



OFFICIAL For Internal Use Only

Case Management Guide

Applied Behavioural Analysis (ABA)

Please note: This document is currently under review and may make reference to information that is no longer current best practice. Case Managers are encouraged to review this document in conjunction with applicable and current [NDIA Operational Guidelines](#), [PACE Knowledge Articles](#), and Agency policy.

Field	Category	Reference Documents
Title	Applied Behavioural Analysis (ABA)	
Purpose	<p>This document is part of a suite of guidance documents for Case Managers to use in formulating their approach to managing individual matters before the Administrative Review Tribunal (ART).</p> <p>This Guide applies nationally to the conduct of all matters within the External Review Branch.</p>	
What is ABA?	<p>ABA therapy refers to a non-pharmacological behavioural intervention to help children diagnosed with autism spectrum disorder (ASD), intellectual disability or developmental delay to develop skills in communication, self-care, and social interaction, and or reduce behaviours that are barriers to learning and participation.</p> <p>ABA is characterised by intensive interventions, delivered by trained personnel in a clinical or childcare (school) environment.</p>	
Policy statement	<p>The ART process is often seen as stressful and adversarial by participants and prospective participants of the Scheme. The NDIA will adopt a participant-focused approach to resolving disputes before the ART, and will work directly with participants and prospective participants to provide better and earlier outcomes, where possible.</p> <p>The role of the NDIA is to assist the ART in reaching the correct and preferable decision, including by assisting participants and prospective participants in reaching the best possible resolution by agreement.</p> <p>The NDIA will fund ABA therapy when the NDIA is satisfied it is a reasonable and necessary</p>	<p>NDIA Dispute Resolution Policy</p> <p>Part 5, Division 2 to the Legal Services Directions 2025</p> <p>Section 34(1) of the National Disability Insurance Scheme Act 2013</p> <p>Rules 3.2 and 3.3 of the National Disability Insurance Scheme (Supports for Participants) Rules 2013</p>



Case Management Guide

Applied Behavioural Analysis (ABA)

Field	Category	Reference Documents
	<p>support. Where ABA therapy is to be funded as an early intervention support, the NDIA must also be satisfied that it is likely to reduce a participant's need for future disability supports.</p> <p>Support funding for children with ASD should be evidence-based, family-centred, and strengths-based. The NDIA will adopt an individualistic approach to the management of matters before the Tribunal which recognises that all participants and their families are unique.</p>	<p>Operational Guideline – Applying to the NDIS</p> <p>Operational Guideline – Early childhood approach</p> <p>ECIA National Guidelines – Best Practice in Early Childhood Intervention</p> <p>Council of Australian Governments (COAG) – Principles to determine responsibilities of the NDIS and other service systems</p>
Approach to ART matters	<p>It is important that the NDIA closely consider a participant's unique circumstances, and any evidence which speaks to those circumstances – including the participant's functional impairment and their personal goals and aspirations, as well as the cultural, language and social background of their family, and their values and beliefs.</p> <p>ABA therapy is likely to <i>not</i> be delivered in the family setting, and is more likely to be delivered in a clinical or childcare (school) environment.</p> <p>Evidence from a meta-analysis of clinical studies indicates that it is unlikely that more than 15 hours per week of ABA will be effective and beneficial.</p> <p>The NDIA may fund up to 20 hours per week of ABA therapy where it is considered likely to be effective and beneficial.</p> <p>Where a request is made to fund more than 20 hours of ABA therapy per week, consideration will turn on the participant's age and capacity, as well as the capacity of their family to meet the time obligations of ABA therapy.</p>	<p>Operational Guideline – Creating your plan</p> <p>CXZS v National Disability Insurance Agency [2021] AATA 511</p> <p>Intervention Recommendations for Children with Autism in Light of a Changing Evidence Base Report, Dr M Sandbank et al (Generalised findings, specific to older children)</p> <p>Autism CRC early intervention NDIS</p> <p>The Department of Defence (USA) Comprehensive Autism Care Demonstration Annual Report 2021</p> <p>A Multisite Randomized Controlled Trial Comparing the Effects of Intervention Intensity and Intervention Style on</p>



Case Management Guide

Applied Behavioural Analysis (ABA)

Field	Category	Reference Documents
	For participants who have commenced school, where a request is made to fund more than 10 hours of ABA therapy per week, consideration will turn on the capacity of the participant and their family to sustain both full-time schooling and intensive therapy.	Outcomes for Young Children With Autism - ScienceDirect
Evidence recommended	<p>To consider funding for ABA therapy, the NDIA requires evidence of a relevant diagnosis by specialist multi-disciplinary team, paediatrician, psychiatrist, or clinical psychologist experienced in the assessment of pervasive developmental disorders. The current Diagnostic and Statistical Manual of Mental Disorders (DSM-V) is the NDIA's preferred diagnostic standard.</p> <p>The NDIA will consider clinical evidence provided by a psychologist, occupational therapist, paediatrician, or (where a participant has previously received ABA therapy) an ABA therapist to determine whether it would be appropriate to fund ABA therapy as a reasonable and necessary support.</p> <p>Clinical evidence must address the link between ABA therapy and a participant's goals and functional capacity, and specify how the requested number of hours of ABA therapy will be effective in assisting the participant to achieve those goals.</p> <p>Evidence from a behavioural paediatrician who has assessed the participant in person is recommended.</p>	<p>Australia's First National Guideline for the Assessment and Diagnosis of Autism Spectrum Disorders Autism CRC</p> <p>List A: Conditions that are likely to meet the disability requirements NDIS</p> <p>Section 34(1) of the National Disability Insurance Scheme Act 2013</p> <p>Rules 3.2 and 3.3 of the National Disability Insurance Scheme (Supports for Participants) Rules 2013</p> <p>Expert Evidence Practice Direction Administrative Review Tribunal</p>
Other considerations	<p>The NDIA must also be satisfied that ABA therapy meets the NDIS funding criteria – in particular, that it:</p> <ul style="list-style-type: none"> is unlikely to cause harm to a participant or pose a risk to others; and is not duplicated by other funded supports. 	<p>Rule 5.1 of the National Disability Insurance Scheme (Supports for Participants) Rules 2013</p> <p>How do we work out who should fund or provide your supports? NDIS</p>



Case Management Guide

Applied Behavioural Analysis (ABA)

Field	Category	Reference Documents
	<p>The NDIA will consider the context and circumstances of the family and their capacity to support the delivery of 15 – 20 hours of intensive therapy within the participant’s learning environment (usually the home or school).</p> <p>Younger children, and children with greater baseline cognitive skills and adaptive behaviour scores, are more likely to have better outcomes from early intensive ABA therapy.</p> <p>The NDIA must also have regard to a participant’s choice and control, and those of their family and carers, in the planning and delivery of supports.</p>	<p>Autism CRC early intervention NDIS</p> <p>Section 3 of the National Disability Insurance Scheme Act 2013</p>
Relevant previous decisions	<p>The Tribunal will not consider whether ABA therapy is generally effective as an early behavioural intervention strategy for children diagnosed with ASD, but whether ABA therapy satisfies the criteria in section 34(1) – which will be determined on the facts of each case.</p> <p>When considering funding for ABA therapy, the NDIA must promote a participant’s choice and control in relation to the pursuit of their goals, and the planning and delivery of their supports.</p> <p>Where necessary, it is the responsibility of the NDIA to demonstrate that ABA therapy can be substituted with other mainstream therapies to achieve the same outcomes for the participant.</p>	<p>FRCT v National Disability Insurance Agency [2019] AATA 1478</p> <p>WKZQ v National Disability Insurance Agency [2019] AATA 1480</p> <p>CXZS v National Disability Insurance Agency [2021] AATA 511</p>

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Document author	Quality, Strategy and Training	4 January 2023
Document approver	Matthew Swainson, Chief Counsel	