

Example – NDIS Access Determination Letter



Dear

I am writing to advise you that I have assessed your request for you to access the National Disability Insurance Scheme (NDIS) and I wish to inform you that I have determined that you do not meet the access requirements in section 24 or section 25 of the National Disability Insurance Scheme Act 2013 (the NDIS Act).

One of the criteria for accessing the scheme is that the supports required are appropriately funded by the NDIS and that there is not another provider of Government services more appropriate. In your situation and based on the information we have available in this circumstance, the supports required are most appropriately provided by the NSW Department of Health or GP Chronic Disease Management Plan.

The legislation requires a participant to have significant and permanent disability that results in substantially reduced functional capacity. While I note you have provided information on your disability, I have determined that it does not sufficiently meet the requirements of the legislation in terms of having a significantly reduced functional capacity.

I have formed the view that on the information available to me, the support that you require is more appropriately provided by the NSW Department of Health through your GP via a Chronic Disease Management Plan during time you are unwell.

I have also included a factsheet on your rights to have this decision reviewed.
If you have any questions about any of the information in this letter please contact us on:

- Ph. 1800 800 110, or
- send an email to nationalaccessteam@ndis.gov.au.

Yours sincerely

National Disability Insurance Agency
Marie Smith
Delegate of Chief Executive Officer

05/02/2016