

Type of Review	How it works?
NDIS Access Request and Review	Applying for the NDIS.  To apply for the NDIS you will need complete the NDIS Access Request Form and if feasible the Supporting Evidence Form.
	Access Request Form - NDIS Access Request Form PDF
	Supporting Evidence Form
	You can also ask the NDIS to mail you the form by calling 1800 800 110.
	Make a verbal access request by calling the NDIS on 1800 800 110.
	Application is unsuccessful, what next? If you are unsuccessful in your request to access the NDIS you have the right to ask the NDIA for an internal review of your access decision.
	Review Request Form - Access Review Form
	Your LAC, ECEI Coordinator or the NDIA can let you know how to do this and can put you in touch with someone, such as an advocate, who can help you with this process.
	Your Access Review Application is unsuccessful, what next?
	If you disagree with the NDIA's review of your access request, you can apply for a review by the Administrative Appeals Tribunal (AAT).
	Visit the AAT website at <a href="www.aat.gov.au">www.aat.gov.au</a> (external) or call 1800 228 333. You can't ask the AAT to review a decision before there has been a review by the NDIA.
Review of a Reviewable Decision	Your NDIS Plan has been Issued, however you are dissatisfied with the type/amount of funding?  If you are dissatisfied with the type or level of support approved in a plan or if the NDIA has declined to fund a support/service in a plan, you can request a review.
	ROARD – Review of a Reviewable Decision You have 90 days / 3 months of receiving written confirmation of the "decision" being questioned, to request a review. Basically 90 days from the start of your plan.
	According to legislation, NDIA have 14 days to decide and advise if accepting a Review request.



## **How to submit a Review Request?**

You will need to complete an Application for a Review of a Reviewable Decision - Review Form

Once completed you can submit in writing to:

Chief Executive Officer
National Disability Insurance Agency
GPO Box 700
Canberra ACT 2601

Or send an email to: enquiries@ndis.gov.au.

You can also drop off the completed form to an NDIA office.

Alternatively **call 1800 800 110** to discuss other more accessible avenues to make a request for a review.

https://www.ndis.gov.au/applying-access-ndis/how-apply/receiving-your-access-decision/internal-review-decision

#### Hint!

One of the key reasons why requested funding is not granted is due to the lack of supporting evidence.

If you are applying for a review of a funding decision, please ensure you provide any additional supporting documents you can obtain before you submit the Review Form.

This could include reports/letters from your/your loved one's OT, Physiotherapist, Psychologise, School, Program Coordinators or Medical Practitioners.

https://www.ndis.gov.au/providers/working-provider/allied-health-providers/plan-review-reports

https://www.valid.org.au/resources-andmedia/resources/10-steps-excellent-ndis-therapy-reports/

Also consider putting together a Carer Impact Statement.

https://mycarespace.com.au/resources/writing-an-ndiscarer-statement-template



#### **AAT Review**

#### Dissatisfied with a Review Outcome, What Next?

After an internal review is completed, if the person whose interests are affected still disagrees with the decision they may make an application directly to the Administrative Appeals Tribunal (AAT) for external review by an independent tribunal (section 103 NDIS Act).

The AAT cannot review a decision until an internal review has been completed.

Further information or assistance about applying for external review and how the AAT will deal with the application can be obtained by calling the AAT on 1800 228 333, or by visiting the AAT website

#### What is external review?

External review is the process by which the AAT re-considers the facts, law and policy aspects of a decision and determines what the correct or preferable decision is.

Similar to an internal review, the AAT will put themselves in the shoes of the original decision maker and consider the decision from a fresh perspective. In doing so, the AAT will consider the same legal framework as the original decision maker, together with any additional information of relevance, and may exercise all the powers and discretions which were available to the original decision maker.

This type of review is often referred to as 'merits review' or a 'de novo' appeal. Merits review differs from a judicial review where a judge in a court can consider only whether the decision was correct in law. In merits review the reviewer is able to change the decision if there is a preferable decision, even where the decision being reviewed is legally valid.

## What is the time limit for requesting an external review?

A person must make a request for external review within 28 days of receiving written notice of an internal review decision from the NDIA (section 29(2)(a) AAT Act).

If this timeframe has passed, a person can apply directly to the AAT for an extension of time by filling out a form on the AAT website or by writing directly to the AAT.



	If an application for an extension of time is made, the AAT will extend the time for making an application for external review if they consider it is reasonable to do so.  How can a request for external review be made?  Applications for external review to the AAT may be made online  Alternatively, applications can be made by completing an application form which can be lodged with the AAT in person, email, by fax or by post.  https://ourquidelines.ndis.gov.au/home/reviewing-decision/reviewing-our-decisions
Plan Variation	Satisfied with Plan Issued, however needs some minor
	adjustments.
	This can occur at any stage during the plan up to 100 days prior to the plan end date. These "reviews" have limited scope and are basically administrative "fixes" if a material error has been made, or funds management type needs to change. This is a process designed to administer small changes instead of going through the complete review process.
	To explore this Review option further please contact your Local Area Coordinator or NDIS Planner or use the Change of Details or Change of Situation Form
Plan Reset	This is when a plan "restarts" and occurs automatically when: a) A light touch review has occurred to resolve an admin error b) Equipment or home mods have been approved post plan approval and were not included in the "background" in the original plan pending quote/application Plan dates and funding is "reset" as per original funding levels (excluding category that has initiated the plan reset i.e. capital / equipment)
Plan Reassessment	What is things in your life have changed impacting your support needs?
(Change of Circumstances Review)	This may include:
	<ul> <li>changes to your disability needs;</li> <li>significant changes in your care or support provided by family or friends;</li> </ul>



- changes to your living arrangements such as where you live, if you live with new people, if you move overseas or into an aged care or residential facility;
- changes to your job or that you're looking for a job; or
- if you receive or claim compensation for an accident or illness related to your disability.

If any changes in your life impact the level or type of care you require, you may want to consider a Change of Circumstances Review.

### **Change of Details or Change of Situation Form**

You may be asked to provide additional evidence of the changes of circumstances and how this has impacted your support needs.

This could include reports/letters from your/your loved one's OT, Physiotherapist, Psychologise, School, Program Coordinators or Medical Practitioners.

https://www.ndis.gov.au/providers/working-provider/allied-health-providers/plan-review-reports

https://www.valid.org.au/resources-andmedia/resources/10-steps-excellent-ndis-therapy-reports/

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## Scheduled Plan Review

A plan review is an opportunity to review how funded supports are working for participants to achieve their goals.

The plan review process can commence up to **three months** prior to the review date of a participant's plan. This is standard practice.

A new plan is then developed including the reasonable and necessary supports a participant requires to pursue their goals. Service bookings end when a new plan is approved and participants are supported to contact their service providers following the approval of a new plan. A participant and their service providers negotiate new service bookings and service agreements in line with the approved plan.



A new plan comes into effect from the date it is approved including funding - funding is not cut off.

Processes and funding continue to be in place to allow providers to claim service bookings delivered during the participant's prior plan – for up to 12 months.

New plans can range from 3 months to 36 months in length. Remember even if you have a longer plan in place and your circumstances change, you can always request a Change of Circumstances Review.

Plan budgets may increase, decrease or stay the same at plan review, depending on a person's individual circumstances and goals.

Participants generally expect contact from NDIA or their LAC to book a scheduled review anytime within 3 months of current plan ending.

If allocated a LAC, these meetings generally occur at least 6 weeks prior to current plan ending (to allow time for the plan to be built and sent to NDIA for delegate approval).

If you have any questions regarding the Scheduled Review of your plan please contact your Local Area Coordinator or NDIS Planner.

Form more information on how to prepare for a plan review –

https://www.ndis.gov.au/participants/changing-your-plan/preparing-your-plan-reassessment

#### **Plan Extension**

# What happens if my plan has expired and I have not had a Scheduled Review?

If your plan reaches its end date and your new plan hasn't been finalised yet, your current plan will be automatically extended for up to 12 months.

If your current plan is shorter than a 12-month plan, your extended plan will be for the same timeframe – for example, a six-month plan will be automatically extended for six months.

https://www.ndis.gov.au/participants/changing-your-plan/what-happens-your-plans-end-date



## Advocacy Support

#### What if I need some support through the Review Process?

Disability advocacy is available to people with disability if they need it. Family or carers might also request advocacy support, when appropriate.

Advocacy provides assistance and support to ensure that:

- The rights of people with disability are upheld as valued members of the community
- People with disability actively participate in decision making processes, particularly those where the outcomes impact on their lives
- The needs and views of people with disability are presented to government, service providers and the broader community.

https://providers.dhhs.vic.gov.au/disability-advocacy-agencies-and-self-advocacy-groups

**List of Advocacy Organisations in Victoria** 

If you need support in connecting with an Advocate, please contact the Office for Disability

P: 1300 880 043

E: disabilityadvocacy@dhhs.vic.gov.au