

NDIS Supports rules consultation

Osteopathy Australia wants to thank the Department of Social Services (DSS) for inviting stakeholders and community members to provide feedback on the transitional rules for NDIS Supports (Section 10). This submission focuses on the inconsistent application of the NDIS Supports rule and the impact on osteopathy and NDIS participants who use osteopathy in their plans.

Osteopathy and Osteopathy Australia

Osteopathy Australia is the peak body representing the interests of osteopaths, osteopathy as a profession, and consumer rights to access osteopathic services. Our core work is liaising with state and federal government and all other statutory agencies, professional bodies, and private industry regarding professional, educational, legislative, and regulatory issues, and advocating for high standards of care. Osteopathy is an Australian Health Practitioner Regulation Agency (Ahpra) regulated health profession, overseen by the Osteopathy Board of Australia. Like all Ahpra registered professions, osteopaths must meet strict national standards for education, professional conduct, and ongoing professional development. Most registered osteopaths are members of Osteopathy Australia.

Osteopaths achieve their qualifications through a dual bachelor's or a combination of bachelor's and master's degrees. These courses encompass anatomy, biomechanics, human movement, the musculoskeletal and neurological systems, as well as clinical intervention approaches, biomedical science including pharmacology which are all underpinned by a biopsychosocial management approach.

Our feedback on the consultation material

1. How well do you understand the NDIS Support rule?

Our understanding of the NDIS Support rule extends mainly to how it impacts the profession of osteopathy. Osteopaths are university qualified, Ahpra-registered allied health professionals who provide evidence-based musculoskeletal supports. Osteopaths work with people of all ages and with a range of functional impairments and disabilities, providing effective, outcome-focused supports that help build capacity and independence. This scope of practice means that osteopathy falls within the 'Therapeutic supports' NDIS Support category. With the change in legislation from the *National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Bill 2024*, for funding to be approved, supports must now be an NDIS Support, alongside the standard requirements. However, application of the NDIS Supports rules and NDIS Guidelines is inconsistent and varies significantly depending on the National Disability Insurance Agency (NDIA) staff member approving a participant's plan.

A consequence of the NDIS Supports list being so prescriptive is that the navigation and interpretation of the list often falls to participants and their supporters. The accompanying rules

alongside the list are also complicated, overly bureaucratic and difficult to apply¹. This combination creates barriers for the self-determination of people with disability under the NDIS.

2. What would help make the rule easier to understand?

We support what has been mentioned in the 'What we've heard so far' supporting documents, particularly around the use of examples and case studies to demonstrate the application of the rules and NDIS Supports list. These resources will help to minimise confusion, particularly for participants navigating the NDIS Supports list. While a principles-based approach to NDIS Supports may not be possible in the legislation, we recommend the creation of practical principles that allied health professionals, disability support networks and NDIA staff can use for more nuanced funding applications. This will align with the NDIS principle of participant choice and control and will create further resources that can be used across the sector, which was found to be a widely appreciated move since the legislation was introduced in October 2024².

3. How have the lists of NDIS Supports helped you to know what the NDIS can and cannot fund?

N/A

4. What have you found hard about using or understanding the lists for:

- a. supports that are NDIS supports
- b. supports that are not NDIS supports?

The main difficulty in the use of the two lists for what is and isn't an NDIS support is that both are still open to interpretation. The 'Supports that are NDIS supports' list is made up of broad categories that stipulate the requirements a support must cover to be funded under that NDIS Support in a participant's plan. In contrast, the 'Supports that are not NDIS supports' is more prescriptive, listing examples of therapy types that are not evidence-based and not eligible for funding. In theory, this supports participant choice and control as it allows for flexibility in the interpretation of NDIS Supports, however participants seeking funding for osteopathy have experienced the opposite. Despite osteopathy meeting the criteria of the Therapeutic supports NDIS support, an increasing amount of funding is being rejected citing that osteopathy is an alternative and complementary therapy, with no clarification or reasoning provided alongside the decision, meaning participants and their supporting osteopaths are unable to refute the findings.

5. What are some examples of things in the NDIS Supports lists that aren't clear?

The NDIS Supports categories have seemingly been designed so a grey area is created where in theory, if supports for an NDIS participant are demonstrated to be effective and fall within the

¹ Grattan Institute. Saving the NDIS: How to rebalance disability services to get better results. [Internet]. 29 June 2025. Available from: <https://grattan.edu.au/report/saving-the-ndis/>

² NDIA. NDIS supports, funding amounts and periods - Summary Report 1. NDIS Reform Evaluation Summary Reports. [Internet]. June 2025. Available from: <https://dataresearch.ndis.gov.au/research-and-evaluation/evidence-helps-us-improve-ndis/ndis-reform-evaluation-summary-reports>

reasonable and necessary criteria, there is space for funding to be approved, increasing participant choice and control. However, this becomes problematic where the interpretation of the rules changes between allied health professionals, disability sector navigators like LACs and plan managers, NDIA staff and participants. Creating more transparent NDIS Guidelines, or resources on how they are applied by NDIA staff, will create greater transparency and build more trust between the NDIA and the disability community.

Despite osteopathy being an evidence-based, Ahpra-regulated profession that works with NDIS participants to build their capacity we have seen an increased amount of funding rejections for osteopathy since the legislation change in October 2024. In February 2025, we met with NDIA Deputy CEO, Corri McKenzie who stated, in writing, that there is no official NDIA policy that prevents osteopathy, when appropriate, from being funded in NDIS plans. However, we have continued to see funding rejections since February 2025, even with the support of the letter from Ms McKenzie, with many NDIS staff citing osteopathy as an alternative or complementary therapy, despite it being an evidence-based and regulated allied health profession. These rejections undermine participant choice and control, the profession itself and often leave participants without funding for supports that have been shown to be effective and beneficial. More detail around how evidence-based therapeutic supports are defined should be made available³, which will help to lessen confusion in these applications for funding. We acknowledge that the NDIA has committed to an ongoing policy review around therapeutic supports and Osteopathy Australia looks forward to further engagement with the NDIA in this space.

6. Are there any areas of the NDIS Supports rule (or lists) you think need to be changed? This might include things that should be included in the lists.

We continue to advocate for osteopathy's inclusion as a recognised profession to provide therapeutic supports under the NDIS.

Further, currently, NDIA staff are often required to work through significant documentation including clinical and non-clinical information when determining a participant's plan and funding allocation. However, many NDIA staff are not qualified to interpret this information, nor do they receive adequate training, resulting in participant's funding being approved based on the personal judgement of NDIA staff⁴, when it should be based on a nuanced interpretation of the NDIS Supports rule, accompanying guidelines and clinical reasoning. As such, clearer guidelines, rules and lists should be developed and made available both internally and externally.

³ NDIA. NDIS supports, funding amounts and periods - Summary Report 1. NDIS Reform Evaluation Summary Reports. [Internet]. June 2025. Available from: <https://dataresearch.ndis.gov.au/research-and-evaluation/evidence-helps-us-improve-ndis/ndis-reform-evaluation-summary-reports>

⁴ Grattan Institute. Saving the NDIS: How to rebalance disability services to get better results. [Internet]. 29 June 2025. Available from: <https://grattan.edu.au/report/saving-the-ndis/>



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Osteopathy Australia would again like to thank the DSS for the opportunity for consultation. For any additional information or comments, please contact us by phone at 02 9410 0099 or by email at policy@osteopathy.org.au.