



Delivered by the
National Disability
Insurance Agency

GPO Box
700
CANBERRA ACT 2601
1800 800 110
ndis.gov.au

National Disability Insurance Scheme

Application for a review of a reviewable decision

This form can be:

- Completed online at ndis.gov.au/feedback
- Downloaded from ndis.gov.au/feedback and lodged in person, by mail or email to feedback@ndis.gov.au
- Completed by a National Disability Insurance Agency (NDIA) officer at your local office, over the phone or in-person

Personal information collected

The NDIA needs to collect some of your personal information so it can effectively conduct an internal review of a reviewable decision made under the *National Disability Insurance Scheme Act 2013*.

Just so you are aware, any personal information the NDIA does collect is protected under the NDIS Act and the *Privacy Act 1988*.

You can also ask to see what personal information (if any) the NDIA has about you at any time, and you can get it corrected if your information is wrong.

Personal information use and disclosure

The NDIA will use your personal information to do an internal review of a reviewable decision made under the NDIS Act.

If you do not provide all of the information requested on this form, your request for an internal review may be delayed due to the NDIA not having enough information to vary or set aside the decision, which is under review.

The NDIA will not use any of your personal information for any other purposes, or disclose it to any other organisations, individuals or overseas recipients unless it is authorised by law or you give us consent.

The NDIA's privacy statement describes

- how we will use your personal information;
- reasons why some personal information may be given to other organisations from time to time;
- how you can access the personal information we have about you on our system;
- how you may complain about a breach of the Australian Privacy Principles and how the NDIA will deal with your complaint; and
- how you can correct your personal information if it is wrong.

You can [read the statement on the NDIS website](#).

Personal information storage

The NDIA uses an Australian Government computer system to store personal information. System users other than NDIA staff may at times be able to see your name when performing duties for their own programs but they are not permitted to record, use or disclose any information and they will not know if you become an NDIS participant. State or territory government officials may also have access to your personal information as part of the agreement between governments to assist the states and territories in their NDIS evaluation.

Part A – Applicant information

The NDIS Act states some NDIA decisions can be reviewed. These are known as *Reviewable Decisions*.

A list of NDIA reviewable decisions are listed in Appendix 1 at the end of this form. They include, for example, NDIS access; the funding and provision of reasonable and necessary supports; nominee appointments and parental responsibility recognition.

Providers may seek a review of a decision not to register them or a decision to revoke their registration.

A person may request a review if they are directly affected by an NDIA decision.

The request for review must be made within three months of receiving the reviewable decision notice.

A request for review may be made by:

- (a) sending or delivering a written request to the NDIA; or
- (b) making an oral request, in person or by telephone or other means, to the NDIA.
- (c) completing and lodging this form in person, by mail or email to feedback@ndis.gov.au

Part B – About You

Name:	
Mr/Ms/Miss/Mrs:	
Participant number: (for participants)	
Address:	
Home contact number:	
Work contact number:	
Mobile:	
TTY:	
Email:	

Preference for contact (check one): Phone ☐ Email ☐

Only fill in this box if you are the participant's nominee:

Nominee name:	
---------------	--

Only fill in this box if someone is helping you. For example, a family member, a carer or advocate.

Representative name:	
What is your relationship to this person:	
Organisation (if any):	
Postal address:	
Home contact number:	
Work contact number:	
Mobile:	
TTY:	
Email:	

Preference for contact (check one): Phone ☐ Email ☐

NOTE: If you need help filling in this form please contact your local office for assistance.

Part C – What are the grounds for this review?

What is your request for review about?

I am requesting a decision review about:

Please insert details below.

If the decision is about the supports in your Plan write:

‘a decision to approve the statement of participant supports in a participant’s plan’.

If the decision is about accessing the NDIS write:

‘a decision that a person does not meet the access criteria’

If unsure about other types of decisions, check the list of reviewable decisions outlined under ‘Appendix 1- Reviewable Decisions’ included with this Application.

Why do you want the decision reviewed?

Describe why you want the decision reviewed. Are there facts you feel have not been taken into account or properly looked at? Is there any additional information we may not have considered at the time?

Respond directly to the reason(s) mentioned by the NDIA in their decision letter.

If the decision is about the supports in your Plan, state under the following sub-headings (where relevant), why you think the support(s) you need are ‘Reasonable and Necessary’ e.g.

- it is directly related to your disability.
- it is going to be beneficial for you.
- It is value for money (e.g. there is no lower cost alternative available that will deliver the same outcome)
- it is not funded under another system e.g. Health.

If the decision is about being ineligible to access the NDIS under disability requirements, state under the following sub-headings (where relevant):

- your diagnosed condition(s)
- that your condition(s) is likely to be permanent or is permanent
- how your conditions severely impact/reduce your capacity to undertake mobility, self-care, communication, etc.

- why you cannot fully participate in the community (socially) or economically (e.g. cannot work, require Disability Support Pension)
- that other systems e.g. Health cannot support you (e.g. no treatments available)

If the decision is about being ineligible to access the NDIS under Early Intervention requirements (section 25 of the Act), state:

- there is a diagnosis of one or more identified intellectual, cognitive, neurological, sensory or physical impairments that are, or are likely to be, permanent;

or

- there is one or more identified impairments that are attributable to a psychiatric condition and are, or are likely to be, permanent

or

Your child has developmental delay¹ and;

- early intervention supports is likely to benefit them by reducing their future support needs; or
- by mitigating/alleviating the impact of the person's impairment to undertake communication, social interaction, learning, mobility, self-care or self-management; or
- by preventing the deterioration of such functional capacity; or
- by strengthening the sustainability of informal supports available to the person, including through building the capacity of the person's carer.

Support your statements with any evidence you have e.g. GP and/or Allied Health professional report.

¹ **Developmental delay means a delay in the development of a child under 6 years of age that is from a mental or physical impairment or a combination of mental and physical impairments and results in substantial reduction in functional capacity in self-care, receptive and expressive language, cognitive development, motor development (s. 9 NDIS Act)**

When was the decision made? (Please state date, month and year).

State the date provided on the NDIA decision letter you have received.
Also - state the date you received the NDIA letter as this is when the 3 month application deadline applies.

How has it affected you? (Please tell us how the decision has affected you?)

In your own words, explain what social, economic, emotional impact the decision made by the NDIA has had on you and/your carer(s)/family.
Go into as much detail as you feel necessary/comfortable with.

What outcomes are you seeking? (Please tell us what you expect from this review?)

What would you like to see happen? E.g.

- For access decision – *‘I am granted access to the NDIS and can begin receiving the supports I require’.*
- For decisions about approval of Plans – *‘For the NDIA to approve the supports I am requesting’.*

Part D – Further information

Supporting information

Please attach copies of any documents you think may help us to review this decision. For example letters, references, emails. If you don't have any, can you tell us what information you think we need to get?

Include any and all evidence which you think will support your Application. Think about what evidence you already have and if it is lacking, think about what you might need to obtain (if you have sufficient time).

Make a list of the evidence and name it as clearly as possible e.g.

1. *NDIA decision letter (2nd April 2017)*
2. *Psychologist Assessment Report – J. Smith 10th (May 2017)*
3. *Occupational Therapist recommendations – P. Black (1st January 2017)*

If you think you won't be able to gather all necessary evidence, state the name and contact details of medical/other professionals you think the person from the NDIA conducting the Internal Review should contact. Also – specify you give the NDIA consent/authority to do this if needed.

Applications can be lodged via the NDIS website ([ndis.gov.au/feedback](https://www.ndis.gov.au/feedback)).
**You can also write a letter to the NDIA and address it to PO Box 700
Canberra ACT 2601; telephone us on 1800 800110, or lodge your
decision review application at your local NDIS office.**

Appendix 1- Reviewable Decisions

Each of the following CEO decisions is a **reviewable decision**:

- (a) a decision a person does not meet the access criteria;
- (b) a decision not to specify a period under s 26(2)(b);
- (c) a decision to revoke a person's status as a participant;
- (d) a decision to approve the statement of participant supports in a participant's plan;
- (e) a decision not to extend a grace period;
- (f) a decision not to review a participant's plan;
- (g) a decision to refuse to approve a person or entity as a registered provider of supports;
- (h) a decision to revoke an instrument approving a person or entity as a registered provider of supports;
- (i) a decision to make, or not to make, a determination in relation to a person;
- (j) a decision not to determine a child can represent themselves;
- (k) a decision to make, or not to make, a determination a person has parental responsibility for a child;
- (l) a decision to appoint a plan nominee;
- (m) a decision to appoint a correspondence nominee;
- (n) a decision to cancel or suspend, or not to cancel or suspend, the appointment of a nominee;
- (oa) a decision to refuse to extend a period;
- (ob) a decision to take action to claim or obtain compensation;
- (oc) a decision to take over the conduct of a claim;
- (o) a decision to give a notice to require a person to take reasonable action to claim or obtain compensation;
- (p) a decision to give a notice the CEO proposes to recover an amount;
- (q) a decision not to treat the whole or part of a compensation payment as not having been fixed by a judgement or settlement;
- (r) a decision not to write off a debt;
- (s) a decision the CEO is not required to waive a debt;
- (t) a decision not to waive a debt;
- (u) a decision the CEO is not required to waive a debt;
- (v) a decision not to waive a debt.