

Guidance on Using Core Funding ‘Flexibly’



1. Support Purposes

NDIS participant budgets are allocated to three separate support purposes:

CORE

Supports that enable participants to complete activities of daily living. Participant core budgets often have a lot of flexibility to choose specific supports however this is not unlimited and cannot reallocate this funding for other support purposes (i.e., capital, capacity building supports and sometime even within Core).

CAPITAL

Investments, such as assistive technologies – equipment, home or vehicle modifications, or for Specialist Disability Accommodation (SDA). Participant budgets for this support purpose are restricted to specific items identified in the participant’s plan.

CAPACITY BUILDING

Supports that enable a participant to build their independence and skills such as therapies, allied health, Support Coordination and Psychosocial Recovery Coaching.



2. How Flexible is ‘Flexible’

Core Supports are designed to support Participants with everyday disability-related needs. Core Supports budget is the most flexible, and in most cases, Participants can use their funding across any of the following four support categories.

- Assistance with Daily Life;
- Consumables;

- Assistance with Social & Community Participation; and
- Transport

However, there are instances where you do not have flexibility in your funding, particularly for transport funding and disability related health supports.

Plan Managers, Support Coordinators and Psychosocial Recovery Coaches should remind participants that wish to use their core funds flexibly that:

- Flexible use of core funding does not result in exceeding the Participant's plan budget;
- The choices associated with the use of flexibility relate to plan goals and expenditure aligned with purpose of the NDIS (i.e. cannot use fund flexibility to by non-NDIS supports);
- Flexibility does not extend to Supports other than Core supports (i.e. Capacity Building or Capital).



3. What about Disability Related Health Supports? Aren't they in Core?

The NDIS will fund disability-related health supports where these supports directly relate to a participant's significant and permanent functional impairment and assist them to undertake activities of daily living.

These supports are provided individually to participants and can be provided in a range of environments, including, but not limited to, the participant's own home.

Approval for Disability Related Health Support will be expressly listed in a Participants NDIS Plan or with Approval in writing from a NDIS Planner (Delegate).

Participants are not permitted to claim for health supports from their plans when those health supports do not relate to their disability and when they do not require health supports on a regular basis.

Those health supports will continue to be provided by the health system. Additionally, if a participant's support needs become acute, that support should be provided in a hospital or another health setting by the relevant state/territory health care system or private health system and not be claimed from the participant's plan.

The NDIA has also advised DIA that disability related health support **are not** listed within core for use to 'top up' or expand any therapy or allied health supports that have been deemed Reasonable and Necessary in a Participants Capacity Building Budget.

Participants that have been funded for Disability Related Health Supports within Core will have it specifically referenced within their Plan.

Where a Participant's NDIS Plan does not expressly specify that Disability Related Health Supports have been approved (deemed Reasonable and Necessary) the participant should be directed to seek clarification and approval in writing from the NDIS Planner (Delegate).

This is required even if the Participant has been previously approved, and it has not been transferred as a specification into their PACE plan.

Plan Managers are advised that the NDIA will consider claims for these supports as being non-compliant upon review/audit without such evidence.

NOTE

Disability Intermediaries Australia provides this guidance based on the most current information available within the NDIS and represents DIA's interpretation of current legislation, rules, operational guidelines and information available from the National Disability Insurance Agency (NDIA) and the NDIS Quality and Safeguards Commission.

DIA reminds members and the wider sector that when in doubt and where individual situations require individual considerations, participants should be directed to seek approval in writing from their myNDIS contact or NDIS Planner (delegate) to clarify their individual circumstances.