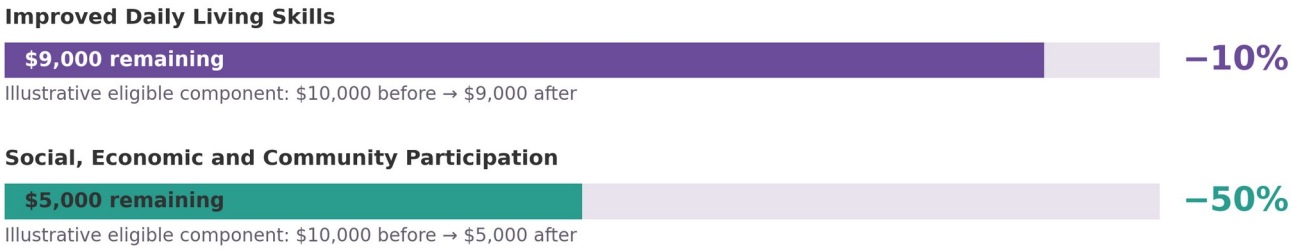
NDIS CHANGES AND INDEPENDENT THERAPIST COLLABORATION

Together, we can help your clients' funding go further

Extend support around your clinical expertise

NDIS changes are reducing specified funding components in affected plans: 10% for Improved Daily Living Skills and 50% for Social, Economic and Community Participation. These reductions are taking effect as plans are created, reassessed or renewed. Exclusions apply. [1, 2]



Illustrations of wholly eligible $10,000 components. These are component reductions, not cuts to every participant's whole plan or provider hourly rates. Dates and detail appear on page 3.

Smaller budgets do not remove support needs

Clients may need to spread appointments further apart, prioritise assessments over ongoing therapy or manage longer gaps without practical support. Therapists may be trying to preserve meaningful therapy while also finding time for reports, coordination and follow-up.

Our shared response to smaller therapy budgets

By working collaboratively, we can help our clients' available funding go further: keeping therapy funding focused on your specialist expertise while NE delivers paid Interest Based Supports using separately agreed, eligible funding. With participant consent, we share structured observations to inform your therapy, clinical review and reporting. You can receive this information without providing reports, goals or strategies in return. We manage our team and service.

Working together to help our clients' funding go further.

NDIS provider 4-K6GFD9R
0110 Specialist positive behaviour support • 0128 Therapeutic supports

The value for your therapy practice

The aim is to make clients' available funding work harder: preserve specialist therapy time for the work that needs you, and add practical support between appointments through a team you do not have to employ or manage.

You may be experiencing	What working with NE can offer
Fewer funded appointments Clients may be stretching therapy funding across assessments, sessions and reports.	Keep available therapy funding for your clinical work. NE's eligible support can provide opportunities for everyday practice between your appointments.
Support between appointments Clients may benefit from more supported opportunities to practise and build on their therapy sessions.	Our trained team works with the person's goals. Sharing therapy strategies is optional; with consent, agreed elements can be incorporated into our support.
The cost of another team to manage Employing assistants may mean recruitment, rostering, leave cover and staff management.	We manage our established, long-term team, supported by ongoing training through The Nest's FREE 2B ME Practitioner Pathway.
Time spent gathering updates Clinical reviews and reports may mean chasing information about support between appointments.	Receive structured observations of participation, support and change to inform your therapy, clinical review and relevant reporting.
Concern about losing your independence You may want more support for clients while keeping your own practice and clinical relationships.	Keep your practice, billing, clinical decisions and therapy fees. NE takes no percentage of your therapy income.

Support around your work without another management role

We run our own service. Share relevant recommendations if you choose, or simply receive our observations. You do not need to write our programme, direct The Nest or supervise our workers.

NDIS changes and your practice

Example only: if a participant has eligible funding equivalent to 20 therapy hours, a 10% reduction leaves funding equivalent to 18 hours at the same fee. These examples use national direct-service price limits; actual agreed fees may be lower.

Therapy example	Fee per hour	Before 20 hours	After 10% 18 hours
Occupational therapy and speech pathology	$193.99	$3,879.80	$3,491.82
Psychology	$252.99	$5,059.80	$4,553.82
Physiotherapy	$183.99	$3,679.80	$3,311.82
Counselling, art therapy and music therapy	$156.16	$3,123.20	$2,810.88
Social work, rehabilitation counselling and developmental education	$193.99	$3,879.80	$3,491.82
Dietetics	$178.99	$3,579.80	$3,221.82
Exercise physiology	$161.99	$3,239.80	$2,915.82
Podiatry	$188.99	$3,779.80	$3,401.82

Twenty hours is an illustration, not an entitlement. Each row assumes the entire example allocation is subject to the reduction and used for that therapy. Fees remain unchanged; funding reduces. Travel, reports and other charges use funding too. [1, 9]

Timing: affected new or reassessed old-framework plans from 1 October 2026; renewals from 1 February 2027. Exemptions include specified health, hearing, employment and complex behaviour supports. Check the funded component, not just the profession. [1, 2]

Planning and clinical assessments

New-framework planning starts progressively from April 2027. Routine budget-setting reports may reduce, including some OT FCAs; clinical assessments remain important. Targeted assessments are proposed for needs such as assistive technology and home modifications. [5, 12, 14]

Practice pressures: therapy limits differ by profession; travel labour is generally capped at half the relevant therapy limit. A 90-day claim window is scheduled from December 2026, with no unspent-fund carry-forward on renewals from February 2027. [3, 4, 9]

Information sharing on your terms

Our trained, neuroaffirming team works independently with each participant's goals. You do not need to provide a report, programme, goals or recommendations to collaborate with us.

The participant chooses the Interest Based Supports they want, subject to availability. If their chosen interest is unavailable, we create a waitlist and gather interest from others until the minimum group size is reached.

Choose the level of exchange that helps you

With participant consent, you can receive useful information from our service without supplying information in return. If sharing the goals or strategies you are working on would add value, that option is available too.

Your choice	What this looks like
Receive our information	We share agreed observations of participation, support and context. You decide how they inform your therapy, assessment, clinical review or reporting.
Also share relevant goals or strategies	You choose what is useful to share, with consent. We consider how appropriate elements fit the participant's own goals and our agreed support. No new therapy programme is required.

If you choose to share

For example, you may share an existing recommendation about pacing or sensory access. We can incorporate agreed elements into an activity the participant chooses, record the support provided and their response, and feed that information back to you.

You retain clinical judgement over your clinical work. We plan, manage and remain responsible for our own service and team. You do not direct The Nest or supervise our workers.

Keep therapy funding focused on clinical expertise

Our collaboration supports your assessment, one-to-one therapy and clinical decisions. Each service has its own agreement and eligible funding; participation budgets are also finite. There is no share of your therapy fees.

Receive information, share information, or agree a combination that is useful for the person and your work.

Information that strengthens clinical evidence

Good collaboration gives you specific, attributable information about everyday participation. It can help you explain how supports work together, what the person experiences and what informs your clinical recommendations.

Current NDIA reporting guidance asks for goals, services, assessed progress, barriers, risks and justified recommendations. It also asks how recommended supports fit the person's life and coordinate with other supports. [15]

Useful in your report	What our records can contribute
The person's goals and priorities	Their stated goals, choices and account of participation, with the date and source recorded.
What support was provided	Activities, frequency, duration, assistance and environmental adjustments, with provider roles distinguished.
Progress, variation or continuing need	Dated observations across sessions, including the support required. These complement your clinical measures; they do not replace them.
Barriers, risks and responses	What affected access, what was tried, the person's response and any matters requiring clinical review.
Coordination and next steps	Information exchanged with consent, any agreed actions, what each provider contributed and what you considered in your recommendations.

Describe what collaboration actually involved

For example, where accurate: "With the participant's consent, I reviewed NE's dated observations of participation and support needs. I considered these alongside my assessment when reviewing the therapy approach and recommendations."

If you also shared strategies, describe which ones, how they were used and what was observed. Receiving records alone should not be presented as joint treatment planning.

The Commission's Practice Standards support consent-based collaboration and information sharing. This is not a promise of funding approval or a new mandatory heading for every future assessment. New-framework report requirements are still developing. [12, 13, 16]

The framework behind our team

We manage our team’s learning, supervision and development.

Our long-term team has access to NE Foundations, the FREE 2B ME Practitioner Pathway and relevant DSC learning. The internal curriculum spans 10 Foundation and 15 Practitioner modules, including reflective self-application, shared practice and supervised application.

Learning focus	Value for your collaboration
Neurodivergence and access	Sensory experience, interoception and communication access: context for understanding participation and support needs.
Reflective practitioner practice	Assumptions, power and responses under pressure: a team supported to examine its own practice and use feedback.
Choice, rights and relationships	Person-led decisions, consent and boundaries: collaboration grounded in the participant’s choices, including information sharing.
Skills, participation and distress	When to teach, adapt, support or seek help: informed support for the person’s goals and interests between appointments.
Judgement, evidence and safety	Observation, uncertainty and safeguarding: useful records and appropriate escalation, with clinical interpretation left to you.
Application and ongoing review	Application, feedback and accountability: NE manages workforce development; you do not need to employ or manage our team.

Learning and supervision are matched to role, experience and participant needs. Course completion and demonstrated capability remain distinct.

Clinical leadership and specialist behaviour support

Tanya Hicks, our founder and clinical lead, is an NDIS behaviour support practitioner, neuroaffirming specialist, ACA registered counsellor, author and speaker, with Autistic and ADHD lived experience.

When distress or other barriers affect participation, you can draw on behaviour support and counselling perspectives alongside your clinical expertise. With consent, shared observations can help clarify what the person needs. Our 0110 Specialist positive behaviour support registration also provides a pathway to separately agreed specialist support.

We manage our service; you retain your therapy practice, clinical decisions and fees. Recognition across our work appears on page 8.

Our registration and your next step

Neurodivergent Empowered
Ms Tanya Louise Hicks trading as Neurodivergent Empowered

NDIS provider 4-K6GFD9R • ABN 43 318 321 173
ACA registered counsellor R82053

Code	Our NDIS registration groups
0102	Assistance to access and maintain employment or higher education
0106	Assistance in coordinating or managing life stages, transitions and supports
0108	Assistance with travel/transport arrangements
0110	Specialist positive behaviour support
0116	Innovative community participation
0117	Development of daily living and life skills
0125	Participation in community, social and civic activities
0128	Therapeutic supports
0133	Specialised supported employment

Start with your client's interests

Your client chooses the interests and supports they want, subject to availability. With their consent, introduce us to explore their choices, access needs and fees.

If their chosen interest is unavailable, we gather interest on a waitlist until the minimum group size is reached. Information sharing is agreed with the participant.

Make an online referral → free2bme.au/referral

Complete the referral online; it saves directly into NE's intake system. Refer with basic details only, or share relevant information with the participant's permission.

Tell us what you would like from the collaboration. Permission for us to share information back with you is confirmed separately with the participant.

0468 005 012 • sparkly@neurodivergentempowered.com
The Nest, Rumba Resort, Shop 3
10 Leeding Terrace, Caloundra QLD 4551
FreeToBeMe.au • FreeToBeMe.global

Recognition across our work

Awards across Tanya Hicks, Neurodivergent Empowered and Sparkly Aliens recognise work in education, inclusion, innovation and leadership. [8]

Women Changing the World

2026 Gold • Big Idea (Global)

2025 Gold • Children's Education (Global); Rising Star (APAC)

2025 Silver • Woman in Education (APAC)

2025 Third • Advocacy and Impact (Global)

2025 Honourable mention • Thought Leader (APAC)

Stevie Awards for Women in Business

2025 Gold • Non-Profit Organisation of the Year

2025 Silver • Diversity and Inclusion

2025 Bronze • Most Resilient Women-Owned Business

2024 Gold • Global Female Executive (Sparkly Aliens)

2024 Silver • Global Woman of the Year (Sparkly Aliens); Global Female Executive (NE)

AusMumpreneur

2026 Bronze • Woman Changing the World

2026 Recognition • Top 100 AusMumpreneurs in Australia

2025 Gold • Emerging Non-Profit Business

2025 Silver • Emerging AusMumpreneur of the Year

2024 Gold • Overcoming the Odds

2024 Silver • Disabled Business Excellence

Community and business awards

2024 Winner • Education and Training, Sunshine Coast Business Awards; Community Leader, Beam

2023 Winner • ND/Autistic Excellence Provider, Divergantz Autistic Business Awards; Community Inclusion, Sunshine Coast Community Gala Awards

2022 Winner • Emerging Community Leader, Sunshine Coast Community Gala Awards

2020 Special commendation • Parent of the Year, Autism Queensland (Tanya Hicks)

The full record includes further finalist and nominee recognition across leadership, therapy and counselling, human rights, innovation and business.

FreeToBeMe.global/recognition

Sources and further detail

Official sources support the funding and reform information in this proposal.

Funding and reform

[1] NDIS (Support) Determination 2026 • F2026L01332

[2] NDIA • Changes to support budgets from 1 October

[3] NDIA • Travel claiming rules, gap fees and other costs

[4] NDIA • Securing the NDIS for future generations and reform timetable

[5] NDIA • New way of planning

[12] Australian Government • Adult transition and new-framework planning

[14] Australian Government • Proposed support needs and targeted assessments

Clinical practice and provider information

[15] NDIA • How to write a plan reassessment report

[16] NDIS Commission • Practice Standards on support provision

[6] NDIA • Guide to working as an allied health provider

[7] NDIS Commission • Neurodivergent Empowered registration

[8] FreeToBeMe • Full recognition record

[13] Occupational Therapy Australia • New-framework concerns, October 2026

Pricing

[9] NDIA • Current pricing arrangements and price limits

[10] NDIA • Annual Pricing Review for 2026/27, Recommendation 16

[11] Australian Government • Pricing announcement of 24 September 2026

Unregistered-provider pricing: the proposed 10% reduction concerns Social, Community and Civic Participation, not all therapist fees. Recommendation 16 proposed January 2027; the September government update still described consultation. [10, 11]

Funding information checked 3 November 2026. Actual services and claims depend on the participant’s plan, the current rules and the agreed arrangement.