

19 June 2025

## **Concerns over proposed NDIS changes and impact on rural health workforce**

Rural Health West stands alongside those raising the alarm about proposed changes to the National Disability Insurance Scheme (NDIS) and their likely impact on access to services in rural communities.

While our remit is primary healthcare – not disability services – we know that across rural and remote Western Australia, these workforces are deeply interconnected. Many of the same allied health professionals who support primary healthcare in the regions also deliver disability services under the NDIS. For these clinicians, the funding mix from private and NDIS income is often critical to maintaining viable, sustainable rural practices.

In recent years, the rollout of the NDIS across rural WA has supported growth in local allied health services, improving access, choice and continuity of care for people living outside metropolitan areas. The changes announced in the 2024-25 Annual Pricing Review risk reversing these gains – with severe consequences for access to therapy, continuity of care, and culturally safe service delivery, particularly in the most remote Aboriginal communities.

“We support over 300 NDIS participants across the Pilbara – around 65% of whom are Aboriginal,” said a spokesperson from Pilbara Therapy Services, a family-run regional provider.

“We’ve worked for more than a decade to build trust and deliver place-based, culturally safe care. These changes will make it financially unviable to continue the outreach work we do in communities like Onslow and Bindi Bindi – where we are often the only face-to-face allied health provider.”

“We’re a team of 28 clinicians operating on a thin profit margin. The decision to reduce travel reimbursements by 50% and slash physiotherapy prices with only two weeks’ notice will significantly impact rural services like ours.”

Rural Health West CEO Professor Catherine Elliott said the organisation was hearing similar concerns from rural providers across the State.

“Many rural health professionals already face significant cost and workforce pressures. The proposed NDIS changes disproportionately penalise rural service models that rely on travel, flexibility, and multidisciplinary team-based care,” she said.

“Through our annual survey process, rural health practices have indicated that a significant portion of their service provision is funded through NDIS – with at least one provider indicating that 90% of their work is through the Scheme.

If rural allied health providers become unsustainable under the revised model, we risk losing services that underpin not only disability care, but broader chronic disease programs, paediatrics, women's health, and aged care in rural WA."

Allied health professionals working in rural WA are not interchangeable or easily replaced. If NDIS funding becomes less viable, the result may not only be fewer disability services – but also a reduction in the broader healthcare services available to rural communities.

Pilbara Therapy Services also warned of broader health system consequences:

"If our business is forced to reduce services, our clients will turn to the public health system – which is already under strain. That's not good for participants, communities, or taxpayers."

We urge the Federal Government to consider the unintended workforce consequences of these reforms and to consult meaningfully with regional health and disability service providers before proceeding.

We support the petition calling for a halt to these changes until a thorough impact assessment is undertaken and strategies are developed to protect access and workforce sustainability in rural and remote areas.

## **ENDS**

***Disclosure:*** Pilbara Therapy Services is co-founded by the Deputy Chair of the Rural Health West Board. Many members of our Board are rural and regional health professionals who contribute their expertise to inform our work. We sought input from Pilbara Therapy Services due to their direct experience delivering disability and allied health services in some of WA's most remote communities. This does not represent a conflict of interest but rather reflects the lived expertise of those shaping health outcomes in the regions.

## **Media enquiries:**

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