

How to determine which NDIS participants you can work with, type of funding and what to charge

There are three types of NDIS funding categories:

- **Self-managed**
- 2 Plan-managed
- **3** NDIA managed

How does this relate to Dietitians?

- Self and plan-managed participants can access both registered NDIA and non-registered NDIA dietitians
- NDIA managed participants can only access NDIA registered dietitians



Important note: APDs are considered non-NDIA registered until they go through the NDIA registration process.



Which funding do I use?

Pay close attention to the funding category **'Capacity funding'** and the different line items under this funding category

Line Item: Improved Health and wellbeing 12_025_0128_3_3

- If available, this should be the first category to bill from.
- It's designated funding for dietetics and cannot be accessed by other allied health professionals.

Line Item: Improved Daily Living 15_062_0128_3_3

- Large funding pool that can be accessed by many allied health practitioners and therapy support workers.
- Used If no "Improved Health and wellbeing" funding is available or if this categories funding has been exhausted.
- Check with a support coordinator or the client what funding is remaining for your input in this budget, as funds may have already been allocated to other practitioners.

The 'Core funding' category is often used when there is no capacity building funding remaining

Line Item: Assistance with Daily Life 01_760_0128_3_3

Good practice would be to gain consent from a Support Coordinator or Local Area Coordinator (LAC) to use this funding for dietetic consultations.



The NDIS set fee for dietetic input is \$193.99 per hour. You can decide your own fee up to this maximal amount.

Example:

