

National Disability Insurance Scheme (NDIS) review and appeals flow chart

NDIS eligibility and planning

- 1 Person with disability contacts National Disability Insurance Agency (NDIA) to apply for NDIS support
- 2 Person's eligibility is assessed on functional capacity according to NDIA access criteria
- 3 If not eligible, person will be notified within 21 days
- 4 If eligible, person accepted as NDIS participant
- 5 NDIS participant meets with planner to develop a plan
- 6 Plan is implemented
- 7 If the NDIS participant is unhappy with the plan, an 'Application for a review of a reviewable decision' form must be lodged within three months. This can be completed by the participant online, or by an NDIA officer over the phone, or in person
- 8 NDIA initiates an internal review process

Internal review

- 1 NDIA internal review staff member makes a decision to confirm, vary or set aside earlier decision
- 2 NDIS participant is notified of decision
- 3 If the NDIS participant remains dissatisfied with the decision, an application for review by the Administrative Appeals Tribunal (AAT) is lodged – this must be done within 28 days

Administrative Appeals Tribunal (AAT)

- 1 AAT contact officer makes contact within three days of receiving application to review NDIA decision
- 2 AAT contact officer notifies NDIA of application
- 3 NDIA provides relevant documents to AAT
- 4 AAT organises conciliation to determine if case can be resolved by agreement
- 5 If not resolved, AAT will conduct a hearing

Note: The NDIS participant can access an External Merits Review support officer to assist them to go through the AAT process and to apply for funding for a legal aid lawyer, or they can work with an advocate, family member, support person, or legal representative

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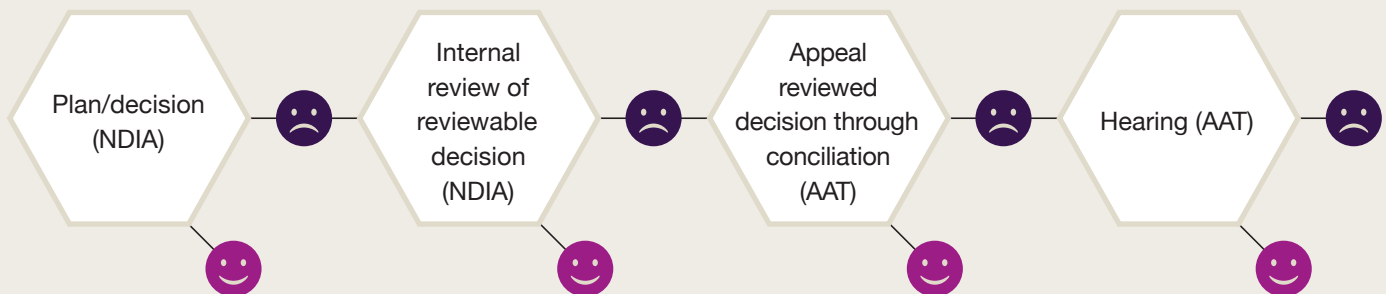
Accessing an External Merits Review (EMR) support officer

- 1 NDIS participant contacts EMR officer at Rights, Information and Advocacy Centre (RIAC)
- 2 EMR officer meets with NDIS participant
- 3 EMR officer applies to the Department of Social Services (DSS) for Central Assessment Provider (CAP) funding for a legal aid lawyer
- 4 EMR officer supports NDIS participant through the AAT process

Victoria Legal Aid

- 1 When DSS approves CAP funding, it notifies Commonwealth Entitlements Team at Victoria Legal Aid
- 2 Commonwealth Entitlements Team allocates the matter to a Victoria Legal Aid lawyer
- 3 Victoria Legal Aid lawyer receives case files
- 4 Victoria Legal Aid lawyer meets with NDIS participant to receive instructions and work through case

Quick reference summary process



References

NDIS Act: <https://www.comlaw.gov.au/Details/C2013A00020>
(List of reviewable decisions – Chapter 3, Part 6, Section 99)

“Internal review of a decision” fact sheet: <http://www.ndis.gov.au/participants/reasonable-and-necessary-supports/decision-review>

“Review of National Disability Insurance Scheme decisions” fact sheet: <http://www.aat.gov.au/applying-for-a-review/national-disability-insurance-scheme-applicants>

“External Merits Review Support (EMRS)” fact sheet: <http://www.riac.org.au/training.php>

Central Assessment Provider (CAP) guidelines: https://www.dss.gov.au/sites/default/files/documents/10_2015/central_assessment_provider_guidelines_.pdf



Contact DARU

Level 8/128 Exhibition Street
Melbourne 3000
Phone (03) 9639 5807
Email admin@daru.org.au
Web www.daru.org.au
Twitter @daruvc