

What is required for a valid NDIS claim?



What makes a valid NDIS claim?

Plan managers are only able to submit invoices to the NDIA that are a valid claim. Valid claims must meet specific criteria including invoice requirements, NDIS legislation, and meet the supports funded in the participants plan. This document covers some of the considerations for a provider to ensure the claims they submit are valid and meet the NDIA requirements. As providers of NDIS supports to an NDIS participant, it is your responsibility to ensure the claim is valid.

Once a valid claim is received, the plan manager will submit this to the NDIA to be reviewed and payment will be processed once funding is released by the NDIA for the claim.



Invoice Requirements

Service Provider Information

Invoices require the following provider information:

- Business name
- Valid and active ABN
- Contact information
- Bank details

Participant Information

Invoices should be addressed to the NDIS participant (not plan manager) and contain the following:

- Participant full name (one participant per claim)
- NDIS number
- Address (if possible)

Service Information

To be able to submit your claim, plan managers need to be able to understand the services you have delivered. Please include:

- Invoice number - this must be unique to each claim you submit
- NDIS Support item number (if known)
- A clear, short description of the service
- Support or service date/s
- Type of claim if applicable (eg: cancellation, travel, non face to face)

Claim Information

Accurate information is required including:

- Number of hours or quantity claimed
- Hourly rate or quantity rate
- Total invoice amount
- GST component (if applicable, most NDIS services are GST free)



NDIS Legislation

General Claiming Rules

The NDIA publishes the Pricing Arrangements and Limits document regularly. This document lists a number of claiming rules such as time of the week, provider travel, cancellations, reports, claiming for groups and more. Your claim must meet these requirements to be submitted.

Providers should familiarise themselves with these rules to avoid payment delays.



Approved NDIS Supports

There is a published approved and non-approved NDIS support list. For claims to be valid, the item or support must not be listed on the non-approved list. Participants and providers can find this information on the NDIS website.

Other Rules and Criteria

Invoices must meet the general criteria for claims including, disability related, reasonable and necessary, value for money and effective.



Funded Supports

Claims in-line with the participant's plan

Valid claims are in line with the budgets, categories and supports funded in the participant's current plan. Most participants have access to only some of the funding categories. Claims can only be submitted for support funded in the plan.

Stated Supports

Some funding in a participant's plan is less flexible than others. Participants may have access to budgets that can only be used in a specific way as indicated in the NDIS plan.

Impairment Notices

Impairment notices are gradually being provided to participants. This informs the participant which of the 6 impairment categories they have been given access to the NDIS through. Different impairment categories will have access to different supports, which in the near future will impact what can be claimed.



Budget Availability

Total Budget Amount

A participant plan will be provided with a total budget amount. This is the amount that can be spent in total during the life of the plan. Valid claims must be within the amounts funded in the plan.

Funding Periods

Funding periods were introduced in May 2025 and impact the frequency and amount of funding a participant can spend during the plan. Funding will be released in small blocks and claims can only be submitted where there is sufficient funding released.



Other Rules

Claims for NDIS supports also must meet other government agency rules. Examples of other rules to consider include:

- ATO guidelines
- Income Tax rules
- Australian Consumer Law

Provider Checklist



Use this checklist to help you confirm if your support is a valid claim

Invoice Requirements

- Provider name and valid/ active ABN
- Bank details
- Contact details

Participant Requirements

- The biller is the participant
- Full name (one participant per claim)
- NDIS number
- Address (if possible)

Service Information

- Invoice number - this must be unique to each claim you submit
- Support item number or description
- Service date/s
- Type of claim (if different from standard face to face)

Claim Information

- Number of hour/ quantity
- Hourly rate/ quantity rate
- Total invoice amount (check calculations)
- GST component (check if applicable)

Checklist Questions

- I have checked claiming rules for my type of support
- I have checked the support is an approved NDIS support
- I have checked the support meets the NDIS claim criteria
- I have discussed the support with the participant and it is in line with their funding
- I have checked with the participant and the support is included in the plan
- I have checked with the participant and the support meets their impairment category (if applicable)
- I have checked with the participant and the support is within their total budget amount
- I have checked with the participant and the support is within their available funding period