



Australian Government

Department of Health, Disability and Ageing

# Defining Therapy Supports

Consultation with Allied Health Sector

# Purpose of this paper

The Department of Health, Disability and Ageing (department) is currently working on amendments to the *National Disability Insurance Scheme (Getting the NDIS Back on Track No. 1) (NDIS Supports) Transitional Rules 2024* (NDIS Supports Transitional Rules). The purpose of this paper is to seek input from the allied health sector on how to categorise and describe therapy supports in new framework planning, expected to commence in July 2026.

We acknowledge that the allied health sector and participants also have a keen interest in the approach to assessing and funding a participant's need for disability related therapy supports. While there is a public consultation on new framework planning that is currently open ([NDIS rules: Public consultation on new framework planning - Australian Government Department of Health, Disability and Ageing - Citizen Space](#)) until 6 March 2026, we acknowledge the information is high level.

This paper provides background and context for NDIS supports, as well as setting out a proposed approach to categorising and describing therapy supports in the *National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) (NDIS Supports) Transitional Rules 2026* (Amending Rules). The approach to the categorisation and description of therapy supports are still subject to policy refinement and consultation.

The department is planning to a full public consultation on the Amending Rules in March 2026.

## Background

The *National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Act 2024* (Amending Act) made some of the most significant changes to the NDIS since it was established. One of the key changes made by the Amending Act was creating the concept of 'NDIS supports' in section 10 of the *National Disability Insurance Scheme Act 2013* (NDIS Act). This concept now appears throughout the NDIS Act and is central to the operation of the NDIS.

The definition of NDIS support guides participants on how they may spend their NDIS funding. The intention is to provide greater clarity around the supports which can and cannot be purchased using NDIS funds.

The NDIS Supports Transitional Rules commenced on 3 October 2024 and only apply to old framework plans. Under the new planning framework, reasonable and necessary supports will be replaced by reasonable and necessary budgets, meaning that most supports will no longer be described in a participant's plan. The definition of NDIS supports has an even more important role in new framework planning in guiding participants to understand the supports which can be funded by the NDIS through their flexible budgets. This means that changes are needed to ensure the definition of NDIS supports works for both old and new framework planning.

In new framework planning a participant must have an 'assessed need' to access therapy supports. A need for therapy will be identified through the support needs assessment process.

A participant will be advised which category or categories of therapy they may access using NDIS funding, likely as part of the participant's needs assessment report and/or plan. The support needs assessment report will not necessarily identify the therapy type (for example speech pathology) but will identify at least the broader category of therapy.

Therapy will be funded in participant plans as part of a flexible budget. This means a participant can spend their NDIS funding flexibly across the categories of therapy supports which have been identified for them through the support needs assessment process and across other flexible funding categories.

Feedback from consultation on the NDIS Supports Transitional Rule in June and July 2025 highlighted the need for clearer descriptions of therapy supports, with participants and providers noting uncertainty about how therapy is categorised, the purpose of therapeutic supports, and the differences between therapy, general health services and lifestyle services. Clearer definitions will help participants understand which therapy supports align with their disability related needs.

Changes to the rules will, among other things, repeal and replace schedule 1 to the NDIS Supports Transitional Rule. Schedule 1 declares supports that are NDIS Supports.

Schedule 1 to the NDIS Supports Transitional Rule currently contains 36 categories of supports, largely aligned to NDIS Provider Registration Categories. The replacement schedule 1 will take a different approach to categorising supports. It will be restructured to align with Support Item Groupings (SIGs) which are groups of supports funded under the NDIS with a similar overarching purpose or delivery method.

Schedule 1 to NDIS Supports Transitional Rules will be restructured to align with SIGs. This approach will provide greater clarity for participants, as SIGs correlate directly to needs identified in the support needs assessment (see section 32L of the NDIS Act) and the Pricing Arrangements and Price Limits (PAPL) and support catalogue (see <https://www.ndis.gov.au/providers/pricing-arrangements>). This provides a more consistent framework for how a participant's budget is generated and what they can spend their funds on.

This approach will not change the supports that a participant is currently able to access under the NDIS Supports Transitional Rule. Participants with old framework plans will continue to have reasonable and necessary supports identified in their plan which can be mapped to the relevant SIGs.

## Proposed approach

Therapy supports are evidence-based therapeutic interventions delivered by, or under the direct supervision of, appropriately qualified allied health professionals. Therapy is generally aimed at improving or maintaining functional capacity, or reducing its decline, in areas like mobility, self-care and communication. These types of supports are generally referred to as capacity building supports in old framework plans. For the purposes of the NDIS Supports rule, therapy supports also includes assessments, and prescription and training in the use of things like assistive technology.

Allied health professionals may also provide supports in other relevant categories, for example in the context of employment supports.

In new framework planning, therapy supports must be linked to the disability-specific needs identified in a participant's support needs assessment. It is therefore proposed to divide therapy supports into three categories of 'general', 'social', and 'physical and health related' therapy. Each of these categories can be linked to the relevant I-CAN domains the category of therapy seeks to address. This enables alignment of therapy supports with areas of need as assessed through the support needs assessment process.

Participants with new framework plans may be assessed as having a need for one or more categories of therapy supports. We propose that each category of therapy support will set out the types of therapies that fall within that category, for example 'physiotherapy'. Participants will then be able to choose which type of therapy falling within that category best meets their needs.

### **'General' therapy**

Supports covered by the general therapy category will help a participant improve, maintain, or reducing decline in functional capacity in the following I-CAN domains:

- communication
- community, social and civic life
- domestic life
- general tasks and demands
- interpersonal interactions and relationships
- learning and applying knowledge
- lifelong learning
- mobility
- self-care.

We anticipate that this category will be open to most, if not all, participants assessed as having a need for therapy. We are still considering the types of therapy to be included in this category.

### **'Social' therapy**

Supports covered by the social therapy category will help a person improve, maintain or reduce decline in functional capacity related to the following I-CAN domains:

- communication
- community, social and civic life
- general tasks and demands
- interpersonal interactions and relationships
- learning and applying knowledge
- lifelong learning.

The types of therapy to be included in this category is still being considered.

### **'Physical and health related' therapy**

Supports covered by the physical and health related therapy category will help a participant improve, maintain, or reduce decline in functional capacity in the following I-CAN domains:

- communication
- domestic life
- general tasks and demands
- mobility
- self-care.

The types of therapy to be included in this category is still being considered.

## **Feedback and questions**

The department is seeking feedback on the proposed approach to categorising and describing therapy supports. We welcome general thoughts and feedback but would particularly appreciate responses to some or all the following questions from allied health professional peak bodies as they will assist us in developing changes to the NDIS Supports Transitional Rule. Where possible, we would appreciate references or direction to the evidence informing responses.

Therapy supports need to be grouped into categories which address a similar range of needs. As outlined above, we are proposing to split therapy supports into categories. These are being referred to as 'general', 'social' and 'physical and health related' therapy, but these categories are not set.

We are proposing to describe each category of therapy supports by specifying the 'therapy types', or allied health professions who can provide therapy in that category. We are also considering options for how to define each allied health profession, including whether they can be defined with reference to the relevant scope of practice.

- What I-CAN domains do you consider your profession and/or scope of practice is best situated to address?
- Are you able to provide a short definition of your therapy type or the scope of your practice and/or how that therapy delivers demonstrable outcomes for participants across relevant I-CAN domains?
- What do you see as the benefits or limitations of this approach?

The above categories were identified by considering which therapies could address needs in the domains outlined in the I-CAN v6, based on publicly available scope of practice.

- Are there alternate ways of grouping therapy supports with reference to the domains in the I-CAN for which a participant would need access to therapy that you consider would be appropriate?

As outlined above, we propose to describe the purpose of each category of therapy supports with reference to improving, maintaining or reducing the decline in a participant's function in the relevant I-CAN domains.

- Is there an alternate approach to describing the purpose of each category of supports that you consider would be appropriate?

We are considering including examples to clarify the purpose of supports. For example, in relation to the domain of mobility, the rule could provide that the purpose is to:

*help participants improve, maintain or slow the decline in a participant's mobility, including walking and moving, physical transfers, positioning, re-positioning and turning, carrying, moving and handling objects.*

- Do you think including examples in the rule would be useful?
- If so, how detailed should the examples be and what kind of examples would be useful?
- If not, is there another way of clarifying the purpose of the supports that you think would be preferable?

## Annexure A: Relevant domains and sub domains

Domain	Subdomains
Mobility	(a) transferring and positioning; (b) carrying, moving and handling objects; (c) walking and moving; (d) transport
Domestic life	(a) shopping; (b) cooking; (c) cleaning and domestic tasks; (d) household maintenance
Self-care	(a) eating and drinking; (b) personal care; (c) toileting; (d) dressing
Community, social and civic life	(a) money and economic life; (b) community life; (c) leisure and recreation; (d) advocacy
Communication	(a) receiving basic communication; (b) expressing basic communication; (c) feelings and emotions; (d) conversations and complex communication
Learning and applying knowledge	(a) learning new tasks; (b) decision making; (c) literacy and numeracy; (d) understanding time
General tasks and demands	(a) daily routines; (b) initiating and completing tasks; (c) managing medication; (d) safety and risk abuse
Life-long learning	(a) finding, choosing and applying; (b) punctuality and preparation; (c) doing the job or participating in learning; (d) after hours
Interpersonal interactions and relationships	(a) social skills; (b) seeking assistance and cooperating; (c) managing relationships; (d) intimate and dependent relationships