Carers Australia Submission to the Senate Community Affairs Legislation Committee on

National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026

June 2026

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About Carers Australia and carers

Carers Australia is the national peak body[1] representing over 3 million carers (around 12% of the population). Carers are people who provide care and support to family members and friends who live with disability, mental illness, a chronic condition, terminal illness, an alcohol or substance issue or who are frail aged.

Our vision is an Australia that values and supports all carers, where all carers have the same rights, choices, and opportunities as other Australians to enjoy optimum health, social and economic wellbeing and to participate in family, social and community life, employment, and education.

Family and friend carers make an invaluable contribution

Family and friend carers make an invaluable contribution to the care and lives of the people they care for, and to the community more generally. The contribution of Australia's carers was estimated to be $78 billion in annual replacement care costs in 2020.[2] Today that equates to around $97 billion.[3]

Family and friends are the main source of care for people with a disability and for older Australians. In 2022:

- 48% of people under the age of 65 with disability received assistance from family and friends and 34% from a formal care provider
- 72% of older Australians (people over the age of 65) received assistance from family and friends and 58% from a formal care provider.
- Around 39% of carers also have a disability themselves.[4]

Carers support those they care for to remain independent in the community, provide personal and emotional care, coordinate services, and maintain continuity across fragmented systems. They are essential to the delivery and sustainability of our care systems, including the National Disability Insurance Scheme (NDIS).

About our submission

Carers Australia welcomes the opportunity to provide a submission on the *NDIS Amendment (Securing the NDIS for Future Generations) Bill 2026* (the Bill). Our submission provides general comments on the proposed changes before discussing more detailed changes under each of the Bill's four Schedules. Areas of particular concern to Carers Australia include:

- the shifting of costs and responsibilities from the NDIS to carers and the lack of consideration of the impacts on carers

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[1] Our member organisations are the carer organisations in each state and territory.
[2] Deloitte Access Economics (2020) *The value of informal care in 2020*.
[3] Australian Bureau of Statistics (2026) *Consumer Price Index, Australia: Latest release*.
[4] Australian Bureau of Statistics (2023) *Disability, ageing and carers, Australia: Summary of findings, 2022*.

- the limited focus on supply side levers for containing Scheme growth and getting better value for taxpayer's money — such levers are less likely to impact carers and the people they support
- the availability and sequencing of supports outside the NDIS to accompany the proposed changes.

Carers Australia is also concerned that the two-week window to comment on the proposed changes in the Bill is not compatible with meaningful participation by people with disability and carers, particularly for people facing disability-related access barriers, literacy and language barriers.

The proposed set of reforms to the NDIS are among the most significant since the Scheme was introduced in 2013, with major changes to eligibility, funding, and planning. These changes will affect access to supports and the design of the Scheme. It is therefore essential that people with disability, as well as their families and carers, and Parliamentarians, have time to consider these substantial changes. Implementing large-scale policy reforms in a hurry with insufficient consultation risks implementing poor policy (and in this case puts at risk the integrity and sustainability of the NDIS) and higher costs to taxpayers in the longer run.

The proposed timeframes are too short for the significance and magnitude of the proposed reforms. More time is needed for consultation with carers and the people they support on the changes and how they will be delivered.

> *"What families are asking for most right now is reassurance that reform and legislation won't be rushed, and that any changes will be guided by lived experience and genuine understanding of what caring actually looks like day to day. Every policy decision made in Canberra will eventually land somewhere very real, at a kitchen table like ours."*
> Clare, Carer, Parliamentary Friends of Carers, Canberra 26 May 2026.

Box 1. Carers Australia recommendations on the NDIS Amendment Bill 2026

Carers Australia recommends that:

1. The reforms to improve the integrity and sustainability of the NDIS should not shift costs and responsibilities onto carers.
2. The Impact Analysis for the NDIS Reforms include, as a criterion, the impact on family and friend carers.
3. Additional levers to slow the Scheme's cost growth be considered (including levers on the supply side to make the NDIS market work better).
4. The Bill explicitly recognises carers of people with disability. This requires establishing processes for seeking and recording carer input throughout assessments and planning.
5. The Bill includes bridging and continuity arrangements where participants are moved between systems and/or confirmation that replacement systems are operational before eligibility and access changes are made.
6. The Bill is amended to ensure that permanence is not based on a person, or their family, undertaking all available treatments, medications or interventions, and that eligibility is not denied because a treatment is inappropriate, refused on valid grounds, inaccessible, unaffordable, or inconsistent with the person's rights, preferences and lived experiences.
7. A pathway is retained for participants to seek an early plan reassessment when circumstances change.
8. The Bill's proposed parental responsibility provision be removed or amended to ensure children with disability are not denied access to supports because disability-related needs are inappropriately considered as ordinary parenting responsibilities.
9. Carers are actively included in the co-design and evaluation of new framework planning arrangements, ensuring the system reflects real caregiving experiences and improves outcomes.
10. Governance reforms should ensure transparency and maintain human oversight in decisions affecting eligibility, funding and supports.
11. The Bill is not passed at this stage given the lack of consultation and the significant consequences of the proposed changes.

Support for reforms that improve integrity and sustainability

Carers Australia acknowledges that there are some areas where the NDIS is not operating as originally intended and we support reforms that improve the integrity and sustainability of the Scheme. The NDIS has improved the lives of hundreds of thousands of people with disability, their families and carers, and it is critical that it continues to be in place for future generations of Australians. It is also important that the Australian community supports the trajectory of the Scheme and considers fraud is minimised and integrity is at the centre of system-design to represent value for taxpayers' money.

However, Carers Australia is concerned that the proposed changes for slowing the cost growth of the NDIS, which are focused on changing eligibility and plan size, will have a profound impact on the lives of family and friend carers. And many carers are already struggling with low or fixed incomes and low wellbeing.

The proposed changes are also likely to struggle to meaningfully reduce the Scheme's cost trajectory. This is in part because the Scheme is designed to support people with significant and lifetime (permanent) disability and this population is a persistent population. What happens within the Scheme (including whether the Scheme has the right providers, there is competition between providers, and whether providers are charging the right prices) is arguably more important for shaping long-run costs.[5] What supports are available outside the NDIS also matters (because it affects people's incentives around accessing NDIS supports).

The levers that could be used to slow cost growth, including those on the supply side to make the NDIS market work better (and get better value for taxpayers' money), have been largely left unchanged. Such changes have the potential to get better outcomes from the same dollars and have fewer negative impacts on family and friend carers and the people they support. This point was recently made by e61 'Rather than asking only who gets in and how much they get, policymakers should also be asking what changes to the market's rules would allow the same resources to deliver better outcomes?'[6] The Grattan Institute also commented that, 'making the NDIS affordable does not have to mean hurting the people who rely on it'.[7]

In this context, many Australians are concerned about providers overcharging (carers speak about participants being charged twice what people are being charged outside the NDIS market), pricing inflation and weak market regulation. Recent e61 research[8] found that some NDIS providers set prices at or very near price caps and pointed to the need to create market discipline (currently absent from the Scheme) to encourage value for taxpayers' money.

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[5] e61 Institute (2026), *More quasi than market: Why the NDIS's cost problem runs deeper than eligibility*.

[6] e61 Institute (2026), *More quasi than market: Why the NDIS's cost problem runs deeper than eligibility*

[7] Grattan Institute (2026), *A better way to fix the NDIS*, p. 1.

[8] e61 Institute (2026), *Understanding the role of price caps in NDIS markets*.

> *'I try to use mainstream services and products rather than go to disability specific market due to the ridiculous prices charged by providers. As has been stated time and again, an able-bodied person can go to an allied health professional and be charged $90, but I go for the same service and because I am NDIS funded, I get charged more than $200 ... Not only is it discriminatory but also costs the government more dollars, and the person with disability gets less support.'* NDIS Participant, NDIS Review, p. 29.

The National Disability Insurance Agency's (NDIA's) legal costs are another area of cost growth and a lever that should be considered in the context of slowing Scheme costs. NDIA's legal spending on Administrative Appeals Tribunal (AAT) matters rose from around $9 million in 2018- 19 to almost $50 million in 2023-24. The NDIS Review commented that 'Too many participants and families are left to seek clarity through Administrative Appeals'.[9] AAT and Administrative Review Tribunal (ART) caseload data shows that the decisions under review changed in 70% of NDIS matters in the period 1 July- 13 October 2024 and 73% in the in the ART between 14 October 2024 and 30 June 2025.

Improving the integrity and sustainability of the NDIS involves choices and trade-offs, including about scope, design and which levers to use. When making these choices, it is important that governments consider (and address) the impacts on all parties, including carers.

Impacts on carers matter for Scheme outcomes and sustainability

It is well known that despite the invaluable contribution that family and friend carers make to the care and lives of the people they care for, and to the community more generally, they are often overlooked when policy changes are being considered by governments. The World Bank Group highlighted this and noted that, 'There is relatively scarce recognition of the tradeoffs and risks faced by providers of informal care. ... — the well-being of caregivers — has been largely overlooked in the economics literature and in policy discussions on the relative effectiveness of various ... models'.[10] Similarly, when the Standing Committee on Social Policy and Legal Affairs released its Report into the recognition of unpaid carers in March 2024, it was unified in its view that 'carers must be considered as a priority, rather than as adjunct to the needs of the people they care for'.[11]

The *NDIS Amendment (Securing the NDIS for Future Generations) Bill 2026* is a case in point. While the Bill adds to the Principles relating to participation and plans (17A) 'where relevant respect the role of family, carers and other persons who are significant in the life of

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[9] NDIS Review (2023), *Working together to deliver the NDIS: Final report*, Australian Government, p. 139

[10] The World Bank Group, *Why should we care about care? The role of informal childcare and eldercare in aging societies*, p.9.

[11] House of Representatives Standing Committee on Social Policy and Legal Affairs (2024) *Recognising, valuing and supporting unpaid carers*, p.iv.

participants'[12], carers remain implicitly acknowledged rather than formally recognised as partners within the Scheme.

The Impact Analysis[13] for the NDIS Reforms also does not include, as one of the criteria, the impact on family and friend carers (the criteria includes: impact on moderating annual Scheme cost growth; alignment with the original intent of the Scheme to support participants who have significant and permanent disability with reasonable and necessary supports; impacts on NDIS participants, impacts on NDIS providers and the NDIS market).

It is important that governments take a whole-of-care system perspective when considering policy changes. This includes considering the full costs and benefits of care (and who benefits and who bears the costs) and how the different components interrelate. The National Carer Strategy speaks to improving awareness of carers, including 'identifying key legislation and policy areas for review and addressing unintended consequences that may impact carers or further constrain their choices'.[14] Not looking at the big picture (including the impact of policy changes on carers' health and wellbeing and their choices about working and caring) risks governments implementing poor policies.

On this point, we note that the Government simply states that 'Changes [to social and community participation budgets] are likely to increase informal caring responsibilities, which may impact levels of social and economic participation for female carers'.[15]

> *'I am deeply concerned that the proposed NDIS changes will have far-reaching negative impacts across the nation. They can create barriers to employment, health and wellbeing, long-term consequences for financial security and independence. These changes will shift pressure onto other systems. We are likely to see increased hospital admissions and mental health impacts, placing further strain on already stretched healthcare services.'*
> Jacqui, Tasmanian carer.

Carers are deeply embedded in the operation of the NDIS, performing essential functions including coordinating supports, safeguarding participants from fraud and poor provider practices, and filling gaps where funded services are unavailable or insufficient.[16,17] Informal carers routinely undertake tasks equivalent to paid services, including personal care,

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[12] Parliament of Australia (2026), *National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026: Explanatory memorandum*, House of Representatives, p.48.
[13] Department of Health, Disability and Ageing (2026), *Impact analysis: National Disability Insurance Scheme reforms*, Australian Government, Office of Impact Analysis, May, p.46.
[14] Australian Government Department of Health and Aged Care (2025) *National Carer Strategy 2024–2034*.
[15] Parliament of Australia (2026), *National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026: Explanatory memorandum*, House of Representatives, p.231.
[16] Taylor Fry and the Centre for International Economics (CIE) (2023), *NDIS Review – Costs, benefits and frameworks: Cost benefit analysis*, National Disability Insurance Scheme Review.
[17] Carers Australia (2026), *Carers Australia Submission to the Joint Standing Committee on the Integrity of the NDIS Inquiry*

supervision, transport, coordination of services, and system navigation.[18] They are not peripheral to the system, they are key to achieving participant outcomes. Without considering carers, reforms risk shifting costs and responsibilities onto carers. It is critical that carers are embedded within the legislative and operational framework of the NDIS (box 2).

The proposed changes to the NDIS need to consider the impact on carers and any potential unintended consequences that may affect carers or further constrain their care choices. The Scheme relies heavily on informal care, and reforms that do not consider impacts on carers risk undermining participant and carer outcomes and the sustainability of the Scheme.

Box 2. Aligning the Amendment Bill with the NDIS Act: Recognising the role of carers

One of the general principles guiding actions under the NDIS Act 2013 is *'The role of families, carers and other significant persons in the lives of people with disability is to be acknowledged and respected'* (Section 4(12) and 4(12A)).[1] Another is that *'people with disability and their families and carers should have certainty that people with disability will receive the care and support they need over their lifetime'* (Section 4(3)).

The Act also requires that, in giving effect to the objectives of the Act, regard is given to the Carer Recognition Act 2010 (Sections 3(3)).

To align with the NDIS Act, the Amendment Bill needs to explicitly recognise carers of people with disability. This requires establishing processes for seeking and recording carer input throughout assessment and planning. Systematically incorporating carers' insights will ensure the Scheme reflects participants' full support context which in turn will improve outcomes and the sustainability of the Scheme.

The shifting of responsibilities and costs to family and friend carers

Of particular concern for Carers Australia is that the proposed eligibility, reassessment and support changes to the NDIS, because they mean fewer participants and supports, will shift costs and responsibilities from taxpayers to family and friend carers. And carers already have poorer health and wellbeing than other Australians.[19] Caring also falls disproportionately on women.[20]

Without measures in place to address the impact of the proposed changes on carers, they are likely to experience poorer health and wellbeing, including financial wellbeing. Carers tell us that they are already at or beyond sustainable limits. Further reductions in available supports and greater reliance on informal care risks accelerating burnout and carers withdrawal from caring roles. Where informal caring relationships break down because formal supports are

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[18] Australian Institute of Health and Welfare (AIHW) (2025), *Informal carers*.
[19] Carers Australia (2025), *Carer Wellbeing Survey Report 2025*.
[20] Australian Bureau of Statistics (2023), *Disability, ageing and carers, Australia: Summary of findings, 2022*.

inadequate, there will be increased pressure on the NDIS, and supports outside the NDIS, to meet the needs of people living with disability.

The proposed changes assume supports outside the NDIS will be available for people not eligible for the Scheme or eligible for less support. But we know that disability supports outside the NDIS are inadequate – less than 4% of all government expenditure on disability is currently spent on supports outside the NDIS.[21] And while there is funding for Foundational Supports, for supports outside the NDIS, it is capped at $10 billion ($4 billion for Thriving Kids) for the first five years of the National Agreement on Foundational Supports.[22] There is also very little detail available on Foundational Supports and Thriving Kids from the Federal and State and Territory Governments.

Making supports outside the NDIS accessible and inclusive will be critical. We note that it will take time for the Foundational Supports to be put in place and for people with disability and their carers to access the services. The sequencing of supports with the changes to the NDIS will matter. There will need to be systems in place to ensure continuity of supports and clear pathways between the NDIS and other support systems.

Without continuity safeguards and navigation supports, carers and the people they support will fall through the gaps. The Bill should require bridging and continuity arrangements where participants are moved between systems and/or confirmation that replacement systems are operational before eligibility and access changes are made.

Proposed changes could undermine the original intent of the NDIS

Some of the proposed changes in the Bill could also risk undermining the original intent of the NDIS. For example, making changes to slow the growth of the Scheme and target fraud, could mean less availability of services and result in participants having less choice and individualised supports with poorer outcomes for participants and family and friend carers.

Carers Australia is also concerned that the focus of the changes is on containing scheme costs (reducing the growth of the Scheme) rather than considering scheme costs in light of the benefits and impacts of the scheme on people with disability, carers, and Australians more generally. Scheme outcomes are important. As the Productivity Commission said:

> *The NDIS was introduced because it has potential to improve the lives of people with disability and the community more generally (by providing insurance for all Australians and lowering future costs of providing disability support). It is therefore essential that the costs to the community are considered in the context of scheme outcomes.*[23]

Taking an individualised and lifetime view of a participants needs, including investing in interventions that maximise their independence and social and economic participation, can

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[21] Productivity Commission (2026), *Report on Government Services 2026: Part F — Services for people with disability*, Australian Government,Table 15A.4.

[22] Parliamentary Library (2026) *National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026*. Bills Digest No. 65, 2025–26. Canberra: Parliament of Australia, p. 8.

[23] Productivity Commission (2017), *National Disability Insurance Scheme (NDIS) costs: Study report*, Australian Government, p. 6

reduce long-term support requirements (both formal and informal), and as such, is critical for the financial sustainability of the scheme and the wellbeing of family and friend carers.

Schedule 1 – Access and Planning Measures

Access and eligibility changes: Risks of exclusion and shifting of responsibility to carers

The Bill's proposed changes under Schedule 1 to strengthen the interpretation of permanent, or likely permanent impairment and to tighten eligibility based on access to other service systems, while intended to better target supports, risk exclusion or delays for individuals with complex or fluctuating conditions.

Carers Australia is supportive of making legislative changes to clarify the interpretation of permanence, however, it has concerns about requiring all 'appropriate treatment' being undertaken before an impairment is considered stable and permanent, regardless of a person's circumstances. Where required treatments are inappropriate, inaccessible, or misaligned with a person's needs, this is likely to restrict access to the Scheme and increase reliance on carers to address resulting gaps in support. The Bill also states that a treatment may be considered appropriate even when unaffordable or not geographically accessible. This could further exacerbate financial disadvantage of participants and carers. These concerns highlight the need to amend the Bill to ensure that requirements around 'appropriate treatment' are/ practical, equitable, and do not restrict access to necessary supports.

Carers are concerned that the tightened eligibility criteria may not capture the full complexity of disability, particularly for episodic or non-linear conditions. There is a risk that functional impact may be underestimated where decision-making relies heavily on administrative interpretation of evidence or focuses narrowly on diagnosis. This may shift the Scheme away from a social model of disability by failing to account for broader impacts on wellbeing and participation.

These risks are compounded by evidence that mainstream service systems are not always adequately resourced. As noted earlier, the NDIS is the main source of support, and where access is restricted or delayed, unmet need is typically transferred to carers.[24] This is particularly concerning for some cohorts, such as people with autism and those with needs that may not be consistently recognised within structured eligibility frameworks. In these cases, carers report a heightened risk that reduced access or delays will mean they are required to take on more caring responsibilities.

There are also concerns that functional capacity assessments may not adequately account for environmental and personal circumstances, including the role and availability of carers. Assessing individuals in isolation from their lived context risks underestimating support needs and overlooking the extent to which informal care sustains daily functioning.

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[24] National Disability Insurance Agency (NDIA) (2024), *National Disability Insurance Agency Annual Report 2023–24: 4.2 NDIS reforms*, Australian Government.

The NDIS Review highlighted that the Scheme has filled gaps left by underdeveloped mainstream systems. Tightening eligibility without strengthening these systems risks shifting responsibility back onto families and carers rather than improving overall system efficiency.

To mitigate these risks, reforms should ensure clear and accessible pathways to alternative supports, maintain flexibility to respond to complex circumstances, and monitor the impacts of eligibility changes on carers.

Safeguards should be embedded to prevent greater reliance and unintended impacts on carers

Reforms of the scale proposed should be accompanied with clear, enforceable safeguards to prevent unintended consequences. Key risks include gaps in support during transitions, increased administrative burden, and cost-shifting to family and friend households. Without explicit protections, there are risks of transition service gaps being required to be filled by carers and increased administrative loads for carers.

Priority safeguards identified by carers include:

- continuity of supports during reassessment, transition, and planning
- supported engagement requirements to prevent adverse decisions due to non-response or inaccessible processes
- accessible communication and non-digital pathways
- transparent monitoring of the impacts on carers, including indicators of cost-shifting.

Planning processes should also ensure that assumptions about informal care are realistic and sustainable, explicitly taking into account carers' capacity and avoiding reliance on informal care as a substitute for funded supports.

> *"The reality is that unpaid carers are already contributing an enormous economic and social value to this country every single year through care that often comes at significant personal, emotional and financial cost. They are already surviving on exhaustion. With siblings quietly adapting around systems that were never designed with them in mind. And with people with disability whose quality of life depends on whether support remains accessible, timely and sustainable."* Clare, Carer, Parliamentary Friends of Carers, Canberra 26 May 2026.

Parental responsibility and caring role

The Bill reinforces a presumption that parents are expected to provide 'substantial care and support' to their children, including supervision, personal care, transport and behavioural support.[25] While Carers Australia recognises the important and valued role of parents, this presumption risks blurring the boundary between ordinary parenting and disability-specific

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[25] Parliament of Australia (2026), *National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026: Explanatory memorandum*, House of Representatives.

supports if applied without clear limits. It is essential that the legislation and the way it is implemented distinguish ordinary parenting from supports that are required because of a child's disability, particularly where needs involve ongoing supervision, intensive behavioural management, communication support, sleep disruption or complex health and personal care.

Carers Australia is concerned that these provisions may result in an inappropriate transfer of responsibility from the NDIS to families, embedding an assumption of unlimited parental capacity and normalising long-term reliance on unpaid care. This risks inequitable outcomes, unmet need and carer burnout. The legislation and associated guidance should clearly define the scope of parental responsibility[26], prohibit the substitution of disability supports with informal care where this is unsafe or unsustainable, and require assessment of carer capacity, sustainability and consent in all planning decisions.

Reforms to planning, funding, and supports

The reforms to planning and funding arrangements, including annual plan renewals, constraints on funding growth, and changes to the definition of 'reasonable and necessary' supports, while aimed at improving consistency and equity across the Scheme and managing expenditure,[27] could result in more complex review processes and more effort by participants and carers to secure appropriate supports.

Carers Australia has concerns about the Bill's proposal to limit a participant's ability to obtain an early plan review (part two – limited unscheduled plan reassessments). The proposed amendments state that a participant will only be able to request a plan reassessment where there has been a significant, ongoing change in their disability-related support needs, driven by either a substantial change in functional capacity or major changes in living, work, or support circumstances.

Disability-related needs can change rapidly because of deterioration in health, changes in functional capacity, changes in informal care, loss of housing, family violence, hospital discharge, or provider withdrawal. Without a realistic pathway to support an early review, participants could be left with inadequate supports for extended periods and carers will often absorb the shortfalls so essential care needs don't go unmet. Denying or delaying early review therefore creates avoidable harm and is not responsive or person-centred. Having in place a fair and responsive pathway for early review is essential.

Reduced flexibility and tighter funding parameters may result in supports being funded below actual need. Carers have raised concerns that some supports, particularly those related to social and community participation, may be deprioritised, despite their importance for long-

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[26] The Carer Recognition Act makes it clear that a person is not in a 'care relationship' just because they are a parent of a child with disability. 'Care' is defined as the provision of ongoing support, assistance or personal care for a person with disability. The NDIS Act does not have a similar qualification in its definition of a carer although there are separate provisions that define 'parental responsibility'.

[27] Parliament of Australia (2026), *National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026: Explanatory memorandum*, House of Representatives.

term wellbeing and independence.[28,29] When these supports are reduced or excluded, carers often fill the gap. Without appropriate safeguards, this may undermine both participant outcomes and the sustainability of informal care.

Planning and funding decisions must explicitly consider the impact on carers, the cumulative effects of funding reductions, and the risk that insufficient supports may compromise both participant outcomes and informal care sustainability.

NDIS data demonstrates the diversity and complexity of participant needs, with substantial variation across disability types, functional capacity and support utilisation.[30] Standardised funding approaches must be carefully applied to avoid underestimating individual needs which again can result in unmet demand and cost-shifting onto carers.

There is also a risk that increased compliance requirements may lead to adverse decisions due to administrative barriers, particularly for people with disability and carers facing challenges related to literacy, language, digital access, or crisis situations. Safeguards should include supported engagement measures, such as accessible communication, flexible timeframes, and proactive outreach, before decisions are made that reduce or remove supports.

> *"For families like ours, there is no pause button. When therapies are reduced, children lose opportunities to build and maintain the skills that give them independence, mobility and connection to the world around them. When support worker funding is cut, families are left scrambling at the last minute, rearranging work, appointments and daily life just to keep everything functioning."*
> Clare, Carer, Parliamentary Friends of Carers, Canberra 26 May 2026.

Schedule 2 – Fraud measures

Integrity and safeguarding: Risk of additional compliance burden on carers

Fraud is an important issue that needs to be addressed, and Carers Australia supports strengthened integrity measures. Strengthening the NDIA's powers to detect, prevent and respond to fraud and improved provider regulation are important changes for ensuring NDIS funds are used to legitimately support and protect NDIS participants, ensure value for public funds, and maintain trust in the Scheme.

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[28] Butler, M. (2026), *Minister Butler speech at the National Press Club – 22 April 2026*. Australian Government, Department of Health and Aged Care.

[29] National Disability Insurance Agency (NDIA) (n.d.) *Social inclusion and community access research*.

[30] National Disability Insurance Agency (NDIA) (2026), *Explore data*, NDIS Data and Insights.

Carers, because of their close involvement in participants' care, are often the ones who identify overcharging, fraud and poor provider practices.[31] There is some risk that additional regulation could unintentionally shift compliance responsibilities onto carers, adding to their already significant administrative burden. Expanded compliance measures and new civil penalties may expose carers to compliance risks where they are involved in managing supports. Without clear role boundaries, carers may be drawn into regulatory processes despite acting in an informal capacity.

These measures must be carefully targeted, with safeguards to ensure regulatory responsibilities remain with providers and formal service actors. Integrity measures must ensure that carers are recognised as partners in safeguarding rather than being informal compliance agents. This requires reducing administrative burden on families, embedding carer-inclusive design in integrity frameworks, and ensuring transparent communication and feedback when carers raise concerns.[32]

While carers support stronger safeguards, there is an ongoing concern that vulnerable participants and carers may still lack access to adequate independent support, such as ongoing support coordination. Without this, many carers are required to navigate complex contractual, legal, and administrative arrangements without sufficient assistance, increasing risk rather than reducing it. Concerns have also been raised that changes to regulatory settings could reduce choice and flexibility if not carefully calibrated to risk.

Registration of NDIS providers: Market failure and thin markets

Provider availability challenges remain most acute in thin markets, particularly in regional, rural, and remote areas. While strengthening provider registration and clarifying the definition of NDIS providers may improve regulatory oversight, these changes will not address underlying supply constraints, including workforce shortages, high service delivery costs, and low market density.

Where provider availability is limited or services withdrawn, carers and participants continue to bear the consequences. Even where supports are funded, they may remain practically inaccessible, requiring carers to fill gaps through increased direct care, coordination of services, and personal cost. In these circumstances, carers often become the primary source of care continuity.

The 2024 NDIS Review highlighted that provider withdrawal and lack of viable supply persist in thin markets - funding does not equal access in regional and remote areas, and carers and participants absorb risk when markets fail.[33] The Review confirmed that these pressures are not incidental as the market-based mechanisms alone have been insufficient to overcome workforce shortages, high travel costs and low service density. This reflects a structural

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[31] Carers Australia (2026), *Carers Australia Submission to the Joint Standing Committee on the Integrity of the NDIS Inquiry*

[32] Ibid.

[33] NDIS Review (2024), *Improving access to supports in remote and First Nations communities. Canberra: Australian Government*.

limitation of market-based approaches, where regulatory improvements alone cannot resolve service shortages.

Reforms to provider registration should be accompanied by targeted strategies to address market failure, including strengthening oversight while ensuring sufficient provider availability. Without this balance, there is a continued risk that gaps in service provision will result in increased reliance on carers,[34] reinforcing existing inequities and undermining both participant outcomes and system sustainability.

> *"In Tasmania, the situation is even more challenging. Foundational and state-based supports are limited, uneven, and in some cases no longer exist, leaving families with few alternatives when supports are reduced."* Jacqui, Tasmanian carer.

Schedule 3 – Governance arrangements

System governance and the role of carers

The Bill introduces governance changes designed to improve consistency and accountability, including Ministerial oversight of pricing decisions and the use of automated administrative processes.[35] While these changes aim to enhance efficiency, it is Carers Australia's view that they also present risks. Complaints data analysed by the NDIS Quality and Safeguards Commission[36,37] pointed to pricing concerns, overcharging, and billing disputes as common issues, reinforcing carers' experiences and the importance of their vigilance.

The expansion of computer-assisted decision-making also presents risks, particularly in cases involving complex family care arrangements. There is a risk that automated processes will not adequately capture the nuances of caring relationships, cumulative needs, or lived experience, increasing the potential for inappropriate or overly standardised decisions.

Automated decision-making processes may not adequately reflect the complexity of individual circumstances. Governance reforms must ensure transparency and maintain the Agency person (a human) oversight in complex cases, decisions affecting eligibility, funding and support level; ensuring contextual factors are properly considered. There should be clear and accessible pathways for communication. Systems must remain responsive to real-world needs and recognise that carers play a central role navigating governance structures on behalf of participants.

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[34] NDIA (2023), *Thin Market Trials: Final Evaluation Report*. Canberra: National Disability Insurance Agency.
[35] Parliament of Australia (2026), *National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026: Explanatory memorandum*, House of Representatives.
[36] NDIS Quality and Safeguarding Commission (2024), *Market Spotlight: Theme analysis of complaints data*.
[37] NDIS Quality and Safeguards Commission (2024), *Cracking down on overcharging of NDIS participants*.

Without appropriate safeguards, automated or standardised decision-making processes could increase the risk of inappropriate decisions in complex cases and reduce transparency. This reinforces the need for human oversight, accessible review pathways, and clear communication of decisions and rights.

> *"I am concerned the automation tools will increase risk and error as Robodebt. Besides that, the requirements such as retaining invoices for extended periods, even when already submitted through MyGov, add unnecessary stress and are inconsistent with other government systems."*
> Jacqui, Tasmania carer.

Schedule 4 – New framework planning

Carers need to be included in new framework planning

Carers Australia supports the intent of new framework planning of ensuring the NDIS is fairer, more transparent, sustainable and person-centred and that the new rules improve the experience of participants and help them get the most out of their NDIS plans and to live the lives they choose. However, it is fundamental that carers are included in co-design and evaluation processes, and they are provided with clear guidance and support to navigate new arrangements effectively. Carers Australia recommends that governments explicitly include carers in the new framework planning rules by:

- seeking and recording carer input throughout the assessment and planning process
- seeking verification of assessment reports with participants and carers to ensure accuracy before building a plan and to reduce reliance on replacement assessments
- subsequently updating the NDIS Guidelines to explicitly include carers, aligning them with the new planning rules and the NDIS Act.[38]

Schedule 5 – Transitional rules

Transition to new arrangements: Disruption and increased demands on carers

The Bill includes transitional provisions to implement reforms over time, including moving participants to new planning frameworks. While necessary, large-scale transitions can create significant disruption and uncertainty.

Carers often absorb the impact of these changes, managing adjustments to supports, coordinating services, and navigating new systems. Accelerated timelines can increase administrative burden and stress, particularly where communication is unclear or supports are interrupted.

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[38] Carers Australia (2026), *Carers Australia Submission to the Department of Health, Disability and Ageing on NDIS Rules: New Framework Planning*

Ensuring continuity of supports during transition, reassessment, or plan renewal processes is critical to avoiding disruption and maintaining stability for participants and carers. Without explicit safeguards, gaps in support may emerge, with carers required to absorb the impact.

A sustainable NDIS requires not only financial sustainability, but system design that protects and supports family and friend carers. This includes embedding enforceable safeguards, reducing administrative burden, and monitoring impacts on carers to avoid short-term savings creating longer-term system pressures.

Implementation timeframes and transition readiness

Carers are raising concerns about the proposed implementation timeframes and the system's readiness for transition. The scale of reform is not matched by sufficient time for consultation, co-design, or workforce and service system preparation.

Alternative supports outside the NDIS remain underdeveloped and inconsistently available which means participants and carers are likely to face gaps in service during transition. At the same time, limited transition periods reduce the ability of carers and participants to understand and adapt to new processes.

Rapid or poorly coordinated implementation creates service gaps and confusion, with carers absorbing the stress and administrative burden. Without extended timelines and verified system readiness, reforms risk exceeding the capacity of both formal services and informal carers to respond safely and effectively.

Recent engagement with carers indicates declining trust and confidence in the NDIS and broader reform process. Carers report increased distress and frustration with reform narratives which appear to undervalue essential supports within the Scheme, including social and community participation. There are real concerns that the reforms will increase reliance on carers for both care provision and advocacy, without sufficient recognition or support.

Conclusion

Carers Australia recognises the importance of securing the NDIS for future generations and supports the intent of the proposed reforms to improve the integrity and sustainability of the Scheme. However, without explicit recognition of carers in policy design, reforms risk shifting both costs and responsibilities from the NDIS onto family and friend carers, rather than achieving genuine sustainability.

Reforms that increase reliance on informal care without adequate safeguards risk undermining both carer wellbeing and participant outcomes. If carers are overburdened, their capacity to provide care will decline, placing additional pressure on formal services.

A sustainable NDIS will recognise carers as partners in the system, ensuring planning decisions reflect realistic care capacity. The success of these reforms depends on achieving a balance between fiscal responsibility and social sustainability. Carers are not supplementary to the NDIS, they are integral to its operation and central to its future.

> *"Carers are not an unlimited resource. And supporting carers is ultimately essential to supporting people with disability themselves. Because when families are supported, people with disability do better. Siblings do better. Communities do better."*
> Clare, Carer, Parliamentary Friends of Carers, Canberra 26 May 2026.

About Carers

Our definition of a carer aligns with the Carer Recognition Act 2010:

Section (1) For the purpose of this Act, a carer is an individual who provides personal care, support and assistance to another individual who needs it because that other individual:

a) has a disability; or
b) has a medical condition (including a terminal or chronic illness); or has a mental illness; or
c) is frail and aged.

Section (2) An individual is not a carer in respect of care, support and assistance he or she provides:

a) under a contract of service or a contract for the provision of services; or
b) in the course of doing voluntary work for a charitable, welfare/community organisation; or
c) as part of the requirements of a course of education or training.

Section (3) To avoid doubt, an individual is not a carer merely because he or she:

a) is the spouse, de facto partner, parent, child or other relative of an individual, or is the guardian of an individual; or
b) lives with an individual who requires care.

Carers Australia also recognises carers who provide unpaid care for people experiencing drug and substance issues.

Key Statistics

3 million carers across Australia *

11.9% of people in Australia are carers *

11% of carers are aged under 25 years (391,300); an increase of 60% since 2018*

30% of primary carers cared for 40 hours per week or more*

4.6% of all people in Australia (1.2 million people) are primary carers, those who provide the most informal care support to a family member or friend *

43.8% of primary carers have disability themselves*

Source: * Australian Bureau of Statistics. 2022. *Survey of Disability, Ageing and Carers*

Further information:

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[redacted]

www.carersaustralia.com.au