

2022-23 Annual Pricing Review

Response to consultation

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Recipient

National Disability Insurance Agency

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About Dietitians Australia

Dietitians Australia is the national association of the dietetic profession with over 8500 members, and branches in each state and territory. Dietitians Australia is the leading voice in nutrition and dietetics and advocates for food and nutrition for healthier people and healthier communities.

The Accredited Practising Dietitian (APD) program provides an assurance of safety and quality and is the foundation of self-regulation of the dietetic profession in Australia. APDs have an important role in supporting people with disability to meet their food, fluid and nutrition needs and achieve their social and economic goals.

This submission was prepared with the input of members of the Dietitians Australia Disability Interest Group following the [Conflict of Interest Management Policy](#) and process approved by the Board of Dietitians Australia. Contributors include Dietitians Australia members with wide-ranging expertise in areas including the NDIS and disability.

Recommendations

1. Increase pricing limits for nutrition and dietetic supports in line with inflation
2. Address the issues raised in our previous submission to the Annual Pricing Review¹

Discussion

Dietitians Australia's [previous submission](#) to the Annual Pricing Review (APR) emphasised concerns regarding the pricing of nutrition and dietetic supports and services within the National Disability Insurance Scheme (NDIS).¹

In this submission we:

- recommend the NDIA increase pricing limits for nutrition and dietetic supports in line with inflation and address the issues raised in our previous submission
- highlight the cost drivers of dietetic services, as requested in the APR consultation terms of reference (ToR)
- bring to attention new research that supports the critical need to address dietetic pricing issues within the NDIS. This includes research on the extent and cost of nutritional neglect

and abuse of people with disability in Australia,² and data on the small proportion of funding allocated to dietetic services through the NDIS, compared to other allied health professions.³

Recommendation 1: Increase pricing for therapy supports, including dietetic services, in line with inflation

APDs play a vital role in supporting people with disability to achieve their goals and participate in the community. To ensure the accessibility and sustainability of nutrition and dietetic services, it is essential to increase pricing limits for these supports, in line with inflation. Inadequate funding for dietetic services can lead to insufficient access to APDs, particularly in regional, rural and remote locations, putting NDIS participants at an increased risk of adverse outcomes.

Cost drivers of dietetic services

The APR ToR requested information on the cost drivers of therapy supports. The timeframe of the consultation prohibits systematic collection of this data from the membership; however, we are aware of the following key cost drivers:

- Inflation and increased cost of living
- Workforce challenges, including a shortage of skilled professionals, recruitment and retention difficulties, and limited access to training opportunities⁴
- COVID-19 pandemic impact, leading to higher costs for personal protective equipment, adapting to telehealth or remote services, and implementing additional safety measures
- Increased administrative burden associated with the NDIS, including changes in policies, reporting requirements, and compliance measures⁵
- High workload and time pressures for dietitians due to increasing service demands and the need to balance clinical, management, and administrative tasks
- Lack of clarity regarding NDIS access, planning and decision-making processes leading to inefficiencies and hence increased costs⁵

Addressing these cost drivers by increasing pricing for dietetic supports will contribute to a more sustainable and equitable pricing structure for dietetic supports and services.

In the quote below, an APD points out the significant complexity that is often involved in supporting people to access nutrition and dietetic supports through the NDIS and the significant number of hours not billed for.

“When a client uses NDIS for Home enteral nutrition (HEN) -related products and equipment, the dietitian in the community is often the go-to person on quotes and ordering of everything related to equipment and feeds + troubleshooting any stock issues. Although this isn't necessarily in our job description, oftentimes, we end up having to be across this to get clients the funding they require and to direct them to where they can purchase their feeds and equipment without hospital funding for HEN. In the HEN hospital system, this is all setup and easy to access whereas, in the community, we're having to contact and maintain relationships with reps from a large number of suppliers, including nutrition product and medical equipment product supplies such as Nutricia, Independence Australia, Nestle, Fresenius, Abbott, Alpha Medical etc, to stay up to date with ordering processes, available stock, new products etc. In the less frequent instances, where you can manage to obtain nursing support to cover the equipment side of things, in my experience, nurses still often reach out to us to confirm advice re: equipment and ordering...A significant and ongoing amount of professional development is required to be able to support enterally fed clients who access feeds and equipment through NDIS (Which I note will become more and more common given VIC funding arrangements state that HEN clients eligible for NDIS should be moved to NDIS funding for HEN related consumables). In circumstances where there is not yet funding for HEN related equipment/ products within the NDIS plan, community NDIS dietitians are having to liaise with HEN providers to make regimen changes/ discuss who will write the report to request HEN funding to be included in the NDIS plan etc....

I really want to highlight here that just staying up to date with ordering differences for each company is a nightmare.

To provide some insight, at current, I meet with approx. 2 suppliers per month, send multi emails regarding ordering processes, have a percutaneous endoscopic gastrostomy (PEG) training day (8 hours) scheduled next month for myself and colleague to attend, spend several hours each month working out/ reaching out to contacts to ask about how equipment works (E.g. which giving set works with which feed container + where to order this from + how to order this) and spend time trying to find nurses who do work with enterally fed clients.

All this unpaid time is required to ensure I am competent in managing a client's HEN consumables once in community (NOT CLINICAL CARE, JUST CONSUMABLES).”

(APD correspondence with Dietitians Australia, 4 April 2023).

Recommendation 2: address the issues raised in our previous submission to the Annual Pricing Review

In our previous submission,¹ we made several recommendations regarding the pricing of dietetic services, which remain pertinent today. We request that the APR addresses these recommendations including increasing the pricing of dietetic supports, increasing group service pricing, maintaining non-face-to-face billing arrangements, and ensuring NDIS covers the costs associated with travel and delivering services in rural, regional, and remote locations.

New research on the extent and cost of nutritional neglect and data on NDIS funding of nutrition and dietetic supports and services

The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability highlighted the extent and significant economic cost of nutritional neglect and poor diet among people with disability. A report commissioned by the Royal Commission found that systemic failures and neglect cost the nation \$27.7 billion per year, with poor diet a key contributor to these costs. A further \$10.8 billion reflected health costs associated with higher rates of obesity and poor diet.²

Recent data released by the National Disability Insurance Agency indicates that, compared to the funding allocated to numerous other allied health professions, only a small proportion of the total funding for therapy and early childhood intervention supports is directed towards nutrition and dietetic supports and services.

Given the critical role of APDs in addressing the health challenges faced by people with disability, it is crucial to re-evaluate dietetic pricing within the NDIS. By increasing funding for these essential services, we can alleviate the significant health costs related to poor nutrition, support growth and sustainability of the dietetics workforce, and ultimately enhance the quality of life for those who depend on these vital supports.

References

1. Dietitians Australia. Annual Pricing Review 2021-22 submission. 2021.
2. James Vincent DM, Hugh Miller, Kirsten Armstrong, Sarina Lacey, Grant Lian, David Qi, Nansi Richards, Tomas Berry,. Research Report - The economic cost of violence, abuse, neglect and exploitation of people with disability. Taylor Fry; 2023.
3. National Disability Insurance Agency. Average support line item payments data downloads. 2022.

4. Dietitians Australia. Joint Standing Committee on the National Disability Insurance Scheme: Inquiry into the NDIS Workforce. 2021.
5. Australia D. Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability: Issues with the National Disability Insurance Agency and Mainstream Services short summary of references to food and nutritional neglect and abuse presented to the Royal Commission. 2022.