

Document created pursuant to section 17 of the FOI Act — Information relating to FOI 16/17-010

Part 1

Total number of Registered Providers who had payments owing to them as a result of delays to the NDIS payments system during the period 1 July 2016 – 31 August 2016.

At 31 August 2016, there were no outstanding claims for payment under the NDIS. All payment claims successfully processed through the NDIS *myplace* portal between 1 July 2016 and 31 August 2016 were paid within 48 hours (two business days) of the claim being processed.

The National Disability Insurance Scheme (NDIS) portal and associated business systems allow for a payment request to be either successful or rejected. On 31 August 2016, 94.1% of payment requests were processed successfully through the portal.

Overall, the rules for lodging payment claims in the new NDIS ICT system are more rigorous than in the old ICT system used during trial to ensure better controls over outlays, as appropriate for the transition to the full scheme. Some NDIS providers and self-managed participants experienced difficulties using the new system's *myplace* portal with its more rigorous requirements and the Agency acknowledges it could have done more to help providers prepare for using the new system.

The Agency has responded to the difficulties providers experienced with making successful payment claims by:

- Making available advance payments to self-managed participants and to providers experiencing hardship resulting from their inability to claim for NDIS services. The Agency paid around \$18.2 million in advance payments, which were then offset against future successful claims for each provider or self-managed participant. The Agency has worked as a priority to acquit the advance payments made to providers and self-managing participants, which has also assisted in claiming returning to a business as usual mode.
- Implementing system enhancements to introduce payment request validation reporting. This reporting assists providers to rectify any payment request errors by providing them with details of which payment requests were successful, which were rejected, and the reasons for rejections.
- Relaxing certain business rules and progressing system change requests to reduce the barriers to claiming, particularly in relation to plans migrated from the old ICT system used during the trial period. These changes include: introducing greater flexibility for the participant's budget to be consumed across all core support categories; the automated creation of service bookings for bulk payment requests submitted by providers; and relaxation of rules regarding quotations.
- Following up individually with many providers that were partially or completely unsuccessful in claiming payments to assist them to resolve their claiming issues; as well as with providers registered with the Agency that had not made a claim since 1 July, to ensure they were not experiencing any claiming issues.
- Continually improving Agency efforts to support the sector to understand the new payment rules and submit successful payments requests, including by establishing a dedicated Provider Support Team, establishing regular portal updates on the NDIS website and advising providers about the latest portal advice and updates in a weekly provider newsletter.

Part 2

*Total **amount of unpaid payments** owing to Registered Providers as a result of delays to the NDIS payments system during the period 1 July 2016 – 31 August 2016.*

All successful payment claims in this period were paid within 48 hours (two business days) of the claim being processed, with the Department of Human Services making three standard payment runs per business day on the Agency's behalf.

Some providers and self-managed participants experienced difficulties using the new NDIS ICT system and advance payments were made to self-managed participants and to providers experiencing hardship resulting from their inability to claim for NDIS services. The Agency paid around \$18.2 million in advance payments to around 420 providers and around 400 self-managed participants.

These advance payments were then offset against future successful claims for each provider or self-managed participant. The Agency has worked as a priority to acquit the advance payments made to providers and self-managing participants, which has also assisted in claiming returning to a business as usual mode.

Part 3

*Total **number of complaints** made to the NDIA in relation to the NDIS IT system (i.e., the MyPlace portal) during the period 1 July 2016 – 31 August 2016.*

2044 complaints were received in this period through the Agency's Regional Offices or its National Complaints Team.

Part 5

The average wait time for participants who have made an access request after 1 July 2016 to have their first plan approved by the NDIA.

The average elapsed time between access request and first plan approval, for participants who made an access request between 1 July 2016 and 15 September 2016 (inclusive), and whose first plan had been approved by 15 September 2016, was 37.4 days.