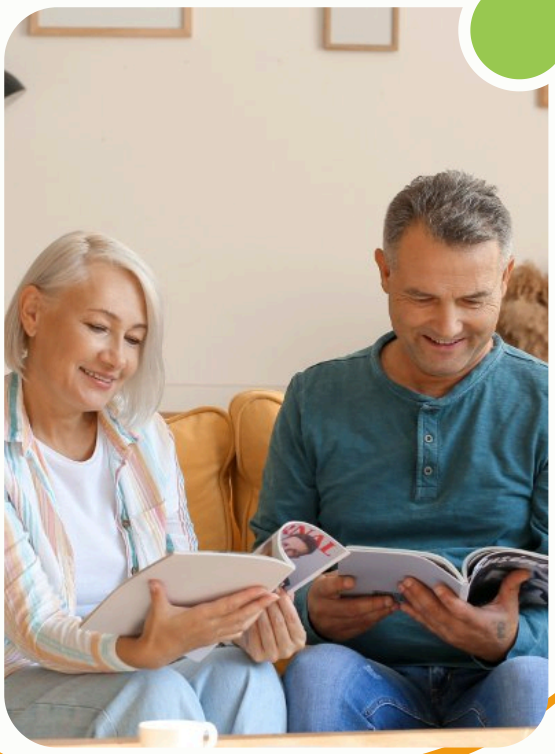
United Health Professionals

Your first NDIS plan: what to do in the first 30 days.

A guide for families

The plan has arrived and you're not sure where to start. This guide walks you through the first month, one step at a time, in plain English.



1. How to read the plan
2. How the plan is managed
3. Finding providers and service agreements
4. Records, and when the plan doesn't fit
5. Your 30-day checklist and glossary

You don't have to sort it all out today. Just the next step.

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Registered NDIS provider
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1 Read the plan before you call anyone.

Open the plan in the my NDIS app or the participant portal, the NDIA's website for participants. Read it slowly. You don't have to understand it all on day one.

The plan comes from the **NDIA** (National Disability Insurance Agency), the government agency that runs the NDIS. It describes your family member's situation and goals, the supports the NDIS will pay for, and who will manage the money.

Look for four things first: the **plan start date** and **reassessment date** (when a new plan is due), the name of their **my NDIS contact** (the person who helps them use the plan), the **total funding amount**, and **how each part is managed**. The money is split into up to four **support budgets**. Not every plan has all four.

Core supports

Help with everyday life. For example, personal care, household tasks, everyday items like continence products, and joining in community activities. Usually flexible.

Capacity building supports

Supports that build skills and independence, like therapy, support coordination or help to find a job. This funding is stated.

Capital supports

Higher-cost equipment, called assistive technology, and changes to a home or vehicle. Some items need quotes or reports first. This funding is stated.

Recurring supports

Transport funding to help get to work, study or activities. It can be paid regularly into a nominated bank account.

Next to each support, the plan says **'This is a flexible support'** or **'This is a stated support'**. Flexible funding can be used across the categories in the same budget. Stated funding can only be spent on the support the plan describes.

Money comes in funding periods.

New plans release funding in blocks of time, usually every 3 months. Money you don't use rolls into the next period of the same plan. Unused funding doesn't carry over to a new plan.

Plans are changing.

Plans made now use the current way of planning. From April 2027, the NDIS starts moving to a new way of planning, with a support needs assessment. The NDIA says it will tell participants before they move.

2 Check how the plan is managed.

The plan says who pays the providers and keeps the records for each part. If that doesn't suit you, you can ask to change it at any time. You can also mix the options.

Self-managed

You, or a nominee, pay providers and keep the records. This gives the most choice. You can use registered or unregistered providers.

Plan-managed

A plan manager pays providers and keeps records for you. Funding to pay them can be included in the plan. You can use registered or unregistered providers.

NDIA-managed

The NDIA pays providers and keeps records. You can only use registered providers. The NDIA says this can suit you if you're not sure yet.

A **registered provider** is registered with the **NDIS Commission**, the government body that registers providers and handles complaints about them. If funding is plan-managed or NDIA-managed, providers can't charge more than the maximum prices in the NDIS pricing schedules. If you self-manage, you can agree prices with providers, but the money still has to last the whole plan.

However the plan is managed, you still need to check that claims match the supports your family member got. You can check claims in the my NDIS app or the participant portal. From 1 October 2027, the NDIA will start a panel of plan managers. People who use a plan manager will need to choose one from it.

Say yes to the plan implementation meeting.

The NDIA offers this meeting within 7 days of approving a plan. It's optional, but it's there to help you get started. It usually takes about an hour, in person, by phone or online.

The my NDIS contact can explain the plan, show you the app and portal, and help you find providers. You can bring someone with you. Missed it? You can ask for one at any time on 1800 800 110.

Who can speak for them?

If your family member is 18 or over, the NDIA needs their consent before it talks to you about their plan. Ask about written consent, or about a **plan nominee** if they need someone to make decisions for them. For under 18s, a parent or guardian is usually the child representative.

3 Find providers, then agree in writing.

Take your time. Talk to a few providers and compare them before you choose.

1 Make a short list

Ask the my NDIS contact, a support coordinator if the plan funds one, and people you trust. The NDIS provider finder on ndis.gov.au lists registered providers near you.

2 Check the register

Search the NDIS Commission's provider register for registered providers, and any that have been banned. Some supports, like plan management, must always use a registered provider.

3 Meet and compare

Ask each provider the same questions. Ask if every worker has a current NDIS worker screening clearance, a government check for people who work with participants. Get every price in writing.

4 Tell the NDIA your choice

If funding is NDIA-managed or plan-managed, tell the NDIA which providers you use regularly. These are called **my providers**. You choose what each provider can see in the plan.

Comparing providers for personal care? **The Personal Care Checklist** in this series has questions to ask each one.

A **service agreement** sets out what your family member and a provider have agreed about their supports. It's only required for some supports, but the NDIA recommends one with every new provider. You can ask for changes, plain words or an interpreter, and time to get help before you sign.

Before you sign, check it covers:

- [ ] Each support, how often, and the cost
- [ ] How the provider will be paid
- [ ] An end date no later than the reassessment date
- [ ] What happens if the provider cancels
- [ ] Your rights and responsibilities
- [ ] Extra charges, like travel
- [ ] Start, end and review dates
- [ ] How much notice to cancel, and any fee
- [ ] How to change or end the agreement
- [ ] How to complain, and who to call

4 If the plan doesn't fit, ask for a change.

Talk to the my NDIS contact first. They can explain decisions and may help you use the plan more flexibly. With a first plan, you can also ask for more regular check-ins, a talk about how the plan is going.

Plan variation

For small or urgent changes, like goals or how funding is managed. The NDIA says it will decide within 21 days of getting what it needs.

Plan reassessment

For big, lasting changes in needs or circumstances. Only the person, nominee or child representative can ask, with evidence. The NDIA has 90 days to decide whether to reassess.

Review of a decision

Disagree with a decision? Ask for an internal review within 3 months. The NDIA aims for 60 days. Then you have 28 days to apply to the Administrative Review Tribunal.

About the budget reductions.

From 1 October 2026, new and reassessed plans have lower budgets for social, economic and community participation, and improved daily living skills. Some supports, like help with eating and drinking, aren't affected. This reduction can't be reviewed. If your family member gets 24-hour support, ask about a high support needs variation within 90 days of the plan's approval.

Keep a folder. It becomes your evidence.

- [ ] The plan and every NDIA letter
- [ ] Invoices, receipts and statements
- [ ] Notes from calls: date, name, what was said
- [ ] Signed service agreements
- [ ] Reports from doctors and therapists
- [ ] Quotes for equipment

If you self-manage, the NDIA says to keep receipts and invoices for 5 years. New laws will change record-keeping periods, so check the current rule with the NDIA. From 1 December 2026, claims must be made within 90 days of a support.

NDIA
1800 800 110
Questions about the plan, changes and reviews

NDIS Commission
1800 035 544
Concerns or complaints about a provider or worker

NDIS fraud and scams helpline
1800 650 717
Report a scam or suspected fraud

5 Your first 30 days, week by week.

Tick each step as you go. If you fall behind, just pick up where you left off.

Week 1: read and get set up

- [ ] Read the plan and note the key dates
- [ ] Book the plan implementation meeting
- [ ] Set up the my NDIS app or portal
- [ ] Sort out consent, or ask about a nominee

Week 2: decide and search

- [ ] Check the way it's managed suits you
- [ ] Make a short list of providers
- [ ] Choose a plan manager, if you need one
- [ ] Start a folder for papers and notes

Week 3: meet and compare

- [ ] Write down the help needed, and when
- [ ] Check each one on the Commission's register
- [ ] Meet two or three providers
- [ ] Get every price in writing

Week 4: agree and start

- [ ] Read each service agreement before signing
- [ ] Check the first claims in the app or portal
- [ ] Tell the NDIA who your my providers are
- [ ] Ask for a check-in if it isn't working

NDIA
The National Disability Insurance Agency. It runs the NDIS and approves plans.

NDIS Commission
The NDIS Quality and Safeguards Commission. It registers providers and takes complaints.

my NDIS contact
The person named in the plan who helps you use it.

Support coordinator
Someone some plans fund to help you find and work with providers.

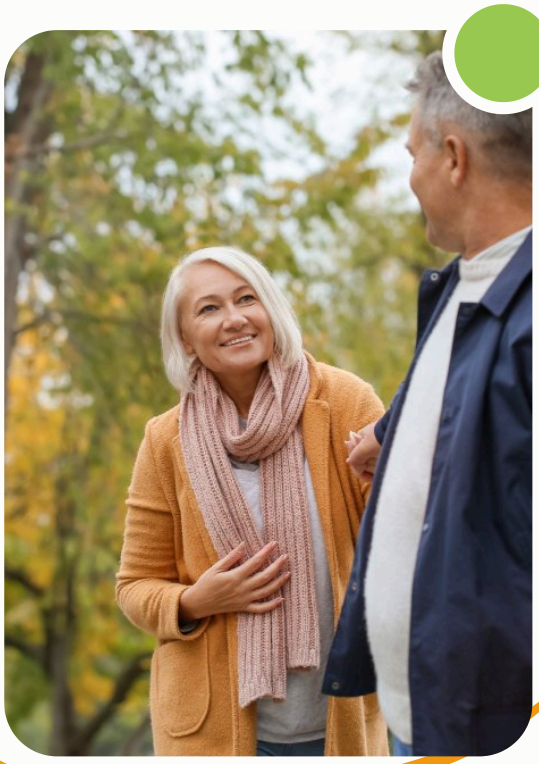
Plan manager
A registered provider who pays providers and keeps records for you.

Nominee
Someone who can make plan decisions for a participant aged 18 or over.

United Health Professionals

Personal care at home, including complex care.

We support adults at home in Melton, Caroline Springs, St Albans, Sunshine and Deer Park. Ask us every question in this guide. We'd rather you compare.



Personal care

Showering, dressing, grooming and toileting, at home and on your schedule.

Complex care

Talk to us about PEG feeding, catheter care, bowel care or seizure support.

Household tasks

Cleaning, laundry and meals, alongside personal care.

Registered NDIS provider

Check us on the NDIS Commission's provider register.

ABN 69 649 956 776

United Health Professionals Pty Ltd.

Your plan, your say

Support can be paid from your NDIS funding if it's included in your plan.

How to start

1

Call us

Tell us who the support is for, what's needed and where.

2

Talk it through

We go through the plan, the routine and what matters to the person.

3

Meet us

At home or wherever suits, with family there if you'd like.

4

Sign when ready

A service agreement with every support and price, before anything starts.

Questions about your first plan?

Call us if you'd like to talk through any part of this guide, or the supports you're looking for.

Call 0416 851 984

info.unitedhealthprofessionals@gmail.com

This guide is general information, not advice about a particular plan. Always follow the person's own support plan and their health practitioner's instructions.