

Who is eligible to receive supports under the NDIS?

Types of support provided

The Productivity Commission created three tiers of support:

- Tier 1 – Raising general awareness about disability amongst the Australian public and promoting opportunities for inclusion.
- Tier 2 – Providing information to all individuals living with disabilities and their caregivers/families about where to access services and supports.
- Tier 3 – Funding lifelong supports and services for individuals with permanent disabilities.

Eligibility for NDIS funding

To be eligible for Tier 3 funding a person must:

1. Be aged 0 – 65 years at the time of acquiring disability; AND
2. Have significantly reduced functioning in at least one these areas: self-management, self-care, communication, or mobility and require significant, ongoing support; AND/OR
3. Require early, disability-related intervention to improve or enhance functioning for the remainder of their life (e.g. those at risk for Autism or those who acquire degenerative diseases).

Estimating number of beneficiaries

To estimate the number of beneficiaries of NDIS funding, the Productivity Commission used data and definitions from the 2009 Survey on Disability, Ageing and Carers. Based on this information, they **estimated that approximately 411, 250 Australians would be eligible for NDIS funding** [*Productivity Commission Report*, Vol. 2, pp.753-754].

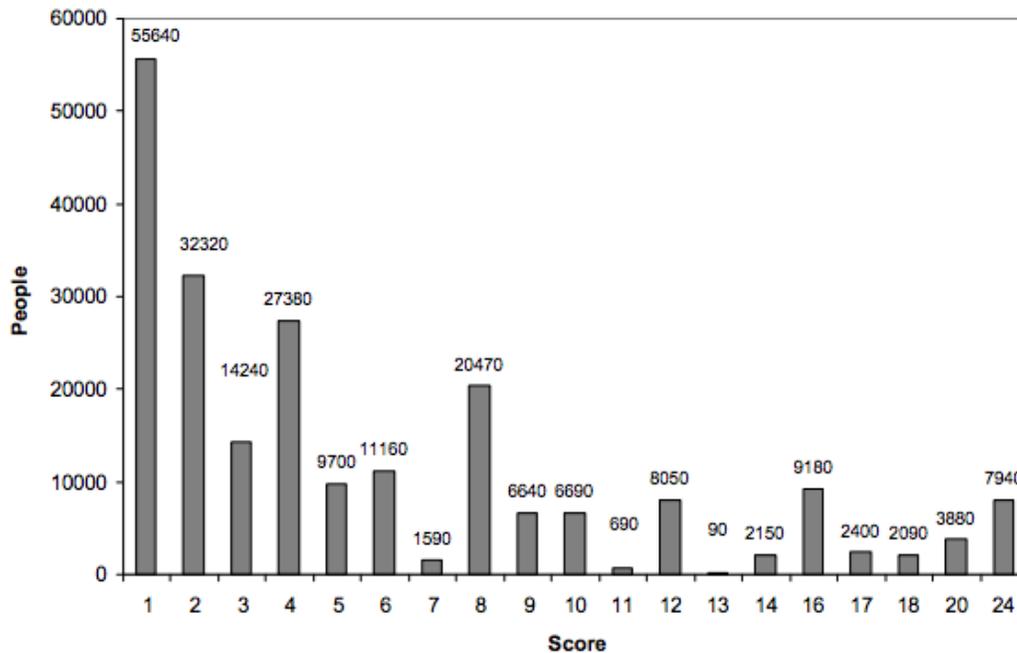
Mapping the level of need

To estimate the costs associated with the anticipated beneficiary pool, the Productivity Commission developed a series of categories based on level of support need. Each category included a basket of services with an average cost attached. Each anticipated beneficiary was then placed in the appropriate category and overall support costs were calculated.

24 categories were created (category 1 = very limited amount of support required for daily functioning and category 24 = constant support required for daily functioning). More detailed information on each of these categories can be found in the Productivity Commission Report on pages 757-758.

The distribution of anticipated beneficiaries across these categories is illustrated in Figure 16.1 (below).

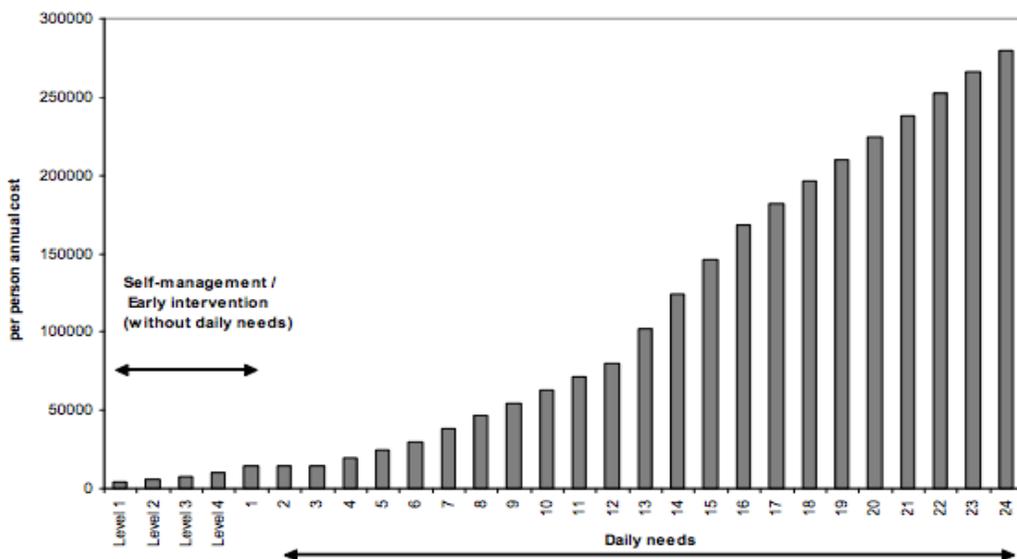
Figure 16.1 Distribution of severity — daily needs group



Data source: Commission calculations based on ABS (2010d, unpublished).

The estimated annual cost per person based on level of need is illustrated in Figure 16.4 (below). As the level of need increases, so do the associated costs.

Figure 16.4 Annual average per person cost of care and support, \$^a



^a Annual average per person costs of care and support for people aged 15–64 years

Data sources: Commission calculations based on ABS (2010d); unpublished data from accident compensation schemes and state disability systems.

Sources:

http://www.pc.gov.au/__data/assets/pdf_file/0012/111270/disability-support-volume1.pdf

http://www.pc.gov.au/__data/assets/pdf_file/0013/111271/disability-support-volume2.pdf

Disability acquired through accidental injury

Australians with long-term disabilities due to accidents are covered under the National Injury Insurance Scheme. The NIIS is a no-fault program that provides lifetime supports just like the NDIS.

Sources:

<http://www.treasury.gov.au/Policy-Topics/PeopleAndSociety/National-Injury-Insurance-Scheme>

Short-term disability caused by illness

Australians 22 years and older who are temporarily disabled by illnesses are able to apply for the national Sickness Allowance. The allowance provides income and access to additional supports, payments, and services until the individual is able to return to work.

Source:

<http://www.humanservices.gov.au/customer/services/centrelink/sickness-allowance>

Chronic health conditions

*“For many people with chronic health conditions, the question is not whether they have significantly reduced functioning in self-care, communication, mobility or self-management. Rather the question is, **having received the optimal duration and type of treatment:***

- ***is their condition permanent (or likely to be permanent)? and,***
- ***do they have significant, long-term support needs in order to participate in the community (whether that be continuous or episodic)?***

People with support needs that persist, or are likely to persist, for only several years due to chronic illness would generally not appropriately have their needs met by the NDIS. The NDIS is intended to give people certainty of support over a long time horizon, recognise that personal choice and power over support needs are greatest for people who will have to get lifelong and enduring supports, provide significant risk pooling from a lifetime perspective, and to facilitate lifetime community and employment goals that would not otherwise be attainable to the person.

*Being precise about what constitutes ‘several years’ is difficult and the details should be worked out in the implementation of the NDIS. But a rule of thumb may be five years. It is important to stress that **relaxing the criterion for ‘permanence’ too greatly could threaten the sustainability of the scheme.** Notably, one of the reasons for the sudden increase in Disability Support Pension claims in the 1990s was the relaxation of the criterion for entry of ‘permanent incapacity’ to ‘substantially incapacitated’ (PC 2005b).”*

[Productivity Commission Report, Vol. 1, pp. 184-185]

Source:

http://www.pc.gov.au/__data/assets/pdf_file/0012/111270/disability-support-volume1.pdf

Mental health conditions

*“While the NDIS legislation stipulates that **someone must have a permanent impairment to be eligible for an individualised package of support, the mental health sector is uncertain about what this means in practice.** Almost uniquely among many kinds of disability, psychosocial disability associated with **mental illness is often episodic in nature and can result in fluctuating needs** – not only over a lifetime but over the course of weeks and months. One person’s support needs may be not be immediately obvious at any point in time, but nevertheless be ongoing, while someone else’s needs might be quite apparent while not necessarily being ‘permanent’ (depending on how permanent is defined). For these and other reasons, the outcomes of assessment may be different depending on when and how it occurs and who is able to contribute to it.”*

[Mental Health Council of Australia, *Mental Health and the National Disability Insurance Scheme Position Paper*, 2013, p.2-3]

*“Of the 489,000 people with serious mental illness in Australia, the Productivity Commission estimated that only 60,000 would qualify for an individualised package of support (‘Tier 3’) because they have a serious and persistent mental illness with complex interagency needs (as shown in Figure 1, below). Among this group, just 6,000 people with psychosocial disability associated with mental illness (that is, only 10 per cent of people with serious and persistent mental illness with complex interagency needs) were said to require the most intensive support – a figure that the MHCA believes lacks any credibility and **vastly underestimates the level of need in the community.**”*

[Mental Health Council of Australia, 2013, p.1]

Recommendations to improve mental health service delivery overall:

1. Australian governments commit to maintaining or increasing funding levels for both NDIS and non-NDIS mental health supports
2. Map state mental health services to determine where gaps exist for individuals deemed ‘Tier 2’ (not eligible for NDIS supports) and what will happen if these services are subsumed into the NDIS system.
3. Ensure early intervention supports are available to all Australians, not just those eligible for the NDIS.

[Mental Health Council of Australia, 2013, p.4-5]

As a result of the criticisms regarding mental health services under the NDIS, a national conference “Integrating Mental Health into the National Disability Insurance Scheme” is held annually (started in 2013). Feedback from conference participants helps to inform ongoing adjustments to the NDIS as it is rolled out across Australia.

Sources:

https://mhaustralia.org/sites/default/files/docs/mhca_position_paper_-_ndis.pdf

<http://mhaustralia.org/events/13>

Palliative care

Although it was recommended that the NDIS should provide palliative care services to those already benefiting from individualized support programs under the scheme (*Productivity Commission Report*, Vol. 1, pp.192] the **final rules for the NDIS state that the NDIA is not responsible for palliative care** [Ministry of Families, Community Services and Indigenous Affairs, *National Disability Insurance Scheme (Supports for Participants) Rules 2013*, p.15].

Sources:

http://www.pc.gov.au/__data/assets/pdf_file/0012/111270/disability-support-volume1.pdf

http://www.ndis.gov.au/sites/default/files/documents/NDIS_%28Supports_for_Participants%29_Rules_2013.pdf

Care for those older than 65 years who acquire disability

At present, **Australians who are older than 65 years and acquire disability are not eligible to receive NDIS supports**. These individuals are expected to receive care from Australia's aged care system (users are expected to contribute to costs as able but the Australian government covers the bulk of costs).

The age cut-off is highly contested. A 2013 Galaxy poll found that 82% of Australians believe the age cut-off is unfair and National Seniors Australia has been protesting the cut-off since draft legislation for the NDIS was introduced. National Seniors claims the aged care system is unable to adequately address the disability care needs of seniors.

While the Australian government has considered removing the age cut-off, **this would increase the cost of the NDIS program and potentially make it financially unviable** (Australia currently faces a budget deficit). It also works against the initial purpose of the program, which was to enable people with disabilities to avoid or move out of the welfare system to pursue employment or meaningful opportunities.

Sources:

<http://www.theaustralian.com.au/national-affairs/important-issue-falling-between-a-major-gap-in-disability-and-aged-care-reform/story-fn59niix-1226580680114?nk=3ef3e004c2a66a8e27bab182a3c41f8c>

<http://www.nationalseniors.com.au/be-heard/disability>

<http://www.cis.org.au/media-information/opinion-pieces/article/4705-extending-ndis-poses-threat>