

Your plan

Quick summary: Once we approve your plan, you can start to use your funding to buy NDIS supports. If you want us to, we'll help you start using your plan and help you connect with supports in the area you live. You must spend your funding in line with your plan, and only on [NDIS supports](#). We may check in with you during your plan to make sure it meets your needs and to check whether your situation has changed. You must also contact us if your situation changes during your plan. You can't use your plan if it's suspended. This could happen if you're outside Australia for more than 6 weeks or if you don't claim compensation you're entitled to when we ask you to.

Note: when we say 'your plan', we mean your NDIS plan. If you're looking for information about community connections, go to [Our Guideline – Community connections](#).

If you're looking for information about your child's early connections, go to [Our Guideline – Early connections](#).

Changes to the law: As part of the recent changes to the NDIS laws, we are moving towards a new framework for planning. Rules need to be developed for this new framework. We're working on how and when we'll introduce these changes.

Until then, the information in this Guideline is about our old framework for planning, which includes the legislation changes we are introducing from now. All current plans will be known as 'old framework' plans, and we'll continue to develop these until all participants have transitioned to the new framework.

What's in this guidance?

This guidance covers:

- [What happens after your plan is approved?](#)
- [What supports can you buy with your NDIS funding?](#)
- [How do you buy NDIS supports from providers?](#)
- [What happens during your plan?](#)
- [When can't you use your plan?](#)
- [What if you're not happy with your plan?](#)

You may also be interested in:

- [Our Guideline – Principles we follow to create your plan](#)

- [Our Guideline – Applying to the NDIS](#)
- [Our Guideline – Creating your plan](#)
- [Our Guideline – Plan reassessments](#)
- [Our Guideline – Plan variations](#)
- [Our Guideline – Reviewing our decisions.](#)

What happens after your plan is approved?

Once we approve your plan, you can start using it. This means you can spend your NDIS funding on the NDIS supports set out in your plan.

NDIS laws determine what we can and can't fund. Things we can fund are called NDIS supports.¹ NDIS supports are the services, items and equipment that can be funded by the NDIS. You can only use the funding in your plan to buy NDIS supports that are in line with your plan. The supports in your plan need to meet all [NDIS funding criteria](#). They need to directly relate to your disability.² In certain circumstances, you may be able to spend your funding on a replacement support instead.³ Learn more about [supports funded by the NDIS](#).

You can't use your NDIS funding to buy supports that other government services are responsible for.⁴ We call these supports [mainstream supports](#). For example, you can't use your NDIS funding on general health supports like your general practitioner (GP), because the health system is responsible for these services.

We'll send you a copy of your plan within **7 days** after we approve it.⁵ You can also find your plan in the [my NDIS portal](#) and app.

If you have a [nominee](#) or [child representative](#) with authority to manage your plan, we can send them a copy of your plan too. You can also ask us to share your plan with other people. We can only share your plan when you ask us to. Learn more about privacy and information in [Our Guideline – Your privacy and information](#).

If you want to, you can show your plan to another person or someone that works with you, like a health professional. This is entirely your decision. Learn more about [sharing your plan](#).

There may be some extra information we need before you can start claiming for NDIS supports. If you [self-manage](#) your funding, you'll need to give us your bank account details before you can make any claims. This is so you can access your funding and pay your providers. There are also some [NDIS supports](#) where you'll need to tell us who your chosen provider is before we can pay them. This includes telling us about your registered plan manager, if you have one.

This guideline explains how we help you to use your plan, and what NDIS supports you can buy with your funding. For example, we have guides on how to use the my NDIS portal and app, or how to work with providers. Learn more about how to [use your funding](#).

How can we help you start using your plan?

Once your plan is approved, we'll ask if you want to meet and talk about how to use your plan. We call this an implementation meeting.

You decide whether or not you want an implementation meeting. It's important to have an implementation meeting. It can help you understand your first plan, or if your new plan has a lot of changes from your last plan. We can help you understand what it means when your plan has a support determination applied. If you want to have this meeting, we'll arrange it within **28 days** after we approve your plan. Learn more about [support determinations](#).

You'll have your implementation meeting with your my NDIS contact, [support coordinator](#) or [psychosocial recovery coach](#) (recovery coach). Your my NDIS contact could be a local area coordinator, early childhood partner or NDIS planner. They can help you start using your plan.

For example, they can help you:

- understand your plan, and if your plan has funding periods and support categories
- understand what NDIS supports you can buy with your funding and how to claim
- understand if a support determination has been applied to your plan
- connect with your community and other government services
- understand what supports other government services, such as the health or education systems, can provide for you
- find providers that meet your needs and will help you pursue your goals
- use the [my NDIS portal](#) and [app](#)
- make [service agreements](#) with your providers
- answer any questions or concerns you have
- ask for a plan variation or a plan reassessment.

If your my NDIS contact is an early childhood partner, they can also help families understand the principles of best practice in early childhood intervention. To learn more, go to [Our Guideline – Early childhood approach](#).

What is a support determination?

We need to make sure the NDIS is financially sustainable.⁶ This means the scheme can continue to meet the needs of participants now and into the future.

To help do this, under the laws for the NDIS, the Minister can make a decision to reduce the funding you have available for some supports or support categories in your plan.⁷ This is called a support determination.

Support determinations will apply to all new and reassessed old framework plans approved on or after 1 October 2026. They will also apply to renewed plans from 1 February 2027.⁸

A support determination is applied after the delegate has decided the reasonable and necessary funding in your plan. This means you will have two funding amounts in your plan:

- the reasonable and necessary amount decided by the planner
- the available amount for you to spend after the support determination is applied.

Some supports won't have a support determination applied to them.⁹

Learn more about support determinations in [Our Guideline – Creating your plan](#)

If a support determination is applied to your plan and you meet the high support needs criteria, you might be able to ask for a plan variation.¹⁰ You can ask us to vary your plan for this reason if all of the below apply to your situation:

- you meet the high support needs criteria¹¹
- a support determination has been applied to your current plan
- the total amount of available funding in your plan has been reduced.

Learn more about plan variations and the high support needs criteria in [Our Guideline – Plan variations](#).

How can we help you connect with informal, community and mainstream supports?

There are many supports you can get that are not provided by the NDIS. These include:

- informal supports, such as your friends, family and other people you know in your community
- community supports, such as community groups, sporting groups or other activities in your area
- mainstream supports, such as health, education and other government services that are available to all Australians.

These supports can often help you pursue your goals. We don't give you funding for these supports.

At the plan implementation meeting we can support you to connect with other supports.

For example, we could help you:

- find community clubs you'd like to join, or activities you'd like to do
- talk to organisations, so they can adapt their service to meet your needs
- contact other government services, such as [Medicare](#), childcare, job services or health providers
- explore ways you can see your family and friends more often, or make new friends, if you want to.

Learn more about supports we can and can't fund:

- [Our Guideline – Reasonable and necessary supports](#)
- [What are NDIS supports?](#)
- [Our Guideline – Early connections](#) for children younger than 9
- [Our Guideline – Community connections](#) for people aged 9 and older.

What is an NDIS provider?

An NDIS provider is a person or organisation that delivers NDIS-funded supports or services to people with disability.

Generally, you are an NDIS provider if you:

- receive NDIS funding. For example, through a participant's plan or through other funding arrangements¹²
- provide general disability supports or services and are included as an NDIS provider under NDIS Rules.¹³

Some people and organisations may receive NDIS-related payments but are not NDIS providers.

This includes, but is not limited to:

- pharmacies. For example, you may buy medication or continence aids from your local pharmacy
- supermarkets. For example, you may buy general household items like batteries

- hardware stores. For example, you may buy items like grab rails.

What does an NDIS provider do and how do they get funding?

NDIS providers can support you, your family and your informal supports in different ways.

They can help you:

- find information about disability, supports and services¹⁴
- access the supports you need¹⁵
- connect with your community¹⁶
- build your skills and independence¹⁷
- take part in social and work activities.¹⁸

Some providers also help children younger than 7 to get disability supports before they have an NDIS plan.¹⁹

We may fund NDIS providers to deliver these and similar supports under the NDIS laws.²⁰

Registered and unregistered providers

Some providers are registered with the NDIS Quality and Safeguards Commission. This means they meet strict conditions for the quality and safety of their services. We call them 'registered NDIS providers'.

If a provider isn't registered with the NDIS Quality and Safeguards Commission, we call them an 'unregistered provider'.

How can we help you find service providers?

Your my NDIS contact, support coordinator or recovery coach can help you find service providers.

You can usually choose any provider you want to provide your NDIS supports. But if your funding is Agency-managed, you can only choose from registered NDIS providers. There are [some types of supports](#) where you must always use registered NDIS providers. Your plan might also include that you can only buy NDIS supports from a specific provider or type of provider.

We can't recommend specific providers to you. But we can let you know about the different providers in your area, to help you decide which ones you might like to use.

You can also check for providers on the internet, look at reviews, or get advice from friends or family. It's a good idea to speak with different providers before you choose one.

You can search for registered NDIS providers on the [myplace portal](#) or with our [Provider finder](#).

We don't pay family members to provide funded supports other than in [exceptional situations](#). Learn more in [Our Guideline – Including specific types of supports in plans](#).

What supports can you buy with your NDIS funding?

Your plan includes information about the [reasonable and necessary](#) supports you can buy with your NDIS funding.

We fund NDIS supports. NDIS laws determine what we can and can't fund. We call the things we can fund [NDIS supports](#).

When you buy a support with the NDIS funding in your plan, it needs to meet **all** of the following criteria:

- the support is an NDIS support for you²¹
- the support isn't declared to be **not** an NDIS support²²
- the support doesn't consist of the provision of sexual services and sex work, alcohol or drugs²³
- the support is related to your disability²⁴
- the support is in line with your plan.²⁵

Spending in line with your plan means only spending your funding on the supports included in your plan. To spend in line with your plan, you need to:

- spend your funding in the way we describe. This includes any stated supports, where we describe the supports you can buy more specifically
- make sure your funding will last for the whole length of your plan
- if your plan includes funding periods and funding component amounts, make sure your funding will last for the length of each funding period.

When you buy supports in line with your plan, you need to make sure they are [NDIS supports](#) or an agreed replacement support that relates to your disability.

If you buy supports that aren't NDIS supports in your plan, or are not an approved replacement support for you, you may need to pay this money back to the NDIS. Find out more about [what happens if you buy supports that aren't in your plan](#).

Replacement supports

In limited circumstances, we may agree that you can spend your funding on a support that isn't an NDIS support. We call this a 'replacement support'.²⁶

You can only spend your funding on a replacement support if we've agreed in writing that you can buy this support.

To have a replacement support, it must:

- be on the [list of replacement supports](#)
- replace one or more other supports that are NDIS supports for you
- cost the same or less than the total cost of the supports it's replacing
- work the same or better than the supports it's replacing.

There are a few ways you can ask for a replacement support:

- complete our 'Application for replacement support form' and send it to us
- contact us by phone by calling 1800 800 110
- send an email to enquiries@ndis.gov.au and include any evidence to support your request
- send us a letter and include any evidence to support your request
- visit one of our [NDIS offices](#).

We'll help you apply for a replacement support if you want us to.

We'll contact you before we make our decision about whether we approve the replacement support you have asked for. You'll also get a letter from us with our decision. If we approve the support, the letter will also explain how you claim for the replacement support.

To download the 'Application for replacement support form' or to learn more, go to [What is a replacement support?](#).

How is the funding in your plan organised?

New and reassessed plans approved from **3 October 2024** will include:²⁷

- a total funding amount
- funding component amounts
- funding periods.

Your **total funding amount** is the total amount for all reasonable and necessary supports funded in your plan. We'll call this a 'total budget amount' in your plan.

A **funding component amount** is the total amount of funding you have for a specific support, or a group of reasonable and necessary supports, over the full length of your plan. We'll use support categories to describe the reasonable and necessary supports in each funding component amount. Read about [how we describe the supports in your plan](#).

A **funding period** is the time that a part of your funding becomes available and how long it needs to last. You can spend up to the amount of funding available in that time. Funding periods can be for either the total funding amount of your plan or for each funding component amount in your plan.

Learn more about [how much of your plan funding you can access at once](#).

It's important that you buy your NDIS supports in line with any funding component amounts and funding periods in your plan. That means that your funding can only be used to purchase the specific supports, or group of supports, that are included.

You can't spend the funding from a funding component amount on supports that:

- are included in your plan in another funding component amount
- are not included in your plan and are not NDIS supports.

Learn more on how we include the NDIS funding in your plan in [Our Guideline – Creating your plan](#).

Example

Alex receives their first plan. It has a total funding amount of \$210,000. Their plan includes reasonable and necessary supports to help them with their everyday tasks, as well as funding to buy assistive technology so they can navigate around their house independently.

We decide to group Alex's plan into 2 funding component amounts. The first funding component amount of \$200,000 includes funding for NDIS supports for everyday tasks. We describe these supports as flexible, so Alex can decide how to spend their funding in a way that works for them.

Funding periods are set at 3 months for these supports. We divide the funding evenly, so Alex can access \$10,000 every 3 months for their everyday NDIS supports.

Alex knows that any funding they don't spend in the first 3 months of their plan will roll over to their next funding period, and they know when they'll be able to access the next portion of their funding.

The second funding component amount in Alex's plan is for their assistive technology. They have \$10,000 for this funding component amount. We expect Alex will use this funding at the start of their plan, so they can use it to buy the assistive technology they need. We include \$10,000 for assistive technology in the first funding period of their plan. Alex won't need funding for assistive technology included in the other funding periods of their plan.

How do we describe the supports in your plan?

We describe the NDIS supports in your plan using support categories. Each support category in your plan includes a definition of the types of supports you can use this funding for. Currently, plans show your supports as funding components grouped under 4 different support budgets:

- **Core supports:** NDIS supports to help you with everyday activities, like help to take part in activities in the community.
- **Capacity building supports:** NDIS supports to help you build your skills. This may increase your independence and reduce the need for the same level of support in the future. Your progress and outcomes from these supports will be shared at each plan reassessment.
- **Capital supports:** NDIS supports including high cost assistive technology, equipment, vehicle modifications, home modifications and specialist disability accommodation.
- **Recurring supports:** NDIS supports that are paid by us on a regular basis. Your funding for recurring supports will be paid regularly to your nominated bank account. This funding is not included anywhere else in your budget.

You can learn more about [support budgets and support categories](#) on the NDIS website.

We are moving to a new way of showing your budget in your plan to give you more flexibility in how you manage your individual supports. Your next plan may not show your capacity building, capital and recurring supports in the same way. Your NDIS supports will be included in your plan as individual funding components instead of being grouped as a support budget, like capacity building or capital. Your plan will still show if the supports are flexible or stated.

A funding component amount in your plan might include funding for more than one Core support category. This means you can choose how you want to spend your funding across all the supports under that funding component amount.

For example, in the same funding component amount we can include any funding for:

- transport
- consumables
- assistance with daily life
- assistance with social, economic and community participation.

This lets you choose how to use your funding for your Core supports.

We can describe the NDIS supports in your plan as either flexible or stated, based on NDIS laws.

When your NDIS supports are **flexible**, we describe the support generally. This gives you greater flexibility over what NDIS supports you can buy.²⁸ You can usually choose what NDIS supports to buy within the descriptions for each support category. We describe most support categories as flexible when we can, so you have more choice about the NDIS supports you can buy with your flexible budgets.

For example, we could include flexible funding in your plan for the support category 'assistance with daily life'. You can use this funding in the way that suits you to pay support workers to help you in your daily life. You may choose to get support with household cleaning or preparing meals, as long as you are buying supports that are NDIS supports for you and are in line with your plan.

When your NDIS supports are **stated**, we describe the support specifically. It means you must buy NDIS supports in the way we have described in your plan.²⁹ We'll be clear when we describe a support category as stated in your plan.

When support categories are described as stated, you have less flexibility. You must use the funding in your plan to buy NDIS supports exactly how we describe them. This includes how the support is provided. For example, we'll sometimes require the support to be provided:

- by a particular service provider
- by a particular qualified person
- through a particular delivery mode or method, or in a special way.

Some stated supports are more specific than others. More specific supports have less items you can spend your funding on.

For example, we could say in your plan 'meal preparation must be limited to \$200 per month' or 'this funding must be used for physiotherapy'.

Learn more about funding components for specific supports in [Our Guideline – Creating your plan](#).

If you're not sure how we described the NDIS supports in your plan, ask your my NDIS contact, support coordinator or recovery coach.

How do you buy NDIS supports from providers?

This section explains:

- [How do you agree on NDIS supports with your service provider?](#)
- [What happens if your agreement doesn't go the way you want it to?](#)
- [When do you need to use registered NDIS providers?](#)
- [Do you need to tell us about your providers?](#)
- [What if there are no service providers in your area for your supports?](#)
- [Can I pay my family to deliver NDIS supports?](#)
- [How much will we pay for each NDIS support?](#)
- [Fund management type](#)
- [Making claims and managing your funding](#)
- [When do you need an assessment or quote before buying NDIS supports?](#)
- [What happens if you buy supports that aren't in your plan?](#)
- [What if I spend my funding before the end of the funding period?](#)

How do you agree on NDIS supports with your service provider?

Once you've chosen a provider, you'll need to contact them and agree on what NDIS supports they'll provide.

You can negotiate with your provider about what you get from your NDIS support. For example, you can agree with your provider about:

- what support your provider will and won't provide
- how much you'll pay for the NDIS support
- your and your provider's responsibilities
- how to change the agreement in the future if you or your provider want to
- how you and your provider will resolve any issues and disputes.

The way your funding is managed will affect how much you'll pay for your NDIS supports. Learn more about [how much we will pay for each NDIS support](#).

Your my NDIS contact, support coordinator or recovery coach can help you negotiate with service providers. Learn more about [working with providers](#).

If you want, you can put this information in a service agreement. Learn more about [service agreements](#).

You don't need a written service agreement for all NDIS supports. But it's usually a good idea to have one and to record answers to the types of questions listed above. That way, it's clear what you and your provider have agreed to. However, you must have a written service agreement for [specialist disability accommodation](#).³⁰

Even though we fund the NDIS support, we're not part of the agreement. The service agreement is between you – the consumer – and your provider. This is a legal agreement that you're both responsible for.

What happens if your agreement doesn't go the way you want it to?

You need to raise any problems directly with your provider. That's why it's important to set out your expectations and your provider's responsibilities in your service agreement.

The [Australian Consumer Law](#) applies to service agreements.³¹ This law protects you as a consumer when you buy supports with your NDIS funding.

The Australian Competition and Consumer Commission (ACCC) has some [helpful resources](#) if you have a complaint or need advice. We also have links to [other consumer resources](#) on our website.

If you want to make a complaint about a provider, you can also contact the [NDIS Quality and Safeguards Commission](#). The NDIS Commission can take complaints from anyone about:

- supports that weren't provided in a safe and respectful way
- supports that weren't delivered to an appropriate standard
- how an NDIS provider managed a complaint about the supports they provided to you.

When do you need to use registered NDIS providers?

You must use registered NDIS providers to buy NDIS supports when your funding is Agency-managed.³²

Registered NDIS providers meet strict conditions for the quality and safety of their services. Learn more on the [NDIS Quality and Safeguards Commission website](#).

Some NDIS supports can only be provided by registered NDIS providers. These include:

- [Specialist behaviour supports](#), if the provider will undertake a behaviour support assessment or develop a behaviour support plan³³
- any NDIS support that is likely to involve a [regulated restricted practice](#),³⁴ either for a short amount of time or on an ongoing basis
- [Plan management](#)³⁵
- [Specialist disability accommodation](#)³⁶
- [Supported independent living](#)
- [NDIS digital platforms \(previously called platform providers\)](#).

You must use registered NDIS providers for these supports, even if:

- your plan doesn't say you need to
- you self-manage your funding
- you use a registered plan manager.

You'll need to tell us about the providers you choose for these supports before we can pay them.

Do you need to tell us about your providers?

We need to record the details about providers of certain Agency-managed supports in your plan. This is so we can pay them for the NDIS supports they provide to you. Once your plan is approved, you'll need to tell us about your chosen providers for these supports. We call these 'my providers'. We used to call them 'participant-endorsed providers'.

When you tell us about your providers, we can record their details and pay them for the support they have given you. Only your my providers can claim for these supports.

You can change your my providers at any time. You can [contact us](#) to tell us you have chosen a new provider. You will need to let your previous provider know that you no longer want them to provide supports to you.

What if there are no service providers in your area for your supports?

If you're finding it difficult to find service providers in your area, talk to your my NDIS contact, support coordinator or recovery coach. They may be able to help you find services in your area or work out other options for your situation.

You may be able to get some NDIS supports over the phone or internet, for example therapy through [telehealth](#).

Can I pay my family to deliver NDIS supports?

The NDIS generally does not pay family members to provide [NDIS supports](#).

This is because evidence says funding a family member to replace paid supports can impact relationships, health and wellbeing of participants and their families.

This may:

- limit a participant's choice and control in the delivery of their supports
- stop family members who provide paid supports from taking a break
- create a [conflict of interest](#).

That's why we won't pay family members to deliver NDIS supports unless there are exceptional circumstances.

We'll consider this when:

- there's a risk of harm or neglect to you
- there are cultural or religious reasons for funding family members to provide support
- there are significant risks to your privacy or dignity that can only be managed by paying a family member to provide these supports
- all other options to find a suitable provider for supports have been exhausted.

We'll consider your individual circumstances and work with you and your family to identify suitable support providers.

Learn more about when we'll [include specific types of supports in plans](#).

How much will we pay for each NDIS support?

The [NDIS pricing schedule](#) sets out the appropriate maximum prices most NDIS supports.

The appropriate maximum prices in the NDIS pricing schedule vary based on factors such as:

- a provider's qualifications or experience
- whether a provider is registered or unregistered³⁷
- the intensity of the supports being delivered
- the location where the supports are being delivered

- the delivery method of the supports, for example face-to-face or remotely.³⁸

The Agency regularly reviews pricing arrangements to understand whether appropriate maximum prices remain fair, evidence-based and sustainable so participants continue to have access to high-quality supports. In determining whether changes should be made, we consider a range of factors, including market supply and demand, wage rates and labour conditions, prices in other comparable markets and broader economic factors. This means that appropriate maximum prices may change. When this happens, the amount of funding in your plan may change if the appropriate maximum price for your NDIS supports change.³⁹

Fund management type

The amount of funding you and your providers can claim for your NDIS supports depends on how you manage the funding in your plan. There are different ways to manage your funding.

If your funding is:

- **Agency-managed:** providers can claim up to the maximum price in the [NDIS pricing schedule](#) for each NDIS support.
- **Managed by a registered plan manager:** your plan manager can claim up to the maximum price in the [NDIS pricing schedule](#) for each NDIS support.
- **Self-managed:** you can agree on how much to pay for each NDIS support with your providers.⁴⁰

You can always claim less than the prices in the [NDIS pricing schedule](#) regardless of how your funding is managed. For example, your provider may charge lower rates, which often means you can get more support from your funding.

Making claims and managing your funding

You or the person managing your plan need to make sure you're only spending the funding that's available in your plan. Funding periods will help to make sure that your funding will last for the whole length of your plan.

You won't be able to claim a support if it would mean you've spent more than the funding you have available in the funding period, for the funding component amount.

You need to make sure claim details are correct. You can use the [NDIS budget calculator](#) to help you budget and manage your plan.

Our claims and payments system will automatically reject a claim that has not been:

- submitted by you or your authorised representative. This includes your plan nominee and child representative. It can also be submitted by your plan management provider. A registered provider can submit a claim to us if you are agency managed
- submitted in the form we require. For example, the claim must be in our approved form and include all the information we need and ask for
- submitted within our required time frames.

This will be done in a safe, transparent and consistent way.

New NDIS laws came into effect on 3 October 2024. All claims for NDIS supports must be submitted within 2 years of the date the support was provided. This means you or your provider must submit a claim from your plan within 2 years from the date you received the support.

Learn more about [How to claim from my plan](#).

If you self-manage your funding, you'll have extra responsibilities. For example, you need to keep receipts of your purchases for 5 years. You'll also need to be able to show how you've used your funding if we ask you. Learn more about [self-managing](#).

If you have self-managed transport funding in your plan, we'll pay this as recurring support funding in regular instalments to your nominated bank account.⁴¹

Example 1

Kristy's plan includes funding for 4 hours of support each week for social and community participation, based on the rates in the [NDIS pricing schedule](#). A support determination has already been applied to Kristy's funding. She chooses to use her funding on support to go to cricket matches on the weekend.

She finds a provider who charges less than the rates in the [NDIS pricing schedule](#), and decides to switch to the new provider.

After a couple of months, she's now saved some extra funding by using this provider. As well as the 4 hours per week for cricket matches, she decides to use the extra funding on support to assist her to join her friends to play trivia every few weeks.

Example 2

Omar self-manages his funding. His plan includes funding for therapy. Omar finds a therapist who is very experienced with his complex disability support needs. The therapist's rates are higher than in the [NDIS pricing schedule](#).

Omar decides he wants to use this therapist, even though it means he will not be able to buy as many hours of support at this higher rate. Omar can do this because he self-manages his funding. Omar thinks he'll get a much better service, even with fewer hours.

When do you need an assessment or quote before buying NDIS supports?

Sometimes we decide you need a quote before you can claim the NDIS funding in your plan. This helps us make sure the support is value for money, which is one of the NDIS funding criteria.⁴²

In these situations, you'll need to give us at least one quote before we can include the NDIS funding in your plan. We may also need an assessment before we can include the NDIS support in your plan.

We may do this for supports like:

- [high cost assistive technology](#)
- [complex home modifications](#)
- supports with more risk involved.

We'll let you know if you need an assessment or a quote before we can include the support in your plan.

What happens if you buy supports that aren't in your plan?

The funding in your plan must be spent on the NDIS supports described in your plan.⁴³ We'll explain the types of supports included under each funding component amount in your plan, so you know how to use your NDIS funding.

Sometimes things can go wrong, or you find something's not right. This can include things like not getting the support you agreed to or providers claiming more than you agreed to.

We understand most people try to do the right thing but sometimes make mistakes. We want to help you to do the right thing when you claim from your plan.

If you think your provider or registered plan manager has made a mistake with a claim, contact them as soon as you can. If you don't feel okay talking to your registered plan manager or provider, talk to someone you trust. They may be able to support you to resolve your concern. If you can't resolve the issue, you can [contact us](#).

If we think there's a problem with how your plan is being used, we may need to investigate it. For example, we may check what supports have been bought with your funding or ask for more evidence, like a receipt.

If you think you've spent your funding on supports that aren't in your plan or aren't NDIS supports, or you've made a mistake with your self-managed claims, [contact us](#). We can help you fix any mistakes and understand how to claim for next time.

If you deliberately spend funding on supports that aren't in your plan or aren't NDIS supports, you may owe us a debt.⁴⁴ This means we'll need to be repaid the amount of money spent on supports that weren't in your plan. We may also vary your plan to:

- change the way your funding is managed, or
- reduce the length of your funding periods for the whole plan or specific funding components.⁴⁵

Remember, NDIS funding can only be spent on NDIS supports. You can use the funding in your plan to buy NDIS supports if they're related to your disability and are [in line with your plan](#). NDIS funding isn't intended to be a source of general income, or to be used for day-to-day living costs like rent.

If you think someone might be doing the wrong thing or committing fraud, you should report it. Fraud might include:

- charging for supports you didn't get
- charging for more support than you get.

The best way to report suspected fraud is to call the NDIS Fraud Reporting Hotline on 1800 650 717.

You can find out more about [fraud](#) on our website.

What if I spend my funding before the end of the funding period?

It's important you stay within the funding amounts in your plan, including any funding periods or funding components. Staying within your plan funding helps you manage your supports and continue to pay for the supports you need for the full length of your plan.

Usually, we aren't allowed to pay for supports outside of your plan if you spend your funding before the end of your funding period.

Under the laws for the NDIS there are some very limited circumstances when we may pay for supports outside of your plan. This might happen if:

- there's a serious risk to your life, health or safety
- you couldn't ask for a plan change because of your disability
- your plan funding was misused due to fraud.

We'll generally only consider paying for essential supports you rely on every day, like personal care, disability-related health supports or behaviour supports.

If you think you will run out of funding before the end of the funding period you should contact your my NDIS contact, support coordinator, or recovery coach as soon as possible. We can talk to you about whether there has been a change in your disability support needs and you need to change your plan. If your disability support needs have changed due to an emergency or crisis and you need supports to help keep you safe, contact your NDIS contact, support coordinator, or recovery coach as soon as possible.

Example 1

Ali has an intellectual and physical disability. He lives with his mum, who is his nominee and helps him manage his plan. Ali needs support from his mum to be able to communicate with others. Ali needs 2 people to help him get out of bed safely. This support is usually provided by his support worker and his mum.

Ali's mum became seriously unwell and had to go to hospital urgently for an extended period of time. Ali's mum was unable to continue supporting him with his daily personal care. To make sure Ali could continue to get the essential support he needed, his provider arranged for a second support worker to help with his personal care. This included help getting him out of bed.

As Ali was unable to communicate independently, he couldn't ask for a plan variation before the support was delivered.

Because of this extra support, his plan funding ran out before the end of the funding period.

In this case, the extra support was essential to keep him safe and could have been funded if Ali was able to request a plan variation. We may consider varying Ali's plan for this support to help keep him safe and well.

Example 2

Sam has epilepsy and uses her plan funding to pay for essential disability-related health supports. This includes help from trained support workers to monitor her for signs of seizures and help her to take her medication safely. About 1 month before the end of her funding period, Sam noticed claims had been made for supports she didn't receive and weren't authorised by her. Sam told us and we investigated. We found verified evidence of fraud by a provider. Because of this, Sam's plan funding ran out early, and she couldn't access the essential disability-related health supports she needed.

Sam wasn't responsible for the misuse of her funding. She wasn't aware of the unauthorised claims until after her funding had run out.

We may consider paying for the essential disability-related health supports provided during this time because funding would have been available if not for the fraudulent claims.

We'll also look at Sam's plan to see if we need to change it to make sure she continues to have the supports she needs. We may also look at ways we can help reduce the risk of fraud occurring in the future.

Example 3

Jonty has a physical disability. He uses the funding in his plan to pay for a support worker to help him with his personal care tasks.

Recently, Jonty asked his support worker for extra supports to attend community events, such as weekend markets and volunteering in the public garden. These extra supports weren't included in his plan. Because of the extra supports, Jonty's funding ran out before the end of his funding period. He asked us to pay for these extra supports outside of his plan.

Jonty didn't request a plan reassessment or a plan variation before using the extra supports. There was no significant change in his disability support needs. The personal care support Jonty couldn't pay for doesn't place him at an immediate risk. This means we can't pay for the personal care supports outside of his plan.

We talk to Jonty about how to stay within the funding periods in the rest of his plan. He decides to use less of his personal care supports so he can use more of his funding to attend community events with a support worker. He understands we won't change his plan to cover the extra supports.

What happens during your plan?

Your plan will continue until it's replaced by another plan or you [leave the NDIS](#).⁴⁶ If you have more than one funding period in your plan, you'll get access to new amounts of your funding over the length of your plan.

You can ask your my NDIS contact, support coordinator, recovery coach, or [contact us](#) at any time if you have questions about your plan.

It's a good idea to monitor your funding on the [my NDIS portal](#) and [app](#). This can help you make sure you're using the right amount of NDIS supports in your plan. You can also keep track that you or your providers are claiming the right amount of funding for your agreed supports.

We also monitor your plan to check if there are any issues. If something doesn't seem right, we may contact you to see if there's anything we can help with.

We may also need to contact service providers or others assisting with your plan. If so, we'll only do this with your consent.

If you have a support coordinator or recovery coach, they usually need to send us reports during your plan. The reports let us know if your plan is working well for you, or if you need any changes to your plan.

For children younger than 9, we have an [Early childhood provider report](#) template to help providers tell us about the supports the child has been given.

How much of your plan funding can you access at once?

When your plan is approved, you can start using your funding straight away. You'll be able to access any funding where the funding period starts on the first day of your plan.

Your plan will say:

- when each funding period starts and ends
- how much funding you have access to during each funding period
- whether your funding periods apply to the whole plan, or if you have different funding periods for different funding components.⁴⁷

Your plan will also say if a support determination has been applied. Your plan, you will have two funding amounts displayed:

- the reasonable and necessary amount decided by the planner
- the available amount for you to spend after the support determination is applied.

Most plans will have more than one funding period, so you won't be able to access all your funding at once.

At the end of your first funding period, any funds you haven't spent will roll over into your next funding period within the same plan. This means the funding you haven't used will be added to your new funding period.⁴⁸ You won't lose any funding you don't spend during a funding period.

Your funds will only roll over during the same plan, not into a new plan. When we do a plan reassessment and give you a new plan, you won't keep any unspent funding from your previous plan.

Your funding periods will be set up in a way that supports your needs over the length of your plan, but not everyone's supports are the same all the time and they may fluctuate. This means your needs might not always line up exactly with the funding periods in your plan.

If this happens, you can still claim for supports from previous funding periods in your current plan, as long as:

- you have enough funding in your current funding period and
- after 1 December 2026, the claim is made within 90 days of the support being provided.⁴⁹

For example, if you run out of funding in the first funding period of your plan, you can wait until your next funding period to make the claim. This means you'll have less funding available for other supports in your new funding period.

You'll need to make sure that your claim doesn't go over the total funding amount or funding component amount for the support. From 1 December 2026, your claim must be submitted within 90 days of receiving the support⁵⁰ unless exceptional circumstances prevent you from being able to.⁵¹ You also need to make sure you don't spend more than your total plan budget, as your remaining funding will need to last you for the length of your plan.

This is because if you decide to claim for the support or service in the next funding period, it will reduce the amount of funding you'll have to use for the rest of your plan. You'll need to review your service agreement or delivery schedule with your providers to make sure there will be enough funding available to pay for your supports in the future.

It's important to think about how you use your funding and which supports are most important to you.

Example

Tess receives 24-hour disability supports every day, including in-home supports, overnight supports and supports in the community.

We include \$160,000 in her plan for social economic and community participation supports. A support determination is then applied to Tess's funding, and she now has \$80,000 of funding available for these supports.

Because she meets the high support needs criteria, Tess can ask for a plan variation within 90 days to have funding added to her plan so she can continue to receive 24-hour disability supports.

To ensure Tess has enough funding to continue to receive the 24-hour disability supports she needs for the full duration of her plan, we include \$40,000 of her social economic and community participation funding in the first funding period of her plan. The rest of Tess's \$40,000 social, economic and community participation funding is spread evenly across the rest of the funding periods in her plan.

This means Tess has enough flexibility in her plan to meet her 24-hour support needs while she asks for a plan variation and adjusts to her new budget.

The funding Tess doesn't spend from the first funding period will be added to the funding in the next funding period. It will be important for Tess to understand her available funding so she can work with her provider to make sure she can access her disability supports for the duration of her plan.

Learn more about high support needs plan variations in [Our Guideline – Plan variations](#).

How will we check in with you during your plan?

We'll check in with you during your plan to make sure your plan is working for you and that you have the right supports in place. We want to make sure we understand your needs and situation so we can help you manage any problems and make the most of your plan.

We have some guides you can use to help you prepare for your check-in. You can find the [Check-ins factsheet](#) on our website.

We may check in with you:

- at regular intervals, for example each year
- before the 'plan reassessment date' shown in your plan
- if we think your plan might not be working for you, including if you're using your funding quicker than expected
- if you would like help to use the supports in your plan.

For example, we may check in with you if you're using much more or much less of your funding than we would expect.

You can also [contact us](#) to organise a check-in with us at any time.

During a check-in, your my NDIS contact will contact you to discuss your plan.

We'll ask:

- how you're going
- if you have any questions about your current plan
- how you're going with your goals
- if you have any new goals, or want to change your goals
- how you're using local services in the community or other government services
- how you're using the NDIS supports in your plan

- how your supports are helping you pursue your goals
- if your supports meet your disability needs
- if your situation has changed
- if you need help with big changes coming up in your life, like starting or finishing school or starting a new job.

Will we change your plan after a check-in?

If the check-in shows your plan is working well for you, we won't need to make any changes to your plan. Your plan will continue. We'll talk to you at your next check-in to see if your plan still meets your needs.

If the check-in shows that you have the right supports in place, but you need more help using your plan, we'll talk about how we can support you to better implement your plan. For example, we might check-in with you more regularly or support you to connect with providers. We may also be able to fund a support coordinator or recovery coach if it's a reasonable and necessary support for you.

If the check-in shows your plan doesn't meet your disability support needs, we'll talk with you about changing your plan. We may change your plan if your disability support needs have changed and you need more, less or different NDIS supports. This could be a plan variation to make a minor change to your current plan, or we may need to reassess your plan and replace it with a new one.

You'll be involved in any changes we make to your plan. We won't change your plan without telling you. Learn more in [Our Guideline – Plan reassessments](#) and [Our Guideline – Plan variations](#).

Based on the information we talk about in your check-in, we might also need to check your eligibility. This is usually because you meet access to the NDIS under the early intervention requirements. If the check-in shows that your capacity has increased and you no longer need NDIS supports, you might not need to be a participant anymore. If we need to check your eligibility, you'll have time to give us more information if you feel you still need NDIS supports. Learn more in [Our Guideline – Leaving the NDIS](#).

Example 1

Kath is 3 months into her first plan, but she hasn't used any funding yet. Kath's local area coordinator calls her and asks if we can help her in any way.

Kath is self-managing her funding and has been using her NDIS supports. But she's not too sure how to claim the funding through the my NDIS portal and app. Kath's local area coordinator teaches her the process step-by-step.

Kath's plan will continue, as she doesn't need any changes to her NDIS supports.

Example 2

Artem is 18 months into his plan. Artem's local area coordinator contacts him to check if there's been any changes in his circumstances or disability support needs. Artem tells his local area coordinator that his current living arrangements are no longer suitable and that he needs a modification to make his home safe for him.

Artem and his local area coordinator discuss his situation. Artem's local area coordinator decides Artem may need a new plan with different NDIS supports.

His local area coordinator lets him know what evidence he needs to support the changes, and how to give us this information. His local area coordinator also gives him the [plan reassessment request form](#) and supports him to complete and submit it with his evidence. When we receive Artem's form and supporting evidence, we'll then work with Artem to approve a new plan with different NDIS supports for his new situation.

How do we check in with you before your plan reassessment date?

Your plan includes an 'NDIS plan reassessment due date'. We need to do a plan reassessment by this date, even if you don't need any changes to your plan.⁵²

We'll check in with you before your plan reassessment date and talk about how your plan has worked for you. We'll talk about any changes to your situation that mean you might need different supports in your next plan, or that your funding components and funding periods need to be organised differently. We'll use this information to start creating your new plan.

When we reassess your plan, we follow the same steps as when we created your plan for the first time. We need to think about your disability support needs, the [principles we follow to create your plan](#) and the [NDIS funding criteria](#) when we decide what reasonable and necessary supports we can include in your plan.

We'll also think about how well your current plan is working for you. If your plan is working well for you and your supports still meet the [NDIS funding criteria](#), we may give you a new plan with the same supports. Your new plan might also have less NDIS supports if there are some you no longer need. Or you might need a plan with more support.

To learn more, go to [Our Guideline – Creating your plan](#).

What if your situation changes during your plan?

You must let us know if something happens or your situation changes, if it might affect:⁵³

- your plan
- whether you're still eligible for the NDIS.

You must also let us know if it's likely one of these changes will happen in the future.⁵⁴

This could include changes like:

- there are significant changes in the support your family and friends provide
- your condition improves or gets worse, meaning you need more or less support
- you're starting a new job and need new or different support at work
- you're going overseas for a long period of time or you're moving overseas
- you're moving out of aged care or other residential accommodation, and you need different support in your new home
- you receive or claim compensation for an accident or illness related to your disability.

These changes don't always mean you'll need a change to your plan. But you must still let us know about these changes as soon as you reasonably can.⁵⁵

You should also let us know if you change your contact details, such as your phone number, email or your home or postal address.

What if there's been a significant change to your disability support needs?

Sometimes your plan may no longer meet your disability support needs. You can ask for a plan reassessment if your ongoing need for NDIS supports has significantly changed.⁵⁶

For example, you may need personal care supports if your usual informal supports can't support you anymore and the change is ongoing.

To ask for a plan reassessment, you need to complete the [plan reassessment request form](#).

To learn more, go to [Our Guideline – Plan reassessments](#).

What if you need to change your current plan?

A plan variation is when we make changes to your current plan. There are some changes we can make to your current plan without doing a plan reassessment.

For example, to change how your funding is managed or to fix an error in your plan. We can also do a plan variation for short term support or once-off support, like to repair your wheelchair.

If you think you need a plan variation, you can [contact us](#) or complete the [plan variation request form](#). You can also tell us about a change to your situation during your check-in.

To learn more, go to [Our Guideline – Plan variations](#).

How can you change how your funding is managed?

If you want to change how your funding is managed, you'll need to ask us to change your plan.⁵⁷ You can ask us to change how you manage your plan at any time. You might want more control of your funding. Or there may be a change in your situation which means you need to change how you manage your funding for a period of time. You can ask to change your plan management as often as you want.

If this is the only change you want, we may be able to vary your plan without completing a full plan reassessment. To learn more, go to [Our Guideline – Plan variations](#).

When can't you use your plan?

There are only some situations where we may suspend your plan. This means you may not be able to use the funding in your plan to pay for your NDIS supports during this time.⁵⁸

We may suspend your plan if:

- we're [unable to contact](#) you when we ask you for more information about the supports you need.⁵⁹ We would only suspend your plan if we can't contact you after we've made several attempts to get in touch with you⁶⁰
- [you're outside Australia for more than 6 weeks](#), unless we give you more time⁶¹
- [you don't claim compensation](#) you're entitled to after we ask you to, for example after you've sustained an injury.⁶²

Plan suspensions when we're unable to contact you about the information we asked for

When we make decision about the NDIS supports to include in your plan, we may ask you for more information about your disability support needs. When we ask you for information, we'll usually do this in writing. It's important you give us this information so we can make sure you have the NDIS supports you need in your plan.

We must give you a reasonable opportunity to give us the information. This will usually be at least 28 days. You can contact us to ask for more time to get the information we've asked for.

If you don't give us the information we ask for, we'll try to make a decision about the NDIS supports in your plan with the information we already have.

Sometimes we can't make a decision without the extra information we've asked for. If this happens, we'll work with you to help you get the information we need. We may suspend your plan only if we can't contact you and we've made reasonable attempts to get in touch with you. We'll try to contact you using your preferred contact method at least 5 times over a 3-to-4-month period. We'll always contact you at least once in writing even if this isn't your preferred contact method.

You can [contact us](#) or use the [my NDIS portal](#) to update your preferred contact method.

We may also try to contact the people who regularly support you. For example, your support coordinator or informal supports. We'll only do this if we have your consent to contact them. This doesn't count as one of our 5 attempts to contact you. We would only contact the people who regularly support you so they can tell you we're trying to contact you.

Learn more in [Our Guideline – Your Privacy and information](#).

We'll think about the reasons we may be unable to contact you. We won't think we're unable to contact you if we have information you are:

- experiencing homelessness
- in hospital or an inpatient clinic
- living in a justice setting. For example, you're currently in police custody or prison.

If we have this information we'll work with you to understand your situation and make sure you plan still meets your support need.

Plan suspensions when you're outside of Australia

If you go overseas, you can still use your supports and funding for up to 6 weeks (or longer if we give you more time). We call this a 'grace period'.

You'll probably need to have your funding self-managed or plan-managed if you need to use your funding overseas. This is because your registered NDIS providers usually don't support people in other countries. You'll also need to claim your funding in Australian dollars.

If you need to change your fund management while you're overseas, let us know and we can [change your plan](#).

If you're going overseas for longer, and we don't agree to extend your 6-week grace period we'll suspend your plan until you get back.

What happens if we suspend your plan?

When your plan is suspended you won't be able to:

- use the funding in your plan to pay for NDIS support.⁶³ You can use your plan to pay for supports you accessed before your plan was suspended
- ask for a plan variation or plan reassessment.⁶⁴

Your service providers also won't be able to claim for any services they provide you while the plan is suspended.

What happens after we suspend your plan will depend on the reason why your plan was suspended.

What happens if we suspend your plan when we're unable to contact you?

If your plan is suspended when we're unable to contact you, we'll let you know in writing. We'll tell you the date your plan suspension will start and how to get back in touch with us.⁶⁵

When your plan is suspended, you, your nominee or child representative can get in touch with us at any time.

When you contact us again, we must decide within **28 days** if we'll:

- Stop your plan suspension. This means you can start using your plan to access NDIS supports again.⁶⁶
- Keep your plan suspension in place and ask you for more information.⁶⁷

In most cases, when you contact us, we'll stop your plan suspension as soon as possible. We'll work with you to help you give us the information we need to make decision about the supports in your plan.

If we keep your plan suspension in place we'll tell you why and what information we need from you to stop your plan suspension.

If your plan has been suspended for at least 90 days and we're still unable to contact you for the information we need we may revoke your status as an NDIS participant.⁶⁸

Learn more about NDIS participant status in [Our Guideline – Leaving the NDIS](#).

What happens if your plan is suspended because you're outside Australia?

When we suspend your plan after a grace period, we'll send you a new plan that shows your funding is suspended. This plan will have no NDIS supports.

If we suspend your plan while you're overseas, you need to contact us when you get back to Australia. We'll then create a new plan.⁶⁹ This means you can start using it again.

What happens if your plan is suspended because you haven't claimed compensation?

When we suspend your plan because you haven't claimed compensation, we'll send you a new plan that shows your funding is suspended. This plan will have no NDIS supports.

When you've claimed your compensation, let us know. We'll then create a new plan.⁷⁰

What if you don't agree with your plan suspension?

If you don't agree with our decision to suspend your plan, you can ask for an internal review.⁷¹

You can ask us to review our decision to:

- not extend the 6-week grace period to use your funding overseas
- suspend your plan when we're unable to contact you.

You'll need to ask for an internal review within **3 months** of our decision.⁷²

You can't ask for an internal review if we suspend your plan because you haven't claimed compensation.

Learn more in [Our Guideline – Reviewing our decisions](#).

When can you use your plan outside Australia for more than 6 weeks?

In some situations, we can give you a longer grace period. If you think you'll be outside Australia for more than 6 weeks and need to use your funding, [contact us](#). We'll let you know whether we'll extend the grace period.

If you know you'll be overseas for more than 6 weeks, it's a good idea to contact us before you leave Australia. Let us know:

- how long you think you'll be overseas
- why you're going overseas
- what supports you need when you're overseas
- why you need NDIS funding for your supports.

There are some things we need to consider for everyone who will be outside Australia for more than 6 weeks. This includes if you're on an extended holiday for more than 6 weeks.⁷³

When we decide if we'll extend the grace period, and for how long, we consider:⁷⁴

- how long you'll be outside Australia
- what NDIS supports you're receiving through your plan
- if you can still get supports while you're outside Australia, and if we can help you find these supports
- if we can keep in touch with you while you're outside Australia
- if we previously decided to extend the grace period
- if denying your request would cause you 'undue hardship' – that is, it would make your situation overseas much more difficult, to a level that's not fair or reasonable.

In what specific situations will we usually extend the grace period?

We'll usually extend the grace period if you'll be overseas for humanitarian reasons, such as foreign aid.⁷⁵

We'll also usually extend the grace period in specific situations:⁷⁶

- [if you're studying overseas or doing an exchange study program](#)
- [if you or a family member need to work overseas for a short period](#)
- [if you or a family member are in the Army, Navy or Air Force Reserve forces](#)
- [if you need medical treatment or therapy that's not available in Australia](#)
- [if you can't come back to Australia for a reason you can't control.](#)

But there are extra things we need to consider when we decide whether we'll extend the grace period, and for how long.

When we consider if these specific situations apply to a 'family member', this usually means a:

- husband or wife
- ex-husband or ex-wife
- de facto partner or former de facto partner
- child, parent, grandparent, grandchild or sibling
- child, parent, grandparent, grandchild or sibling of a spouse or de facto partner
- step-relative, such as stepparents and stepchildren
- adopted immediate family member.

If you're studying overseas or doing an exchange study program

We consider how long the course goes for.⁷⁷ The overseas study needs to be either:⁷⁸

- part of a course you're doing in an Australian high school, TAFE or other training, or university
- part of a recognised program of international exchanges, such as an exchange semester during university.

If you or a family member need to work overseas for a short period

We consider how long you or a family member need to work overseas.⁷⁹

If you or a family member are in the Army, Navy or Air Force Reserve forces

We consider how long you or a family member need to be deployed overseas.⁸⁰

If you need medical treatment or therapy that's not available in Australia

We consider how long your treatment will take. We also allow a reasonable period of time for you to recover after your treatment or therapy.⁸¹

If you can't come back to Australia for a reason you can't control

We consider how much time is reasonable to allow you to return to Australia.⁸²

Some of the reasons you can't control while you're overseas include if you or a family member:⁸³

- are involved in a serious accident
- become seriously ill
- are hospitalised
- are the victim of a serious crime
- are a party to custody proceedings
- need to stay overseas because of criminal proceedings, for example if you're involved or are a witness in a criminal trial.

Or there might be a situation that affects everyone in the area, including:

- war, industrial action, or social or political unrest you're not willingly participating in⁸⁴
- natural disasters, such as earthquakes, bushfires, floods or cyclones⁸⁵
- border restrictions you can't control, for example due to travel advice or a pandemic.

What if you're not happy with your plan?

If you're not happy with your current plan, you should talk to your my NDIS contact, support coordinator or recovery coach.

They may be able to explain the decision, clarify how you can use the funding or help you fix any problems. If you'd like more details about the supports that make up your plan's total funding amount, we can send this to you. You can contact us and ask for a funding breakdown.

It's a good idea to do this soon after you get your plan.

We can also give you written reasons on why we made the decision. [Contact us](#) if you'd like reasons for our decision.

If you don't agree with our decision to approve your plan, you can ask for an internal review.

Having an internal review means someone who wasn't involved in creating your plan will review our decision to approve your plan. They'll consider if we made the right decision under the laws for the NDIS.

Once you get your plan, you have **3 months** to ask for an internal review.⁸⁶

To learn more, go to [Our Guideline – Reviewing our decisions](#).

Reference list

- ¹ NDIS Act s 10.
- ² NDIS Act s 34(1)(aa), NDIS (Supports for Participants) Rules r 5.1(b).
- ³ NDIS Act s 10(6)-(8).
- ⁴ NDIS Act s 10(4)-(5).
- ⁵ NDIS Act s 38.
- ⁶ NDIS Act s 34A(1).
- ⁷ NDIS Act s 34A(1).
- ⁸ NDIS Act s 34A(1); NDIS (Support) Determination 2026 ss 6, 11(1).
- ⁹ NDIS Act s 34A(1C); NDIS (Support) Determination 2026 ss 7, 8.
- ¹⁰ NDIS Act s 47B(1).
- ¹¹ NDIS Act ss 47B(2), 47B(12)(a).
- ¹² NDIS Act s 10C(1)(a)(i-ii).
- ¹³ NDIS Act s 10C(1)(b)(i-ii).
- ¹⁴ NDIS Act s 14(1)(a).
- ¹⁵ NDIS Act s 14(2)(a).
- ¹⁶ NDIS Act s 14(1)(aa).
- ¹⁷ NDIS Act s 14(1)(aa)-(ab).
- ¹⁸ NDIS Act s 14(1)(ab).
- ¹⁹ NDIS Act s 14(2)(b).
- ²⁰ NDIS Act s 14.
- ²¹ NDIS Act s 46(1)(a); NDIS Act s10.
- ²² NDIS Act s 10(4)-(8).
- ²³ NDIS Act s 10.
- ²⁴ NDIS (Supports for Participants) Rules r 5.1(b).
- ²⁵ NDIS Act s46(1)(b).
- ²⁶ NDIS Act s10(6)-(9).
- ²⁷ NDIS Act s 33.
- ²⁸ NDIS Act s 33(3); NDIS (Plan Management) Rules r 6.2.
- ²⁹ NDIS Act s 33(3); NDIS (Plan Management) Rules r 6.3.
- ³⁰ NDIS (SDA) Rules r 36.
- ³¹ Competition and Consumer Act Sch 2.
- ³² NDIS Act s 33(6).
- ³³ NDIS (Provider Registration and Practice Standards) Rules r 7(3).
- ³⁴ NDIS (Provider Registration and Practice Standards) Rules r 7(2).
- ³⁵ NDIS Act s 42(2)(b).
- ³⁶ NDIS (Provider Registration and Practice Standards) Rules r 7(1).
- ³⁷ NDIS Act s 45C(9)(b).
- ³⁸ NDIS Act s 45C(9)(a).
- ³⁹ NDIS Act s 34B.
- ⁴⁰ NDIS Act s 45C(9)(b)-(c).
- ⁴¹ NDIS (Plan Management) Rules r 4.3(b).
- ⁴² NDIS Act s 34(1)(c).
- ⁴³ NDIS Act s 46.
- ⁴⁴ NDIS Act s 182(3).
- ⁴⁵ NDIS Act s 46(1).
- ⁴⁶ NDIS Act s 37(3).
- ⁴⁷ NDIS Act s 33 (2A)-(2F).
- ⁴⁸ NDIS Act s 33 (2C)(d-e).
- ⁴⁹ NDIS Act s 45A(5)(a)
- ⁵⁰ NDIS Act s 45A(5)(a)

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- ⁵¹ NDIS Act s 45A(6)
⁵² NDIS Act s 33(2)(c).
⁵³ NDIS Act s 51(1)(a).
⁵⁴ NDIS Act s 51(1)(b).
⁵⁵ NDIS Act s 51(2).
⁵⁶ NDIS Act s 48A(1)(a).
⁵⁷ NDIS Act s 47A.
⁵⁸ NDIS Act s 41(2)(a).
⁵⁹ NDIS Act s 40A.
⁶⁰ NDIS Act s 40A(1)(1-b).
⁶¹ NDIS Act ss 40(2)-(3), 41(1)(a).
⁶² NDIS Act ss 41(1)(b), 105(2)(a).
⁶³ NDIS Act s 41(2)(a).
⁶⁴ NDIS Act s 41(2)(c).
⁶⁵ NDIS Act 2 40A(2).
⁶⁶ NDIS Act s 40A(4)(a).
⁶⁷ NDIS Act s 40A(4)(b).
⁶⁸ NDIS Act s 40A(8).
⁶⁹ NDIS Act s 40(3).
⁷⁰ NDIS Act s 105(2)(a).
⁷¹ NDIS Act ss 40(2)(b), 99(1) item 5.
⁷² NDIS Act s 100(2).
⁷³ NDIS (Plan Management) Rules r 5.7.
⁷⁴ NDIS (Plan Management) Rules r 5.8.
⁷⁵ NDIS (Plan Management) Rules r 5.6.
⁷⁶ NDIS (Plan Management) Rules r 5.6.
⁷⁷ NDIS (Plan Management) Rules r 5.9.
⁷⁸ NDIS (Plan Management) Rules r 5.9.
⁷⁹ NDIS (Plan Management) Rules r 5.10.
⁸⁰ NDIS (Plan Management) Rules rr 5.11-5.13.
⁸¹ NDIS (Plan Management) Rules r 5.14.
⁸² NDIS (Plan Management) Rules r 5.15.
⁸³ NDIS (Plan Management) Rules r 5.16(a).
⁸⁴ NDIS (Plan Management) Rules r 5.16(b).
⁸⁵ NDIS (Plan Management) Rules r 5.16(c).
⁸⁶ NDIS Act s 100(2).