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

21 May 2026

1. Introduction

On 14 May 2026, the Government introduced the National Disability Insurance Scheme Amendment (Securing the NDIS for Future Generations) Bill 2026 ('Bill').

The 109-page Bill implements a wide range of changes to the NDIS, affecting everything from who can access the Scheme to planning and how particular supports will be funded. It was released with nearly 300 pages of explanatory material, which outlines the Government's intentions in drafting the proposed changes and which may be used by Courts and Tribunals to interpret the resulting laws.

The Government has set an extremely short time frame for the community to respond. A Senate Committee inquiry is taking submissions on the Bill until 29 May 2026. After the Committee completes the inquiry, the Bill may be passed by Parliament without further consultation.

We have created this Explainer to help the disability community understand the most significant changes in the Bill and support informed participation in the Government's consultation process.

Due to the Bill's length and complexity, we have not covered every proposed change. Instead, we have focused on the changes that we expect will have the biggest consequences for participants.

We understand many people in the community are concerned about the scale of changes announced by the Government and the impact they will have for people with disability. We share many of the community's concerns. However, due to the short consultation timeline, this Explainer does not include recommendations about which parts of the Bill should be amended or opposed.

This Explainer reflects our understanding of the Bill as at 21 May 2026. We expect the Government will continue to release information about the Bill and its intentions, and there may be amendments proposed to the Bill as it moves through Parliament. In addition, some important aspects of the changes will depend on Rules and Ministerial determinations to be made later, which will affect how the changes operate in practice.

The Justice and Equity Centre will make its own submission to the Senate Committee Inquiry, which will be publicly available on the Committee website.

1.1 Interaction of this legislation with previous Federal Court cases

The Bill will change the law so that several Federal Court decisions about the NDIS will no longer apply in the same way, which we discuss in this explainer. While Parliament has the power to make laws that override court decisions, many of these decisions established precedents that benefitted people with disability. By overriding these cases the Bill will make the NDIS harder to access and/or reduce supports for participants.

1.2 A guide to references

In this explainer, we refer to the NDIS Act, the main body of existing NDIS law, and to the Government's new NDIS Bill, which proposes changes to those laws.

References below to the NDIS Act point to 'sections' and 'subsections'. References to changes made to the NDIS by parts of the Bill point to 'proposed sections' and 'proposed subsections'. Parts of the Bill that do not directly amend the NDIS Act are referred to as 'items', and are each located within a 'schedule' of the Bill.

2. Changes to NDIS access

The Bill makes major changes to how people get access to the NDIS. This section explains three of those changes.

2.1 Test for functional capacity

Public commentary sometimes says NDIS access is based on 'diagnosis lists'. However, the NDIS Act has always required a person to show their impairment *impacts their functional capacity* (subsections 24(1)(c) and 25(1)(c)).

This Bill now defines 'functional capacity' (proposed subsection 9B(1)). More importantly, it also lets the Government, with state and territory agreement, to make NDIS Rules to decide who can access the NDIS, by setting (proposed subsection 9B(2)):

- criteria to assess people's functional capacity; and
- tools to measure functional capacity.

This appears intended to implement a standardised assessment tool to determine whether people meet the functional capacity threshold for access to the Scheme, as announced by Government.[1]

A standardised assessment would be a major change from the current approach, where people can use reports from their doctors or allied health practitioners.

Many people with disability say a standardised assessment would be inappropriate. We have also heard concerns from the community and experts that a standardised assessment tool will not be able to capture the full range of disability, resulting in some people being overlooked or disadvantaged.

[1] Minister Butler, 'Securing the NDIS for Future Generations' (Speech, National Press Club, 22 April 2026).

The Bill also allows the NDIA to use the standardised assessment for current participants, and remove them if they don't meet the set threshold (Schedule 1, item 11, combined with sections 30-30A).

2.2 Changes to requirement for an impairment to be 'permanent'

The Bill introduces several provisions that would prevent people accessing the NDIS if there are treatments that could improve or reduce the effect of their impairment(s).

One of these provisions would reverse the Federal Court's decision of *NDIA v Davis* [2022] FCA 1002 ('*Davis*'). In *Davis*, the Court found where a possible treatment for a person's impairment existed, but the person could not realistically access the treatment for reasons such as being unable to afford it or their geographic location, this would not bar them from accessing the NDIS. The Bill overturns this position (proposed subsection 25A(2)).

Another provision says a person must try 'all appropriate treatment' before they can access the NDIS (proposed subsections 24(5)(a) and 25(1B)(a)). 'Appropriate treatment' means treatment that is (proposed section 25A):

a. evidence-based;
b. can reliably be expected to materially improve, reverse or alleviate the impact of the impairment(s); and
c. is regularly undertaken or performed in Australia.

These criteria seem quite broad, but it is not yet clear how they will be applied.

The Bill says a person may not have to try 'all appropriate treatment' if there are medical reasons not to, or if NDIS Rules say it is not needed (eg the Explanatory Memorandum says this may apply to some psychosocial disabilities) (proposed subsections 25A(3)-(4)).

Even so, the requirement to try 'all appropriate treatment' could have unfair or unpredictable impacts. For example, if a treatment might result in improvements over many years, but the person would still have substantially reduced functional capacity, they may be prevented from accessing the NDIS in the meantime. It could also make it harder for people with progressive conditions to access the NDIS, even where treatment only slows, but does not reverse, the deterioration of their functional capacity.

These provisions also exclude people who refuse treatment for non-medical reasons (proposed subsection 25A(3)). This has been criticised by some in the disability community as interfering with people's rights to control their own bodies. The requirement to try 'all appropriate treatment' also applies to 'early intervention', even though early intervention is meant to help people get support sooner and avoid higher support costs later (proposed subsection 25(1B)).

These changes could greatly limit access to the NDIS. If these requirements are introduced, the wording must be carefully considered to prevent unfair or unintended outcomes.

2.3 Other available support systems limiting access

Earlier this year, the Federal Court decided that a person does not have to show other government programs or supports cannot meet their needs before *accessing* the NDIS: *NDIA v Sutherland* [2026] FCA 3 ('*Sutherland*').

The effect of *Sutherland* was that access to the Scheme was not *denied* because other supports might be available, but those other supports *were taken into account* in the planning process. So, the NDIS could fill a gap between those other supports and a person's actual needs – but not double-up. This Bill overrides that decision (proposed section 25B).

The Bill proposes two ways in which people receiving support from other systems would be denied access to the NDIS:

- first, if a person's impairment is from a car accident or workplace injury and is covered by a compensation scheme, they *will not qualify* for the NDIS (proposed subsections 25B(2)-(3)); and

- second, the Minister, with state and territory agreement, can make NDIS Rules to exclude other groups or people who receive certain supports (proposed subsection 25B(4)). The Explanatory Memorandum says the aged care system could be one of these.

The change proposed by the Bill could therefore lead to unfair outcomes and leave some people without the supports they need. For example, people who already access aged care may be denied disability-specific supports through the NDIS. This could also have a disproportionate impact on certain communities, including First Nations people, who qualify for aged care at 50 even though they may still be eligible for the NDIS.[2]

3. Changes to NDIS planning

3.1. Curtailing reassessments

Reassessments only where needs or circumstances significantly change

Currently, participants can request a plan reassessment at any time (section 48). Under the proposed changes (proposed section 48A), participants can *only* request a reassessment if:

- There has been a significant and ongoing change in their ongoing support needs; and

- The change affects either a participant's:
  a. functional capacity in an ongoing way – meaning changes that relate directly to an existing impairment, or a new impairment that meets the access criteria, and cause a substantial reduction in the person's ability to do daily activities; or

[2] See, for example, *Brickhill and National Disability Insurance Agency (Practice and procedure)* [2025] ARTA 707; *Court and CEO, National Disability Insurance Agency (NDIS)* [2025] ARTA 1560.

b. personal or environmental circumstances – meaning 'unanticipated' changes such as losing a primary informal carer, or changes in living, work and/or education arrangements.

Because the change must be 'ongoing', temporary injuries or temporary changes to care arrangements would not be enough to seek a reassessment. In these cases, instead of a reassessment a participant may only be able to seek a variation of their plan.

The Explanatory Memorandum makes clear that if a participant runs out of funding early, but their support needs have not changed significantly, their request for reassessment will be refused (page 22).

The Bill also creates a stricter process to request a reassessment and gives the NDIA more control over whether and how it responds to requests, as it:

- extends the time for the NDIA to decide a reassessment request from 21 to 90 days (proposed subsection 48(3));
- only requires the NDIA to consider a reassessment request if the request is made in a specific form and includes any information requested by the NDIA (proposed subsection 48(3)); and
- removes safeguards for participants if the NDIA does not decide a reassessment request in time (Schedule 1, item 20, removing and replacing existing subsection 48(4)).

Instead of deciding a reassessment request, the NDIA may decide to transition the participant to a new framework plan (proposed subsection 32B(2A)). This indicates a preference in some cases to transition participants to new framework plans, rather than reassessing existing plans. This is significant, because decisions to transition participants into new framework plans are not reviewable.

Reassessments are one of the few ways to respond to changes in participant's lives. These proposed changes will leave participants with fewer options if their plan no longer meets their needs.

3.2. End dates for plans (and preventing funding carryover)

The Bill would replace 'reassessment dates' in old framework plans with an 'end date'. The main practical effect is that participants would no longer be able to carry unused funding over to their next plan.

At the 'end date', plans would be automatically 'renewed' (proposed section 50A). Although renewed plans will largely mirror the previous plan, there are some key differences:

- the renewed plan will last for a further 12 months;
- one-off supports from the old plan will not carry over (ie funding for assistive technology or home modifications); and
- the Minister has the power to make additional 'alterations' to the new plan (eg time-limited funding or temporary variations may not continue into the new plan).

Importantly, there is no requirement the 'renewed plan' is prepared with the participant, meaning a plan can be renewed for a further 12 months without the participant having the opportunity to identify whether their support needs or circumstances have changed. Such changes would

need to be addressed separately by plan reassessment or variation processes (however, see section 3.1.1 above).

Automatic plan renewals are also not reviewable decisions. According to the Explanatory Memorandum, this is because renewed plans simply repeat earlier planning decisions. However, the scope of possible 'alterations' which the Minister could make to new plans is unclear, including whether such changes might substantially affect participants' supports. This raises questions about whether such changes should properly be treated as new decisions, with participants having the right to review the 'renewed plan'.

3.3. Plan suspensions

The Bill allows the NDIA to suspend plans where it is trying to get information from a participant, and the participant is not contactable (proposed section 40A). Before suspending a plan, the NDIA must make 'reasonable attempts' to contact the participant (proposed section 40A). If the participant remains uncontactable after 90 days, the NDIA can suspend their plan.

The Explanatory Memorandum suggests that 'reasonable attempts' might include writing to the participant, giving them 'enough time' to respond, and ensuring they are not unable to reply due to circumstances such as hospitalisation (page 58). However, the Bill does not require these attempts to meet a participant's accessibility needs. It also does not require the NDIA to consider whether plan suspension would pose a risk to the participant (even though the Explanatory Memorandum suggests risks should be considered).

A person can seek a review of a decision to suspend their plan.

The Bill also allows a participant's plan to be revoked if they remain uncontactable for 90 days after their plan has been suspended (proposed section 30(1A)), meaning the participant loses access to the NDIS.

These changes significantly increase the consequences of participants being 'uncontactable', with limited safeguards in place.

3.1. Legal test for supports

3.1.1. Changing principles

The Bill fundamentally changes how 'reasonable and necessary' supports are to be understood. Significantly, it removes section 31 entirely and replaces it with amendments to section 17A and new section 17B, alongside changes to the objects (section 3) and principles (section 4) underpinning the Scheme.

In particular, the Bill substitutes the reference to 'reasonable and necessary supports' in section 3(1)(d) with 'NDIS supports…consistent with the financial sustainability of the Scheme.' While those objects and principles have not guaranteed particular outcomes, they provide a framework under which planning decisions should be based on individual circumstances, personal goals, choice and control, with plans shaped by participants. Courts have used the NDIS Act's objects and principles to guide how the Scheme should be applied.

Together, these changes shift the focus of decision-making about 'reasonable and necessary' supports away from the individual needs and goals of participants and toward the financial sustainability of the Scheme.

Proposed section 17B introduces principles requiring the CEO to prioritise Scheme sustainability when making planning decisions, including by:

- funding only supports that arise directly from impairments that meet the access criteria;
- recognising the role of community and informal supports;
- confirming that participants are responsible for day-to-day living costs, including costs incurred whether or not a person has a disability; and
- ensuring funding is distributed fairly and consistently across participants with similar needs.

The Government has justified these changes on the basis that the current objects and principles have led courts and tribunals to favour participants and prospective participants. It argues this has 'unintentionally expanded' the Scheme, increased costs, caused inconsistent decisions and put pressure on its long-term sustainability (Explanatory Memorandum page 46).

3.1.2. Reversing *Eastham* and undoing 'whole of person'

The Bill undoes the 'whole of person' approach to funding supports that the disability community secured in the 2024 amendments to the NDIS Act (proposed section 34(1)(aa) and accompanying note). These amendments addressed a longstanding issue in NDIS decision-making concerning how people with multiple impairments should be funded for supports, where only one or some of their impairments qualify for access to the Scheme.

The 2024 changes enabled a support to be funded if it relates to a need 'arising from' an impairment that meets access to the Scheme, noting a support need may arise from the interaction of multiple impairments and/or a participant's other circumstances (eg their location).

The proper application of these provisions was confirmed in February 2026 by the Federal Court in the case of *CEO of the NDIA v Eastham* [2026] FCA 147 ('*Eastham*'). In *Eastham*, the Court described this approach as 'commonsense' and made clear the law requires supports to be funded even if the need for the support has multiple causes, as long as one cause is the impairment that gave the person access to the NDIS.

The Explanatory Memorandum to the Bill says the outcome in *Eastham* represented an 'unintended expansion' of the Scheme (page 24). But this does not reflect the Government's position set out in the Explanatory Memoranda to the 2024 amendments, or the understanding of the disability community from discussions at the time.

Undoing the 'whole of person' approach, means the NDIA would only fund supports that arise 'directly' from an impairment that meets the access criteria (proposed subsection 34(1)(aa) and accompanying note; proposed subsection 32L(6) and accompanying note). This approach may impose artificial distinctions in the way a person with multiple and interrelated disabilities accesses supports. For example, if a person only has access to the NDIS for post-traumatic stress disorder (PTSD), but they also experience chronic pain, any psychological support may only be funded for their PTSD, even if their chronic pain also impacts their psychological wellbeing.

A test of 'directly arising' is likely to be difficult to apply in practice, as it would involve questions of judgement about complex areas of people's lives.

3.1.3. Limits on supports funding and undoing *McGarrigle*

The Bill introduces new mechanisms to limit how much funding participants can use for particular supports, even where such supports are deemed reasonable and necessary.

Support determinations for old framework plans

New 'support determinations' to be made by the Minister will reduce the funding available for certain groups of supports (proposed section 34A). The Minister has specifically referred to reducing funding in at least the 'social and community participation' group of supports.[3] The Explanatory Memorandum says this change is aimed at making sure plans are 'reasonable' in light of the Scheme's financial sustainability (page 29).

These determinations do not change the content of a participant's plan. Instead, they apply Scheme-wide, reducing by percentage the amount of funding available to participants who receive supports subject to a determination. This is a shift away from the NDIS taking an individualised approach to funding participants, partly enabled by the changed principles of the NDIS Act.

These proposed changes overturn the Federal Court decision in *McGarrigle v National Disability Insurance Agency* [2017] FCA 308 ('*McGarrigle*'), which confirmed the NDIS must fully fund a participant's reasonable and necessary supports. The Bill makes clear funding cuts will apply even if it leaves a person with less funding than what is determined to be 'reasonable and necessary' for them.

The Minister must consider participant safety when making a determination, including whether funding reductions could place a participant at risk of neglect, crisis or loss of essential functioning (Explanatory Memorandum, page 32). However, participants are still at risk of being unable to access vital supports given the Bill permits support determinations even where the remaining funding is less than the full cost of a participant's supports (proposed subsection 34A(5)).

Because these determinations operate through legislative instruments, any resulting reductions in funding are not reviewable decisions so participants cannot challenge the decisions through available review.

Caps in statements of supports

In addition to 'support determinations', the Bill gives the Minister power to make other determinations that set caps on the supports a participant can get, including (proposed subsections 33(2EA) and 33(2EB)):

- a maximum amount of funding for particular supports;
- a maximum frequency and/or duration for the provision of supports; and
- maximum worker-to-participant ratios for specific supports or classes of supports.

These limits can apply across the Scheme or to targeted groups of participants. Government says the caps will be supported by published, peer-reviewed evidence about what level of

[3] Minister Butler, 'Securing the NDIS for Future Generations' (Speech, National Press Club, 22 April 2026).

support is 'appropriate and beneficial' for participants (Explanatory Memorandum, pages 46-47). For example, a determination could cap the intensity of a particular therapy if evidence suggests that additional hours do not improve outcomes (Explanatory Memorandum, page 50).

This proposed change aims to standardise funding decisions and support the Government's broader aim of constraining growth in NDIS expenditure, by setting hard caps that may limit funding to less than the full cost of a 'reasonable and necessary' support. The examples in the Explanatory Memorandum make this clear. In one example, a participant's reasonable and necessary community supports are assessed at $44,000, but a support determination is in place to limit their actual spending to $30,000 (page 50).

It is therefore clear that these changes will result in people receiving less support than they have been assessed as needing.

3.1.4. New funding criteria and reinterpretation of existing criteria

The Bill introduces changes to the criteria for funding a support, including altering how the existing criteria should be interpreted. The Explanatory Memorandum says these changes are aimed at achieving more consistency in what is otherwise a very discretionary process, but most proposed changes would also have the effect of restricting availability of supports under the Scheme.

Is there a 'more appropriate system' to provide the support?

As part of the changes to the NDIS Act in 2024, the Government removed a previous requirement to consider if another system should fund a support. It was removed because the NDIS supports lists were intended to draw the lines for what is and is not covered by the NDIS. The Bill brings back that requirement (proposed subsection 34(1)(g)).

This means even if a support is on the 'in' list, the NDIA could still refuse it if it decides another system should provide it (eg health system). This adds an additional basis for the NDIA to refuse funding. It is unclear why the requirement should be reintroduced given the NDIS supports lists already serves this purpose.

Interpreting 'value for money'

The Bill requires new factors to be considered in deciding whether a support is 'value for money' (proposed subsections 34(1A)-(1C))), such as:

- if comparable supports are available at a lower cost; and
- where the support is equipment or modifications, whether it is more cost-effective to purchase or lease the support.

The Explanatory Memorandum says these new considerations are 'currently factors in the Supports for Participants rules but will be strengthened by inclusion in the primary legislation' (page 46).

While some of these factors are currently in the *Supports for Participants Rules*, other helpful factors (eg whether a support will have long-term benefits for the participant) have been left out.[4] Those other factors could still be considered in planning decisions (proposed subsection

[4] See *NDIS (Supports for Participants) Rules 2013* (Cth) s 3.1(b).

34(1D)), however, the overall effect of these amendments are likely to push decisions towards lower cost supports.

Interpreting 'effective and beneficial'

The Bill requires decisions about whether a support is 'effective and beneficial' to be made by prioritising peer-reviewed and generalised research about the effectiveness (or not) of a support over a participant's lived experience or evidence from their treating practitioners of the use of that support (proposed subsections 34(1E)-(1F)).

These changes would make it harder for participants to get funding for some supports, particularly for more novel or tailored supports such as certain therapies, even if they can show those supports have had good results for them.

Interpreting 'what is reasonable to expect of family, carers, informal supports and the community'

For children in the NDIS, the Bill would require the NDIA to consider the 'presumption' that parents are responsible for providing substantial care and support for their children, including supervision, personal care, transport, emotional support and behavioural support (proposed subsections 34(1G)-(1H)). As with the changes to 'value for money', this selectively imports factors currently included in the *Supports for Participants Rules,* while not including factors from the *Rules* regarding whether the child's care needs are greater than a child without a disability, or whether the support would improve the child's capacity.[5]

Additionally, the Bill would change how any risks to a participant or carer are weighted. Such risk would only lead to funding a formal support where the risk 'cannot be mitigated through informal or lower cost supports' (proposed subsection 34(1K)(a)). This sets a very high bar and may result in supports being unreasonably denied. A similarly high bar is proposed by the Bill directing that informal supports are prioritised over funding formal supports, except where formal supports are 'necessary' (proposed subsection 34(1K)(b)).

4. Fraud measures

4.1. Mandatory registration requirements

The Bill changes who is an 'NDIS provider', based on rules yet to be made (proposed section 10C). The aim is to expand the number of registered providers (to regulate more providers in the NDIS, as part of implementing Recommendation 17 of the NDIS Review), while excluding business like supermarkets, hardware stores and pharmacies (Explanatory Memorandum, pages 72-73).

4.2. Civil penalties and regulatory powers

The Bill proposes to give the NDIA new powers to investigate and enforce compliance. The NDIA will have powers to investigate and monitor both participants and providers, but enforcement actions (such as issuing infringement notices or enforceable undertakings) apply only to providers.

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5 *NDIS (Supports for Participants) Rules 2013* (Cth) ss 3.4(a)(ii) and (iv).

These new regulatory powers sit alongside those of the NDIS Quality and Safeguards Commission ('Commission'). Although the Commission can only regulate 'registered providers', it is not clear why the regulatory powers proposed to be given to the NDIA could not be given to the Commission instead, as it is already set up to regulate in the NDIS context.

The Bill also gives the NDIA power to impose civil penalties in a range of circumstances, including where a person fails or refuses to provide information to the NDIA. These would apply to participants and prospective participants (proposed sections 53(2) and (3)).

4.3. Requirements for claims

The Bill adds new requirements for claims.

First, it requires people to keep specific kinds of records or evidence about claims (3 years for participants, 5 years for nominees and 7 years for providers) (proposed section 45B). The kinds of records that need to be kept will be set out in rules yet to be made. If a claim is paid and a person does not keep a specified record, the person will owe a debt to the NDIA – the Bill does not allow for any exemptions or defences (proposed section 182(4)).

Second, the Bill reduces the time to make a claim from two years to 90 days, with late claims only allowed in exceptional cases (proposed section 45A(5)(a)).

5. Pricing and administration

5.1. Minister to have price-setting power

The Bill lets the Minister set maximum prices for supports that are Agency-managed or plan managed (ie not self-managed) (proposed section 45C). Prices can vary by type of support, provider or participant.

Granting the Minister this power is different to the NDIS Review's Recommendation 11 that the Independent Health and Aged Care Pricing Authority should be responsible for pricing in the NDIS.

5.2. Automation of some NDIA functions

The Bill contemplates automated decision making ('ADM') by the NDIA ie decisions made by computers (proposed section 59B).

The Bill specifically authorises the NDIA to use ADM for decisions about payment or rejection of claims, and approving old framework plans (proposed section 59C). The Explanatory Memorandum says the NDIA intends to only use ADM for paying or rejecting claims where there is an objective reason to do so (such as that the claim would require money that is not available under a person's plan), or for grouping together certain supports in a person's plan (pages 132 and 134).

The Bill also allows the Minister to expand the use of ADM by issuing future legislative instruments, which may authorise ADM for a wider range of purposes (proposed subsection

59C(2)). The Explanatory Memorandum foreshadows the use of ADM in the context of new framework planning, and for making other NDIS functions more efficient (page 133).

Currently there is no whole-of-government framework outlining safeguards for the use of ADM by government agencies. So the Bill contains some precautionary measures, including:

- allowing the NDIA to override an ADM decision that is incorrect;
- requiring the NDIA, where ADM is used to make decisions involving 'evaluative judgements', to produce a 'standard operating procedure instrument' describing how the computer is programmed to make these judgements;
- requiring the NDIA to publish those standard operating procedures on its website and outline in its Annual Report what types of ADM were used over the past year; and
- requiring the NDIA to tell people if certain decisions affecting them were made by ADM.

6. Minister's powers to make changes after the Bill passes

The Bill allows the NDIS Minister to unilaterally make rules that change the effect of the NDIS Act, without those rules having to be passed by Parliament (which is ordinarily the case for changes made to the NDIS Act) (Schedule 5, item 1).[6] Such rules can only be made for 12 months after the Bill is passed and can only operate for up to 12 months.

While courts have said this type of provision is legal, they are approached with caution.[7] Parliamentary committees and law reform bodies have also said they require safeguards and should not be used broadly, given they allow the government to act without the usual accountability to Parliament and the public.[8]

For the purposes of the Bill, the Government has said this clause is necessary so the Minister can respond to issues arising during the Bill's implementation, which may need to be addressed on an urgent basis without waiting for Parliament to pass new law (Explanatory Memorandum, pages 150-151). However, this clause is extremely broad and could be used to make very significant changes to how the NDIS operates.

6 Provisions like this are sometimes known as 'Henry VIII' clauses.

7 For example, comments made in *Victorian Stevedoring and General Contracting Company v Dignan* (1931) 48 CLR.

8 For example, Australian Law Reform Commission (ALRC), Report 141, Confronting Complexity: Reforming Corporations and Financial Services Legislation (November 2023), Appendix D; Senate Standing Committee for the Scrutiny of Delegated Legislation, Aged Care Legislation Amendment (2026 Measures No. 1) Rules 2026, *Delegated Legislation Monitor 4 of 2026*; [2025] AUSStaCSDLM 31 and Senate Standing Committee for the Scrutiny of Bills, Competition and Consumer Amendment (Unfair Trading Practices) Bill 2026, Scrutiny Digest 6 of 2026; [2026] AUSStaCSBSD 60.