, including 380 staff for the NDIA to improve front-line service delivery.						
		Note: This initiative flows from a broader 2022 election commitment regarding the APS, involving the NDIA, as well as Services Australia and the Department of Veterans' Affairs.						
			2022–23	2023–24	2024–25	2025–26	2026–27	Total
		\$ million	22.401	45.006	45.280	45.521	45.764	203.972
		ASL	190	380	380	380	380	
<u>Achievements:</u> This funding acquitted an election commitment to increase ongoing APS employment at the NDIA. Since then, the Agency's workforce has significantly expanded to ensure that the Agency can continue to provide services as the number of participants on the Scheme expands.								

2.	25-Oct-22 (October 2022–23 Budget)	Fraud Fusion Taskforce (<u>Budget Paper No. 2</u> (External) - page 9) The Government will provide \$126.3 million over 4 years from 2022–23 to establish a cross-agency Fraud Fusion Taskforce to address fraud and serious non-compliance in the NDIS. The Taskforce will comprise a range of Commonwealth agencies delivering government programs, with the support of law enforcement, regulatory and intelligence agencies. The Fraud Fusion Taskforce replaces the existing NDIS Fraud Taskforce. <table><tr><th></th><th>2022–23</th><th>2023–24</th><th>2024–25</th><th>2025–26</th><th>2026–27</th><th>Total</th></tr><tr><td>\$m</td><td>10.436</td><td>15.898</td><td>15.957</td><td>16.073</td><td>-</td><td>58.364</td></tr><tr><td>ASL</td><td>64</td><td>96</td><td>96</td><td>96</td><td>-</td><td></td></tr></table> <u>Achievements:</u> As at March 2026, more than 660 investigations were underway across taskforce agencies and 2,500 incorrect or non-compliant providers disrupted.		2022–23	2023–24	2024–25	2025–26	2026–27	Total	\$m	10.436	15.898	15.957	16.073	-	58.364	ASL	64	96	96	96	-	
	2022–23	2023–24	2024–25	2025–26	2026–27	Total																	
\$m	10.436	15.898	15.957	16.073	-	58.364																	
ASL	64	96	96	96	-																		
3.	25-Oct-22 (October 2022–23 Budget)	Plan for the NDIS (<u>Budget Paper No. 2</u> (External) - page 184) The Government will provide \$437.4 million over 3 years from 2022–23 to support people with disability and their families. Funding includes: \$385.0 million in 2023–24 in additional funding to the NDIA for operational funding to support NDIS participants. \$12.4 million in 2022–23 to introduce an expert review pathway to resolve disputes arising from NDIA decisions, reduce the number of appeals to the AAT, and provide better and earlier outcomes for NDIS participants. Note: This initiative flows from a broader 2022 election commitment regarding funding of the NDIA and addresses the first funding cliff. This measure has been superseded by measures 5 and 6 in this table (“Support for the NDIS” and “NDIS Reform”).																					

			2022–23	2023–24	2024–25	2025–26	2026–27	Total
		\$m	5.800	385.000	-	-	-	390.800
		\$m - Agency Cliff component	-	385.000	-	-	-	385.000
		ASL	-	See note	-	-	-	
		Note: This measure notionally contained 1,118 ASL in 2023–24, however that was provided to maintain existing operations.						
		<u>Achievements:</u> - This funding allowed the Agency to maintain continuity of critical frontline services and agency operations for 2023–24. Since then, the Agency's workforce has significantly expanded to ensure that the Agency can continue to provide services as the number of participants on the Scheme expands. - The NDIA made significant improvements in reducing the backlog in the then Administrative Appeals Tribunal through dispute resolution initiatives including Early Assessment, intensive case reviews as well as the Independent Expert Review (IER) trial which commenced in October 2022 and concluded in September 2023. The Evaluation Report for the IER trial was published in November 2023. Learnings from the IER trial informed current and future initiatives, including the reform of the now Administrative Review Tribunal.						
4.	9-May-23 (2023–24 Budget)	Improving the Effectiveness and Sustainability of the NDIS ⁽¹⁾ (<u>Budget Paper No. 2: Budget Measures</u> (External) - page 197) A sustainable growth trajectory for the NDIS is critical for its long-term viability, ensuring it can continue to provide life-changing outcomes for future generations of Australians with disability. As a first step towards ensuring a sustainable NDIS, the Government will provide \$732.9 million over 4 years from 2023–24 to support participant outcomes and the effective and sustainable operation of the Scheme.						
			2022–23	2023–24	2024–25	2025–26	2026–27	Total

Initial announcement (2023–24 Budget)- \$m	-	278.155	180.552	133.400	132.276	724.383
Reprofiling of expenditure (2024–25 Budget) - \$m		(146.070)	65.940	40.070	40.060	-
Transfer from Department of Social Services (2024–25 MYEFO/PAES)			0.512	0.512		1.024
Total - \$m	-	132.085	247.004	173.982	172.336	725.407
ASL	-	710	1,274	920	906	-

This funding was for 8 initiatives [per SQ24-000275]:

- Capability - \$429.5 million.
- Better planning - \$73.4 million.
- Flexibility - \$63.8 million.
- Independent living - \$56.4 million.
- Evidence-based supports - \$29.3 million.
- Blended payment trial - \$24.6 million. This includes an additional \$1 million originally provided to the Department of Social Services in the 2023–24 Budget but transferred to the NDIA in the 2024–25 MYEFO.
- First Nations and remote communities - \$7.6 million.
- Fraud (payment integrity workforce and CDoF business case) - \$48.3 million.

Workforce capability (Service Delivery)

This funding supports work at the agency to improve consistency of planning decisions and to improve workforce capacity and capability by providing better training, tools, and system improvements for planners and partners.

Achievements:

- Created better tools for staff including self-service centralised disability knowledge resource guide.
- Established a nationally consistent and effective performance framework for Service Delivery staff in February 2025. It provides clear guidelines on performance measurement and introduces a consistent, comprehensive approach to performance assessment and communication.
- Developing a Capability Framework that defines the skills, tools and mindsets required to deliver high quality support for participants and drive structural alignment through consistent application of the framework across the frontline.
- Developing new training for frontline staff.

Better planning (Service Delivery)

This funding allows us to provide better support to participants to manage their plan within budget and have long term plans that are flexible and sustainable, with a focus on creating high-quality plans that produce better outcomes for participants.

Achievements:

- Established a dedicated Budget Management Support (BMS) team to pre-emptively contact participants deemed to be at high risk of overspending their funding, with the aim of reducing intraplan inflation risks. They:
 - Deliver proactive education, ongoing monitoring and a supportive approach to assist participants to spend within the intention of their plan
 - Undertake regular ongoing monitoring calls with participants and intermediaries.

- As at 31 March, there is a 92% positive rate of sentiment following calls from participants which exceeds the target rate of 80%.

Flexibility (Children, Specialised Services and Scheme Interfaces)

This funding allows us to provide better support to participants to access mainstream and community supports and to develop clearer guidance on eligibility criteria for transition planning; and hire additional access staff to complete the backlog of eligibility reassessments and review evidence requirements for access.

Achievements:

- Rolled out a supported access process on 30 October 2023. As part of this change, people and families requiring support now first connect with their Partner in the Community (PiTC) to learn of the community and mainstream supports available, and, if required, for support to apply to the NDIS.
- Materials including eligibility communications, letters and fact sheets have been co-designed and updated to reflect stakeholder feedback.
- The Eligibility Reassessment (ER) team completed on average 1,543 ER cases per week. The average number of revocations per week was 747 (48%).
- As at 30 September 2025, there were 179 FTE dedicated to access decisions. Access queues are now back to business-as-usual levels and most new applications are being progressed within the 21-day legislative timeframe.

Independent living

This funding is helping us to strengthen supported independent living decisions and to better align with the best interests of participants and their families in relation to safety, quality and outcomes.

Achievements:

- Updated guidance on NDIS website clarifying the evidence needed to support a home and living request, including:
 - daily support and housing needs
 - functional capacity and the impact on daily life
 - other home and living options explored.
- New team of specialist planners making home and living decisions with improved practice guidance and extensive training.
- Home and living delegates complete the planning meeting with participants who request supported independent living (SIL) for the first time or changes to their SIL budgets, before confirming a new plan. This helps ensure that a participant understands the decision made and is supported to implement their plan.
- Positive feedback from participants in relation to engaging with a home and living (H&L) delegate for planning, because the delegate is able to support the participant to understand the decision and explore next steps or alternatives.

Evidence-based supports:

Funding has been allocated to support the quality and effectiveness of services provided to participants, through improving provider oversight and enabling participants to engage evidence-based supports. Funding is supporting the development of a refreshed Market Stewardship approach, development of preferred provider approaches and activities to improve the role of intermediaries.

Achievements:

- The NDIA is collaborating with Department of Health, Disability and Ageing (DHDA) and NDIS Quality and Safeguards Commission to develop the Market Stewardship Framework which aims to strengthen the Australian Government's role in shaping, supporting and monitoring NDIS markets and provide clearer and more active stewardship roles across Government to improve the provider market and drive innovation.

- As part of this project NDIA have also:
 - developed a suite of market lever guidance material including market lever snapshots and information guidance, and
 - published a conflict of interest position statement and resources on the NDIS website in November 2024 to assist participants and providers to manage actual, potential or perceived conflicts of interest with a provider.
- Explored the use of provider lists to assist participants to make informed choices for supports. The aim is to enhance participant access to improved service standards and more transparent product information.

Blended payment trial:

Funding to NDIA supports the co-design and implementation of a 2-year trial of blended payments.

Achievements:

- Co-design activities were completed between August – October 2024. Co-design included engagement with 24 people with lived experience, 12 Disability Representative and Carer Organisations, 8 peak bodies and 31 providers.
- A grant process was delivered to engage providers as part of co-design activities with grants up to \$11,000 allocated to the 31 providers to help inform the blended payments model design.

First Nations and remote communities:

In April 2024 the NDIA established the First Nations Group to drive change in how we support First Nations people with disability. The Group's priorities include the facilitation of First Nations-led systems reform, organisational and scheme cultural safety change, workforce growth and retention, and First Nations approaches to improved scheme access and equitable outcomes for First Nations Peoples with disability.

Achievements:

- Since inception, we have developed and launched the NDIS First Nations Strategy 2025–2030, which sets out a clear vision and priorities to improve outcomes for First Nations participants, families, and communities.
- The Strategy was developed with our First Nations Strategy working group and it is built directly from the views of over 650 Indigenous organisations and communities who contributed to the Disability Royal Commission and Independent review. It responds to the findings Review of the NDIS and our National Agreement on Closing the Gap (CTG).
- First Nations participant satisfaction has increased to **68.8% in 2025**, up from **60.9% in 2024** and now higher than the non-First Nations rate. **Access rates for First Nations** applicants are **also higher** than for non-First Nations people, and **payments for supports have increased by 15% over the past year**.

Fraud:

[Media Release - Albanese Government invests in fighting fraud against NDIS | Department of Social Services Ministers \(external\)](#)

The 2023–24 Budget provided for a further \$48.3 million investment in the NDIA to crack down on fraud and non-compliance in the Scheme. This measure is funding an increase in the number of NDIA staff responding to non-compliance and fraud, and the development of a business case for ICT systems to detect, prevent and reduce non-compliant payments.

An additional \$17.1 million was announced in the 2025–26 Budget to maintain the NDIA's payment integrity workforce. The NDIA processes over 600,000 claims per day, this investment will maintain the NDIA's capability to detect, respond to and reduce fraud and non-compliant payments.

Achievements:

In Q2 2025, Pre-Payment Integrity teams have reviewed over 20,000 high risk claims totalling more than \$65.2 million. Of those high risks claims, 59% were rejected due to fraud or non-compliance. Payment integrity functions are imperative to ensuring NDIS funding is provided to compliant and high-quality services.

5.

13-Dec-23
(2023–24
MYEFO)

Support for the NDIS (Mid-Year Economic and Fiscal Outlook 2023–24 (external) - page 292)

The Government will provide additional funding of \$511.3 million over two years from 2023–24 to support the effective and sustainable operation of the NDIS and improve participant outcomes.

Funding includes:

\$492.2 million in 2024–25 to ensure the (NDIA can continue to support NDIS participants

\$19.1 million over two years from 2023–24 for the Department of Social Services to support the development and implementation of responses to the recommendations of the Independent NDIS Review.

The Government will also transfer \$6.7 million over four years from 2023–24 from the NDIA to the Australian Competition and Consumer Commission to support reforms to prohibit unreasonable price differentiation impacting NDIS participants.

	2022–23	2023–24	2024–25	2025–26	2026–27	Total
\$m	-	(1.417)	489.774	(1.795)	(1.008)	485.554
\$m - Agency Cliff component	-	-	492.246	-	-	492.246
ASL	-	(7)	(11) (see note)	(9)	(5)	

Note: This measure notionally contained 935 ASL in 2024-25, however that was provided to maintain existing operations.

Achievements: This funding allowed the Agency to maintain continuity of critical frontline services and agency operations for 2024–25.

6.

30-Jan-24

(Media release, reflected in 2023–24 PAES)

Building a strong ecosystem of disability supports (Building a strong ecosystem of disability supports | Department of Social Services Ministers (external))

The Government will also make investments to meet our goals of improving the participant experience and securing the future of the NDIS in line with the Review.

The new work will focus on a number of initial, immediate steps to take action in response to the historic Review, as part of our commitment to restoring the NDIS to its original vision.

	2022–23	2023–24	2024–25	2025–26	2026–27	Total
\$m	-	25.672	52.683	-	-	78.355
ASL	-	105	211	-	-	

Achievements:

Early Childhood

Part of this funding allowed us to undertake design and consultation work on a system of best practice early childhood supports outside of the NDIS and develop definitions of ‘substantial developmental delay’ and ‘likely to benefit.’

Achievements:

The NDIA has used this funding to employ staff with expertise in policy, reform and service design, as well as support for codesign and consultation.

The NDIA established the Children’s Expert Advisory Group in July 2024 with 12 meetings held as at 26 February 2026, as well as dedicated workshops with the Group on substantial developmental delay and likely to benefit.

7.	18-Feb-24 (Media release, reflected in 2024–25 Budget)	Reinforcing a sustainable, honest, and trustworthy NDIS (Reinforcing a sustainable, honest, and trustworthy NDIS NDIS (external))																										
The Australian Government will provide initial funding of \$83.9 million to strengthen the NDIS and make sure every dollar is going to participants who need it.																												
The new funding will go towards the Crack Down on Fraud (CDoF) program and will boost fraud-detecting IT systems to better protect monies allocated to Australians living with disability who are on the NDIS.																												
Note: This represents the first tranche of funding for the Crack Down on Fraud (CDoF) program. Details were also included in the “Getting the NDIS Back on Track” announcement.																												
<table><tr><th></th><th>2022–23</th><th>2023–24</th><th>2024–25</th><th>2025–26</th><th>2026–27</th><th>Total</th></tr><tr><td>\$m</td><td>-</td><td>23.778</td><td>58.355</td><td>-</td><td>-</td><td>82.133</td></tr><tr><td>ASL</td><td>-</td><td>31</td><td>51</td><td>-</td><td>-</td><td></td></tr></table>								2022–23	2023–24	2024–25	2025–26	2026–27	Total	\$m	-	23.778	58.355	-	-	82.133	ASL	-	31	51	-	-		
		2022–23	2023–24	2024–25	2025–26	2026–27	Total																					
\$m	-	23.778	58.355	-	-	82.133																						
ASL	-	31	51	-	-																							
Achievements: The CDoF program continued to deliver a range of benefits that improve our core systems, technologies and capabilities that strengthen prevention, detection, security and response.																												

8.

Getting the NDIS back on track (Budget Paper No.2 (external) - page 172)

The government is committed to improving outcomes for NDIS participants and ensuring every dollar of NDIS funding goes to those who need it most.

The government will provide \$468.7 million over 5 years from 2023_24 (and \$37.9 million per year ongoing) to support people with disability and get the NDIS back on track.

Navigator service design

The measure includes the provision to the NDIA of \$15.0 million over 2024–25 and 2025-26 for initial design and consultation work on reforms to help participants and people with disability navigate services, and \$0.5 million in 2024–25 to undertake initial work to reform NDIS pricing arrangements, including reviewing existing pricing approaches and developing a pricing data strategy.

	2022–23	2023–24	2024–25	2025–26	2026–27	Total
\$m	-	-	8.035	7.503	-	15.538
ASL	-	-	15	12	-	

Achievements

- The Agency is developing a proposed navigator service, working closely with the support coordination market, partners, providers, participants and the broader disability sector to ensure the approach delivers the best outcomes for NDIS participants.

14-May-24
(2024–25
Budget)

9.

NDIS Reform (Mid-Year Economic and Fiscal Outlook 2024–25 (external) - page 294)

The Government will provide \$1.1 billion over three years from 2024–25 to support the design and implementation of Foundational Supports, further reforms to the NDIS and implementation of the *NDIS Amendment (Getting the NDIS Back on Track No.1) Act 2024* which came into effect on 3 October 2024. Funding includes:

- \$503.5 million in 2025–26 to ensure the NDIA can continue to support NDIS participants
- \$280.0 million in 2025–26 to the NDIA to begin implementation of the new planning framework
- \$110.4 million over two years from 2024–25 to boost fraud detecting information technology systems at the NDIA, to further safeguard the integrity of the NDIS

Note: This represents the second tranche of funding for the Crack Down on Fraud program

- \$4.5 million over two years from 2025–26 to the NDIA to undertake further design and consultation on an early intervention pathway for children in the NDIS.

Note: This initiative superseded two earlier initiatives (described above). This initiative contained the second tranche of funding associated with the Crack Down on Fraud (CDoF) program. This initiative is ongoing. As described in the 2025-26 Budget, the third and final tranche of funding for the CDOF program will be released once this second tranche is completed, targeted for the end of this calendar year.

	2022–23	2023–24	2024–25	2025–26	2026–27	Total
\$m	-	-	61.629	829.675	2.278	893.582
<i>\$m - Agency Cliff component</i>	-	-	-	<i>503.521</i>	-	<i>503.521</i>
ASL	-	-	53	1,054	10	-

Note: This measure also contained a further 935 ASL in 2025–26, however that was provided to maintain existing operations

13-Dec-24
(2024–25
MYEFO)

Achievements

- New Framework Planning to make the Scheme fairer, simpler, and more flexible for participants. This new approach will provide more consistent plans, greater choice and control, and a better participant experience—responding directly to feedback from the disability community and the NDIS Review.
- Key changes include a person-centred assessment process, flexible budgets, and enhanced support to help participants access the right services at the right time.
- At the same time, we are maintaining strong business-as-usual operations and driving sustainability initiatives to ensure the Scheme delivers value for participants and taxpayers.
- These reforms are being co-designed with people with disability, families, and sector representatives, and will be rolled out from mid-2026, with ongoing consultation to ensure they meet diverse needs.

Crack Down on Fraud Tranche 2

- The CDoF program has delivered further improvements to our core systems, technologies and capabilities. These include increased security for users of the my NDIS Mobile app, a new integrity management system and a new customer identity and access management system.

Early Childhood

\$4.5 million over two years from 2025–26 to the NDIA to undertake further design and consultation on an early intervention pathway for children in the NDIS under 9.

Achievements

- The NDIA has used this funding to employ staff with expertise in policy, reform and service design, as well as support for codesign and consultation. The Agency is continuing work on a new children's pathway with co-design activities undertaken with 106 parents and carers who have a child or children in the Scheme younger than 9.

10.

25 March 2025

(2025–26 Budget)

Strengthening the NDIS ⁽²⁾ (Budget Paper No. 2 (External)- page 72)

The Government will provide additional funding of \$175.4 million over four years from 2025–26 (and \$43.8 million per year ongoing) to further safeguard the integrity of the NDIS and support people with disability.

Funding includes:

- \$151.0 million over four years from 2025–26 (and \$43.8 million per year ongoing) to continue enhancements to the NDIA’s fraud detecting information technology systems, with this funding to be held in the Contingency Reserve until the fraud and compliance system enhancements funded in previous economic updates are complete [Note: This represents the third tranche of funding for the Crackdown on Fraud program]
- \$17.1 million in 2025–26 to continue to invest in the NDIA’s ability to detect and respond to fraud and non-compliant payments.

	2022–23	2023–24	2024–25	2025–26	2026–27	Total
Crackdown on Fraud (held in Contingency Reserve)						
\$m				23.242	42.970	66.212¹
ASL				34	61	
Continued investment in ability to detect and respond to fraud and non-compliant payments						
\$m	-	-	-	17.087	-	17.087
ASL	-	-	-	106	-	

Achievements

- In the 2025–26 MYEFO, the Government released to the Agency the money for , following completion of necessary milestones. This was reflected in the 2025–26 Portfolio Additional Estimates.

¹ (not included \$41.903 million provided in 2027–28 and \$42.867 million provided in 2028–29)

11.	12 May 2025 (2026–27 Budget)	Securing the National Disability Insurance Scheme for Future Generations ⁽²⁾ (<u>Budget Paper No. 2 (external)</u> - page 106) • The Government will provide \$1.7 billion over five years from 2025–26 (and \$110.9 million per year ongoing) to support people with disability and to improve the quality of supports delivered through the National Disability Insurance Scheme (NDIS). Funding includes: • \$436.0 million in 2026–27 to ensure the National Disability Insurance Agency (NDIA) can continue to support NDIS participants. • \$358.5 million over five years from 2025–26 to develop and implement a new enrolment and digital payment system to improve payment integrity and reduce fraud and non-compliant payments. Partial funding for this measure will be held in the Contingency Reserve. • \$280.1 million over five years from 2025–26 (and \$53.0 million per year ongoing) to continue the Fraud Fusion Taskforce and invest in the NDIA to continue to detect and respond to fraud and non-compliant payments. • \$270.1 million in 2026–27 to prepare for the roll-out and implementation of new framework planning from 1 April 2027. • \$49.4 million over four years from 2026–27 to commission plan management and support coordination services for NDIS participants to reduce fraud and improve service quality for participants.
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		2025–26	2026–27	2027–28	2028–29	2029–30	Total
	Agency Cliff						
	\$m		436				436
	ASL		2,557				
	Digital Payment System (Partial funding held in the contingency reserve)						
	\$m	-	133.6	129.7	44.3	44.5	351.1
	ASL	-	-	-			
	Fraud Fusion Taskforce						
	\$m	-	17.2	17.5	17.7	17.9	70.3
	ASL	-	96	96	96	96	
	Payment Integrity Workforce						
	\$m	-	17.9	18.2	18.4	18.6	73.1
	ASL	-	106	106	106	106	
	New Framework Planning						
	\$m	-	263				263
	ASL	-	824				

			2025–26	2026–27	2027–28	2028–29	2029–30	Total
		Commissioning of Plan Management and Support Coordination						
		\$m	-	11.5	13.2	8.3	8.4	41.3
		ASL	-					
		Reducing Participant Support Budgets in Old Framework Plans						
		\$m	-	2.2				2.2
		ASL	-					
		Achievements: TBA						

2026–27 Budget Estimates

Supplementary Brief: SB26-000039

Title: Gifts, Benefits and Policy Compliance

Witness: Samuel Porter/Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- NDIA officials must not accept gifts and benefits which might be seen to compromise their integrity.
- We have recently strengthened our Gifts and Benefits Policy.
- The major changes include:
 - Putting in place the general principle that ‘thanks is enough’ and ensuring that staff only accept gifts and benefits by exception.
 - Requiring staff to declare all gifts or benefits within 5 business days of being offered, regardless of their value or if accepted or declined.
 - Reducing the threshold at which approval must be sought before staff accept gifts from \$100 to \$50.
 - Requiring suppliers to maintain a register of gifts they have provided to NDIA for procurements of greater than \$400k (including GST) of ICT and consultancy services.

Key Headline Facts and Figures

Gifts/Benefits Received for 2025–26 as at 31 March 2026

- There were 13 gifts/benefits valued at more than AUD \$50 (including GST) accepted by NDIA officials.
- There were 30 gifts/benefits valued at less than or equal to AUD \$50 (including GST) accepted by NDIA.

Gifts/Benefits Declined for 2025–26 as at 31 March 2026

- There were 32 gifts/benefits valued at more than AUD \$50 (including GST) declined by NDIA officials.
- There were 19 gifts/benefits valued at less than or equal to AUD \$50 (including GST) declined by NDIA officials.

Gifts/Benefits Given for 2025–26 as at 31 March 2026

- One gift/benefit valued at more than AUD \$50 (including GST) was given by NDIA officials.

Background

- Gifts and benefits accepted by all NDIA officials at or over \$50 (including GST) must be approved by the Chief Financial Officer or Chief Executive Officer.
- Gifts valued under AUD \$50 (including GST) must be approved by a Senior Executive Service (SES) Line Manager.
- Gifts and benefits accepted and valued at over \$50 (including GST) are published quarterly on the [NDIA gifts and benefits register | NDIS \(external\)](#).
- Messaging is sent out periodically to staff, reminding them of their obligations in relation to gifts and benefits.

2026–27 Budget Estimates

Supplementary Brief: SB26-000040

Title: Capital Budget and Works

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- As of 31 March 2026, the NDIA operated in 146 properties, consisting of 39 standalone sites and 107 service delivery co-locations with Services Australia and the Australian Taxation Office.
- The 39 standalone sites are further categorised into:
 - 15 service delivery sites
 - 18 regional hubs (a mix of corporate and service delivery), and
 - 6 corporate sites.
- Property operating costs for 2025–26 (excl. capital project costs) totalled \$40.2 million as of 31 March 2026.
- Agency capital works costs for 2025–26 totalled \$50 million as of 31 March 2026.
- These works included completion of refurbishments/fit outs of 8 sites. A further 12 sites are currently in design and/or under construction for refurbishment/fit-out.
- Information and Communications Technology (ICT) capital expenditure totalled \$5.9 million and included the purchase of laptops, docks, monitors and iPhones along with upgrades to video conferencing facilities.

Background

- Following extensive consultation with staff and the Participant Reference Group, the Agency is progressing the implementation of properties in line with the refreshed property design guidelines, which provides the foundation for all future office fit-out works. These updated designs prioritise support for neurodivergent staff and participants, multifunctional workspaces, strengthened security and acoustic treatments, and improved accessibility for all visitors.
- Capital Projects commenced, in progress and/or finalised during 2025–26 as of 31 March 2026 are outlined in the table below:

Capital Works Project Expenditure	2025–26
Adelaide, SA – new site	\$4,410,039
Bankstown, NSW – new site	\$16,082
Cairns, QLD – new site	\$269,151
Chatswood, NSW – site refresh	\$3,465,092
Chermside, QLD – site refresh	\$4,278,297
Dandenong, VIC – new site	\$820,730
Footscray, VIC – new site	\$316,715
Mount Gravatt, QLD – site refresh	\$423,006
Newcastle, NSW – new site	\$678,825
Parramatta, NSW – site refresh	\$3,938,971
Penrith, NSW – site refresh	\$264,935
Robina, QLD – new site	\$2,918,471
Rockingham, WA – site refresh	\$2,305,619
Surry Hills, NSW – new site	\$8,805,808
Surry Hills, Level 9, NSW – new site	\$149,121
Toowoomba, QLD – new site	\$13,520
Townsville, QLD – site refresh	\$5,896,371
Wollongong, NSW – new site	\$292,742
Woodridge, QLD – site refresh	\$2,437,171

Capital Works Project Expenditure	2025–26
Broadmeadows, VIC – site refresh	\$363,266
Locker Project	\$1,040,322
Minor Capital Works Programme	\$958,289
Non-Building Capital Works	\$12,300
Sub Total Property	\$44,074,843
Laptops	\$4,116,417
Docks, Monitors, Site Refreshes	\$785,885
iPhones	\$179,032
Video Conferencing Upgrade Project	\$839,026
Sub Total ICT	\$5,920,360
Total	\$49,995,203

2026–27 Budget Estimates

Supplementary Brief: SB26-000041

Title: External Audit

Witness: Samuel Porter, Deputy Chief Executive Officer,
Enabling Services / Chief Operating Officer

Talking Points

- The National Disability Insurance Agency (NDIA) is committed to addressing the Australian National Audit Office's (ANAO) findings and recommendations.
- The NDIA continues to reduce the volume of open audit findings.
- Fewer new findings are being raised and when findings are raised, they are more frequently of a lower risk rating.

Key headline facts and figures

- As of 30 April 2026, there are 20 open external audit findings:
 - 8 financial statement audit findings (2 findings were closed and one new finding was raised in the 2025–26 interim management letter). Three are awaiting ANAO testing and are expected to be closed at the end of the 2025–26 audit.
 - 3 performance statement audit findings (2 findings were closed and one new finding was raised in the 2025–26 interim management letter).
 - 9 performance audit recommendations.
- In the 12 months to April 2026, the ANAO raised 9 new findings. This compares to 18 in the 12 months to April 2025, and 20 in the 12 months to April 2024.
- In the 12 months to April 2026, no new Category A or Category B findings were raised in the annual audits.

Financial statements audit findings

- The NDIA has reduced the volume of open financial statements audit findings from 17 in 2023–24 to 8 in 2025–26.
- Of those 8, 3 relate to system controls and processes - particularly around monitoring of privileged user access and timely removal when it is no longer required.
- The NDIA has implemented new controls in response, and the ANAO has advised they will test the effectiveness of these controls in the final stages of the 2025–26 financial statement audit.
- The remaining 5 findings have the lowest rating (Category C) and work is in progress to address them.

Performance statements audit findings

- The NDIA has reduced the volume of open findings from 5 in 2023–24 to 3 in 2025–26.
- To acquit the Category A finding on the reliability of performance measure data, the NDIA:
 - Improved systems and processes to report on 18 Participant Service Guarantee (PSG) measures (compared to 10 in 2024–25).
 - Changed performance measures on average payment per participant and Scheme growth rates to use projections from the Annual Financial Sustainability Report.
- The NDIA has one remaining Category A finding relating to the completeness of the performance measures included in the annual performance statements.

Performance Audit - Effectiveness of NDIA Board Governance (June 2025)

- As at 30 April 2026, the NDIA had addressed 2 of the 3 ANAO recommendations.
- In March 2026, the NDIA Board approved amendments to Board charters and processes to management of Board member conflicts of interest, and to encourage constructive challenge of NDIA management on performance results.
- To address the remaining recommendation, the NDIA is commissioning an independent review of its risk management framework, which will include recommendations as to how frequently it should be reviewed in future.

Performance Audit - NDIA's Management of Claimant Compliance with NDIS Claims Requirements (June 2025)

- As at 30 April 2026, the NDIA has taken action to address one of the 4 ANAO recommendations.
 - In March 2026, the NDIA Board approved the NDIA's revised Fraud and Corruption Control Plan and Compliance and Enforcement Framework to address the recommendation that existing artefacts were insufficient.
- Work to address the remaining recommendations is underway, including:
 - Updating fraud risk registers in 2026 to include all known risks and controls.
 - Continuing to revise methodologies for payment assurance testing to provide a more accurate measure of fraud losses.
 - Revising methodologies for reporting on savings from compliance initiatives and providing updates to the Disability Reform Ministers Council.

Performance Audit - Management of Complaints by the NDIA (April 2024)

- One recommendation remains open from this audit.
 - To address it, the NDIA is updating processes to use complaints data and review outcomes to inform continuous improvement of planning processes and practices.

Performance Audit - Effectiveness of NDIA's Management of Assistance with Daily Life Supports (June 2023)

- Three recommendations remain open from this audit.
- To address them, the NDIA is:
 - Working with the NDIS Commission on regulatory measures to better manage provider conflicts of interest.
 - Implementing system controls to restrict and monitor system access where staff have declared a conflict of interest.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000017

Title: Integrity Transformation and Outcomes

Witness: John Dardo Deputy Chief Executive Officer,
Integrity Transformation and Technology Services

Talking Points

- NDIA fraud and integrity activities are focused on increasing safety and outcomes for NDIS participants by improving the integrity of the NDIS - making it easier to get it right and harder to get it wrong.
- All NDIS participants should have a positive experience in the NDIS. This includes protecting their safety and wellbeing. The goal is to safeguard the NDIS and protect participant plans, so the NDIS remains available to support participants when they need it.
- The NDIA Integrity Transformation program leverages the strategic work of the Fraud Fusion Taskforce (FFT) and the system uplifts delivered by the Crack Down on Fraud (CDoF) program to make the NDIS stronger and more sustainable.
- These programs of work continues to improve the ability to detect integrity losses that were previously invisible to the NDIA.

Key headline facts and figures

- On 12 May 2026, the Australian Government announced as part of the 2026–27 Budget, continued investment to improve and uplift NDIS integrity and participant safeguarding. This includes:
 - \$280.1 million over 5 years from 2025–26 (and \$53.0 million per year ongoing) to continue the Fraud Fusion Taskforce and invest in the NDIA to continue to detect and respond to fraud and non-compliant payments.

- \$358.5 million over 5 years from 2025–26 to develop and implement a new enrolment and digital payment system to improve payment integrity and reduce fraud and non-compliant payments.
- This investment builds on previous government funding from 2022 of over \$550 million which resulted in the establishment of the FFT, Tranche 1 of the CDoF program and uplifts to the Payment Integrity program.
- The FFT, CDoF, and Payment Integrity programs continues to improve detection of provider risk. Integrity interventions already implemented are estimated to deliver over \$3.4 billion in benefits between 1 November 2022 to 30 June 2029 (i.e. during the FFT lifetime to the end of forward estimates). These benefits include over \$960 million in savings to the Scheme due to prevented non-compliant payments and a further \$2.5 billion in payments diverted from problematic providers into higher quality spending on genuine disability supports and services.
 - Bans and manual payment reviews (MPRs) implemented to 30 September 2025
 - Expired plans and Short Term Accommodation campaign results implemented to 31 December 2025.
- The FFT has disrupted over 2,500 providers who have submitted incorrect or non-compliant claims to the NDIS. In the 12 months prior to the disruption, these providers had collectively claimed \$1 billion from the NDIS. Since the start of the Scheme, these providers have collectively claimed over \$4.8 billion. Whilst it is not possible to determine the exact proportion of problematic claims, all these funds should have been directed to genuine supports or providers.
- Some of these funds were inappropriately claimed and some funds were associated with the partial delivery of poor-quality services by some of these providers. The historic diversion of these funds from higher quality providers or services to problematic or fraudulent providers increased participant risks and undermined the availability of these funds for genuine services and supports.

- Partnering with other FFT agencies continues to result in increased multi-agency interventions against organised crime syndicates targeting the NDIS. Results as at 31 March 2026 include:
 - Over 660 taskforce investigations across the 25 member agencies
 - Significant growth in NDIA warrant executions on suspected criminals, from a total of 30 in the 4 years from 2018–2021 to 77 in the 2025 calendar year.
- As at 31 March 2026, 34 individuals involved in 21 investigations related to the NDIS were either in the courts or being assessed for criminal prosecution. 15 individuals were before the courts and briefs of evidence were being assessed by the Office of the Commonwealth Director of Public Prosecutions in relation to the other 19 individuals.
- The NDIA received approximately 7,200 tip-offs in the March 2025–26 quarter, compared to approximately 6,600 in the December quarter. The NDIA received over 29,000 tip-offs over the 2024–25 year. This compares to a total of approximately 23,000 received during 2023–24. In the March quarter, over 80% of tip-offs were received through the web form, compared to 73% in the last financial year. The quality of the tip-offs received continues to be high, enabling faster triaging, assessment and escalation.

Benefits realisation

- Implemented NDIS integrity interventions have delivered benefits and savings to the NDIS due to prevented non-compliant payments and payments diverted from problematic providers into higher quality spending on genuine disability supports and services.
- The NDIA has uplifted integrity capability through system, campaign and investigative enhancements, alongside the development of new savings and benefits methodologies.
- The saving and benefit methodology is continually revised, as it measures integrity treatment across both payments, investigation and compliance interventions.

- The NDIA engages regularly with the Department of Finance to share methodologies of calculating savings and benefits. The NDIA also attends the International Public Sector Fraud Forum (IPSFF), inclusive of the IPSFF Senior Leads Forum. The NDIA chairs the IPSFF Data subgroup and is a member of the Evidence and Insights subgroup which is focused on international best practice for savings and benefits.

Fraud Fusion Taskforce

- The Government established the FFT in November 2022 to identify, investigate and prevent fraud within the NDIS and other government payment programs.
- The multi-agency FFT is co-led by NDIA and Services Australia and has grown to include 25 agencies sharing data and working together to identify and prosecute unscrupulous individuals and networks who seek to exploit the NDIS.
- The FFT continues to make significant progress in improving the government's capability to better detect, prevent and respond to fraud against the NDIS. Partnering with other FFT agencies continues to result in increased multi-agency interventions against organised crime syndicates targeting the NDIS.
- A comprehensive integrity campaign detected and reduced the misuse of Short Term Accommodation (STA) NDIS funds for holidays. The campaign engaged over 195 STA providers to ensure appropriate advertising and practices. The NDIA also worked with partner FFT agencies to remove many problematic providers from the NDIS. Combined with the introduction of "Supports that are not NDIS supports" (section 10 of the National Disability Insurance Scheme Act 2013) and improved pre-payment reviews, this campaign has resulted in a 47% reduction in both the number of participants claiming STA and the overall value of STA claims. This compares to annual STA growth rates averaging 30% in prior years. The new STA Operational guideline was released on 20 October 2025.

Crack Down on Fraud

- The CDoF program commenced in February 2024 with an initial \$83.9 million investment for the 2024 calendar year, followed by a November 2024 government announcement of an additional \$110.4 million for 2025 after successful outcomes.
- In the 2025–26 Federal Budget, the government announced additional funding of \$151 million over 4 years from 2025–26 for the existing CDoF program, with ongoing funding of \$43.8 million per year from 2029–30. The government also announced funding of \$17.1 million in 2025–26 to continue investment in the NDIA's ability to detect and respond to fraud and non-compliance.
- The CDoF program has delivered the 33 milestones committed to government in the CDoF business case and has therefore successfully completed the primary scope of the program.
- During the 2-year build phase, the CDoF program delivered significant system uplifts. These uplifts now detect and treat more high-risk claims per day, prior to payment, than were treated annually prior to 2023.

- In March 2026, the NDIA CDoF program underwent an End Stage Gateway Review, conducted by an independent review team, coordinated under the Department of Finance's Assurance Review Framework. The report rated the program as 'green' across all categories, recognising the many improvements the NDIA has made, including stronger identity checks, improved claiming systems and processes, a new integrity management system, and a more accessible NDIS mobile app with enhanced features. It also found that all milestones were completed on time and within budget, while embedding durable integrity controls across core systems and processes.
- In the March 2026 quarter, the integrity program continued to implement measures to address emerging and high-risk integrity issues and sustain the benefits delivered from CDoF phase 1, including:
 - One-time code for providers – from January 2026, NDIA National Contact Centre staff began asking registered providers to confirm a one-time code if their request involves accessing sensitive information.
 - Application programming interface (API) gateway – in January 2026, the NDIA completed migration of the first digital partner to the new NDIA API gateway, which strengthens protections for provider transactions and participant data. It provides greater visibility of how digital partners interact with NDIA systems and greater control over protecting these systems.
- New mobile app - in February and March 2026, the NDIA began to roll out the new mobile phone app across iOS and Android operating systems. The new app is more accessible (including the ability to use the device with one hand) and works more consistently across devices.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000018

Title: Artificial Intelligence

Witness: John Dardo Deputy Chief Executive Officer,
Integrity Transformation and Technology Services

Talking Points

- NDIA delegates remain responsible for all decisions on a participant's NDIS funding using relevant information and evidence in accordance with the *National Disability Insurance Scheme Act 2013* (NDIS Act).
- Artificial Intelligence (AI) does not replace the decision maker around NDIS funding, plan arrangements or eligibility decisions.
- The NDIA is committed to ensuring security, reliability and integrity of its technologies whilst providing a positive experience for staff, participants, and the broader disability community.
- The use of AI and its maturity is evolving, and the NDIA is taking a conservative and measured approach to exploring AI use in a secure, legal and ethical way, aligned to whole-of-government directions.
- The NDIA has implemented strong measures to mitigate AI risks and continues to strengthen treatments to ensure the use of AI aligns with government and community expectations. When used responsibly and ethically, AI gives more capacity to deliver a high performing NDIS that is available for those who need it.
- The NDIA has established a Responsible AI Committee to strengthen governance and oversight of artificial intelligence across the NDIA. The committee's membership and escalation pathways are designed to ensure that higher risk AI use cases are reviewed by staff with suitable seniority and subject matter expertise.

- Supporting this, the NDIA has appointed an AI Accountable Official responsible for implementing AI policy, engaging with whole-of-government AI processes, and notifying the Digital Transformation Agency (DTA) of high-risk AI use cases where required. In addition, the Chief AI Officer is responsible for driving the NDIA's adoption of AI and advocating for strategic change.

Key headline facts and figures

- All sensitive Agency information held by the NDIA is stored securely within the NDIA's secure environment and located within Australia. This is in accordance with the *Privacy Act 1988*, *Archives Act 1983* and applicable whole of government AI, security and protective security requirements.
- AI use is subject to strict human oversight, applying the human-in-the-loop practice to confirm outputs. AI is not used for assessing or making decisions in relation to participant plans.
- NDIA applies compliance controls to AI use, limiting access to approved tools and staff cohorts, blocking 466 external AI websites, and actively monitoring emerging technologies to ensure new AI-enabled products meet policy, governance, and risk mitigation requirements.

Background

- The NDIA, like all Australian Public Service agencies, is committed to improving its service by carefully considering emerging technologies that can deliver better outcomes for participants and staff. This includes exploring the potential of AI in a secure, ethical, and measured way, aligned with whole-of-government directions.
- AI enabled use cases are assessed through risk, privacy, cyber security and assurance processes aligned to whole-of-government guidance, including the Australian Government's Policy for the responsible use of AI in government and the DTA AI Impact Assessment Tool. These processes consider fairness, bias, transparency, privacy, security and human oversight. Monitoring and review activities are undertaken to support the quality and reliability of AI enabled systems.
- In January 2024, the NDIA commenced the DTA-led trial of Microsoft Copilot (Copilot), along with 30 other government agencies. 6 months after commencing the use of Copilot, the NDIA completed an evaluation of the AI technology. Benefits were demonstrated by users reporting enhanced productivity, improved accessibility, data driven decision making and streamlined administrative activities.

- As at 7 May 2026, 258 users have a Copilot licence and are participating in the trial. To ensure secure and ethical use of the technology, mandatory training is required to be completed before a licence is granted.
- The NDIA uses machine learning, which has been used for several years within the Typical Support Package (TSP) to provide a starting point for the development of an initial draft budget for new participants. Planner delegates then make further adjustments to that draft budget based on the individual participant's circumstances. Since the inception of the NDIS only a very small proportion of plans (around 1%) were set at the exact level of the TSP.
- Like many organisations, the NDIA uses AI across a range of contexts to improve back-office efficiency and support assistive technologies. This includes capabilities such as:
 - **Generative AI:** Is used in controlled and approved ways to help reduce administrative tasks within our general office productivity suite e.g. Copilot. The NDIA does not use generative AI or large language models to develop draft plans for NDIS participants. The NDIA will continue to explore opportunities to improve efficiency and consistency through appropriately governed AI-enabled tools, with human oversight and decision-making remaining central.
 - **Large language models and agentic AI:** Which are being adopted in some technology engineering teams to support activities such as code development, debugging, and testing.
 - **Sentiment analysis:** Which is incorporated into our contact centre telephony system to help assess how effectively calls are handled by operators.
 - **Embedded accessibility AI technologies** include tools such as Adobe Sensei to support design teams in generating images, and text-to-speech functionality on the NDIS website (via ReadSpeaker).
 - **Optical Character Recognition (OCR) and machine learning:** Which are used to convert scanned documents, PDFs, and images into text, enabling more efficient review by staff.

2026–27 Budget Estimates

Supplementary Brief: SB26-000019

Title: Administrative Review Tribunal - Caseloads

Witness: Matthew Swainson, Deputy Chief Executive Officer,
Legal, Reviews, Actuarial and Data

Talking Points

- The National Disability Insurance Agency (NDIA) is committed to supporting a fair, timely and person-centred experience for National Disability Insurance Scheme (NDIS) participants in the Administrative Review Tribunal (ART). The NDIA takes its responsibilities to act as a model litigant very seriously.
- The NDIA works with NDIS participants and their representatives in a participant-centred and trauma-informed way, by attempting to resolve matters early wherever possible.
- The NDIA is working collaboratively with the ART to address and respond to the increase in case volumes. Immediate activities underway include:
 - Prioritising cases that can be resolved quickly through an early assessment approach.
 - Undertaking intensive and regular case reviews to progress and resolve matters where possible.
 - Reviewing internal processes to improve efficiency and drive better outcomes for participants, including reviewing performance data to identify best practice and opportunities for continuous improvement.
 - Identifying different resolution pathways to improve timelines including matters that are suitable to being heard ‘on the papers’.
 - Supporting the ART to operationalise a lodgement directions process aimed at narrowing issues or impairments in dispute. This process will reduce the time that a matter is with the ART.
 - Exploring alternative short-term surge resourcing options to support the increase in applications.

Key headline facts and figures

- In 2025–26 Quarter 3 (Q3):
 - There were 2,294 new ART cases in the March 2026 quarter, relating to 2,271 participants.
 - The number of new ART cases annualised, in proportion of active participants, has increased slightly from 1.17% in the December 2025 quarter to 1.19% in the March 2026 quarter.
 - ART applications closed increased 9% to 1,979 from 1,823 in the previous quarter. This has continued the upward closure trend across the financial year and delivering the highest quarterly closures on record.
 - Of the 1,979 ART applications closed, 96.9% (1,918) were resolved prior to a substantive hearing and 3.1% (61) were resolved from a substantive hearing decision.
 - Of the applications resolved prior to substantive hearing, 69.6% were resolved by agreement, 22.4% were withdrawn by the participant, 6.3% were dismissed and 1.8% resulted in Extension of Time (EOT) or jurisdictional outcomes. This is consistent with the previous quarter.
 - There was a 5% increase in the number of applications on hand, increasing from 6,502 (as at 31 December 2025) to 6,817 (as at 31 March 2026), which is 35% higher than the same time last year (5,058 as at 31 March 2025). Improved closure performance has helped moderate the impact of elevated inflows on the active caseload.
 - Due to increased workloads, there are signs closure timeframes are beginning to increase. In 2025–26 Q3 the average days to close an application was 281 days, which is higher than the 2025–26 Q2 average of 265 days and the 2024–25 yearly average of 263 days.
 - The NDIA's total ART legal expenditure for 2024–25 increased by 28.5% to \$68.1 million from \$53 million in 2023–24. The increase in legal spend is due to a substantial increase in ART appeals.
 - Finalised internal reviews increased approximately 26% during the quarter with over 13,000 of these finalised reviews affirming the NDIA's original decision.

Background

- A key driver of increased review rates early in 2025–26 was the significant uplift in administrative decision-making across the NDIA. Between 2023–24 and 2024–25, there was an approximate 25% increase in access and planning delegate decisions.
- While decision volumes have stabilised in 2025–26, the continued high volume of internal reviews is contributing to increased demand for external reviews, creating a downstream flow-on effect.
- The NDIA is strengthening engagement with the disability sector through an established Dispute Resolution Forum to further embed a participant-centred approach in dispute resolution.
- The NDIA engages lawyers in the merits review process to ensure it meets its obligations to assist the Tribunal and its model litigant obligations under the *Legal Services Directions 2017*.
- NDIS participants can represent themselves or choose a representative to assist them with the ART process.
- The NDIA uses both in-house lawyers and external law firms to represent the NDIA in applications to the ART. Use of external lawyers enables the NDIA to flexibly respond to increases and decreases in applications to the ART.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000027

Title: NDIS Pricing

Witness: Penelope McKay, Deputy Chief Executive Officer,
Partners, Providers and Home and Living

Talking Points

- The NDIS Amendment (Securing the NDIS for Future Generations) Bill 2026 that is before the Parliament will, if passed, create new pricing arrangements.
- This means there will be an interim period until the new legislative pricing arrangements coming into effect.
- We recognise that participants and providers need information about pricing now.
- For this reason, it is intended to release an Annual Price Review and a price schedule.
- The Fair Work Commission published its Annual Wage Review 2026 on 2 June 2026.
- The Agency has recently given the Board advice on both issues in the context of advising the Board on what it considers to be appropriate and reasonable prices.
- The Board is now closely considering the advice.

Key headline facts and figures

Annual Pricing Review (APR) Consultation

- Consultation opened on 27 November 2025 and closed on 8 February 2026.
- Key statistics from the consultation process included:
 - 7,644 visits to NDIS Engage
 - 3,243 responses in total
 - Total of 3,076 survey responses:
 - 557 participant responses:
 - 64% carers/family, 36% participants
 - 53% plan managed, 36% self-managed
 - 52% major city, 39% regional, 8% rural or remote.
 - 2,519 provider responses:
 - Predominantly small and sole-trader businesses (76.9%)
 - 50% unregistered, 35.4% registered.
 - A significant proportion of respondents indicated that they deliver therapy supports (76.9%).
 - 156 written submissions.
 - 2 participant focus groups including 11 participants with diversity across age, location, disability type.

Background

APR Consultation

- For this years' APR the NDIA consulted widely with participants, providers, peak bodies, and sector representatives.
- For the first time consultation was run through NDIS Engage, the Agency's dedicated engagement and consultation platform, and included Participant Focus Groups.
- Feedback from the consultation informed recommendations for this APR and will inform pricing improvements that have been mapped out in the Agency's 3-Year Pricing Workplan.

3 Year Pricing Workplan

- To support pricing improvements, the NDIA released the 3-Year Pricing Workplan on 12 December 2025.
- The workplan sets out a sequenced approach to strengthening how NDIS pricing supports participant outcomes and market sustainability. The APR is a key component of the workplan.
- The workplan provides clarity to participants, providers, and the broader sector about our pricing approach through to 2025–28. The workplan was developed in close collaboration with the NDIS Quality and Safeguards Commission and the Department of Health, Disability, and Ageing.
- The NDIA made significant progress in Year 1 of the 3 Year Pricing Workplan, including the Quality Supports Program pilots, with Supported Independent Living and Support Coordination pilots having commenced in August 2025, and the Quality Support Program Therapy Pilot commencing in March 2026.
- In 2026–27, the NDIA will conduct a review of the DSW Cost Model, a Therapy Pricing Review and a Supported Independent Living Pricing Review. The Agency will consult with participants and providers during these reviews. Findings from the reviews will inform future pricing improvements.

Pricing Decision Making

- Consideration and approval of the APR recommendations are in line with the NDIA Board's duties under the *NDIS Act* and the *Public Governance, Performance and Accountability Act 2013*.
- The Government has recently tabled draft legislation to transfer responsibility for pricing decisions to the Minister for Disability and the NDIS.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000028

Title: NDIS Markets

Witness: Penelope McKay, Deputy Chief Executive Officer, Partners Providers and Home and Living

Talking Points

- The Australian Government and the NDIA remain committed to supporting a sustainable and high-quality NDIS market so that people with disability can access the supports they need.
- The NDIA is a co-steward of the NDIS market together with the Department of Health, Disability and Ageing and the NDIS Quality and Safeguards Commission.
- The NDIA is focussed on shaping and supporting NDIS markets through market design and intervention, coordination and engagement activities. These activities aim to improve participant outcomes and strengthen provider capability.
- Current market stewardship activities include:
 - NDIA's Three -Year Pricing Workplan, a multi-year pathway to ensure NDIS pricing supports sustainable, high-quality services and value for participants.
 - Quality support pilots to evaluate the characteristics of quality service provision, including the costs and outcomes that come from quality service provision in the Supported Independent Living, Therapy and Support Coordination markets.
 - Working with other Commonwealth government departments and agencies to improve service delivery in regional and remote locations by better alignment and collaboration in service delivery under the integrated care and commissioning (ICC) pilot program.

- Establishing provider lists to assist participants, their families and carers find trusted information on products, providers and assessors more easily.
- Working with the NDIS Quality and Safeguards Commission to explore what guidance and materials could make service agreements easy to understand, fair, and supportive for everyone.
- In any healthy market, there is both new entrants and exits of existing providers.
- The NDIA has processes in place to support provider exits. This includes working with participants, partners, providers and relevant stakeholders, including the NDIS Quality and Safeguards Commission. If needed, the NDIA assists participants to find alternative providers of supports they need.

Key headline facts and figures

- On 22 April 2026, Minister Butler announced a plan to secure the NDIS for future generations. The plan will be delivered through 4 pillars and includes fighting fraud, slowing rapid cost increases, clearer eligibility requirements and delivering quality services and supports to participants.
- As at 31 March 2026:
 - 774,456 participants had an approved NDIS plan. This represents an increase of 13,014 participants since December 2025 (1.7% increase)
 - There are 277,376 active providers. This represents an increase of 795 active providers since December 2025.

Background

Securing the NDIS for Future Generations - Improving the Quality of Providers

- The Australian Government announced it will introduce the National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill following the release of the 2026–27 Budget.
- At the National Press Club speech of 22 April 2026, Minister Butler has announced plans to:
 - Commission a panel of plan management providers to improve service quality and integrity standards and reduce fraud.
 - Commission a new, more efficient support coordination and connection function.
 - Commence consultation and design of a commissioning approach for home and living supports for Supported Independent Living (SIL) participants who need 24/7 support to ensure participants receive the best supports and address provider viability challenges.

Market Stewardship Framework

- In 2018, the NDIA published the Market Enablement Framework outlining its approach to fulfilling its role as a market steward. Subsequently, in 2021 the Department of Social Services published the NDIS Market Roles and Responsibilities.
- Under the Reform for Outcomes Initiative 5 - Evidence-based supports, the Market Enablement Framework is being updated in collaboration with Department of Health, Disability and Ageing and NDIS Quality and Safeguards Commission.
- The new framework is referred to as the Market Stewardship Framework. The Market Stewardship Framework will improve how government shapes, supports and monitors provider markets. It will detail stewardship responsibilities and define how governments influence and shape markets to promote the delivery of efficient, effective and ethical disability supports that deliver quality outcomes for participants.
- The Market Stewardship Framework provides the foundation for a more proactive and collaborative approach to market stewardship. This enables governments to respond to emerging risks, support innovation, and ensure NDIS markets are participant-centred and align with the broader care and support economy.

Provider Lists

- In April 2026, the NDIA released the new Dog Guide Provider list on the NDIS website.
- The list gives participants clear, trusted information about dog guide providers, their services and products. It improves access to safe and high-quality dog guide supports (linked to Reform for Outcomes Initiative 5 – Evidence-based supports).
- This provider list adds to the existing continence provider list, which provides participants with information about 31 registered providers of continence supports across Australia.

Service Agreements

- The NDIA is working with the NDIS Quality and Safeguards Commission and the Australian Competition and Consumer Commission to develop improved guidance and supports for a service agreements.
- The NDIA has consulted with participants, providers and the broader sector to inform the development of a service agreement template and other resources that are easy to understand, fair and supportive for everyone.

Integrated Care and Commissioning

- The Department of Health, Disability and Ageing leads the Integrated Care and Commissioning (ICC) pilot which brings together Australian Government investments and resources in the aged care, disability support and veterans' care sectors.
- ICC aims to improve access to primary care and support services in thin markets by trialling integrated services and joint commissioning across a wide range of health sectors. This includes primary health, First Nations health services, disability aged care and veterans' care sectors.
- Funding was allocated to deliver place-based and community driven integrated care activities from 2023 to 30 June 2027, with the initiative announced as delivering trials in up to 10 locations (later limited to 6).
- There are currently 6 pilot site locations, including the Kimberley, Western Australia; Central West Queensland; Gippsland, Victoria; South- East New South Wales; Northern Tasmania and Whyalla/Port Augusta South Australia.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000029

Title: Supported Independent Living Homes in Victoria

Witness: Penelope McKay, Deputy Chief Executive Officer, Partners, Providers and Home and Living

Talking Points

- The Victorian government transitioned approximately 2,500 NDIS participants residing in state owned disability accommodation out of disability services and into the Scheme as part of the Bilateral Agreement in 2021.
- The Victorian government retains ownership of most of the housing accommodation. Provision of in-home supports transitioned to 5 Victorian providers.
- Individually negotiated agreements provided for ‘continuity of supports’ and included subsidy payments which were intended to compensate for the Victorian Government Enterprise Agreement which at that time paid above award rates for Disability Support Workers.
- The subsidy, which is subject to a confidentiality clause, ended on 31 December 2025.
- The end of the subsidy payment is a matter for the Victorian government.
- The Agency is continuing to work with the 5 providers impacted by the cessation of the subsidy to provide targeted advice and plan reassessments for participants where required.

Background

- The 5 Victorian SIL providers: Melba Support, Life Without Barriers, Scope, Possability (recently acquired by the Independence Australia Group) and Aruma have raised concerns of insufficient funding in transitioned participant plans.
- There are approximately 2,000 NDIS participants in this cohort that are currently supported by the five providers and remain living in Victorian government owned disability accommodation.
- The NDIA has been working closely with the providers since early 2025 and appreciates the unique circumstances of these participants.
- The NDIA established a dedicated team in Service Delivery to undertake a risk based prioritised approach to plan reviews.
- As part of this targeted audit of Victorian SIL plans, the Agency completed most plan reassessments for approximately 800 transitioned participants by the end of 2025.
- The remaining 1,200 plans had a more recent plan review and home and living decision. Service Delivery reviewed a sample of these participant plans (104) to identify trends that could be used as a benchmark uplift approach across this cohort.
- Based on available evidence, the NDIA found the home and living budgets in reviewed participant plans to be reasonable and necessary.
- The Agency also introduced a Senior Case Manager model from January 2026 to support providers. The model involves a Senior Case Manager working with each provider to oversee plan reassessments through to 30 June 2026.
- Where a plan has recently been reviewed, and there are concerns with the outcome, the relevant provider can engage with their Senior Case Manager, who will explain the decision and provide advice regarding what additional clinical or other evidence is required.
- Most of the participants' home and living supports that have been discussed through the Senior Case Manager Model have an updated approved plan with an extended transition period and a detailed list of updated evidence requirements. This gives providers time to either alter their service delivery model and / or get further evidence without putting the participant's current supports at risk.
- As identified through the Senior Case Manager model, overarching challenges with determining reasonable and necessary supports include incomplete evidence on file, current or new disabilities that are not recorded or access met, and inconsistent reporting to meet evidence requirements.
- The NDIA is continuing to engage proactively with providers., including providing guidance to support the submission of appropriate and robust evidence for plan change

requests, ensuring NDIA decision making is informed by complete and high quality information.

- The NDIA appreciates the unique circumstances of this participant cohort and continues to actively work with the providers and affected participants.

Sensitivities

- The providers continue to pay above award rates. Several of the providers are in the process of re-negotiating their Enterprise Bargaining Agreements.
- The financial position of each provider varies, and although some may be experiencing financial viability pressures, this does not apply to all.
- The five Victorian providers are seeking remediation action from NDIA to recognise the increasing intensity of support required by this unique cohort of participants.
- The Quality Supports Program SIL Pilot, in addition to other work underway with the SIL sector, will provide a credible response to industry financial viability concerns and provide the most streamlined long-term approach to addressing market challenges and ensuring those providers that are critical to the Scheme's success remain in the market.
- Victoria and NSW/ACT have the highest numbers of SIL participants.
- Some of the 5 providers were included in reporting through the NDIS Commission's Own Motion Inquiry into Supported Accommodation (2023), which identified issues across all providers in the report of alleged abuse or neglect, and issues in provider practice, policies and procedures.

Recent media interest

- 22 February 2026 | The Age They're gaslighting us': More disability homes close as state funding ends').
- 8 January 2025 | The Age Dozens of disability homes face collapse after subsidies end (external).
- 8 December 2025 | ABC - Future uncertain for hundreds of vulnerable people amid group home closure fears (external).
- 7 September 2025 | The Sunday Age Thousands with disabilities face eviction from homes (external).
- 31 July 2025 | ABC Radio Melbourne Mornings at 08:35 a.m. - Isentia (external).
- Publication dates: 31 July 2025, 1 August 2025, 7 September 2025, 8 December 2025 and 22 February 2026.

Key issues raised:

- Financial viability pressures for Victorian SIL providers
- SIL providers withdrawing supports from group homes
- Participants facing potential closure of their group home and needing to find an alternate provider and/or new accommodation.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000030

Title: NDIS Providers

Witness: Penelope McKay, Deputy Chief Executive Officer,
Partners Providers and Home and Living

Talking Points

- Quality providers are integral to the success of the NDIS, and the Australian Government and the NDIA values the vital work providers do in supporting NDIS participants.
- The NDIA does not directly fund providers but provides funding in a participant's NDIS plan based on what is 'reasonable' and 'necessary' to pursue their goals, in addition to the support provided by family, friends, and other community and government services.
- In any healthy market, there are both new entrants and exits of existing providers. When a provider exits from the delivery of NDIS supports, the NDIA assists participants to continue to receive the supports they need.
- NDIS data shows the NDIS provider market continues to grow. In the March quarter there were 277,376 active providers delivering services through the NDIS - up from 263,145 in the same quarter a year prior.
- The NDIA has a process in place to support provider exits. This includes working with participants, partners, providers and relevant stakeholders including the NDIS Quality and Safeguards Commission. When required, the NDIA assists participants to continue to receive the supports they need from another provider.

Key headline facts and figures

Provider Exits

- Provider exits can be partial or full.
- A full exit is where a provider decides to cease delivering all NDIS supports.
- A partial exit is where a provider decides to cease delivering some NDIS supports but continues to deliver other NDIS supports.
- Committed provider exit is defined as exits notified to the NDIA that require action/oversight.
- During 2025–26, for the nine-month period 1 July 2025 to 31 March 2026, there were 245 committed exits of registered NDIS providers notified to the NDIA.
 - 121 were full exits; and
 - 124 were partial exits.
- There has been a progressive increase in full and partial committed exits compared to previous periods.
- Committed provider exit trends for the past 4 previous financial years were:
 - 2024–25: 247
 - 2023–24: 128
 - 2022–23: 74
 - 2021–22: 61.

Background

Committed NDIS Provider Exits¹

	2021-22	2022-23	2023-24	2024-25	1 July – 31 March 2026
Full exits	22	33	79	147	121
Partial exits ¹	39	41	49	100	124
Totals	61	74	128	247	245

The Reasons for Provider Exits in 2025–2026 to 31 March 2026 (9-month period) were:

Reason	Full exits	Partial exits
Change in strategic direction of the provider	29	80
Deregistration and/or regulatory action	49	13
NDIS price settings	7	19
Administration/liquidation	23	0
Deregistration: non-renewal	9	2
Workforce attraction/retention	1	6
No reason provided	2	3
Fraud investigation	1	0
Funding withdrawal	0	1
Totals	121	124

The reason for provider exits in the 2024-2025 financial year were:

Reason	Full exits	Partial exits
Change in strategic direction of the provider	30	62
Deregistration and/or regulatory action	62	7
NDIS price settings	33	0
Administration/liquidation	7	15
Deregistration: non-renewal	0	4
Workforce attraction/retention	1	1
No reason provided	2	0
Fraud investigation	12	11
Totals	147	100

The most common support types exited in 2025–2026 to 31 March 2026 (9-month period) were:

- Support Coordination
- Assist Personal Activities
- Participate Community
- Therapeutic Supports
- Supported Independent Living.

Providers in the Market

	2022–23 Q4	2023–24 Q4	2024–25 Q4	2025–26 Q1	2025–26 Q3
Active Providers in the quarter	167,409	215,779	263,145	273,673	277,376
Registered Providers	14,130	14,168	16,363	17,374	17,717
Unregistered Providers	154,409	202,396	254,018	257,318	264,970

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

Providers claiming both registered and unregistered supports, or whose status changed during the quarter, are counted in both categories.

- Over the past 2 years, payments have grown by 27% (from \$39.5 billion for the year ending 31 March 2024 to \$50.1 billion for the year ending 31 March 2026).
- Payments have grown across the support categories, most notably for core daily activities and core social and community participation (growing by 28% in aggregate over the period).

Payment (cash flow)	Category	FY22–23	FY23–24	FY24–25
Therapy	Registered	2.3b	2.6b	2.7b
	Unregistered	1.0b	1.5b	1.8b
	Missing ¹	0.0b	0.1b	0.3b
Overall		3.4b	4.2b	4.8b
DSW only	Registered	12.0b	13.6b	13.6b
	Unregistered	3.3b	4.4b	5.0b
	Missing	0.1b	0.4b	2.1b
Overall		15.4b	18.5b	20.6b

Payments to registered and unregistered providers

Payment	2022–23 FY (in \$b)	2023–24 FY (in \$b)	2024–25 FY (in \$b)
Registered	23.5	26.1	27.5
Unregistered	7.3	10.6	13.7
Missing	3.9	4.5	4.6
Overall	34.7	41.2	45.8

¹ Missing refers to providers who have received payment for supporting NDIS participants where the NDIA has been unable to validate their registration status due to a missing and/or an invalid Australian Business Number (ABN).

Provider payments by support categories

	2022–23 FY (in \$b)	2023–24 FY (in \$b)	2024–25 FY (in \$b)
Core – daily activities	18.291	21.441	23.599
Core – community	7.464	9.473	10.802
Core – consumables & transport	1.392	1.512	1.513
Capacity building – daily activities	4.363	5.176	5.622
Capacity building – other	2.199	2.627	3.027
Capital	1.007	1.018	1.284
Total	34.724	41,254	45.853

2026–27 Budget Estimates

Supplementary Brief: SB26-000031

Title: Partners in the Community Program

Witness: Penelope McKay, Deputy Chief Executive Officer,
Partners Providers and Home and Living

Talking Points

- Partners in the Community (partners) support people with disability and over 70% of NDIS participants to connect, understand and navigate the NDIS, and connect to local community and mainstream supports.
- Agreements with current partners are in place to 30 June 2027. This ensures continued support for participants, carers and families, while NDIS reforms are underway.
- On Wednesday 22 April 2026, the Hon. Mark Butler MP, Minister for Health and Ageing announced the intention to introduce a new commissioned support coordination and connection service. This will be implemented from July 2028.
- Implementation of Peer Support and Capacity Building grants by the NDIA ensures that people with a disability, families, and carers can continue accessing supports while governments and the disability sector work together to design foundational supports.

Key headline facts and figures

- **Partners in the Community:** The NDIA has agreements with 23 partners with a total value of \$644.8 million for 2025–26 and \$663.4 million for 2026–27.
- **Of the 23 Partners in the Community:**
 - 8 deliver Local Area Coordination (LAC) services only
 - 10 deliver Early Childhood (EC) services only
 - 5 deliver both LAC and EC services.
- **Support coordination and connection:** The Government committed \$15 million over 2 years from 2024–25 for the NDIA to undertake initial design and consultation work on reforms to help participants and people with disability navigate services. On 22 April 2026, the Minister for Health and Ageing announced the intention to introduce a new commissioned support coordination and connection service from July 2028.
- **Peer Support and Capacity Building:** The NDIA has agreements with 66 grant recipients with a total value of \$36.5 million for 2025–26 and 2026–27.

Background

- There are 23 partners delivering early childhood and local area coordination services in defined geographical areas across Australia, generally excluding remote areas.
- Partner agreements are in place for 2 years, to 30 June 2027. No decision has been made on services after this date. Future services will be considered in the context of NDIS reforms, including the introduction of Thriving Kids.
- As at 31 March 2026, there were 4,349 people employed by partners, including:
 - 1,614 people employed by early childhood partners
 - 2,735 people employed by local area coordination partners.

- During the establishment of the Scheme, the role of partners was directed towards high volume planning activities to support people with disability transitioning to the NDIS. Partners are now in a better position to focus some resources on supporting participants to connect with services.
- The Independent Review of the NDIS proposed changes to the way supports and services are delivered, including the services provided by partners. The proposed changes were aimed at reducing both duplication and gaps in intermediary services. It reflected the desire of participants and their families to be supported in a simpler and more humanised way, while also addressing the need to improve service quality and reduce fraud.
- The Agency has been working with established co-design and engagement groups to inform initial thinking on intermediary services. This has included expert and diverse lived experience advice from participants and the sector – e.g. Disability Representative and Carers Organisation, Independent Advisory Council, Participant Reference Group, Participant First members, Industry Chief Executive Forum.
- Co-design and engagement undertaken between July and December 2025, involving more than 380 stakeholders (and almost 100 participants), highlighted the following key priorities:
 - Safety, trust and continuity of relationships are paramount
 - A capable and skilled workforce, including people with lived experience of disability
 - Choice and flexibility to respond to changing needs and circumstances
 - Clear role definition, including responsibility for addressing unsafe, fraudulent or poor-quality providers
 - Effective integration with the broader service system, supported by fit-for-purpose digital systems
 - Delivery of services that are safe, culturally appropriate, equitable and respectful.
- The insights generated through that process have been critical to shaping the NDIA's understanding of what participants need from an intermediary support function. The insights will carry forward into the design of the new model.
- As governments and the disability sector continue to work together to design foundational supports, the Peer Support and Capacity Building grant recognised the valuable role small community-based, disability-led organisations play in the disability ecosystem, helping people with disability build their skills and connect with others who have shared similar experiences.
- This is a one-off grant round delivered by the NDIA, providing up to \$20 million per year in funding over 2 years (totalling \$40 million), with the possibility of a one-year extension.

- In December 2024, the Agency entered into grant agreements with 68 successful applicants. Since commencement, 2 grantees have withdrawn due to organisational change, with 66 organisations remaining in place in the following states and territory.
 - Australian Capital Territory - 4
 - New South Wales - 16
 - Queensland - 13
 - South Australia - 1
 - Tasmania - 1
 - Victoria - 20
 - Western Australia - 11
- To date \$25 million has been paid to grantees with activities reaching 214,425 people with disability, families and carers.

List of the 23 organisations delivering the Partners in the Community program

Partner Organisation	Service Type	Location
APM	LAC	WA, NT, and QLD
Baptcare	Both	SA & TAS
Blue Sky	LAC	NSW
Brotherhood of St Laurence (BSL)	Both	Vic
BUSHkids	EC	QLD
Carers Queensland	LAC	QLD
EACH	EC	NSW
Early Childhood Australia (ECA)	EC	NT
Feros Care	LAC	ACT & QLD
Indigenous Wellbeing Centre (IWC)	LAC	QLD

Partner Organisation	Service Type	Location
Intereach Limited	Both	NSW & Vic
Kudos Services	EC	SA
Latrobe Community Health Services	Both	NSW & Vic
Lifestart Cooperative Ltd	EC	NSW
Meli (BCYF)	EC	VIC
Mission Australia	Both	WA, QLD, SA
Northcott	EC	NSW
Settlement Services International	LAC	NSW
Social Futures	LAC	NSW
The Benevolent Society (TBS)	EC	QLD
Uniting (NSW)	LAC	NSW
UnitingCare Queensland (UCC)	EC	QLD
Uplyft (previously Wanslea)	EC	WA

2026–27 Budget Estimates

Supplementary Brief: SB26-000032

Title: Supported Independent Living

Witness: Penelope McKay, Deputy Chief Executive Officer,
Partners Providers and Home and Living

Talking Points

- The NDIS funds supports to assist participants to live a more independent life. This includes funding for Supported Independent Living (SIL).
- SIL assists NDIS participants to live independently at home, providing help or supervision with daily tasks like personal care and meal preparation. SIL is designed for the most complex and vulnerable participants who require high levels of support across a 24-hour period.
- SIL can be a shared support with other NDIS participants, with the level of sharing typically expressed as a ratio (e.g. 1:3).
- The SIL Pilot, part of the Quality Supports Program, has now commenced with 44 registered providers working closely with the Agency to develop data about the costs and characteristics of quality service provision.
- A total of \$25.4 million (GST inclusive) will be distributed across eligible grant recipients over the 12-month pilot.
- The findings from the pilot will inform the review of current NDIS pricing models as part of the commitment to a revised pricing approach that better reflects the value and benefits of higher-quality services.
- The Australian Government has announced consultation will commence from 1 July 2026 on the design of a commissioning approach for home and living supports for SIL participants who need 24/7 support to ensure participants receive the best supports and address provider viability challenges. Consultation will conclude on 31 October 2026.

- From 1 July 2026, NDIS Commission will introduce mandatory registration for SIL supports. This will strengthen safeguards, improved quality and consistency and provide greater transparency and accountability.
- The NDIA and the NDIS Commission are working together to implement mandatory registration and ensure participants and providers are aware of their obligations with minimal disruption to service delivery.
- The NDIA has a process in place to support provider exits. This includes working with NDIS participants, partners, providers and relevant stakeholders, including the NDIS Commission.

Key headline facts and figures

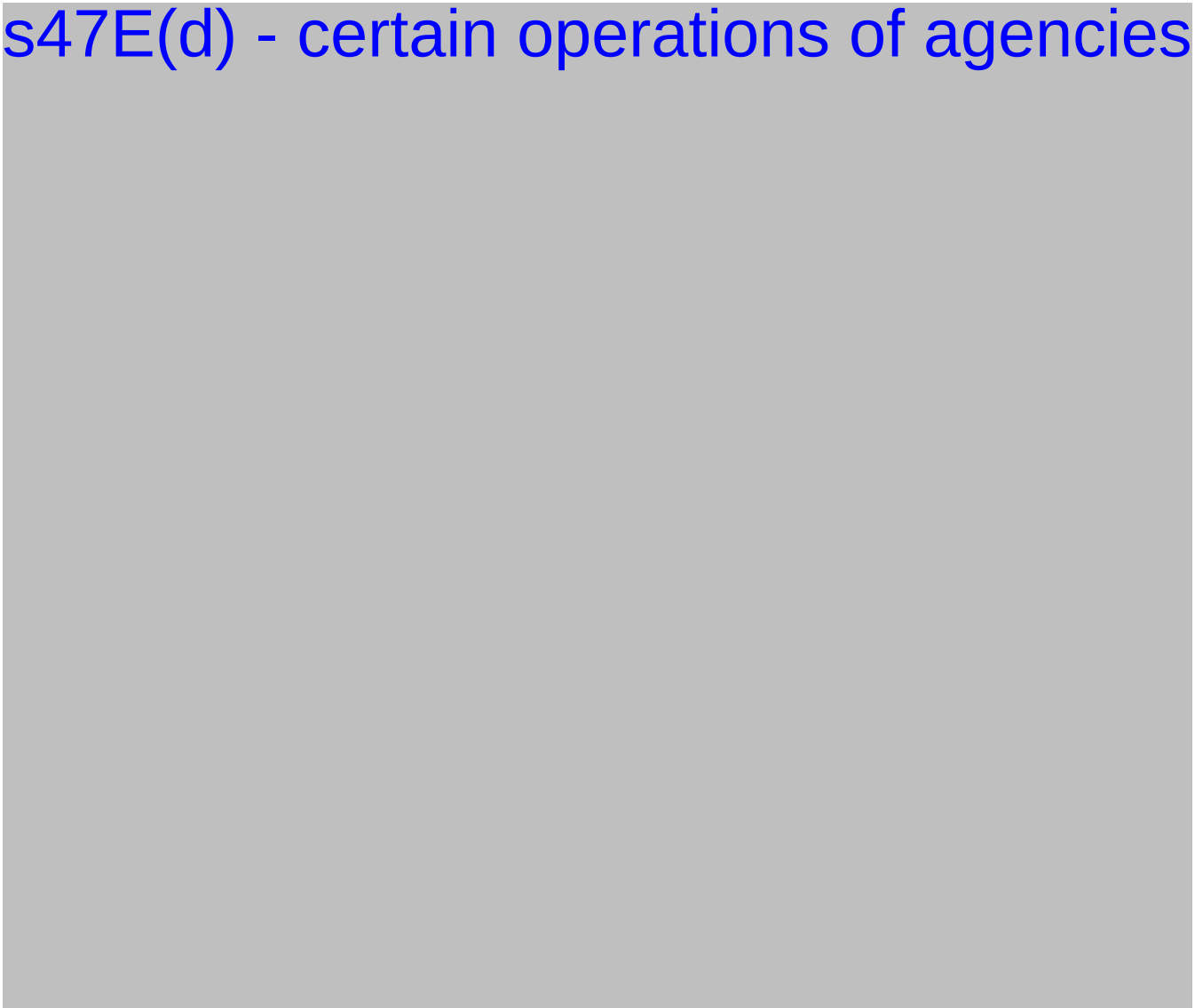
- In the March 2026 quarter, \$4.1 billion of SIL supports was paid.
- Of the 36,808 active NDIS participants in SIL, at 31 March 2026:
 - The average total plan value is \$488,600. This increased by 5% annually since 2024.
 - The average of the core daily activities component of these plan budgets is \$344,800. This has increased 4% annually since 2024.
- Annualised total payments to NDIS participants in SIL have increased 11% annually over the last 2 years from \$13.4 billion at March 2024 to \$16.4 billion at March 2026.
 - Annualised total payments for the core daily activities component of these payments have increased 10% annually over the last 2 years from \$10.2 billion at March 2024 to \$12.2 billion at March 2026.
- Average payment per participant in SIL has increased 5% annually over the last 2 years from \$409,400 at March 2024 to \$447,100 at March 2026.
 - The average of the core daily activities component of these payments has increased 6% annually over the last 2 years from \$310,700 at March 2024 to \$346,900 at March 2026.
- The number of active NDIS participants with SIL supports in their plan has increased 4% annually over the last 2 years, from 34,310 as at March 2024 to 36,808 at March 2026.

Background

- The complexity of this cohort's support needs and the tailored nature of the supports is reflected in high costs for SIL participants.
- Their support aligns closely with the intent of the original design of the Scheme.
- The current delivery models for SIL are acknowledged as an often outdated shared-supports model from the pre-Scheme era, intended to assist people in congregate care settings that transitioned into the NDIS.
- Providers experiencing cost pressures claim the current pricing structures do not reflect the real cost of ensuring safe and quality services for participants – the SIL Quality Support pilot is aimed at investigating this.
- The NDIA Independent Pricing Committee Final Pricing Report 2025 (IPC Report) identifies that SIL is particularly impacted by the “singular” price cap system, as it does not differentiate enough for variations in support models, complexity and quality.
- Multiple reviews and inquiries have identified serious issues in the way certain SIL services are being delivered, including risks to participant safety and quality of care. These reviews have recommended strengthening oversight and regulation of SIL to improve the quality and safety of these supports.
- On 18 December 2025, the Minister for the NDIS, the Hon Jenny McAllister confirmed that mandatory registration for SIL and Platform Providers would commence from 1 July 2026.

Table One: SIL Funding in Participant Plans

s47E(d) - certain operations of agencies



This document was released under the Freedom of Information Act 1982 by the National Disability Insurance Agency.

Table Two: 44 SIL Pilot Providers (in alphabetical order)¹

SIL Pilot Provider	State and Territory service locations*
Ability Centre Australasia PTY LTD	WA
Ability Options Ltd	NSW
Able Australia Services	VIC, ACT, QLD, TAS
Allambi Care Limited	NSW
Anglicare SA Ltd	SA
Aruma Services Limited	VIC, ACT, NSW, QLD
Autism Association of Western Australia	WA
Brightwater Care Group Limited	WA
Community Accommodation and Respite	SA
The Trustee for CareChoice Business Trust	VIC
Cerebral Palsy Alliance	NSW, SA
Challenge Community Services	NSW, QLD
Civic Disability Services Pty Ltd	NSW, QLD
Community Living Options	SA
ConnectAbility Australia Limited	NSW
Focus Individualised Support Services	VIC
Forsight Australia	ACT, NSW
Gateways Support Services Inc	VIC
InLife Independent Living Ltd	VIC
Southern Cross Support Services PTY Ltd	NSW, QLD
Kirinari Community Services Ltd	VIC, TAS
Life Without Barriers	VIC, ACT, NSW, QLD, SA, WA, NT, TAS
Melba Support Services Ltd	VIC

¹ Source: 2024–25 NDIA claiming data

SIL Pilot Provider	State and Territory service locations*
Mercy Connect Limited	VIC, NSW
Minda Incorporated	SA
Multicap Limited	NSW, QLD
Multi-task Human Resource Foundation Limited	NSW
New Horizons	NSW, QLD
Nexus Inc	TAS
The Northcott Society	VIC, NSW
Orana Australia Ltd	SA
Quality Health Care Pty Ltd	NSW
Rocky Bay Ltd	NSW, WA
Royal Rehab	NSW
SAC (SA) Pty Ltd	SA
Samaritans Foundation Diocese of Newcastle	NSW
Scope (Aust) Ltd	VIC
St John of God Outreach Services	VIC
St Jude's Health Care Services	QLD, WA
Sylvanvale Ltd	QLD, SA
The Disability Trust Limited	ACT, NSW
United Disability Care Pty Ltd	NSW, QLD, SA
Valley Industries Limited	NSW
Yooralla	VIC

2026–27 Budget Estimates

Supplementary Brief: SB26-000033

Title: Provider Exits

Witness: Penelope McKay, Deputy Chief Executive Officer,
Partners Providers and Home and Living

Talking Points

- The NDIA monitors markets to ensure participants have access to quality supports, continue to receive the supports they need and the market remains sustainable.
- The NDIA does not directly fund providers but allocates funding to NDIS participants to purchase NDIS supports. Business decisions, including whether to continue offering services through the NDIS, are a matter for individual organisations.
- In any healthy market, there are both new entrants and exits of existing providers. When a provider exits from the delivery of NDIS supports, the NDIA assists participants to continue to receive the supports they need.
- The NDIA has a process in place to support provider exits. This includes working with participants, partners, providers and relevant stakeholders including the NDIS Quality and Safeguards Commission. When required, the NDIA assists participants to continue to receive the supports they need from another provider.
- NDIS data shows the NDIS provider market continues to grow. In the March quarter there were 277,376 active providers delivering services through the NDIS – up from 263,145 in the same quarter a year prior.
- Impacted participants can contact their local area coordination partner or the National Disability Insurance Agency on 1800 800 110 for assistance to find a new provider.

Key headline facts and figures

- Provider exits can be partial or full.
- A full exit is where a provider decides to cease delivering all NDIS supports.
- A partial exit is where a provider decides to cease delivering some NDIS supports but continues to deliver other NDIS supports.
- Committed provider exit is defined as exits notified to the NDIA that require action/oversight.
- During 2025–26, for the period 1 July 2025 to 31 March 2026, there were 245 committed exits of registered NDIS providers notified to the NDIA.
 - 121 were full exits; and
 - 124 were partial exits.
- There has been a progressive increase in full and partial committed exits compared to previous periods.
- Committed provider exit trends for the past 4 previous financial years were:
 - 2024–25: 247
 - 2023–24: 128
 - 2022–23: 74
 - 2021–22: 61

Committed NDIS Provider Exits

	2021–22	2022–23	2023–24	2024–25	1 July 2025 – 31 March 2026
Full exits	22	33	79	147	121
Partial exits	39	41	49	100	124
Totals	61	74	128	247	245

The Reasons for Provider Exits in 2025–2026 to 31 March 2026 were:

(*Please note this is for a 9-month period)

Reason	Full exits	Partial exits
Change in strategic direction of the provider	29	80
Deregistration and/or regulatory action	49	13
NDIS price settings	7	19
Administration/liquidation	23	0
Deregistration: non-renewal	9	2
Workforce attraction/retention	1	6
No reason provided	2	3
Fraud investigation	1	0
Funding withdrawal	0	1
Totals	121	124

- The most common support types exited in 2025–2026 to 31 March 2026 were:
 - Support Coordination
 - Assist Personal Activities
 - Participate Community
 - Therapeutic Supports
 - Supported Independent Living.

The Reasons for Provider Exits in 2024–2025 were:

Reason	Full exits	Partial exits
Change in strategic direction of the provider	30	62
Deregistration and/or regulatory action	62	7
Administration/liquidation	33	0
NDIS price settings	7	15
Workforce attraction/retention	0	4
NDIS Review	1	1
Fraud investigation	2	0
No reason provided	12	11
Totals	147	100

- The most common support types exited during 2024–25 were:
 - Daily Activities
 - Social Community and Civic Participation
 - Support Coordination
 - Supported Independent Living
 - Therapeutic Supports.

Current High Profile Provider Exits

AEIOU Foundation - ABN 19135897255

- Queensland based registered NDIS Provider: AEIOU Foundation, was a not-for-profit provider of early intervention services for autistic children through its outlets in Queensland, Australian Capital Territory and South Australia.
- On 7 March 2026, advice was received from the Queensland Department of Families, Seniors, Disability Services and Child Safety (via the NDIS Commission) that AEIOU Foundation was considering entering voluntary administration.
- On 10 March 2026, the CEO of AEIOU Foundation advised the NDIA the Board was considering the ongoing viability of operations.

• s47G - business information

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- 340 participants were impacted nationally due the voluntary liquidation of the AEIOU Foundation.
- NDIA has engaged with impacted families. These families indicate they have been able to source alternative providers of NDIS supports for their child.

• s47G - business information

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Bedford Services and Advisory Ltd - ABN 24839364005

- The SA government agreed on 27 July 2025 to provide a \$15 million support package to Bedford Services and Advisory Ltd (BSA) to stabilise the business and develop a plan for BSA to return to a stronger financial position. A condition of this funding was the appointment of McGrathNicol as strategic business advisors to assist with the turnaround.

- As part of this agreement, BSA agreed to exit from the delivery of Supported Independent Living (SIL) supports to 39 participants living in Bedford's 'Balyana' property (which has been sold to the SA Government as a condition of the support package).
- On 3 October 2025, Minister Butler confirmed a \$4.4 million Commonwealth contribution to the South Australian Government to support Bedford's sale process.

• s47G - business information

- The Deed of Company Arrangement (DOCA) was completed on 31 March 2026, with all conditions of sale met.
- A new BSA Board, Company Secretary and Senior Executive have been appointed to oversee the day-to-day operations of BSA.
- The NDIA has continued to engage with the SA Government, TDT and McGrathNicol to assist them to successfully engage with the NDIA's systems.
- During this period the NDIA has engaged with impacted participants, including residents of the Balyana facility and Bedford Employment Services, and their families.
- If required, plan reviews have been undertaken for participants if requested by the participants or nominee.
- BSA continues to support approximately 1,200 NDIS participants (including over 820 supported employment employees) with no impacts to service provision due to these changes.
- As of 29 May 2026, 36 of the of the original 39 Balyana NDIS participants have transitioned to new SIL properties with three residents remaining to transition.

• s47G - business information

s47G - business information

- The NDIA were notified on 10 March 2026 by the NDIS Commission that s47G - business information entered voluntary administration on 25 February 2026 but were continuing to trade.
- On 11 March 2026, the NDIS Commission notified the NDIA that 52 NDIS participants were transitioning to an alternative provider, s47G - business information as of 12 March 2026.
- As per the NDIA's Provider Exit Framework, the NDIA engaged with impacted participants and their families to assist participants to access the NDIS supports they need. This included providing assistance to support participants to transition to a new provider, or other arrangements of their choice.
- Participants who transitioned to the alternate provider s47G - business information were then impacted by the sudden exit of this provider in April 2026. This provider's exit was triggered by a manual payment review implemented by the NDIA due to payment/claiming concerns.
- The NDIS Quality and Safeguards Commission subsequently suspended the registration of s47G - business information effective 15 April 2026. The suspension remains in place until 14 June 2026.
- The NDIA again engaged with impacted participants and their families to assist participants to access the NDIS supports they need and transition to alternative providers.
- s47G - business information

s47G - business information

- On 20 May 2026, the NDIA became aware of emerging concerns that s47G - business information was at risk of ceasing operations s47G - business information.
- The NDIS Quality and Safeguards Commission confirmed later that day that the provider: s47G - business information was no longer operational.
- 59 participants have been identified as impacted by this exit.
- As per the NDIA's Provider Exit Framework, the NDIA has engaged with impacted participants and their families to assist participants to access the NDIS supports they need. This includes providing assistance to support participants to transition to a new provider, or other arrangements of their choice.

• s47F - personal privacy

- The NDIA's Hospital Interface Team is actively working with all relevant Health Services s47G - business information and conversing with the Queensland Director General of Health to support the discharge of these participants when safe to do so.

• s47G - business information

2026–27 Budget Estimates

Hot Issue Brief: SB26-000020

Title: Plan Reassessments and Variations

Witness: Scott McNaughton, Deputy Chief Executive Officer,
Service Delivery

Talking Points

- When a participant requests a change to their plan the Agency may decide to conduct a variation or a reassessment depending on the participant's circumstances and the evidence provided.
- Plan variations involve targeted changes to a participant's current plan. Typically, this would mean only specific elements are updated, for example plan management, while the rest of the plan remain unchanged and continues in effect.
- Plan reassessments involve a detailed review of the participant's circumstances and disability-related needs to determine the funding and supports aligned to the *National Disability Insurance Scheme Act 2013* (NDIS Act) and Rules.
- Reassessments most commonly occur when a participant's situation changes substantially, such as health, living arrangements, or support needs and therefore requires full plan reassessment rather than a plan variation or plan continuation.
- Participant total funding amounts in plans can increase or decrease depending on an individual's disability-related needs at plan reassessment.
- The NDIA fully respects a participant's right to request a review of a decision made by the NDIA, and their right to an external review by the Administrative Review Tribunal.

Key headline facts and figures

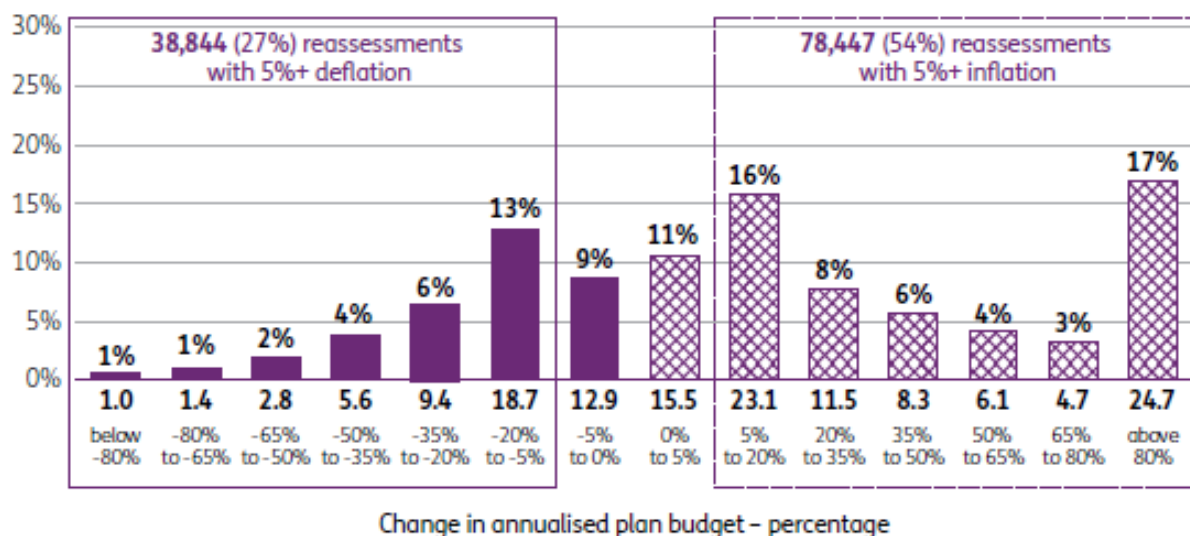
- Plans are more likely to increase after an unscheduled plan reassessment than decrease. The frequency of plans that increase after an unscheduled plan reassessment compared to those that decrease has reduced over recent quarters and this trend occurs regardless of supported independent living (SIL) status.
- In the 9 months to 31 March 2026, 28% (28,977) of unscheduled reassessed plans had a decrease in total funding amount compared to 71% (73,279) of unscheduled reassessed plans that had an increase in total funding amount. The total annualised plan reduction for the same period was \$0.74 billion, compared to \$3.73 billion annualised plan increase.
- In the 9 months to 31 March 2026, 53% (22,653) of scheduled reassessed plans had a decrease in total funding amount compared to 47% (20,126) of scheduled reassessed plans that had an increase in total funding amount. The total annualised plan reduction for the same period was \$0.71 billion, compared to \$0.65 billion annualised plan increase.

Background

- NDIS plans are developed under the NDIS Act and Rules to fund reasonable and necessary supports. Funding can increase or decrease based on changes in needs, goals, or evidence. Delegates must apply legislative criteria and NDIA guidelines when making decisions.
- An individual plan's total funding amount (and funding within categories within a plan) can increase or decrease depending on the level of support needed, and the evidence provided at the time of plan reassessment.
- When making decisions on supports appropriately funded by the NDIS, the Agency must take into consideration what is reasonable to expect families, carers, informal networks and the community to provide.

- There are a range of factors that might result in a participant's plan value changing. These can include:
 - Funded support that assists a participant in building greater independence or functional capacity. The need for these specific support/s may reduce (or be eliminated) over-time. This is an example of the NDIS building capacity and less reliance on funded supports. If goals change and require fewer supports, the overall budget can decrease as plans consider a participant's goals.
 - The inclusion of capital supports – for example prosthetics or other assistive technology (AT) – that may have been acquired during a previous plan and do not require an annual replacement. This commonly results in an overall reduction in the total funding amount.
 - The removal of non-NDIS supports which duplicate mainstream services or general living costs are excluded under Rules Part 5.
 - A change in living situation, such as moving to shared accommodation or gaining informal supports (family or community) can reduce the need for paid supports.

Figure 34: Distribution of the percentage change in annualised plan budgets for plans reassessed between 1 July 2025 and 31 March 2026



Number of plans reviewed and the change in annualised committed supports - broken down by SIL status¹

All Scheme:

Financial Year / Quarter	Number of reviews with reduction in budget	Number of reviews with no change in budget	Number of reviews with increase in budget	Total reduction amount (\$ million)	Total increase amount (\$ million)
2024–25 Q1	16,481	89	45,147	\$ 323 m	\$ 1,669 m
2024–25 Q2	13,787	23	44,892	\$ 345 m	\$ 1,770 m
2024–25 Q3	13,700	65	41,211	\$ 343 m	\$ 1,692 m
2024–25 Q4	13,605	88	37,258	\$ 374 m	\$ 1,604 m
2025–26 Q1	16,885	122	36,791	\$ 436 m	\$ 1,684 m
2025–26 Q2	16,796	170	29,701	\$ 513 m	\$ 1,472 m
2025–26 Q3	18,037	143	26,998	\$ 499 m	\$ 1,221 m

SIL:

Financial Year / Quarter	Number of reviews with reduction in budget	Number of reviews with no change in budget	Number of reviews with increase in budget	Total reduction amount (\$ million)	Total increase amount (\$ million)
2024–25 Q1	1,393	<11	4,114	\$ 66 m	\$ 377 m
2024–25 Q2	1,488	<11	4,303	\$ 79 m	\$ 391 m
2024–25 Q3	1,334	<11	3,727	\$ 73 m	\$ 358 m
2024–25 Q4	1,320	<11	3,430	\$ 70 m	\$ 338 m
2025–26 Q1	1,197	11	3,458	\$ 73 m	\$ 319 m
2025–26 Q2	1,854	11	3,359	\$ 121 m	\$ 280 m
2025–26 Q3	1,632	<11	2,358	\$ 104 m	\$ 201 m

¹ SIL status as at 31 March 2026

Non-SIL:

Financial Year / Quarter	Number of reviews with reduction in budget	Number of reviews with no change in budget	Number of reviews with increase in budget	Total reduction amount (\$ million)	Total increase amount (\$ million)
2024–25 Q1	15,088	86	41,033	\$ 257 m	\$ 1,291 m
2024–25 Q2	12,299	20	40,589	\$ 266 m	\$ 1,380 m
2024–25 Q3	12,366	55	37,484	\$ 270 m	\$ 1,334 m
2024–25 Q4	12,285	79	33,828	\$ 304 m	\$ 1,266 m
2025–26 Q1	15,688	111	33,333	\$ 363 m	\$ 1,365 m
2025–26 Q2	14,942	159	26,342	\$ 392 m	\$ 1,192 m
2025–26 Q3	16,405	134	24,640	\$ 395 m	\$ 1,020 m

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2026–27 Budget Estimates

Hot Issue Brief: SB26-000022

Title: New Framework Planning

Witness: Scott McNaughton, Deputy Chief Executive Officer,
Service Delivery

Talking Points

- The Australian Government is improving the NDIS to make it fairer, simpler and more consistent for participants, responding to the findings of the 2023 Independent Review of the NDIS and extensive feedback from the disability community.
- Changes to the *National Disability Insurance Act 2013* (NDIS Act) passed in 2024 enabled a new way of planning, known as New Framework Planning (NFP).
- On 22 April 2026, the Government announced participants will transition to NFP from April 2027, delayed from 1 July 2026.
- The delay enables further time to engage with the disability community about the reforms, as well as allowing more time to undertake additional testing of Support Needs Assessments to provide confidence the new framework planning can operate safely, consistently and sustainably at scale.
- Significant joint work is underway with Department of Health, Disability and Ageing (DHDA) and the Agency to deliver on immediate priorities aligned with the revised delivery schedule committed to Government.
- Alongside the implementation of NFP, DHDA and the Agency will deliver coordinated programs of NDIS Reform and operational uplift spanning fraud prevention, payment integrity, provider regulation, service quality and functional capacity assessment tools.

Key headline facts and figures

- **Funding and Government decisions:** Government has endorsed NFP as the future planning approach under the NDIS Act reforms passed in 2024. Funding of \$280.0 million allocated in 2025–26 supports development of the NDIS Rules on NFP, workforce uplift and technology readiness. A further \$270.1 million was announced in May 2026 for 2026–27 to prepare for the roll-out and implementation of NFP from 1 April 2027.
- **Timing and rollout:** NFP will commence from April 2027, with a staged, multi-year rollout to December 2030, to ensure a safe, participant-centred transition.
- **Participant experience:** under NFP, NDIS plans will be simpler, more flexible, and more transparent. Fewer scheduled reviews, clearer budgets, and reduced administrative burden are expected, while maintaining human decision-making and existing review/reassessment rights.
- **Scheme sustainability:** NFP establishes a consistent, rules-based budgeting method, addressing Review findings of inconsistency and limited transparency. It supports long-term sustainability by aligning funding with assessed needs while strengthening participant outcomes. NFP is a key component of the government's Reform package. It is instrumental in achieving the Scheme growth target of 5-6% in the medium term and, by reducing inconsistencies in the planning process, will reduce the uncertainty in future Scheme expenditure estimates.

Background

- NFP focuses on an NDIS participant's individual needs and circumstances, not their diagnoses, supporting more equitable and transparent budgeting.
- The NDIA has undertaken significant work to re-baseline the NFP Program following the announcement by Government on 22 April 2026 to delay transition to NFP to April 2027.
- The delayed transition will allow more time to listen to feedback, test proposed rules and processes, and share more detailed information about the transition.

Key changes under NFP

- Support Needs Assessment (SNA): the SNA is a guided, person-centred assessment covering daily life strengths and support needs. It reduces reliance on external reports and uses the I-CAN v6 based tool, co-developed with the University of Melbourne and the Centre for Disability Studies (CDS). It is undertaken by a trained and accredited assessor.
- Fairer and more consistent budgets: budgets will be based on applying the SNA report to a method set out in the NDIS Rules, rather than relying on diagnosis or external reports.
- Simpler, more flexible plans: NDIS plans will focus on flexible budgets, with few stated supports.
- Longer plan periods: to provide greater certainty and fewer scheduled reviews.

Consultation and codesign

- The NDIA is working with DHDA to support consultation and engagement on NFP Rules. Public consultation on the NDIS Rules for NFP was open between 23 January 2026 to 6 March 2026. Input from NDIS participants, families, providers and jurisdictions will shape final rules.
- More than 7,000 stakeholders have contributed through co-design, testing, and engagement activities to date.
- The NDIA is testing NFP processes with participants. Participants, their families and carers can express their interest in taking part in this testing via NDIS Engage: [New Framework Planning Pool \(external\)](#).

NFP rules development

- Work is underway between DHDA, NDIA and states and territories to finalise the NDIS Rules on NFP, which will set out:
 1. how the Support Needs Assessment is applied,
 2. how reasonable and necessary budgets are determined, and
 3. how flexible and stated supports will operate.

Phased approach to implementation

- The Agency is implementing the NFP reforms through a phased approach to ensure a safe and smooth transition for NDIS participants and to ensure our workforce and systems are ready.
- NDIS participants will move to the new planning approach when identified as suitable. Participants will be given advanced notice of when they will be moved to the new planning approach.
- Many NDIS participants will not experience the new planning and assessment approach for some time. Current NDIS plans remain in place until a participant transitions to the NFP.
- Clear information, training and tools will be released before rollout so NDIS participants, providers and partners understand the new processes.

Governance, assurance and oversight of implementation

- The NDIA has established governance and assurance arrangements to oversee the implementation of NFP. This includes executive-level oversight within the NDIA, structured program management and ongoing monitoring of risks, issues and implementation of learnings.
- The NDIA is working closely with DHDA to ensure alignment with legislative, policy and system reforms, reflecting shared accountability for delivery.
- Up to 10,000 live assessments will be undertaken by November 2026 to validate the Support Needs Assessment and budget method. As at end April 2026, the Agency has undertaken 7,000 desktop assessments and 291 live assessments to test the model and participant experience.

Skills, training and accreditation for Support Needs Assessors

- A specially trained NDIA team member will complete the Support Needs Assessment.
- The NDIA is working in collaboration with the University of Melbourne and the CDS to develop the Support Needs Assessor training and accreditation program.
- The Agency will put in place training, guidance and accreditation arrangements to support consistent, high-quality assessment practices developed by the CDS. These arrangements will be supported by quality assurance and technical oversight mechanisms.

NFP for children and young people

- Timeframes for the implementation of NFP for children and young people have not yet been determined.
- The NDIA has already engaged with parents and carers of young children with lived experience of the NDIS and sector experts on early design concepts for the New Framework Planning pathway for children younger than 9, and assessment of their support needs.
- The NDIA is working closely with DHDA and states and territories to ensure that the transition to New Framework Planning for young children is sequenced in a way that minimises the impact on children and their families and complements the Thriving Kids program.
- The NDIA will work closely with the disability community and NDIS participants and families to support the implementation of New Framework Planning for children and its alignment with the Thriving Kids program.

If asked: is it a requirement to have tertiary allied health qualifications to administer the tool?

- To administer the tool:
 1. The first 80 Support Needs Assessors will be trained and accredited by the CDS. To complete this program, NDIA staff require:
 - A tertiary qualification in allied health, OR
 - Recognition of their qualification and disability experience by the CDS. This could be the case for a staff member whose allied health qualification is not on the CDS list.
 2. All remaining Support Needs Assessors will be trained and accredited using the Agency's training and accreditation program developed with the CDS. To complete this program, NDIA staff require:
 - A tertiary qualification in allied health, OR
 - Completion of the Foundational (bridging) program developed by the CDS. These staff will also be assessed as having the required skills, capabilities and experience for the Support Needs Assessor role.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000023

Title: Frontline Performance

Witness: Scott McNaughton, Deputy Chief Executive Officer,
Service Delivery

Talking Points

- As at 31 March 2026, the NDIS is supporting 774,736 participants.
- The Agency's key focus is ensuring NDIS participants receive the disability related supports they require in a timely manner.
- The Agency has noted a slight increase in the volume of plan change requests received each week, from an average of 5,000 (Q2 2025–26) to 5,300 (Q3 2025–26). This work remains a strategic priority.
- The Agency will continue to prioritise urgent change of circumstances reassessments, especially where there is a risk to the participant.
- We have increased our commitment to prioritising unscheduled requests by allocating more staff to this work and focussing on completion of the oldest work first, whilst prioritising review request based on participant risk.
- The NDIA continues to implement a remediation plan to address Participant Service Guarantee (PSG) timeframes and improve both the participant experience and PSG performance.

Key headline facts and figures

- For Quarter 3 (Q3) 2025–26, the Agency completed:
 - 25,421 access decisions (compared to 27,250 in Q2)
 - 19,730 first plan approvals (compared to 20,704 in Q2)
 - 68,334 plan change requests (compared to 62,598 in Q2)
 - 51,378 unscheduled plan approvals (compared to 51,055 in Q2)
 - 17,248 internal review decisions (compared to 13,250 in Q2).
- The NDIA continues to monitor and report on an expanded set of 18 PSGs during Q3 of the 2025-2026 financial year. Of the 18 PSGs reported in Q3:
 - 8 PSGs (44%) met the 95% performance target: PSGs 1, 6, 7, 9, 10, 16, 17b and 19
 - An additional 5 PSGs (28%) achieved over 80% performance: PSGs 2, 8, 13, 18 and 20.
- These results reflect the implementation of targeted operational strategies and resource allocation to improve participant outcomes.

Participant Service Guarantee Timeframes

- The NDIA has moved from reporting on 10 PSGs in Q4 2024–25, to reporting on 18 PSGs in Q3 2025–26.
- This is in alignment with our commitment to disability ministers to expand performance reporting when it is available.
- This quarter, PSG 2 (Make an access decision, or request for more information, after an access request has been received) timeframes reduced to 82% (-10%), as a consequence of staff being allocated to other priority work, however, access decision volumes remain within acceptable thresholds. PSG 4 (Approve a participant's plan, after an access decision has been made (excludes those supported by the early childhood approach)) results remained stable at 68% (-1%).
- A key NDIA focus has been to ensure participants' first plans are received in a timely manner. More than 96% of participants received their first plan within PSG 6 and 7 timeframes (56 days) in Q3 2025–26.

- We continue to experience a high number of participants seeking a review or reassessment of their NDIS plan, particularly for a change of circumstances.

Complaints

- In the March 2026 quarter, the NDIA had the lowest complaint rate in the past 2 years (12,337 participant complaints which is a complaint rate of 6.4% of active participants).
- The proportion of complaints resolved within 21 days increased to 86%, compared to 82% in the December 2025 quarter.
- Participant critical incident numbers were stable in the March 2026 quarter, with 5,194 notifications received, compared to 5,005 in the previous quarter.

National Contact Centre

- In the March 2026 quarter, the National Contact Centre received 803,508 contacts, a 1% decrease from the December 2025 quarter, and a 1% decrease from the same quarter in the previous year (March 2025 quarter).
- The following is a breakdown of contacts received in the March 2026 quarter by channel:
 - Voice – 388,011 (1% increase from previous quarter)
 - Email – 367,831 (4% decrease from previous quarter)
 - Webchat – 47,666 (0.2% increase from previous quarter).
- The average speed of answer for voice increased from 80 seconds to 93 seconds, with 67% of all calls answered within 60 seconds.
- Customer satisfaction exceeded the target (80%) at 92% in the quarter, and the NCC received no significant complaints about call waiting times.
- 87% of callers reported their enquiries were resolved at the first point of contact, exceeding the target of 80%.
- Email response times improved in the March 2026 quarter with 94% of incoming emails answered within two business days, exceeding the target of 90% answered within two business days, and up from 49% in the previous quarter. The average time to respond to an email was 1.2 business days.

Claims and payments

In Quarter 3 (Q3) 2025–26:

- The number of NDIS participants increased by 1.7% compared to the previous quarter (Q2 2025–26), from 761,442 to 774,456.
- 97.6% of claims submitted via myNDIS app or provider and participant portals were processed successfully.
- 2.4% of claims were rejected by NDIS systems due to failing by various financial and other controls. In addition to this, pre-payment integrity efforts review claims which lead to further rejections.
- 30,324 Claims and Payment Enquiry (CPE) were received and 28,494 were completed.
- The number of CPEs received decreased by 8.3% compared to the previous quarter (Q2 2025–26), from 33,058 to 30,324.
- The number of CPEs received decreased by 11.7% compared to the same quarter in the previous year (Q3 2024–25), from 34,328 to 30,324.
- CPE work on hand increased by 54% over the 9 months from 30 June 2025, from 8,137 to 12,517 as at 31 March 2026, with 51% (6,322) less than 21 days old, 20% (2,610) between 21 and 42 days old and 29% (3,585) over 42 days old.

Internal reviews

- As at 31 March 2026, there were 8,567 internal reviews awaiting a decision with higher-than-expected continued inflow.
- A number of strategic initiatives have been implemented to prioritise this work and reduce participant wait times, including partners in the community leaning in to support through work packages.
- The NDIA continues to review ways to increase outcomes to meet the increased inflow through system enhancements and realigning staff.
- Subsequent plans continue to be built and approved within PSG timeframes (99%).

2026–27 Budget Estimates

Supplementary Brief: SB26-000024

Title: Improving Participant Experience

Witness: Scott McNaughton, Deputy Chief Executive Officer,
Service Delivery

Talking Points

- Improving participant experience is a key priority for the NDIA and central to delivering a high-quality, fair and sustainable NDIS.
- The NDIA has implemented initiatives to make the NDIS more accessible, responsive, and participant-focused. This includes:
 - Operationalising legislative changes to the *National Disability Insurance Scheme Act 2013* (NDIS Act)
 - Providing a better digital experience
 - Implementing frontline and operational improvements
 - Engaging with participants and the disability sector to make it easier for participants to navigate the Scheme to access the supports they need.

Key headline facts and figures

- As at 31 March 2026, the NDIS is supporting 774,736 participants.
- We have increased our commitment to prioritising unscheduled requests by allocating more staff to this work and focussing on completion of the oldest work first, whilst prioritising review requests based on participant risk.

- The NDIA continues to implement a remediation plan to improve both the participant experience and Participant Service Guarantee (PSG) performance:
 - Total number of access requests on hand have decreased from 10,989 at the end of March 2025 to 4,063 end of March 2026. This is a reduction of 63% over 12-months.
 - An 81% decrease in the number of access requests on hand (from 22,440 in September 2024 to 4,063 in March 2026).
 - A key NDIA focus has been to ensure participants' first plans are received in a timely manner. More than 96% of participants received their first plan within PSG timeframes in Q3 2025–26.
 - In Q3, we completed 68,334 plan change requests (5,736 more compared to Q2) and 51,378 unscheduled reassessments (323 more compared to Q2).
 - PSG 13 (Complete a reassessment, after the decision to accept the request was made) showed improvements reaching 87%, which is an increase of +4% since Q2 2025–26.
 - PSG 17b (Enact on outcome of a reviewable decision) performance remaining stable at 98% in Q3.
 - Since 30 September 2024, the number of plan change requests on hand has reduced from 44,984 to 27,123 (at 31 March 2026) reflecting a 39% reduction.
 - In December 2024, the median days to complete a Plan Change Case was 66 days. The following year in December 2025, the median days was 24 days. In March 2026, the median days was 20 days, demonstrating a 69% decrease over 15-months.
- In the March 2026 quarter, the NDIA had the lowest complaint rate in the past 2 years (12,337 participant complaints which is a complaint rate of 6.4% of active participants).
- The proportion of complaints resolved within 21 days increased to 86%, compared to 82% in the December 2025 quarter.

Background

Legislative Changes

The amendment to the NDIS Act commenced in October 2024 and introduced important changes to improve the experience of participants and long-term sustainability of the NDIS.

This includes introducing a definition of NDIS supports that clarifies how NDIS funds can be spent (Section 10) and setting funding periods (Section 33).

Clarifying how NDIS funds can be spent gives participants clearer guidance, so they can make informed choices about how to use their funding.

In some specific circumstances, the NDIA can fund supports that are not NDIS supports. These are called replacement supports. A participant can apply for a replacement support, and the NDIA will assess requests against funding criteria.

Funding periods support participants to spend in accordance with their plan. From 9 October 2024, funding periods were initially set at 12 months. In May 2025, system changes occurred allowing funding periods to be set from 1 to 12 months.

Funding periods bring the NDIS into line with other government programs, where staged release of funding is common.

Three-month funding periods are the starting point for NDIA staff in their discussions with participants for most supports in their NDIS plan, as this gives flexibility to participants and helps participants manage budgets.

Reducing Volumes and Wait Times

To reduce wait times, the NDIA is prioritising access requests, first plans and plan change requests for participants with changes to their circumstances to ensure eligible participants without necessary supports can access the supports they need. (See relevant data points above).

We have increased our commitment to prioritising unscheduled requests by allocating more staff to this work and focussing on completion of the oldest work first, whilst prioritising requests based on participant risk.

The NDIA is also seeking to better understand the drivers of new plan change request volumes and provide participants with improved guidance on how to use their NDIS plan more flexibly.

National Contact Centre Improvements

In May 2024, the National Contact Centre (NCC) commenced the First Contact Resolution (FCR) project to improve first contact resolution for participants and providers. The project focuses on enhanced training, increased delegation of powers for Australian Public Service (APS) staff, and refined enquiry specialisation.

As a result, the NCC APS workforce can now complete a range of delegate tasks, including changes to nominees and representatives, participant-initiated exits from the NDIS, and low-complexity plan variations under section 47a of the NDIS Act.

Through the FCR project, more than 320,000 delegate and non-delegate transactions each year are now resolved at the point of contact, rather than being referred to planning teams. In the last quarter, the NCC completed an average of 16,000 delegate tasks per month under First Contact Resolution—tasks it previously lacked the authority to complete.

Improving NDIS Support in Rural and Remote Areas

Over the past 18 months, the NDIA has implemented a service model for people living in remote and very remote Australia that prioritises local, face-to-face services through Remote Community Connectors (RCC) and a network of over 200 remote servicing staff who regularly visit communities.

The remote servicing teams also have dedicated sector engagement and market development functions, to work with communities on improving access to NDIS services. The NDIA has also introduced a new 'remote service solutions' capability, building the sector workforce in remote Australia through partnering with the National Indigenous Australians Agency and running remote access clinics.

The NDIA is working with the NDIS Quality and Safeguards Commission and the Department of Health, Disability and Ageing to deliver a strengthened approach to improving participant safeguarding across remote communities through increased joint engagement and direct market interventions.

Other actions to improve the NDIA's service in rural and remote areas included alternative commissioning pilot sites in Maningrida, Northern Territory and Katanning, Western Australia which trialled approaches for improving access to supports in remote and First Nations communities. The pilot concluded on 30 June 2025. Pilot lessons are actively being implemented through the broader remote service model.

To better support early childhood services in remote locations, the NDIA is implementing the Remote Early Childhood Services (RECS) project (in the Kimberley region of Western Australia and in the Torres and Cape region of Queensland). The RECS project is designed to guide early childhood approaches tailored specifically for remote areas. To ensure continuity of service delivery and appropriate supports for children in remote areas, the NDIA will maintain RECS contracts until the Thriving Kids program is established.

Budget Management Support and Assurance Planning Teams

In May 2023, the Australian Government announced a \$724.4 million investment over 4 years to strengthen the NDIA and ensure the long-term sustainability of the NDIS.

The Assurance Planning Team (APT) and the Budget Management Support (BMS) team are part of this initiative, contributing to improved participant outcomes, enhanced plan quality, and sustainable service delivery.

The BMS team pre-emptively contact participants deemed to be at high risk of overspending their funding, with the aim of reducing intraplan inflation risks. They:

- Deliver proactive education, ongoing monitoring and a supportive approach to assist participants to spend within the intention of their plan.
- Undertake regular ongoing monitoring calls with participants and intermediaries.

On average, from July 2025 to 31 March 2026, 83% of participants made a commitment to spend in line with their plan. Sampling of participant expenditure after BMS intervention returns a 92% compliance rate, where participants return to normal spending.

As at 31 March 2026, the Assurance Planning Team (APT) comprised of **177 APT delegates** who complete an average of **1,200 reassessments per month**, with over 98% currently scheduled reassessments.

APT undertakes a range of plan reassessment activities, including scheduled reviews that target identified outliers. These outliers are determined through comparisons across key variables such as age, disability cohorts, level of impairment, and higher Social Community and Civic Participation (SCCP) funding. This includes plans with multiple extensions, partner-managed plans, and those with elevated support costs.

On average, plan reassessments completed by the APT result in a **19%** reduction in plan budgets. The team's strong focus on decision quality and consistency has also led to very low internal review overturn rates (**5%**), which is **lower than the average for other scheduled reassessments**. This performance demonstrates the robustness of APT planning decisions and their strong alignment with legislative and policy requirements.

Home and Living (dates are January 2026 – March 2026)

As at 31 March 2026, the Home and Living team comprised 194 specialised delegates* trained to assess home and living support requests.

During the March 2026 quarter, the Agency received **7,899** new home and living applications, representing a **13%** increase compared to March 2025. Of these, **97%** were finalised within 90 days¹², demonstrating timely decision-making despite increased demand.

As at 31 March 2026, there were **1,939** home and living applications in progress. Of these, **1,248 (64%)** were awaiting a decision, while **691 (36%)** were pending implementation of approved supports within a plan.

Where appropriate, home and living delegates meet directly with participants. This engagement supports participants to better understand how independent living outcomes may be achieved through alternative housing options and can assist in clarifying or gathering additional evidence required to support home and living requests.

Specialised Pathways

The Agency has established specialised pathways to centralise and streamline service offers for applicants and participants whose diverse and urgent needs were not being met through the standard pathway. These pathways support applicants and participants with complex needs, including those: with childhood dementia; who interface with child protection services; who are aged under 7 with a hearing impairment; who interface with the justice system; with terminal illness and disability; with Motor Neurone Disease; who are younger people in residential aged care; and, who are at risk of hospitalisation or require support to safely discharge.

The Scheme Eligibility Branch has established the Specialised Access and the Priority Teams to support these cohorts when applying to the NDIS.

The Scheme Eligibility Branch has also established a speciality remote and very remote (RVR) access team, servicing all RVR and non-partnered access applications. The team recognises the challenges these communities can face when trying to access government and/or mainstream services and provides support to apply to the Scheme in a streamlined and culturally appropriate way.

¹ *Delegate numbers exclude labour hire and supervisor portions (APS6 and EL1).

An application is considered closed if it is cancelled or rejected, a participant declined all home and living supports, or the application won't progress to implementation (e.g., participant deceased, participant does not proceed). An application is considered implemented once a participant has a new approved plan.

² For the March 2026 quarter, 1,239 of the 7,889 applications that were closed or implemented had no data on the closure date and were excluded from the percentage of applications closed or implemented within 90 days.

The RVR access team support NDIA remote access clinics virtually and face-to-face, completing 4 access clinics in the last 12 months for remote Northern Territory and Queensland. These clinics have resulted in 93 applicants meeting access and becoming a participant of the NDIS.

A Better Way to Inform and Engage with Participants

Information sessions are held regularly to ensure information about how the NDIS operates is available and accessible to participants, their families, carers and supporters. A webinar series, 'Understanding the NDIS', was launched in 2025 and has attracted over 2,400 attendees at over 28 sessions to date. Sessions are held monthly on different topics, such as community connections, employment supports, self-management and assistive technology. Those interested can register for these sessions at the latest events page on the NDIS website.

In 2025 the NDIA introduced NDIS Engage, an online platform where people can get involved and provide direct feedback to the Agency. It is the centralised platform for all consultation and engagement activity delivered by the NDIA, making it easier for participants, providers and the disability community to have their say on how to make the NDIS the best it can be.

In the last 6 months consultation activities on NDIS Engage have included:

- Public consultation on pricing to inform the Annual Pricing Review.
- Seeking feedback on ways to improve service agreements, in partnership with the NDIS Quality and Safeguards Commission.
- Targeted consultation with participants and families that have used the MND priority pathway, to help evaluate its effectiveness.
- Participant and community feedback continues to inform improvements to the NDIS.

In 2025 the NDIA established the Design Hub, a single environment for making sure the lived experience of people with disability is at the centre of testing and refining new planning tools, products, resources and participant experience. It is also being used to test staff guidance.

The Design Hub commenced sessions with participants in October 2025 and will continue to scale up as the NDIA works towards commencing the new way of planning. Participants can sign up to take part in new framework testing via NDIS Engage.

Design Hub testing is focused on the new approach to planning and includes one-on-one interviews, focus groups and in-person workshops. These sessions focus on gathering insights to improve participant resources that help participants prepare for a Support Needs Assessment, further develop the overall participant experience of the Support Needs Assessment process, and ensure that accessibility and inclusion are embedded in the new way of planning.

This work is essential to shaping the future of planning and ensuring participants have the resources and support they need.

The NDIA continues to focus on improvements to the Scheme that support the inclusion of diverse communities through the LGBTIQ+ Strategy, Culturally and Linguistically Diverse Strategy 2024–2028 and First Nations Strategy 2025-2030. The NDIA will be releasing a new LGBTIQ+ Strategy in 2026.

The NDIA is also progressing targeted participant experience initiatives through a structured program of 6-week design sprints, enabling focused, evidence-based analysis of known pain points. These sprints bring together participants, external stakeholders, the sector and NDIA staff to co-design and test practical changes to improve accessibility, communication and overall service experience.

Initial sprints have focused on improving contact experiences, including testing Auslan video calls to the National Contact Centre to support accessible communication for Deaf participants, and testing improvements to outbound call processes. These include options for participants to return missed calls and the use of pre-call notifications, aimed at making NDIA contact more predictable and easier for participants to reconnect. The next sprint will focus on NDIS app education and uplift, aimed at improving usability and supporting participants to access information and make greater use of self-service options. These initiatives are currently being tested and will inform consideration of future improvements to participant experience.

Auslan Video Call Sprint

This sprint involved strong engagement with Deaf stakeholders, working closely with Deaf Connect and Auslan NDIA staff, alongside targeted participant testing. Engagement was designed to reflect the relatively small Auslan cohort, with design informed through focused user testing and qualitative interviews.

- 1 participant and 6 Auslan staff engaged directly in co-design and testing
- Sector representative: Deaf Connect
- Internal representatives: National Contact Centre and the Office of Agency Accessibility and Inclusion

Return Calls Sprint

Targeted testing of return call functionality has been delivered in close collaboration with internal stakeholders across the National Contact Centre and Service Delivery, alongside direct participant engagement to validate usability and experience improvements.

- 10 participants engaged in targeted testing
- Builds on the Frontline Telephony Trial completed in December 2025, which involved:
- 4 frontline teams
- A 3-month trial period (Aug–Dec 2025)

Improved Digital Experience

- PACE functionality enables enhanced client experiences and mitigates the risk of using a legacy SAP platform.
- Since the implementation of PACE in October 2023, the National Disability Insurance Agency (NDIA) has been able to develop and implement system changes quickly in response to new legislation.
- PACE is being future proofed through the ongoing delivery of technical performance and stability uplifts in anticipation of higher forecast future volumes.
- The new NDIA mobile app has created a common experience for both PACE and SAP users.
- The NDIA is providing a positive experience by streamlining systems and processes. These improvements drive efficiencies and better support participants.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000042

Title: NDIS First Nations Initiatives and Strategies

Witness: Scott McNaughton, Deputy Chief Executive Officer,
Service Delivery

Talking Points

- Through the NDIS First Nations Strategy 2025–2030 (the Strategy), the NDIA is focused on improving outcomes for First Nations peoples with disability, their families and carers across Australia.
- The Strategy was launched in January 2025. The aim is to realise an equitable, culturally safe, community-centred and coordinated Scheme for First Nations peoples.
- Key areas of action underway include:
 - Improving access and support services including a dedicated First Nations stream in the NDIS National Contact Centre
 - Growing the First Nations provider market in urban, regional and remote areas through a First Nations Market and Sector Development Strategy
 - Strengthening the cultural safety of the NDIS and the NDIA through training and prioritising First Nations workforce growth and retention
 - Strengthening First Nations voices in Agency representation and co-design and improving meaningful data on First Nations participants' experience
 - Maturing our partnership with Aboriginal Community Controlled Organisations (ACCOs) and peaks.
- Further initiatives are being identified through the development of a Strategy Implementation Plan with the community and the NDIA Independent Advisory Council First Nations Reference Group for release in late 2026.

- The Strategy responds to the National Agreement on Closing the Gap (CTG) and findings of the Disability Royal Commission (DRC) and the Independent Review of the NDIS.
- It is built directly from the views of over 650 Indigenous organisations and communities.

Key headline facts and figures

- As at 31 March 2026, the NDIS supports 66,348 First Nations peoples with disability. This represents around 8.6% of all active NDIS participants.
- Between January and March 2026, 11.4% of new participants entering the NDIS identified as First Nations, up from 7.6% in late 2022.
- The occurrence of disability amongst First Nations peoples remains significantly higher than their non-indigenous counterparts with approximately 25.3% of First Nations peoples reported as having a disability. First Nations peoples are 1.9 times more likely to report disability.
- Access to supports for NDIS First Nations participants living in remote and urban communities is affected by thin markets and lack of culturally safe providers.
- In the calendar year 2025, the government administered \$3.38 billion in NDIS support payments to First Nations participants and 55,000 providers serviced First Nations participants.
- Fewer than 1% of those 55,000 providers are known to be First Nations providers, making reforms like the First Nations Market and Sector Development Strategy especially relevant.

Background

Alignment with the National Agreement on Closing the Gap

- The NDIA is not a lead Commonwealth agency responsible for CTG targets or outcomes. However, disability is a cross-cutting measure that impacts achievement of many targets.
- The Strategy will help deliver on commitments in the National Agreement including:
 - Aligning efforts with the Disability Sector Strengthening Plan to strengthen ACCOs and address culturally unsafe and thin markets in service delivery
 - Improving shared decision-making through co-design of NDIS reform implementation with First Nations communities, and
 - Incorporating principles of Indigenous Data Sovereignty.
- The Strategy aligns with and will facilitate the Agency to deliver the CTG Priority Reforms of shared decision-making, building the community-controlled sector, transforming government organisations and shared access to data and information at a regional level through Scheme and Agency policies, systems and processes.

Development of the Strategy

- The Strategy was launched on 17 January 2025 and establishes 4 clear priorities for reform, including:
 - Equitable NDIS access and support for First Nations people
 - Systems transformation and power-sharing in NDIS governance structures
 - Improved cross-sector collaboration to provide holistic services, and
 - Gathering and sharing data for continuous improvement.
- The Strategy was developed in 2024 in partnership with the First Nations Strategy Working Group.

2026–27 Budget Estimates

Supplementary Brief: SB26-000025

Title: Support Needs Assessment - Development and Procurement

Witness: Aaron Verlin, Acting Deputy Chief Executive Officer,
Service Design and Improvement

Talking Points

- The NDIS is transitioning to a new way of planning, known as New Framework Planning. As part of New Framework Planning, the NDIA will arrange for all participants to undergo a needs assessment which determines their disability support needs and allocate fair and consistent NDIS budgets on this basis.
- The NDIS needs assessment for adults (16+) will be based on the Instrument for the Classification and Assessment of Support Needs (I-CAN) version 6, which was developed in Australia and has been used in Australian government programs such as the Disability Support for Older Australians (DSOA) program.
- The NDIS needs assessment for adults will also include a questionnaire to understand a participant's personal and environmental circumstances, and any necessary targeted assessments to assess more complex disability support needs such as supported disability accommodation.
- In 2025, the NDIA ran a competitive procurement process to select the needs assessment tool for New Framework Planning. A consortium comprised of the University of Melbourne and the Centre for Disability Studies (an affiliate of the University of Sydney) was the successful tenderer, providing a licence for the NDIA to incorporate the I-CAN v6 into the NDIS needs assessment.
- The consortium will also provide a range of operationalisation support services to support implementation of the tool within NDIA operations, including supporting workforce training and accreditation, quality assurance, and data analytics and strategic advice. Through this partnership, we will monitor, refine and continuously improve the support needs assessment over time.

- These changes give effect to key recommendations of the Independent Review of the NDIS. The NDIA will continue to consult deeply with participants and disability sector representatives to develop and implement these changes.

Key headline facts and figures

- In 2023, the Independent Review of the NDIS made a range of recommendations for a fairer and more consistent participant pathway. This included a recommendation to introduce a new needs assessment process to more consistently determine the level of need for each participant and set budgets on this basis.
- In August 2024, the *National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No.1) Act 2024* passed the Australian Parliament. These amendments enable the creation of legislative instruments to give effect to New Framework Planning.
- The assessment and budgeting approach for New Framework Planning will be articulated in new Rules, which are agreed through a rule-making process with states and territories.
- The rollout of New Framework Planning has been delayed to 1 April 2027. The implementation of New Framework Planning is the biggest change to the NDIS since its introduction. We are taking the time to consult the community and other experts to make sure we get these changes right.

Background

Procurement of support needs assessment tool for adults (16+)

Milestone	Date
Tender release	5 February 2025
Deadline for questions	7 March 2025
Closing time	28 March 2025
Evaluations complete	17 June 2025
Preferred Tenderer notified	30 June 2025
Negotiation timeframe	2 July 2025 – 27 August 2025
Contract signed (A/g CEO) / start date	27 August 2025
Contract term	5 years with extension option of up to 5 years
Value (initial term)	\$28,855,537 (GST inclusive)

- In February 2025, the NDIA released an open and competitive procurement process on AusTender. Eleven submissions were received by the closing date for the Request for Tender.
- The Evaluation Panel included officials from the NDIA, the South Australian Department of Human Services and the Commonwealth Department of Finance. The Evaluation Panel was supported by a range of expert advisory groups, including a lived experience expert advisory group comprised of independent experts with lived experience of disability.
- The procurement process concluded on 27 August 2025.

Reports from trusted GPs and specialists

- The introduction of a structured needs assessment process reduces the need for participants to spend time and money sourcing costly and lengthy reports to support the planning process. Although there may be some circumstances where components of the assessment will use external health reports or quotes to ensure that more complex areas of need are appropriately understood.
- Participants will continue to be required to provide evidence from GPs and specialists to support NDIS access and eligibility decisions.

2026–27 Budget Estimates

Supplementary Brief: SB26-000026

Title: Support Needs Assessment - Validation and Testing

Witness: Aaron Verlin, Acting Deputy Chief Executive Officer,
Service Design and Improvement

Talking Points

- New Framework Planning (NFP) will improve the way people experience the NDIS, including through a holistic assessment of disability support needs.
- The rollout of NFP has been delayed to 1 April 2027. This will allow more time for more testing of the new support needs assessment (SNA).
- Testing of the SNA includes validation of the I-CAN tool in the NDIS context, and alongside the personal and environmental circumstances questionnaire (PECQ) and targeted modules for complex support areas. It also includes validation of the budget method.
- This program of work is designed to ensure the SNA and budget method work together as intended.
- The University of Melbourne and the Centre for Disability Studies (an affiliate of the University of Sydney) is supplying the Instrument for the Classification and Assessment of Support Needs (I-CAN) version 6 to the NDIA for use in SNA for adult participants.
- The I-CAN has been developed by the Centre for Disability Studies over more than 20 years in the Australian context. It has been tested through multiple research studies across a range of disability groups.
- Since September 2025, the NDIA has undertaken a program of desktop assessments of the new SNA. These assessments are being conducted by a dedicated internal workforce. The purpose of the desktop assessments is to inform refinements to the SNA and budget method and inform workforce requirements.
- The NDIA is also conducting live practice assessments with volunteer participants through the NDIS Design Hub. These assessments are helping to test how well the SNA works with real participants. These sessions inform important insights about assessment conversation flow, completeness of the information gathered and supporting emotional safety.

- Ongoing continuous improvement of the SNA will be supported through the NDIA's 5-year partnership with the University of Melbourne and Centre for Disability Studies. Findings from this work may lead to changes in how the SNA is delivered, or the guidance and resources provided to assessors and participants.
- The NDIA will continue to work closely with the disability community to modify and improve the SNA for different NDIS cohorts of participants over time.

Key headline facts and figures

- Government has provided funding of \$270 million for large-scale testing and preparatory activities to support NFP rollout from 1 April 2027.
- A target number of 10,000 tests has been set to inform rule development, budget model accuracy, process and system performance and participant and staff experience.
- Testing will provide evidence to support Government decision making and readiness to roll-out, with testing results and insights used to adjust assessment settings, workforce requirements and budget methodology ahead of full implementation of NFP.
- Validation will occur both prior to and after commencement of NFP.
 - Prior to NFP commencement – Development of the SNA and budget method, including Advance Party, Independent Review and live assessments through the Design Hub.
 - Following NFP commencement – Ongoing continuous improvement including through the University of Melbourne partnership.
- The development of the assessment and budget method have been supported by independent review, including a Professional Advisory Panel and an independent technical review of the budget model.
- As at 31 March 2026:
 - Around 10,000 desktop reviews of existing participant files have been completed to using the draft SNA.
 - 30 practice SNAs have been conducted through the Design Hub.
- Participants for the Design Hub tests are being sought through several channels. This includes in response to an advertised expression of interest for participants in the NDIA's fortnightly Participant First newsletter. More than 700 responses were initially received from this. Participants were selected based on criteria to ensure diversity across geographic location, gender and disability type.

- The NDIA is communicating Design Hub outcomes via the NDIS Engage website and making insights available to key partners through the pre-existing co-design working groups.
- Longer term activities for SNA validation are being established through the NDIA's 5-year contract with the University of Melbourne and Centre for Disability Studies.

Background

Prior to NFP commencement (up to 1 April 2027)

Advance Party

- The Advance Party commenced in September 2025 to conduct desktop reviews of SNAs. The Advance Party is made up of 60+ assessors. Each Advance Party desktop review results in a completed SNA, which is used to estimate a potential participant budget. The appropriateness of the budget is tested by comparing the estimated participant budget to the existing budget produced by old framework planning.
- The Advance Party also helps to identify any issues relating to the assessment. This informs refinements to the SNA, workforce requirements (including time-in-motion studies and assessor guidance) and policy settings.
- There are known risks and issues associated with the Advance Party analysis. These relate to the limitations of the data and sample, as well as differences in assessment outcomes expected between desktop reviews and live assessments with participants. Ongoing testing is occurring, including through live assessments through the Design Hub.

Testing by clinicians and health-care professionals

- The NDIA has engaged clinicians and health-care professionals in the development of the SNA through a variety of mechanisms:
 - Expertise through the University of Melbourne and Centre for Disability Studies
 - NDIA's own clinical workforce, including staff in the Technical Advisory and Practice Improvement Branch
 - Consultation and engagements with allied health and medical peak bodies
 - Other reference groups, including National Mental Health Sector Reference Group
 - The NDIA's Professional Advice Panel.

Professional Advisory Panel (PAP)

- The PAP is comprised of clinical and academic experts in disability and health, as well as in actuarial analysis and economics. The PAP includes clinical subject matter experts in occupational therapy, psychology, speech pathology, physiotherapy and nursing.

- The PAP has informed the design and development of the SNA, as well as how it is operationalised. The PAP is designed to engage responsively, offering feedback and expert reflections as required. Topics discussed include the development of the core assessment tool, development of targeted modules and review of descriptions of impairment categories.
- Going forward, the PAP will contribute to informing monitoring and evaluation of the overall framework, including the budget model, as part of a broader assurance approach.

Independent technical review of the budget model

- The development of the budget model has been further supported by an independent technical review. This involves technical review of the budget model and related processes, ensuring consistency of results, as well as validation of the financial projections.
- The primary purpose of the review was to validate the technical work being performed by the NDIA's Actuarial, Data and Analytics Division on the budget model. This includes the participant and scheme financial impacts that will arise from the implementation of NFP.

Design Hub

- The NDIA established the Design Hub in October 2025 to test NFP service design, Agency business processes and systems, as well as participant and assessor experience.
- The testing uses a range of formats including workshops, one-on-one 'real world' simulations of the participant pathway, including the SNA, and user testing interviews. This helps to inform the iterative design process, including participant and assessor resources required.
- The mock SNA process aligns with the proposed legislative framework for how an SNA will be conducted and includes completion of both the core tool (based on the I-CAN v6) and PECQ.
- As at 31 March 2026, 30 practice SNAs were conducted through the Design Hub. These participants took part in an SNA practice interview and survey. A smaller number of those also participated further in mock SNA preparation discussion and plan discussion meeting.
- The disability types represented in the Design Hub include autism, intellectual disability, physical disability, vision impairment, psychosocial disability and autism.
- Participants came from across the country and varied in age, with the youngest participant being 19 and the oldest 70.
- There are further testing activities scheduled through 2026, with 300 participants expected to undertake a practice SNA before the end of May.

The University of Melbourne and Centre for Disability Studies

- The University of Melbourne and the Centre for Disability Studies (CDS; together: the Consortium) will support the NDIA to monitor, refine and continuously improve the SNA (and budget model) over time.
- Prior to NFP commencement, the Consortium are supporting the NDIA to test the SNA. In addition, the Consortium are currently establishing a research program over the transition period to NFP.
- The NDIA-Consortium Project (the Project) is supporting critical deliverables for NFP, including delivery of a tested SNA tool in the NDIS context (underpinned by the I-CAN v6), along with workforce training and accreditation and support for quality assurance.

Project Governance

- In October 2025, a Joint Operational Project Leadership Group was established to oversee and progress day-to-day project delivery.
- In February 2026, a Joint Strategic Advisory Group was established to further strengthen governance and oversight of the Project.
- Since April 2026, the Project has been supported by three layers of project governance.
- The Project Steering Committee (the Committee) provides strategic direction and oversight to the Project. The Committee meets monthly. Two meetings have been held to date. The Committee's members include:

<u>NDIA</u>	<u>Consortium</u>
– CEO (Chair)	– Director, Melbourne Disability Institute
– Deputy CEO, Children, Specialised Services and Scheme Interfaces	– Dean of Medicine, University of Melbourne
– Scheme Actuary	– CEO, Centre for Disability Studies
– Branch Manager, Office of the Participant Advocate	

- Key outcomes include:
 - Confirming the immediate, medium- and long-term priorities for delivery under the Contract.
 - Determining an immediate approach to test and validate the SNA tool.
- The Committee is supported by:
 - The Joint Strategic Advisory Group, which provides strategic input on contract deliverables and ‘guard-railing’ for the Workstream 3 research program. NDIA membership includes senior executives from across the NDIA with responsibility for policy, workforce and participant experience. The Advisory group has met fortnightly (sometimes weekly) since mid-February 2026.
 - The Joint Operational Project Leadership Group, which continues to oversee and progress day-to-day project delivery. Membership consists of operational experts from across the NDIA. The Leadership group meets fortnightly.

Contract Workstreams

- Under the Contract, the Consortium will deliver work under 3 workstreams to the NDIA:
 - Workstream 1 – Ongoing project management and governance. This will be delivered over the 5 years of the project.
 - Workstream 2 – Provision of the assessment tool (i.e. the licence to the I-CAN v6) and operational readiness support. This also includes the development of the training and accreditation program for assessors, as well as development of the support materials for assessors to use when administering the SNA. This will be delivered by the end of 2026.
 - Workstream 3 – Consortium teams embedded within the NDIA to provide analytics and research support, and strategic advice. This work will be delivered over the 5-year contract period. It includes the analysis and insights about the SNA tool itself (including reliability and validity), as well as how the SNA is being implemented (such as with different participant cohorts). The Consortium’s lived experience insights team will engage with the disability community to understand how the SNA works in practice, including gathering feedback from participants with different disability types, from remote areas, First Nations and culturally and linguistically diverse backgrounds.

NFP Program integration

- The NFP Program will deliver an integrated program approach to provide assurance, evidence, and operational confidence for NFP implementation. Testing will be conducted across the full breadth of the NFP program. This includes the SNA and budget method, participant experience and safety, workforce readiness and technology delivery.
- NFP Program testing activities will continue following NFP commencement to support scaling, future technology enhancements, and transition of subsequent cohorts.

Following NFP commencement (1 April 2027 onwards)

- The Consortium support the NDIA to monitor, refine and continuously improve the SNA (and budget model) over time. This includes leading psychometric and broader performance testing of the I-CAN tool in the NDIS context (including reliability and validity testing).
- The Consortium's lived experience insights team will engage with the disability community to understand how the SNA process is working in practice. This includes gathering feedback from participants with different disability types, people living in remote areas, First Nations participants, and people from culturally and linguistically diverse backgrounds.
- The CDS will also support ongoing audit and quality assurance of assessment reports and the assessments completed by NDIA assessors.

2026–27 Budget Estimates

Hot Issue Brief: SB26-000010

Title: 2025–26 Scheme Expenditure and 2024–25 AFSR

Witness: David Gifford, Scheme Actuary

Talking Points

- To reduce annual growth in Scheme expenses, the Australian Government introduced a range of reforms and initiatives through changes to the *National Disability Insurance Scheme Act 2013* (NDIS Act) in October 2024. These included:
 - A list of NDIS supports under Section 10 of the NDIS Act to clarify what supports participants can spend their funds on.
 - ‘Funding periods’ under Section 33 of the NDIS Act to help participants spend within their plan budgets.
 - Various operational measures to better manage plan inflation.
 - Development of new framework planning that will introduce a supports needs assessment and flexible budgets.
- The 2024–25 Annual Financial Sustainability Report (AFSR) reflects the commencement of Foundational Supports and New Framework Planning (NFP) from 1 July 2026 (compared with 1 July 2025 for Foundational Supports and September 2025 for NFP respectively in the previous AFSR).
- Assumptions regarding Foundational Supports and NFP will be updated in future projections to reflect the policy intent of the Thriving Kids program announced by National Cabinet on 30 January 2026, when agreement is reached between states and territories and the Department of Health, Disability and Ageing (DHDA), and for roll out NFP being delayed to 1 April 2027.
- Overall, the projection of Scheme expenditure in the 2024–25 AFSR for the 4 years to June 2029 is within 0.5% (\$1.2 billion) of projected expenditure over the same period in the 2023–24 AFSR.

- The 2024–25 AFSR projections showed the NDIA is on track to meet National Cabinet’s NDIS growth target made in April 2023: from 9.4% in 2025–26 to rates below 8% from 2026–27 onwards, noting that further reforms will be needed to achieve the lower medium-term growth target of 5-6% per annum announced by National Cabinet on 30 January 2026.
- The latest projections for the 2026-27 Budget estimate that Scheme expenditure will increase by \$13.4 billion over five years from 2025-26. This means, without further reforms, costs will continue to escalate, and the 8% NDIS sustainability growth target would not be met in 2026-27.

Key headline facts and figures

- For March 2026, the key data points in relation to the June 2025 projections were:
 - Total Scheme expenses for the 9 months to 31 March 2026 were \$38.0 billion, \$350 million or 0.9% higher than the June 2025 projections.
 - The number of Scheme participants is 774,456 as at 31 March 2026, which is 4,503 or 0.6% more participants than expected in the June 2025 projections.
- As at 31 March 2026, annual (rolling 12-month) growth in Scheme expenses was 11.3%, up from 10.3% at the end of the previous quarter. Note the growth rates are volatile from month to month. The expected 25–26 full year growth rate is 10.5%.
- For the March 2026 quarter, plan inflation, excluding price indexation, was 5.9% per annum. This is lower than that in the March 2025 quarter of 11.0% per annum.
- April 2026 results in the published summary of statistics show:
 - \$50.6 billion of paid supports to participants for the 12 months ending April 2026, compared to \$45.3 billion for the 12 months ending April 2025 - an increase of 11.5%.
 - At the end of April 2026 there were 775,896 participants, compared to 724,158 at the end of April 2025 - an increase of 7%.
 - The average annualised payment per participant was \$67,000 for the 12 months ending April 2026, compared to \$66,000 for the 12 months ending April 2025 - an increase of 2%.
 - When comparing the same group of participants for the above, that is, excluding initial plans approved in the last 12 months, the average annualised payment per participant is \$69,800 for the 12 months ending April 2026. This compares to \$66,000 for the 12 months ending April 2025 - an increase of 6%.

2026-27 Budget Estimates

Supplementary Brief: SB26-000011

Title: NDIS Facts and Figures

Witness: David Gifford, Scheme Actuary and Chief Data Officer,
Legal Reviews Actuarial and Data

NDIS FACTS AND FIGURES 31 March 2026

NDIA: 1800 800 110

NDIS Fraud Hotline: 1800 650 717

NDIS Commission: 1800 035 544

NDIS at a glance as at 31 March 2026

Table 1

	Participant numbers	% of participants	Total Payments (\$m)	% of payments	Median payments ¹	Average payments ²
NDIS Participants	774,456	100%	\$50,102	100%	\$19,300	\$66,800
Receiving supports for the first time ³	562,034	73%	\$22,425	45%	\$14,800	\$41,900
Funds management type						
NDIA-managed	46,652	6%	\$4,501	9%	\$21,500	\$91,700
Self-managed (fully)	163,155	21%	\$3,514	7%	\$10,400	\$21,700
Self-managed (partly)	34,006	4%	\$2,563	5%	\$22,100	\$71,900
Plan-managed	527,469	68%	\$39,516	79%	\$23,400	\$78,900
Funds management type not recorded	3,174	0%	\$8	0%	\$100	\$2,700
Gender						
Male	469,604	61%	\$29,271	58%	\$18,100	\$64,200
Female	295,353	38%	\$20,459	41%	\$21,800	\$71,900
Other	9,499	1%	\$366	1%	\$13,800	\$41,400
Missing	0	0%	\$5	0%	\$-	\$-
Cohorts						
First Nations	66,348	9%	\$4,059	8%	\$18,900	\$65,500
CALD	67,501	9%	\$5,314	11%	\$31,400	\$81,100
Regional (include rural)	231,990	30%	\$13,774	27%	\$17,000	\$61,400
Remote & Very remote	11,876	2%	\$857	2%	\$21,100	\$74,700
Regional, Remote & Very remote (incl. rural)	243,866	31%	\$14,631	29%	\$17,300	\$62,100
Children under 15						
Children 0-8	167,787	22%	\$3,223	6%	\$11,400	\$19,000
Children 9-14	155,702	20%	\$3,399	7%	\$9,900	\$22,900

¹ Figures are rounded to the nearest hundred dollars. The calculation of median payments from exclude payments with negligible amount.

² Average payments are calculated as the sum of the payments in the 12 months prior to the reporting date, divided by the average number of participants that are active per working day in each month over the same period. They have been rounded to the nearest hundred dollars.

³ Those that did not transfer from existing Commonwealth, State and Territory disability supports prior to joining the NDIS.

15-18	80,700	10	\$2,561	5%	\$9,200	\$33,800
19-64	326,648	42%	\$35,070	70%	\$46,400	\$111,300
65+	43,619	6%	\$5,844	12%	\$60,300	\$143,900
Missing	0	0%	\$5	0%	\$-	\$-
Autism	338,099	44%	\$10,749	21%	\$12,700	\$34,800
Intellectual disability	99,535	13%	\$11,191	22%	\$49,700	\$115,100
Developmental delay	67,382	9%	\$1,059	2%	\$8,200	\$13,700
Psychosocial disability	65,964	9%	\$6,182	12%	\$57,400	\$94,300
Hearing impairment	29,682	4%	\$293	1%	\$4,900	\$9,900
Other neurological	26,145	3%	\$4,238	8%	\$67,800	\$166,900
Acquired brain injury	20,292	3%	\$3,496	7%	\$86,400	\$176,200
Other physical	20,268	3%	\$1,558	3%	\$34,800	\$77,100
Global developmental delay	19,083	2%	\$384	1%	\$11,100	\$19,100
Cerebral palsy	18,875	2%	\$3,221	6%	\$69,900	\$173,500
Other ⁴	14,388	2%	\$1,327	3%	\$27,600	\$101,200
Multiple sclerosis	12,426	2%	\$1,280	3%	\$38,500	\$105,900
Down syndrome	11,792	2%	\$1,637	3%	\$80,200	\$139,300
Visual impairment	11,182	1%	\$518	1%	\$26,400	\$47,200
Stroke	11,014	1%	\$1,790	4%	\$82,900	\$168,300
Spinal cord injury	6,570	1%	\$1,157	2%	\$82,300	\$180,300
Other sensory/speech	1,759	0%	\$23	0%	\$6,500	\$12,500

Source: NDIS Quarterly Report to Disability Ministers – 31 March 2026

Notes:

- Participant numbers refer to number of participants active as at 31 March 2026.
- Total payments refer to all supports paid over 12 months to 31 March 2026 on a cash basis, including costs for in-kind supports delivered by States and Territories. Total payments on an accrual basis are **\$50,122 million**.
- The sum of total payments for disaggregated categories may be slightly less than the national total payments of **\$50,102 million**, as they may not include participants in 'other territories', or uncategorised payments (payments with missing details).
- The columns '% of participants' and '% of payments' may not add up to 100% due to rounding.

Scheme statistics over time

NDIS participants

Table 2

	PC Estimate	At 30 Jun 2022	At 30 Jun 2023	At 30 Jun 2024	At 30 Jun 2025	At 30 Sept 2025	At 31 Dec 2025	As at 31 Mar 2026
NDIS Participants	500,000 by 2022-23 ⁵	534,655	610,502	661,267	739,414	751,446	761,442	774,456

⁴ This includes participants with missing disability information and covers approximately 45 conditions – the top 4 are 'Amputation - Single limb or upper/lower limb', 'Childhood apraxia of speech', 'Dementia – Early Onset' and 'Ehlers Danlos'.

⁵ The 2011 Productivity Commission report only included a breakdown by broad age group due to the sample size of the 2009 ABS Survey of Disability, Ageing and Carers (SDAC). Of the 411,250 participants estimated to be in the NDIS in the 2011 Productivity Commission report, 120,960 (29%) were estimated to be under the age of 14 years, 196,750 (48%) were estimated to be aged between 15-49 years, and 93,540 were estimated to be between 50-64 years (23%).

Plan budget and spending

Table 3

	At 30 Jun 2022	At 30 Jun 2023	At 30 Jun 2024	At 30 Jun 2025	At 30 Sept 2025	At 31 Dec 2025	As 31 Mar 2026
Participant Average Annualised Plan Budget ⁶	\$68,800	\$74,900	\$79,500	\$82,500	\$84,500	\$85,100	\$85,100
Participant Average Payments ⁷	\$55,200	\$60,700	\$64,400	\$65,800	\$65,800	\$66,700	\$66,800
Participants Utilisation – National Average ⁸	75%	76%	78%	75%	75%	75%	74%

Markets and providers

Table 4

	2022-23 Q4	2023-24 Q4	2024-25 Q4	2025-26 Q1	2025-26 Q2	2025-26 Q3
Active Providers in the quarter ⁹	167,409	215,779	269,432	273,673	276,581	277,376
Registered Providers ¹⁰	14,130	14,168	16,363	17,374	17,982	17,717
NDIA-managed ¹¹	8,971	8,964	9,751	9,930	10,335	10,451
Plan-managed	13,343	13,289	15,183	16,190	16,762	16,895
Self-managed	NA	5,770	8,968	9,474	9,468	19
Unregistered Providers	154,409	202,396	254,018	257,318	259,179	264,970
NDIA-managed	n/a	-n/a	n/a	n/a	n/a	n/a
Plan-managed	154,409	176,403	181,938	185,427	187,422	197,394
Self-managed	NA	55,777	126,974	127,676	127,408	116,980

	Month of Jun 2022	Month of Jun 2023	Month of Jun 2024	Month of Jun 2025	Month of Sep 2025	Month of Dec 2025	Month of Mar 2026
Successful payments	97.4%	98.0%	97.4%	97.7%	97.7%	98.0%	97.5%

Committed NDIS Provider Exits¹²

Table 5

	2021-22	2022-23	2023-24	2024-25	2025-26 to date (31 March 2026)
Full exits ¹³	22	33	79	147	121
Partial exits ¹⁴	39	41	49	100	124
Totals	61	74	128	247	245

⁶ Average annualised committed supports are derived from total annualised committed supports in the current plans of active participants at each reporting date.

⁷ Average payments are calculated as the average of the annualised monthly payments in the 12 month period to each reporting date, weighted by the participants that are active in each month. They have been rounded to the nearest hundred dollars. The participant utilisation and annualised plan budget are directly related (total payments/total plan budgets), but calculation of the annualised plan spend is using a different methodology and can't be directly calculated from the utilisation in the table but can be used as an indicative figure (i.e. if one were to take payments/plan budgets one would not get to the utilisation reported in the next line).

⁸ Only utilisation of committed supports over a 6-month period with 3 months prior to the reporting date is shown, as experience in the most recent quarter is still emerging. For 31 March 2026, only utilisation of committed supports over 1 July 2025 to 31 December 2025 is shown.

⁹ Active providers refer to those who have received payment in the quarter for supporting NDIS participants. The count of active providers excludes providers with an invalid Australian Business Number (ABN).

¹⁰ From 2025-26 Q3, registration status is based on whether a provider was registered for a specific support on the support provision date. Previously, providers were classified as registered if they were registered for at least one support. For self-managed participants, providing a Support Item Number is optional; where this is not provided, the provider's registration status for that specific support cannot be determined. These providers and their associated payments are classified as having unknown registration status and are not shown separately but are included in the total count of active providers. Providers claiming both registered and unregistered supports, or whose status changes during the quarter, are counted in both categories with payments reflected accordingly.

¹¹ The number does not include plan managers who received only payment for plan management fees.

¹² Provider exit notifications received by the NDIA for NDIS providers that require NDIA action/oversight.

¹³ A full exit is where a provider decides to cease delivering all NDIS supports.

¹⁴ A partial exit is where a provider decides to cease delivering some NDIS supports but continues to deliver other NDIS supports.

NDIS participants – Supported Independent Living (SIL), Specialist Disability Accommodation (SDA), Younger People in Residential Aged Care (YPIRAC)

Table 6

	PC Estimate	At 30 Jun 2023	At 30 Jun 2024	At 30 Jun 2025	At 30 Sep 2025	At 31 Dec 2025	As 31 March 2026
NDIS Participants - SIL	28,000	31,509	34,850	36,691	36,641	36,755	36,808
Annualised Committed Support - SIL	NA	\$13.07bn	\$15.72bn	\$17.39bn	\$17.78bn	\$17.912bn	\$17.986bn
NDIS Participants – YPIRAC with Plan under 65	NA	1,743	1,182	670	601	546	497
NDIS Participants – YPIRAC with Plan under 45	NA	34	25	11	10	10	10
NDIS Participants with SDA in use ¹⁵	NA	13,971	14,179	15,177	15,518	15,925	16,263
NDIS Participants SDA eligible, not yet using SDA ¹⁶	NA	9,853	9,955	9,880	9,756	9,577	9,370
Annualised Committed Support - SDA	\$700m	\$365m	\$470m	\$560m	\$592m	\$626m	\$653m
SDA Registered Providers ever active - Total	NA	472	594	Discontinued and no longer reported	Discontinued and no longer reported	Discontinued and no longer reported	Discontinued and no longer reported
SDA Registered Providers - Active	NA	355	468	514	514	561	563
SDA Enrolled Dwellings	NA	7,925	9,487	11,642	12,396	13,297	13,779

¹⁵ The number of participants with SDA in use are participants that have SDA funding in their latest plan and evidence of using SDA. Due to a change in the entry process for SDA funding in plans in the new computer system, the number of participants with SDA in use is reported instead of the number of participants with SDA funding to more accurately report on the number participants in enrolled SDA dwellings.

¹⁶ Participants who are SDA eligible (SDA funding not yet in use) are either participants that have SDA in their latest plan and don't have evidence of using it, or participants who have been found eligible for SDA through the home and living application process who don't yet have SDA funding in their plan.

Hospital Discharge Data – 28 February 2026

Table 7

Jurisdiction	Total NDIS participants in hospital	Medically Ready for Discharge	Not Medically Ready for Discharge	Average Days between 'Medically Ready to Discharge' to Discharge ¹⁷	Median Days between 'Medically Ready to Discharge' to Discharge ¹⁸
National	3,066	853	2,213	16	0
NSW	975	330	645	22	0
VIC	643	148	495	12	0
QLD	700	141	559	17	1
WA	252	69	183	9	0
SA	293	91	202	19	1
TAS	80	41	39	15	3
ACT	12	3	9	1	0
NT	39	13	26	10	0

Time taken – Median Days from Health information received to plan approval

Table 8

Time taken	Month of Mar 2025	Month of Apr 2025	Month of May 2025	Month of Jun 2025	Month of Jul 2025	Month of Aug 2025	Month of Sept 2025	Month of Oct 2025	Month of Nov 2025	Month of Dec 2025	Month of Jan 2026	Month of Feb 2026
Median Days from Health Information to Plan Approval for New Participants ¹⁹	14	16	20	14	15	15	13	15	15	15	28	18
Median Days from Health Information to Plan Approval for Existing Participants ²⁰	15	15	20	15	15	15	13	19	17	16	29	21

¹⁷ Regarding Average and Median Days between 'Medically Ready to Discharge' to Discharge:

- Figures are derived from participants notified as being discharged in the month of March 2026, excluding Long-Term Mental Health admissions.
- Medically ready and discharge date is reliant on updates from the hospital. There are inconsistent definitions across hospitals in regard to the medically ready date.
- The median is the indication that at least 50% of participants were discharged within 24 hours of being deemed medically ready.

¹⁸ Ibid.

¹⁹ Includes: All data nationally for New Participants. Excludes: Admission Type – Diversionary Need and Closure Reasons – Access Not Met, Admission Not Confirmed, Palliative Care, Participant deceased.

²⁰ Includes: All data nationally for Existing Participants. Excludes: Admission Type – Diversionary Need and Closure Reasons – Access Not Met, Admission Not Confirmed, Palliative Care, Participant deceased.

Time taken – Contact and plan approval

Table 9

Time taken	Month of March 2025	Month of April 2025	Month of May 2025	Month of Jun 2025	Month of Jul 2025	Month of Aug 2025	Month of Sept 2025	Month of Oct 2025	Month of Nov 2025	Month of Dec 2025	Month of Jan 2026	Month of Feb 2026
Participants contacted within 4 days of notification of hospital admission	87%	71%	84%	89%	87%	95%	91%	85%	82%	95%	94%	97%
Plans approved within 30 days ²¹	55%	54%	52%	55%	56%	53%	56%	55%	54%	55%	42%	51%

²¹ Performance against this KPI is highly dependent on the Agency getting all the available information from health systems to be able to finalise a NDIS plan within this timeframe.

Participation in community and social activities (for those in the NDIS for at least 2 years)²²

Table 10

	At 30 Jun 2022	At 30 Jun 2023	At 30 Jun 2024	At 30 Jun 2025	At 30 Sep 2025	At 31 Dec 2025	At 31 Mar 2026
Aged 15-24	34% to 41%	34% to 40%	33% to 39%	33% to 39%	33% to 38%	33% to 38%	33% to 38%
Total 15+	36% to 43%	35% to 42%	34% to 41%	34% to 41%	34% to 41%	34% to 41%	34% to 41%

Participation in work (for those in the NDIS for at least 2 years)^{23 24}

Table 11

	At 30 Jun 2022	At 30 Jun 2023	At 30 Jun 2024	At 30 Jun 2025	At 30 Sep 2025	At 31 Dec 2025	At 31 March 2026
Aged 15-24	11% to 21%	11% to 22%	10% to 22%	10% to 23%	10% to 23%	10% to 23%	10% to 24%
Total 15-64	22% to 23%	21% to 23%	21% to 23%	21% to 23%	21% to 23%	21% to 23%	21% to 23%

NDIS participant satisfaction (Rating of Good/Very Good)²⁵

Table 12

	2021-22 Q4	2022-23 Q4		2023-24 Q4	2024-25 Q4	2025-26 Q1	2025-26 Q2	2025-26 Q3
Access	81%	80%	The Early Supports Process	66%	61%	66%	65%	76%
Pre-planning	79%	80%	The Community Connections Process	72%	80%	78%	71%	79%
Planning	85%	86%	The Apply for NDIS Process (overall)	46%	48%	66%	59%	68%
Plan Review	70%	67%	The Apply for NDIS Process (access met)	52%	65%	80%	78%	80%
			The Apply for NDIS Process (access not met)	32%	27%	38%	31%	42%
			The Plan Approval Process	51%	54%	51%	47%	53%
			The Plan Implementation Process	58%	65%	60%	59%	61%
			The Plan Reassessment Process	70%	71%	66%	63%	69%

²² The results are based on responses provided to the outcomes framework questionnaires. Responses are collected at entry to the NDIS (baseline) and at subsequent plan reassessment or check-in for participants who have been in the NDIS for at least 2 years.

²³ Refer to footnote #24.

²⁴ Some of the increase is due to participants leaving school and starting work. As the NDIS matures it will be possible to analyse the extent to which the percentage gap increases.

²⁵ From Dec 2023, new survey formats were used which contains 6 pathway stages instead of the 4 in the old survey.

Participant Service Guarantee²⁶

FOI 26/27-0512

Table 13

PSG	Service type	Description of the service being guaranteed	Service guarantee	Performance in 2023-24 Q4	Performance in 2024-25 Q4	Performance in 2025-26		
						Q1	Q2	Q3
1	Access	Explanation of a previous decision, after a request for explanation is received.	28 days	NA	NA	95%	96%	96%
2	Access	Make an access decision, or request for more information, after an access request has been received	21 days	30%	47%	91%	92%	82%
3	Access	Allow sufficient time for prospective participants to provide information, after NDIA has requested further information	90 days	NA	NA	NA	NA	NA
4	Access	Make an access decision, or request for additional information, after more information has been provided	14 days	40%	46%	55%	69%	68%
6	Planning	Approve a participant's plan, after an access decision has been made (excludes those ECEI that have received initial supports)	56 days	23%	94%	96%	97%	96%
7	Planning	Approve a plan for ECEI participants, after an access decision has been made	56 days	99%	99%	100%	99%	100%
18	Implementation	Offer to hold a plan implementation meeting, after the plan is approved	7 days	81%	83%	85%	86%	85%
9	Implementation	If participant accepts the offer, hold a plan implementation meeting.	28 days	NA	NA	98%	98%	98%

²⁶ From the March 2026 quarter, performance is being measured from milestones built into the new computer system for most measures. PSGs 10 and 16 are captured within the same milestone. For PSGs 11, 14 and 18, performance is being measured from available data on processes and dates in the new computer system.

10, 16	Plan approval	Provide a copy of the plan to a participant, after the plan is approved (PSG 10) or amended (PSG 16).	7 days	NA	NA	99%	99%	99%
11	Plan reassessment	Commence facilitating a scheduled plan Reassessment, prior to the scheduled reassessment date	56 days	70%	62%	51%	53%	47%
12	Plan reassessment	Decide whether to undertake a Participant Requested Plan Reassessment, after the request is received	21 days	18%	26%	26%	31%	29%
13	Plan reassessment	Complete a Participant Requested Reassessment, after the decision to accept the request was made	28 days	74%	81%	83%	83%	87%
14	Plan variations	Amend a plan, after the receipt of information that triggers the plan amendment process	28 days	39%	45%	44%	44%	39%
17a	Reviewable decisions	Complete an internal Review of a Reviewable Decision, after a request is received	60 days	24%	75%	70%	44%	34%
17b	Reviewable decisions	Enact on outcome of a reviewable decision.	28 days	NA	NA	97%	98%	98%
18	Participant budget update	Implement an Administrative Review Tribunal (ART) decision to vary a plan, after receiving notification of the ART decision	28 days	NA	NA	87%	86%	90%
19	Manage authorised representative	Cancel participant requested nominee.	14 days	NA	NA	91%	98%	99%
20	Manage authorised representative	Cancel CEO initiated nominee	14 days	NA	NA	98%	99%	95%

Agency statistics over time

ART cases²⁷

Table 14

Total ART cases	2023-24 Q2	2023-24 Q3	2023-24 Q4	2024-25 Q4	2025-26 Q1	2025-26 Q2	2025-26 Q3
ART Cases - Total	1,769	1,896	1,852	1,620	2,483	2,221	2,294
Rate of new ART cases to active participants	0.26%	0.27%	0.26%	0.22%	0.33%	0.29%	1.19%
ART Cases – Open at the end of the quarter (% total ART matters from Scheme inception to quarter end)	3,671 (16.6%)	4,497 (23.4%)	5,056 (24.8%)	5,192 (18.9%)	6,102 (20.3%)	6,506 (20.2%)	6,817
Resolved prior to contested hearing (% of closed ART matters during the quarter)	1,023 (96.0%)	1,036 (96.8%)	1,249 (96.6%)	1,419 (95.6%)	1,503 (95.5%)	1,731 (95.3%)	1,918 (96.9%)
Received substantive ART decision (% of closed ART matters during the quarter)	43 (4.0%)	34 (3.2%)	44 (3.4%)	65 (4.4%)	70 (4.5%)	86 (4.7%)	61 (3.1%)

ART cases resolved²⁸

Table 15

ART cases that were resolved	2023-24 Q2	2023-24 Q3	2023-24 Q4	2024-25 Q4	2025-26 Q1	2025-26 Q2	2025-26 Q3
Resolution by agreement	67.5%	70.9%	68.8%	71.5%	67.6%	67.6%	67.4%
Withdrawn by applicant or dismissed	27.6%	25.3%	27.5%	23.6%	26.9%	27.4%	27.8%
Proceeded to a contested hearing	4.0%	3.2%	3.4%	4.4%	4.5%	4.7%	3.1%

²⁷ Figures restated to show results for the reporting quarter only in February 2026.

²⁸ Figures restated to show results for the reporting quarter only in February 2026.

ART cases to have a substantive hearing and decision²⁹

Table 16

ART Cases heard by the ART	2023-24 Q2	2023-24 Q3	2023-24 Q4	2024-25 Q4	2025-26 Q1	2025-26 Q2	2025-26 Q3
NDIA decision affirmed	25 (58.1%)	18 (52.9%)	28 (63.6%)	31 (47.7%)	40 (57.1%)	46 (53.5%)	33 (54.1%)
NDIA decision varied	4 (9.3%)	7 (20.6%)	4 (9.1%)	6 (9.2%)	6 (8.6%)	7 (8.1%)	6 (9.8%)
NDIA decision set aside	14 (32.6%)	9 (26.5%)	12 (27.3%)	28 (43.1%)	24 (34.3%)	33 (38.4%)	22 (36.1%)

NDIA's external legal spend

Table 17

Year	ART	Royal Commission	Other external legal spend	Total Agency external legal spend	Total Agency internal legal spend	Total Agency legal spend
2020-21	\$17,342,579	NA	\$214,136	\$21,256,431	\$8,521,180	\$29,777,611
2021-22	\$54,786,755	NA	\$392,835	\$59,414,410	\$7,472,904	\$66,887,314
2022-23	\$66,553,764	NA	\$1,130,865	\$72,058,982	\$8,767,786	\$80,826,768
2023-24	\$53,097,093	NA	\$141,786	\$59,717,446	\$11,305,814	\$71,023,260
2024-25	\$68,041,996	NA	\$13,654,250	\$81,696,246	\$14,729,770	\$96,426,016
2025-26 Q3	\$67,517,456	NA	\$9,626,456	\$-77,143,912	\$15,365,373	\$92,509,285

NDIS Service Delivery – other metrics^{30,31}

Table 18

	Target	2022-23 Q4	2023-24 Q4	2024-25 Q4	2025-26 Q1	2025-26 Q2	2025-26 Q3
Complaints – open complaints and the % that have been open 21+ days	21 days	1,559 (13%)	7,763 (58%)	1,400 (6%)	2,351 (10%)	1,576 (9%)	1,275 (4%)
Complaints – closed complaints and the % that were completed within 21 days	21 days	7,804 (78%)	21,803 (36%)	13,414 (90%)	17,194 (80%)	15,841 (82%)	14,260 (86%)

National Contact Centre

Table 19

	2022-23	2023-24	2024-25	2024-25	2024-25	2024-25	2025-26	2025-26	2025-26
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²⁹ Figures restated to show results for the reporting quarter only in February 2026.

³⁰ The numbers of complaints reported for the most recent quarter may still increase to the extent there is a lag in data collection. However, any increase is not expected to have a material impact on the results.

³¹ The historical number of complaints reported prior to the June 2023 QRDM has changed due to Participant Critical Incidents being reported separately from the June 2023 QRDM onwards.

	Q4	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Total number of contacts	584,979	708,967	784,549	787,215	809,377	833,617	910,911	812,109	803,508
Number of calls offered ³²	293,284	385,934	405,638	387,449	388,895	391,156	431,226	382,449	388,011
Average speed of answer in minutes	1:23	3:13	1:40	1:19	1:03	1:13	1:44	1:20	1:33
Service level (calls answered within 60 seconds) against the target of 80%	64%	39%	60%	67%	71%	70%	67%	74.5%	67%
Percentage of call utilised "virtual hold"	NA	11.6%	3.5%	2.3%	NA	NA	8.3%	6.6%	4.3%
Resolved within first response (prior to 2024-25 Q2), or at first point of contact (2024-25 Q3 and after)	86%	NA	NA	NA	86%	85%	86%	86%	87%
Customer Experience Rating ('High' or 'Very High')	92%	92%	93%	93%	93%	91%	91%	92%	92%
Number of Webchats offered ³³	31,257	44,018	42,601	48,159	47,651	52,848	55,642	47,570	47,666
Number of Emails received	260,438	279,015	336,310	351,607	372,831	389,613	427,761	382,090	367,831
Percentage of Emails completed within SLA target (2 business days)	72%	41%	85%	90%	67%	85%	87%	49%	94%

NDIS staffing and resourcing

Table 20

	At 30 Jun 2022	At 30 Jun 2023	At 30 Jun 2024	At 30 Jun 2025	At 30 Sept 2025	At 31 Dec 2025	At 31 Mar 2026
NDIA ASL (Actual)	4,458	4,988	6,402	8,888	10,381	10,486	10,513
NDIA APS	5,070	5,652	7,846	10,601	11,002	11,054	11,024
Contractors / Secondees	1,905	2,139	2,143 ³⁴	1,770	1,820	1,728	1,686

³² The outbound telephony figures reported in the chart refer to targeted outbound campaigns conducted by the NCC and does not include regular outbound calls made by the NCC as part of general business processes. Hence, in quarters where outbound telephony figures are not reported, the NCC did not conduct any targeted outbound campaigns.

³³ Webchats offered in 2023-24 Q4 were based estimated figure.

³⁴ 1,950 Labour Hire, 132 Consultants, 61 System access only.

LAC and ECEI Partners	4,816	4,917	4,769	4,713	4,606	4,585	4,569
NCC Partners	804	982	1,420	1,535	1,585	1,555	1,571
Other outsourced partners	-	-	14 ³⁵	10	12	12	14
Total	12,595	13,690	16,192	18,629	19,025	18,934	18,861
NDIA Staff with Disability	17.5%	19.9%	23.2%	23.4%	23.4%	23.4%	23.4%
Consultant Fees	\$8.9m	\$9.0m	\$12m	\$10.8m (unaudited)	\$5.0m (unaudited)		

Budget estimates for reasonable and necessary supports, 2025-26 to 2029-30

Table 21

Contributor (\$b)	2025-26	2026-27	2027-28	2028-29	2029-30
Commonwealth	38.2	40.1	39.6	40.0	40.4
States and Territories	13.1	13.6	14.2	14.3	14.4
Other	-	-	-	-	-
Total	51.3	53.7	53.8	54.3	54.8
Commonwealth (% of total)	74%	75%	74%	74%	74%
States and Territories (% of total)	26%	25%	26%	26%	26%

Note: The figures in this table are produced with reference to table 2.2.1 – Budget Expenses for Outcome 1 for the NDIA, contained on page 373 of the 2026-27 Health, Disability and Ageing Portfolio Budget Statements. “States and Territories” above is the sum of “contributions from state and territory governments”, and “revenue from other independent sources” (which relates to services provided in-kind to participants by state and territory governments), as per that table. “Commonwealth” is the sum of “payment from related entities” and “expenses not requiring appropriation in the Budget Year” as per that table.

Differences may occur due to rounding.

³⁵ Primarily security guards.

Participant growth and expenditure

Table 22

	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27
Participant numbers at end of financial year	466,619	534,655	610,502	661,267	739,414	779,705	805,735
Participant growth %		15%	14%	8%	12%	5%	3%
Scheme expenditure (\$ billion)	23.3	28.6	35.2	41.8	46.4	51.3	54.0
Growth %		23%	23%	19%	11%	11%	5%

Note: Projected participant numbers and Scheme expenditure from Financial Year 2025–26 onwards are based on data published in the latest 2024-25 Annual Financial Sustainability Report (AFSR).

Operating budget

Table 23

Year (\$ billion)	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27
	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Estimate</u>	<u>Estimate</u>
NDIA Operating – Budget	0.692	1.033	1.478	1.456	1.517	1.591	1.832	2.085	2.541	2.861	2.767

Table 24

Year(\$b)	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	2025-26	2026-27
	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Actual</u>	<u>Estimate</u>	<u>Estimate</u>
Total Participant supports*	0.458	0.857	3.487	8.045	15.139	16.262	23.297	29.304	35.100	42.417	46.196	51.302	53.704
Total Participant supports (Actual FBO)	0.451	0.723	2.238	5.418	10.460	17.621	23.413	28.635	35.199	41.893	46.436	NA	NA
Total Participant supports (Budget vs FBO)	0.007	0.134	1.249	2.627	4.679	-1.359	-0.116	0.669	-0.099	0.524	-0.240	NA	NA
NDIA Operating (Budget)	0.170	0.215	0.692	1.033	1.478	1.456	1.517	1.669	1.832	2.222	2.788	2.861	2.767
NDIA Operating (Actual FBO)	0.170	0.343	0.579	0.907	1.310	1.510	1.481	1.591	1.832	2.084	2.541	NA	NA
TOTAL (Budget)	0.673	1.079	4.212	9.147	16.731	17.850	24.840	30.973	36.932	44.639	48.984	54.163	56.471
TOTAL (Actual ³⁷)	0.636	1.075	2.856	6.397	11.881	19.266	24.921	30.226	37.031	43.968	48.977	NA	NA
TOTAL (Budget vs FBO)	0.037	0.004	1.356	2.750	4.850	-1.416	-0.081	0.747	-0.099	0.671	0.007	NA	NA

* "Actual" in this row refers to the "Estimated Actual" contained in the relevant budget paper contained in the last budget paper before each year was completed.

³⁶ The consolidated Final Budget Outcome variances are calculated using the cash budget and expenditure. These tables include the total expenditure as published in Portfolio Budget Statements and NDIS Annual Reports. Package costs include cash and in-kind.

³⁷ Refer to published NDIS Annual Reports.

NDIS Quality and Safeguards Commission Key Facts and Figures as at 30 September 2025

Note: All NDIS Commission figures are based on the latest Quarterly Performance Report [as at 30 September 2025]

Compliance

Table 25

Action	Q2 2024-25 1 Oct - 31 Dec 24	Q3 2024-25 1 Jan - 31 Mar 25	Q4 2024-25 1 Apr – 30 Jun 25	Q1 2025-26 1 Jul - 30 Sep 25
Banning order	41	63	54	68
Banning order revocation	1	1	2	0
Banning order variation	8	4	3	7
Civil penalty proceedings	4	1	0	2
Compliance notice variation	2	0	3	1
Compliance notice	33	203	467	576
Conditions on registration	0	0	1	0
Corrective action request	6	1,036	263	10
Education	597	4,450	421	73
Enforceable undertaking	0	0	0	1
Infringement notice	39	30	9	13
Registration refusals	1,214	1,108	274	140
Revocation of registration	44	74	200	161
Suspend registration	0	0	3	4
Warning Letter	81	56	77	39
Withdrawal of revocation	0	0	0	1

Complaints

Table 26

Action	Q2 2024-25 1 Oct -31 Dec 24	Q3 2024-25 1 Jan - 31 Mar 25	Q4 2024-25 1 Apr – 30 Jun 25	Q1 2025-26 1 Jul - 30 Sep 25
Received	8,780	8,423	7,910	7,119
Finalised	9,908	5,799	10,150	11,413
% closed in 90 day	49.5%	54.3%	27.1%	32.6%

Types of Complaints

Table 27

Issue %	Q2 2024-25 1 Oct - 31 Dec 24	Q3 2024-25 1 Jan - 31 Mar 25	Q4 2024-25 1 Apr – 30 Jun 25	Q1 2025-26 1 Jul - 30 Sep 25
Provider Practice	46.9%	42%	36.3%	40%
Abuse and Neglect	16.3%	19.4%	15.8%	13.3%
Worker conduct	16.2%	14.8%	17.8%	19.8%
Provider policies	7.6%	8.3%	9.1%	8.6%
Other	13%	15.6%	21%	18.4%

Reportable Incident Notification Types (non-URP)

Table 28

Actions	Q2 2024-25 1 Oct - 31 Dec 24	Q3 2024-25 1 Jan - 31 Mar 25	Q4 2024-25 1 Apr – 30 Jun 25	Q1 2025-26 1 Jul - 30 Sep 25
Alleged abuse	1,509	1,573	1,425	1,222
Alleged neglect	2,172	2,357	2,385	2,259
Death	729	764	784	843
Serious injury	2,938	3,112	2,994	2,691
Alleged sexual misconduct	219	192	199	165
Allegations of unlawful physical / sexual	1,017	1,005	942	817

Reportable Incident Notifications – Police Informed (URP and non-URP)

Police Informed	1,537	1,620	1,624	1,473
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Registered provider entry/exit - Count of new and deregistered providers per quarter

Table 29

Provider Type	Quarter of status change							
	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024	Jul-Sep 2024	Oct-Dec 2024	Jan-Mar 2025	Apr-Jun 2025	Jul-Sep 2025
New Provider ³⁸	1,303	1,774	1,849	1,724	1,749	618	1,955	2,685
Deregistered Provider ³⁹	815	531	643	898	363	368	663	545

Registered provider - Cumulative count of registered providers as at quarter end

Table 30

Provider Type	Quarter of registration status date							
	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024	Jul-Sep 2024	Oct-Dec 2024	Jan-Mar 2025	Apr-Jun 2025	Jul-Sep 2025
Registered providers	16,677	17,920	19,144	19,985	21,387	21,649	22,955	25,120

³⁸ Providers who have had new application or reregistration application to become a registered provider approved within the reporting period.

³⁹ Providers who have had registration record expire or revoked within the reporting period