

Key points you should know about the NDIS Pricing Index

The NDIS Pricing Arrangements and Price Limits guide details what NDIS providers can and can't invoice for. While it's expected that Providers will charge for time spent directly with the participant, when they are providing non-direct services and charging for these, it can become more confusing. What are they allowed to invoice for? It is good for you to know a bit about this, to ensure you aren't incorrectly billed.

The NDIS Pricing document provides thorough detail about this, and you can find it online. However, this document summarises the key points of what can and can't be charged for under 'Non Direct Services'.

What may be claimed	What shouldn't be claimed
Time spent writing reports for co-workers, staff or other providers, or preparing documentation requested by participant/their family relating to needs and goals.	Time spent going through the service agreement document and pre-service planning.
Time spent writing updates to other providers about the client's progress with skill development.	Costs of training and upskilling staff, and of supervision are included in the base price limits and are not considered billable.
Reasonable amounts of time spent undertaking research linked to participant needs and goals.	Time spent on administration, such as invoicing, bookings, updating details and similar overheads.
Travel time to face to face visits, but capped to 30 minutes in MMM 1-3 regions and 60 minutes in MMM 4-5 regions (MMM = Modified Monash Model).	Travel time from a face to face visit when the Provider is going straight to another client.
Return travel time from face to face visits can only be charged (according to MMM regions) if the provider is travelling back to their usual place of work.	Mileage from a visit when the Provider is going straight to another client.
Reasonable and negotiated non labour travel costs such a mileage cost to contribute to vehicle running costs – capped at \$0.97/km in 2022.	If a cancellation to a group session is provided within 7 days, but the Provider is able to fill their position within the group.
Short term cancellation (or no-show) fees at full price if less than 7 days notice is given.	The same travel related costs twice through two participants supported simultaneously. Eg. If visiting a family with 2 NDIS participants and transporting them both to a community activity, costs should be divided equally between both
Time spent preparing NDIA requested reports. Such as a report outlining plan objectives and goals or a plan review report.	
Time spent transporting a participant, and mileage costs capped at \$0.97 as at 2022 for an unmodified vehicle, and \$2.76 for a modified / accessible vehicle (if mileage costs have been agreed to).	Costs in advance for services that haven't been completed.

Notes:

- The issue of short-term cancellations can often cause a lot of distress, especially as illness or emergencies can't be predicted 7 days in advance. When needing to provide a short-term cancellation, it is worth proposing a non-face to face task for Providers to undertake on your behalf during this time such as a request to develop a visual aid resource, or undertake research into suitable community activities relating to goals, or writing a summary progress update for you or other providers.
- When Providers cancel on you with short notice (within 7 days) you may also like to try and request a 'cancellation credit' with them whereby they don't charge you for your next cancellation. This can be provided at their discretion.
- To find your area's rating on the Modified Monash Model, search for the WA Health's "Country WA PHN map" or ask your LAC or Support Coordinator.