



24 April 2026

Committee Secretary
Joint Standing Committee on the National Disability Insurance Scheme
PO Box 6100
Parliament House
Canberra ACT 2600
By email: ndis.joint@aph.gov.au

Dear Committee Secretary

RE: Integrity of the National Disability Insurance Scheme

The Royal Australian College of General Practitioners (RACGP) welcomes the opportunity to provide a submission to the Joint Standing Committee on the National Disability Insurance Scheme's (NDIS) inquiry into the integrity of the NDIS.

The RACGP broadly supports measures to protect the integrity of the NDIS, reduce overservicing, and ensure its long-term financial viability. Enhanced regulation of NDIS providers will help maintain access to vital supports for NDIS participants and respond to cases of fraud and non-compliance.

Specialist general practitioners (GPs) are intrinsically involved in disability work and often have strong and ongoing relationships with people living with disability, their families, carers and other multidisciplinary care team members. GPs provide patient-centred, safe, comprehensive, and ongoing care to people with disability through all life stages. They routinely help patients apply for NDIS funding by providing evidence of disability and functional impact.

GPs are not NDIS providers themselves, however consolidating their involvement in the NDIS will strengthen the integrity of the scheme. This response addresses term of reference 4 of this inquiry – *any legislative or other reforms required to strengthen scheme integrity*.

Currently, GP involvement in the NDIS is sporadic and their status as medical specialists is not formally recognised by the National Disability Insurance Agency (NDIA). This under-represents the role of the GP in the care of a person with disability, with missed formalised opportunities for GPs to provide clinical input to ensure NDIS funding is appropriately allocated. Our members report GPs are too often a powerless witness to a lack of patient and family centred support in the NDIS, with the needs of patients going unmet. Instead, appropriate supports and care often depend on a patient's ability to self-advocate, and the extent to which NDIS planners understand the GP's role.

In a recent [submission](#) to the Senate Community Affairs Legislation Committee's inquiry into the National Disability Insurance Scheme Amendment (Integrity and Safeguarding) Bill 2025, we suggested the Bill presented an opportunity to legislate the need for GP expert opinion to be considered when someone applies for the NDIS or their plan is being reviewed. Unfortunately, this advice was not heeded. We therefore once again recommend this committee consider other opportunities to legislate the role of GPs in the access and planning process.

Specialist GPs have demonstrated through Medicare Benefits Schedule-funded GP Chronic Condition Management Plans that they are adept at utilising allied health resources efficiently and effectively to meet the greatest needs of their patients and respect service workloads.



RACGP
Royal Australian College
of General Practitioners

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Building collaborative partnerships between the health and disability sectors will enable people with disability to achieve and maintain optimal health and function, and therefore live better, more inclusive lives. Embedding a greater role for GPs in the NDIS via legislation will contribute to a more sustainable NDIS, ensuring people with disability get the support they need when they need it. The RACGP stands ready to work with government and the disability sector on reforms to strengthen the NDIS now and into the future.

Please contact Samantha Smorgon, National Manager – Funding and Health System Reform, on (03) 8699 0566 or via samantha.smorgon@racgp.org.au, if you wish to further discuss the role of GPs in disability care and management.

Yours sincerely

Dr Michael Wright
President