



National Disability Services Policy Paper: Funding NDIS Supports During Disasters and Emergencies

1.0 Purpose

This policy paper has been developed by National Disability Services (NDS) to outline potential solutions for addressing funding gaps during disaster and emergency events that affect the delivery of disability supports including those provided through the National Disability Insurance Scheme (NDIS).

About NDS

National Disability Services (NDS) is Australia's peak body for disability service organisations, and Australia's biggest and most diverse network of disability service providers. Our valued members collectively operate several thousand services for more than 300,000 Australians with disability and employ a workforce of more than 100,000 people. NDS is committed to a sustainable and diverse disability service sector, underpinned by the provision of high-quality, evidence-based practices and supports that strengthen, safeguard, and provide greater choice for people with disability in Australia.

2.0 Background

Australia experiences regular and severe natural disasters, including cyclones, bushfires, floods, and extreme weather events. These emergencies pose significant risks to people with disability, particularly in terms of maintaining safe and consistent access to supports. While the [NDIS Practice Standards](#) include requirements for emergency and disaster planning, the current NDIS funding model lacks a mechanism for providers to be directly and promptly reimbursed for additional support costs incurred during such events.

The COVID-19 pandemic demonstrated that targeted, time-limited funding measures can be rapidly implemented to ensure the continuation of disability supports during a crisis. For example, the [NDIS Pricing Arrangements and Price Limits COVID Addendum](#) introduced direct billing claim codes for support costs like deep cleaning, additional supported independent living (SIL) services, and personal protective equipment (PPE). This provides a useful precedent for a broader disaster response model.

3.0 Issues and opportunities

Currently, there is no avenue for the National Disability Insurance Agency (NDIA) to directly fund providers for the additional work required in preparation for and during emergencies and disasters. This includes activities such as risk assessments, staff resourcing, participant evacuation planning, and continuity of critical daily supports. These activities are essential to ensuring the safety and wellbeing of participants but are not adequately funded through current plan budgets or existing pricing arrangements.

Providers often absorb these costs without guarantee of reimbursement, creating financial strain and disincentivising proactive emergency planning. In many cases, providers are expected to meet the expectations set by the NDIS Practice Standards—such as ensuring continuity of supports and effective disaster response—without any dedicated funding mechanism to support these obligations.

3.1 A complex policy issue: Shared responsibilities and system gaps

Emergency response in Australia involves multiple layers of government, and the division of responsibilities between the NDIA, state/territory governments, local government, and providers is not always clear-cut. Disability supports delivered through the NDIS are designed to be portable and participant-led, but in disaster situations, flexibility and coordination are critical.

Key complexities include:

- **Role ambiguity:** Disasters are traditionally managed by state and territory governments. However, when NDIS participants are affected, there is an expectation that the NDIA ensures continuity of disability supports. It is unclear who is responsible for covering the costs of additional supports required during an emergency —NDIA, providers, or government.
- **Inclusion gaps:** Emergency accommodation and evacuation planning often fail to consider the access needs of people with disability. Hospitals cannot be assumed to be suitable fallback options.
- **NDIS interface limitations:** Section 10 of the *National Disability Insurance Scheme Act 2013* NDIA limits the NDIA funding to disability-related needs, but in a disaster, many needs (food access, accommodation, health) are interlinked and urgent.
- **Provider obligations and risks:** Registered providers are subject to NDIS Practice Standards (e.g., continuity of supports, safe delivery), IR obligations, and the positive duty to protect the psychological safety of staff—yet without the resourcing required to meet these requirements in an emergency.
- **Evidence and claim burden:** Retrospective funding models are administratively heavy and risky. Providers face uncertainty around evidence requirements (e.g., stay-at-home orders, weather declarations) and may be unable to meet compliance expectations during chaotic conditions.
- **Disruption of informal supports:** Disasters may isolate participants from informal supports (family, carers), further increasing demand on formal services.

These overlapping issues highlight the need for a structured, nationally consistent mechanism that removes uncertainty, reduces administrative burden, and ensures funding keeps pace with real-time support requirements.

3.2 Key Issues

- **Continuity of supports:** Providers must act quickly to maintain services, often under severe conditions.
- **Funding gaps:** No pre-approved, rapid-response mechanism exists to access additional funds.
- **Workforce pressures:** Overtime, psychological safety, and IR implications increase burden.
- **System fragmentation:** Lack of clarity around agency, provider, and jurisdictional responsibilities.

4.0 Proposed solutions

The following outlines a range of interconnected solutions that could be explored to improve responses in times of disasters or community emergencies. Also attached is a summary of policy responses that were enacted during COVID-19 which provide a practical example of how pricing and payment responses can support participant wellbeing through emergency situations (Appendix One).

4.1. Emergency support funding line item in NDIS pricing arrangements

- Introduce a dedicated "Disaster and Emergency Response" support item, claimable via direct billing.
- Available only during disasters formally declared by National Emergency Management Authority (NEMA) or other recognised authorities.
- Covers overtime, surge staffing, logistics, transport, PPE, evacuation-related supports, and essential supply access.

4.2. Pre-authorisation and pre-planning requirements

- Providers must:
 - Discuss disaster response contingencies with participants and include these in service agreements.
 - Maintain compliant emergency and disaster management plans.

- Inform participants of claim conditions in advance.
- Retain documentation for audit.

4.3. Automatic plan top-up mechanism

- Claims under the emergency line item would not reduce participants' plan budgets.
- Instead, the NDIA would automatically top-up plans to match the claimed amount. S47 of the *National Disability Insurance Scheme Act 2013* allows for plan variations where crisis or emergency funding may be required as a result of a significant change to the participant's support needs.
- Ensures continuation of regular supports without triggering reassessment.

4.4. Trigger-based activation

- Activation contingent on:
 - NEMA declaration
 - Public health emergency
 - Internal NDIA guidelines (developed with the sector)

4.5. National coordination role and policy alignment

- NDIA should:
 - Act as a central coordination body during declared disasters.
 - Align funding and response with emergency services.
 - Clarify funding responsibilities across government levels.

4.6. System enhancements

- Develop an emergency claim portal.
- Allow temporary service flexibility (e.g. family carers, tele-supports, increased budget flexibility across relevant categories e.g.: support coordination).
- Introduce surge billing codes (drawing from COVID SIL measures).

4.7. Explore solutions outside the NDIS

- Establish joint emergency funding arrangements through Commonwealth-State disaster recovery frameworks.
- Develop MOU-style agreements to fund disability-specific emergency supports through existing programs such as Emergency Management Australia or Services Australia.
- Clarify role of Disability Inclusion Officers and local emergency management teams in coordinating and resourcing disability-inclusive responses.
- Advocate for inclusive design and accessibility in state-level emergency planning and resourcing.

5.0 Next Steps

- Engage government, participant and sector stakeholders to validate the issues and refine solutions.
- Collaborate with Department of Health, Disability and Ageing, Department of Social Services, the NDIA, and the NDIS Quality and Safeguards Commission to coordinate implementation.

Appendix One

COVID Addendum: A precedent for designing emergency responses

The [NDIS Pricing Arrangements and Price Limits COVID Addendum 2024–25](#)

provides a compelling example of how the NDIA can rapidly adapt its funding and pricing structures to respond to crisis situations. Through the addendum:

- Providers were able to make **direct claims** for additional supports provided in line with public health advice, without needing to seek prior approval or adjust individual plans.
- Special line items were introduced to cover the cost of **deep cleaning, increased staffing, PPE, and alternative accommodation.**
- Additional billing options recognised the different costs for providers in **remote and very remote areas.**
- Claims were **time-bound and linked to clearly defined periods and geographic areas**, based on public health declarations.
- Provider obligations to maintain participant safety were formally recognised through specific funding responses.

This model shows that it is possible for the NDIA to:

- Provide **clear eligibility criteria and direct funding mechanisms** during emergencies.
- **Reduce administrative burden** through standardised processes.
- Ensure **sector-wide consistency and transparency.**
- Recognise and resource the **true cost of provider compliance** during crises.

There is a strong case for the NDIA to build on this model and expand it beyond public health emergencies to all disaster types, using existing national coordination infrastructure such as NEMA.