
NDIS General Issues Enquiry

Hello

I would like to make a submission to the Joint Standing Committee on the National Disability Insurance Scheme regarding the administration process of the NDIS.

Background

My wife has an NDIS plan of which I am the nominee. My wife is blind so I conduct the administration of the plan. We are very happy with the plan and the assistance that it provides and would like to point out that we are not complaining about any decision by the NDIS. We are wanting to highlight that after more than two months there has been no decision made (either positive or negative).

Situation

As part of my wife's plan the CORE component enables house cleaning to be carried out and charged against her plan. The provider of house cleaning has been undertaking cleaning for the past four or so years, we are very happy and the fortnightly fee (\$100) we feel is very reasonable.

Up until recently our provider had a current ABN which enabled the processing of invoices to be carried out under the Plan Managed mechanism of the plan. This processing was done by a third party.

Recently our provider let the ABN lapse, meaning that the invoice could no longer be processed under plan managed system unless the provider has a current ABN.

Looking at the NDIS website a provider does not have to have an ABN if the plan is self managed.

A request to have the plan varied from plan managed to self managed was lodged on 31 March 2023. Subsequently a Change of Circumstances document was completed over the phone with an NDIS call centre staff member.

There was no other request to alter the plan budget or the items / services that the plan is intended to cover.

Follow up

Apparently any variation can take upto 21 clear business days before any outcome is communicated. Upon speaking with the NDIS hotline, all they can inform me is that the matter has been referred for review, they are not able to provide any update as to time , status nor are they able to transfer me to the area under taking the review. In a separate plan the NDIS plan manager varied the plan from Agency managed to plan managed in two days. I thought that this process would occur in my wife's plan.

Calls have been made to the NDIS call centre following up and all they can tell me is that it is still being looked at.

Suggestion re administration process

It is apparent that the NDIS do not differentiate between variation of payment process and a full plan review.

Could the NDIS establish a triage process?

Meaning that when requests for variations and reviews are submitted they are accessed as to their complexity so simple requests are dealt with expediently and those more complex (ie relating to funding / items in plan) are processed separately.

Looking from the outside it appears that all variations and reviews follow the same process

just like taking a ticket at the supermarket deli. Surely simple variations do not need to be accessed by numerous experienced review staff.

The current method looks as though it creates an unnecessary backlog which in turn puts pressure on staff.

So having a triage system would not only expedite simple requests but reduce pressure workload as well fulfilling NDIS statements of responding within 21 days.

Thanks and regards
Colin