

Submission to the Joint Committee of Public Accounts and Audit Inquiry into the administration of the National Disability Insurance Scheme

Submitted by:

Self Manager Hub

Australia's leading peer-led organisation supporting NDIS self-managers and people who self-direct their NDIS supports

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Executive summary

People who self-manage their NDIS funding frequently experience legitimate claims being rejected through the NDIS portal without any explanation, reasons, or guidance on what to do next. Claims are simply marked “Rejected”.

This is a systemic administrative failure. It undermines compliance, shifts financial risk onto people with disability and our families, disrupts continuity of supports, and increases administrative inefficiency across the scheme.

Unexplained claim rejections particularly affect NDIS self-managers and people who self-direct their NDIS supports, especially those who directly engage support workers and are responsible for paying wages and meeting employment obligations.

The Self Manager Hub recommends that the NDIA be required to provide clear reasons for claim rejections, identify the type of rejection, give corrective guidance, ensure accessible and timely review pathways, and publicly report on rejection rates and outcomes.

1. Introduction

The Self Manager Hub is Australia's leading peer-led organisation for NDIS self-managers and people who self-direct their NDIS supports. We are run by people with lived experience, for people with lived experience, and support people with disability and our families to self-manage and self-direct their NDIS funding.

This submission addresses a significant and systemic issue in the administration of the NDIS, the rejection of legitimate claims through the NDIS portal without any explanation, reasons, or guidance on next steps.

2. Issue summary

The Self Manager Hub regularly hears from NDIS self-managers whose legitimate claims are rejected through the NDIS portal without any reason being provided. In many cases, the portal simply records the claim as “Rejected”, with no indication of whether the issue is technical, administrative, or substantive, and no explanation of action that can be taken to resolve the rejection.

This lack of transparency is a recurring problem, not an isolated incident.

3. Relevance to the inquiry terms of reference

3.1 Administration of claim compliance and financial sustainability

The NDIA has placed increasing emphasis on compliance by participants and providers as part of managing financial sustainability risks. However, rejecting claims without providing reasons actively undermines compliance.

NDIS self-managers cannot comply with requirements if they are not told what has gone wrong.

3.2 Disproportionate impact on people who self-manage and who directly engage their support workers

People who self-manage and who directly engage their support workers are particularly exposed to unexplained claim rejections. Unlike agency-managed participants, these individuals are directly responsible for paying support workers and meeting employment obligations.

3.3 NDIA performance monitoring and reporting

The absence of transparent reasons for claim rejections raises serious concerns about how NDIA performance is monitored, measured, and reported.

4. Procedural fairness and accountability

Claim rejections, including automated rejections, are administrative decisions with real financial and practical consequences.

5. Recommendations

The Self Manager Hub recommends that the Committee consider requiring the NDIA to implement the following reforms to improve transparency, compliance, and administrative efficiency in NDIS claim processing.

5.1 Mandatory reasons for claim rejection

The NDIA should be required to provide clear, specific reasons for every rejected claim. A claim status of “Rejected” without explanation is insufficient and undermines procedural fairness.

Reasons should identify the precise issue leading to rejection, for example incorrect line item, date mismatch, missing information, or system error. This would allow participants and providers to understand what has gone wrong and correct errors efficiently, reducing unnecessary resubmissions and disputes.

5.2 Clear categorisation of rejection type

Claim rejections should be clearly categorised so that participants understand the nature of the issue. At a minimum, rejections should be identified as:

- Technical, for example system or portal errors,
- Administrative, for example missing or incomplete information,
- Substantive, for example eligibility or rule-based issues.

This distinction is critical for people who self-manage and people who self-direct their NDIS supports, as it determines whether a claim can be quickly corrected or whether further engagement with the NDIA is required.

5.3 Clear corrective guidance and next steps

Where a claim is rejected, the NDIA should provide clear, plain English guidance on what steps are required to resolve the issue. This should include:

- What information needs to be corrected or provided,
- Whether the claim can be resubmitted and how,
- Expected timeframes once corrections are made.

Providing this guidance would reduce confusion, administrative burden, and delays, and would support compliance rather than penalise people for system opacity.

5.4 Accessible and transparent review pathways

Participants should be clearly informed of how to seek review or correction when a claim rejection is incorrect. Review pathways should be simple, accessible, and timely.

This includes ensuring that automated claim rejections are subject to review and that participants are not required to escalate unnecessarily through complaints processes to resolve basic administrative errors.

5.5 Improved performance monitoring and public reporting

The NDIA should be required to collect, monitor, and publicly report data on claim rejections as part of its performance framework. This should include:

- The number and proportion of claims rejected,
- Common reasons for rejection,

- Time taken to resolve rejected claims,
- Rates at which rejected claims are later corrected or paid.

Transparent reporting would support continuous improvement, enable Parliamentary oversight, and help identify whether system design or automated processes are contributing to avoidable errors and delays.

6. Conclusion

Unexplained claim rejections are not a minor technical issue. They represent a systemic failure in NDIS administration that undermines compliance, transparency, and trust in the scheme.

Addressing these issues through clear reasons, guidance, review pathways, and performance reporting would be a practical and achievable reform. It would reduce administrative inefficiency, support financial sustainability, and protect continuity of supports for people with disability and our families, particularly those who self manage and self-direct their NDIS supports.