



PARLIAMENTARY JOINT STANDING COMMITTEE ON THE NATIONAL DISABILITY INSURANCE SCHEME
ANSWER TO QUESTION ON NOTICE

Reference No: SQ17-000168

SUPPORT SERVICES

Question

Senator SIEWERT: I have had a recent example of where someone was left without services because their plan was being reviewed. Can you take on notice the number of times a person has lost access to service support? How many times has that happened?

Senator SIEWERT: I'm not going to go through all the details and I'm not sure whether it expired or was being reviewed, but they were definitely left without support services of any kind. Can you take on notice whether that has happened in other places and, if so, how many times?

Ms Gunn: We will do our best, but I'm not sure that we'd be able to identify that, I have to say. The only instance that we could identify is where a plan had expired and a new plan had not been put in place prior to that expiry.

Answer:

A plan review is usually scheduled as the plan end date approaches. This is part of the usual planning cycle. Scheduled Plan reviews are usually held once every twelve months. Once a plan review is initiated, the next cycle of pre-planning and planning tasks is commenced to develop the participant's new plan. Individual assessments and therapy reports are reviewed for evidence of outcomes. If these reports are not available, they may be requested to inform the plan review. When the new plan is complete and approved, the new plan can be implemented.

For a small cohort, a plan may expire before the plan review can be completed. The main reasons for plan expiry are predominantly as a result of participants being unable to be contacted, or the review is pending the provision of information that has been requested to inform the review.

For those that require a plan review, the National Disability Insurance Agency (NDIA) actively follow-up to book appointments. This can include multiple attempts at different times of day, on different weekdays and at least one over the weekend. Where it can be seen that there is a provider actively claiming from the plan, the provider or support coordinator may be contacted to seek their assistance to make contact with the participant.

In instances where the NDIA is unable to complete a scheduled plan review prior to the end date of the current plan, a three month plan extension can be provided to allow time for a planning meeting to occur.

A small number of participants may have a gap between their current plan's start date and the previous plan's end date. If a participant is waiting for a plan review and their plan has expired, the NDIA will cover that expense for the provision of supports that are in line with what a person was previously receiving in their plan. The NDIA can also extend the old plans to the day before the start of the next plan to enable providers to receive payment under the previous plan for services they may have provided during the gap period.