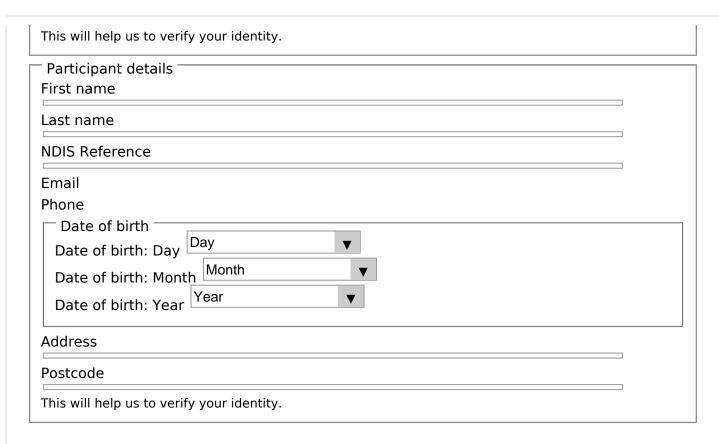
# Please complete this form to make a Participant Information Access request.

All fields marked with an asterisk (\*) are required. What information do you want? Your NDIS application You can ask for information about your NDIS application, including any information provided to support your application and the reasons for the access decision. **Your Current Plan** Access Request Form The Access Request Form (ARF) is the form you complete to apply for the NDIS. It also includes any medical documents you submitted with your ARF. Find out more about the ARF. Access decision letter When we decide if you are eligible for the NDIS, we call this an 'access decision'. We send you a letter to tell you if you are eligible, to explain the reasons for the access decision and your next steps. Find out more about the access decision letter. Supporting evidence form A Supporting evidence form (SEF) can be completed to provide evidence to support your application. Find out more about the SEF.  $\bar{\phantom{a}}$  Your NDIS plan (for current and past NDIS Participants only)  $\bar{\phantom{a}}$ Your plan includes information about you and your goals, what supports you need, and the funding the NDIS will give you. For your current plan, you can request the information we used to make the decision, the reasons for the decision, and a copy of your plan. Planning information This is the information collected at your planning meeting and includes your participant statement, goals, support needs and the planning conversation. Planner justifications These are the reasons why we made decisions about your NDIS supports. A copy of your NDIS plan Your plan includes information about you and your goals, what supports you need, and the funding the NDIS plan will give you. Your internal review of an NDIA decision

Outcome of NDIA internal review

O	ents (including medical)
	nts, including medical documents that you have provided to the NDIA:
	locuments / assessment reports
Examples of me from allied healt documents relat documents, plea	nts provided to the NDIA as supporting evidence for access or planning decisions. dical documents and assessment reports include letters from doctors, reports h professionals, and support provider reports. Please note, only medical ed to your most recent plan will be provided. If you need access to other medical se email us at information.access@ndis.gov.au.
Listed dis	
	provides the primary (and/or secondary) recognised disability listed for ne NDIS. The information would be provided in a one-page document.
	care (We will only have this document if the participant is in Supported
A roster of care needed by the p	for people in supported independent living arrangements lists the support ratios articipant and the times and days these supports are provided.  d living supports decision
of the decision is supports decision prior to this will	ant requests specialised disability accommodation in their NDIS plan a summary swritten. This is called a home and living supports decision. Home and living n letters are available for decisions made after June 2022. Any decision made be included in a participant's plan approval letter.  summary
A Payment Sum	mary lists the payments made by the NDIA for supports in your NDIS plan. This is to legal firms representing participants in a personal injury claim. Find out more
about payments	
about payments	re options. Please click on the document type for more information.)
about payments	ormation about you or someone else?*
about payments Choose one or mo Do you want inf About you	ormation about you or someone else?*
Choose one or mo Do you want inf About you About som	ormation about you or someone else?*
about payments Choose one or mo Do you want inf About you	ormation about you or someone else?*
about payments  Choose one or mo  Do you want inf  About you  About som  Choose one optio	ormation about you or someone else?*
Choose one or mo  Do you want int  About you  About som  Choose one optio	ormation about you or someone else?*
about payments  Choose one or mo  Do you want inf  About you  About som  Choose one optio	ormation about you or someone else?*
about payments Choose one or mo Do you want inf About you About som Choose one optio Your details irst name	eone else



We will action your request when you give us:

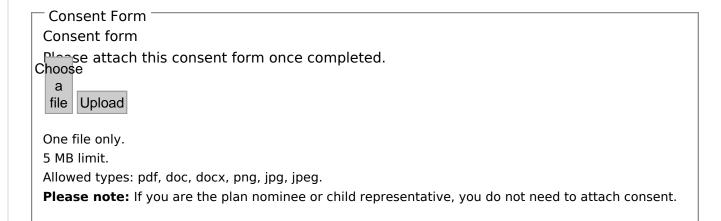
• proof of your identity

Find out more about proof of identity.

We will action your request when you give us:

- proof of your identity
- · evidence of your authority to make this request

Find out more about proof of identity and evidence of your authority.



Our policy is to respect and protect the <u>privacy</u> of all people connected with the NDIA, including participants, providers, employees, contractors and community partners.

If you are asking for information for someone else, you must provide us with proof that you are authorised to do so.

We cannot action your request until you have provided us with evidence of your authority and proof of your identity.

Learn more about consent and find a consent form.

### Contact us

Please email us at <u>information.access@ndis.gov.au</u> if you have any questions or need help to make your request. Please note that the Participant Information Access (PIA) Team only provides access to documents, and cannot make any changes to plans or decisions. If you have questions about your plan, a decision, or information within the documents provided, please speak with your local area coordinator or planner.

## Privacy and your personal information

Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by National Disability Insurance Agency (NDIA) for the assessment and administration of your request for information under the Participant Information Access Scheme.

This information is required under the *National Disability Insurance Scheme Act 2013* and is necessary to process your request for information.

Your information will be used to process your request and may be used for other purposes if you have consented or it is required or authorised by law. Get more information about the way the NDIA will manage your personal information, including our privacy policy.

Submit

## Please complete this form to make a Participant Information Access request.

All fields marked with an asterisk (\*) are required. What information do you want? Your NDIS application = You can ask for information about your NDIS application, including any information provided to support your application and the reasons for the access decision. **Your Current Plan** Access Request Form The Access Request Form (ARF) is the form you complete to apply for the NDIS. It also includes any medical documents you submitted with your ARF. Find out more about the ARF. Access decision letter When we decide if you are eligible for the NDIS, we call this an 'access decision'. We send you a letter to tell you if you are eligible, to explain the reasons for the access decision and your next steps. Find out more about the access decision letter. Supporting evidence form A Supporting evidence form (SEF) can be completed to provide evidence to support your application. Find out more about the SEF.  $^{ extsf{ iny Your NDIS}}$  plan (for current and past NDIS Participants only)  $^{ extsf{ iny Your NDIS}}$ Your plan includes information about you and your goals, what supports you need, and the funding the NDIS will give you. For your current plan, you can request the information we used to make the decision, the reasons for the decision, and a copy of your plan. Planning information This is the information collected at your planning meeting and includes your participant statement, goals, support needs and the planning conversation. Planner justifications These are the reasons why we made decisions about your NDIS supports. A copy of your NDIS plan Your plan includes information about you and your goals, what supports you need, and the funding the NDIS plan will give you. Your internal review of an NDIA decision Outcome of NDIA internal review This is a copy of the letter we sent you following the outcome of your internal review of a decision under section 100 of the NDIS legislation. Find out more about internal review processes. Other documents (including medical) Other documents, including medical documents that you have provided to the NDIA: Medical documents / assessment reports Medical documents provided to the NDIA as supporting evidence for access or planning decisions. Examples of medical documents and assessment reports include letters from doctors, reports

1	ied health professionals, and support provider reports. Please note, only medical		
documents related to your most recent plan will be provided. If you need access to other medical			
	ents, please email us at information.access@ndis.gov.au.		
-	isted disabilities		
1	ormation provides the primary (and/or secondary) recognised disability listed for		
	ants of the NDIS. The information would be provided in a one-page document.		
— N	oster of care (We will only have this document if the participant is in Supported		
	ndent Living)		
1	of care for people in supported independent living arrangements lists the support ratios		
	by the participant and the times and days these supports are provided.		
- ''	ome and living supports decision		
	participant requests specialised disability accommodation in their NDIS plan a summary ecision is written. This is called a home and living supports decision. Home and living		
	s decision letters are available for decisions made after June 2022. Any decision made		
1	this will be included in a participant's plan approval letter.		
	ayment summary		
	ent Summary lists the payments made by the NDIA for supports in your NDIS plan. This is		
_	provided to legal firms representing participants in a personal injury claim. Find out more		
about p	ayments.		
(Ch	ne or more options. Please click on the document type for more information.)		
	ne option)		
Your de	rails		
First nan			
Last nam	ıe		
Relations	ship with participant		
-	ple, parent, advocate, legal representative, etc		
Email			
Phone			
This will h	elp us to verify your identity.		
Participa	ant details		
First nan	ne		
Last nam	ie		
NDIS Ref			
	CICIEC		
Email			
Phone			
□ Date of	of birth		



Date of birth: Day  Date of birth: Month  Date of birth: Year  Day  V  Month  V  Vear					
Address					
Postcode					
This will help us to verify your identity.					

We will action your request when you give us:

proof of your identity

Find out more about proof of identity.

We will action your request when you give us:

- proof of your identity
- evidence of your authority to make this request

Find out more about proof of identity and evidence of your authority.

Consent Form

Consent form

Place attach this consent form once completed. Choose

a

file Upload

One file only.

5 MB limit.

Allowed types: pdf, doc, docx, png, jpg, jpeg.

**Please note:** If you are the plan nominee or child representative, you do not need to attach consent.

Our policy is to respect and protect the <u>privacy</u> of all people connected with the NDIA, including participants, providers, employees, contractors and community partners.

If you are asking for information for someone else, you must provide us with proof that you are authorised to do so.

We cannot action your request until you have provided us with evidence of your authority and proof of your identity.

Learn more about consent and find a consent form.

#### Contact us

Please email us at <u>information.access@ndis.gov.au</u> if you have any questions or need help to make your request. Please note that the Participant Information Access (PIA) Team only provides access to documents, and cannot make any changes to plans or decisions. If you have questions about your plan, a decision, or information within the documents provided, please speak with your local area coordinator or planner.

### Privacy and your personal information

Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by National Disability Insurance Agency (NDIA) for the assessment and administration of your request for information under the Participant Information Access Scheme.

This information is required under the *National Disability Insurance Scheme Act 2013* and is necessary to process your request for information.

Your information will be used to process your request and may be used for other purposes if you have consented or it is required or authorised by law. Get more information about the way the NDIA will manage your personal information, including our privacy policy.

Submit