

NDIS vs. Support at Home vs. CHSP: Which Government Meal Funding Program Applies to You?

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Details:

Now I have comprehensive, current data from authoritative sources. Let me compose the full article.

NDIS vs. Support at Home vs. CHSP: Which Government Meal Funding Program Applies to You?

Australia has three primary government-funded pathways through which people can access subsidised meal preparation and delivery at home. Yet for many individuals, carers, and even experienced support coordinators, knowing which program applies — and why — remains one of the most persistently confusing questions in the disability and aged care landscape.

The confusion is understandable. The boundary between aged care and the National Disability Insurance Scheme has never been clean. Thousands of Australians sit at the intersection — NDIS participants approaching 65 who will eventually transition to aged care, younger people in residential aged care who are NDIS-eligible, and older Australians with disability who receive supports from both systems simultaneously.

This article cuts through that complexity with a direct, side-by-side comparison of Australia's three primary government-funded meal support pathways: the NDIS, the Support at Home program, and the Commonwealth Home Support Programme (CHSP). It is designed to help you identify which scheme applies to your situation — and, critically, what happens when you sit at the boundary between them.

The Three Programs at a Glance

Before examining each scheme in detail, it helps to understand the fundamental design principle separating them:

- **NDIS** — Disability-focused, any age under 65 at entry, not means-tested - **Support at Home** — Aged care-focused, 65+ (or 50+ for First Nations people), means-tested - **CHSP** — Entry-level aged care, 65+ (or 50+ for First Nations people), subsidised with client contributions

At a high level, the NDIS supports people with a permanent disability, while aged care supports older Australians with frailty or functional decline. That single sentence captures the essential dividing line — but the real world, as this article will show, is considerably messier.

Program 1: NDIS Meal Funding

Who It Is For

The National Disability Insurance Scheme (NDIS) supports people with a permanent and significant disability that affects their ability to take part in everyday activities. The NDIS is for people who have a permanent or significant disability, aged under 65 years when they become a participant.

Crucially, the NDIS is not means-tested. Unlike My Aged Care, the NDIS is not means tested. Your funding is based on support needs rather than income or assets.

What It Funds for Meals

The NDIS does not pay for food itself. Meal preparation assistance qualifies under Core Supports when your disability prevents safe cooking. The scheme funds the *labour* component of meal preparation and delivery — not the ingredients. In practice, this means NDIS participants typically pay approximately 25–30% of total meal costs (the food component) while the NDIS funds the remaining 70–75% (preparation and delivery labour). (For a full breakdown of how co-payments are calculated and how invoices must be structured, see our guide on *NDIS Meal Co-Payments Explained: What You Pay vs. What NDIS Covers*.)

The Funding Category

Meal preparation and delivery is funded under ****Core Supports — Assistance with Daily Life****, support item code ****01_022_0120_1_1****. Since the ***Getting the NDIS Back on Track No. 1*** legislation took effect on 3 October 2024, meal delivery must be an explicitly approved support in your plan — it cannot simply be drawn from a general Core Supports budget. Parliament passed the National Disability Insurance Scheme Amendment (Getting the NDIS Back on Track No. 1) Bill 2024 (Cth), meaning a range of changes to NDIS laws came into effect on 3 October 2024. (For a full explanation of what changed under these reforms, see our guide on ***NDIS Meal Funding Rules After the October 2024 'Back on Track' Changes***.)

Scale of the Scheme

The number of NDIS participants had increased to 761,442 at 31 December 2025, with people with autism as their "primary disability" making up 43 percent of participants.

Program 2: Support at Home

What It Is and When It Started

The new Support at Home program replaced the Home Care Packages Program and Short-Term Restorative Care Programme on 1 November 2025. The Department of Health and Aged Care states, "The new Support at Home Program will better support older people to remain independent at home. It will bring together current in-home aged care programs, have new classifications, equitable pricing, an increased focus on early interventions, and higher levels of care for people with complex needs." The Support at Home program and the NDIS funding are separate government-funded programs with different eligibility criteria, focuses, and funding sources.

Who It Is For

You may be eligible for the Support at Home program if you are aged 65 or older (or 50+ if you are Aboriginal or Torres Strait Islander, or at risk of homelessness) and need help with daily activities like personal care, household tasks, or accessing healthcare.

How Meal Support Works Under Support at Home

Support at Home organises services into three tiers, and meals sit across two of them:

It groups services into Clinical Care, Independence Support, and Everyday Living to make aged care simpler and fairer.

- **Clinical Care** (fully government-funded): Includes dietitian consultations and nutritional assessments. Clinical Care under Support at Home covers essential health services fully funded by the government. This includes nursing, allied health, dietitian support, and care planning.

- **Everyday Living** (highest personal contribution): Includes meal preparation and delivery. Everyday Living includes household help such as cleaning, laundry, minor home repairs, and meal preparation. It often requires the highest personal contribution, up to 80 percent of the cost.

Important update for 2026: From 1 October 2026, the Australian Government will fully fund personal care services. Additionally, the 2026–27 Budget includes \$1 billion to fully fund personal care services (removing co-contributions). This does not currently extend to meal preparation under Everyday Living, which remains subject to income-tested contributions.

Funding Tiers

Eight new funding tiers will offer up to \$78,000 per year for in-home aged care, along with two short-term care pathways for temporary needs. This is a significant increase in funding ceiling compared to the previous Home Care Package system.

Dietitian Requirements for Meal Providers

A notable difference from NDIS: as part of the new Support at Home Program, all meal delivery companies are required to provide an independent dietitian's report. This assessment, conducted under the Aged Care Rules 2025, confirms that meals meet the nutritional and sensory needs of older adults.

How to Access

To access subsidised meals, older Australians need an assessment through My Aged Care (call 1800 200 422 or visit myagedcare.gov.au). Assessment is conducted by a Regional Assessment Service (RAS) for entry-level support or an Aged Care Assessment Team (ACAT) for complex needs.

Program 3: Commonwealth Home Support Programme (CHSP)

What It Is

The CHSP provides entry-level aged care services to help older people continue living independently and safely at home and in their community. CHSP providers help with services including personal care, transport, and preparing meals.

The CHSP is the entry-level rung of the aged care ladder — designed for people who are mostly independent but beginning to need help with one or two tasks per week. The Commonwealth Home Support Programme (CHSP) provides basic support at home. You can generally access one or two services a week, which might include cleaning, meal preparation, transport, social support or help with dressing or showering.

Current Status and Transition Timeline

The CHSP has been extended from 1 July 2025 to 30 June 2027. The Commonwealth Home Support Program will transition to the new program no earlier than 1 July 2027. This means CHSP and Support at Home are currently running as parallel systems — a critical point for anyone navigating the aged care landscape in 2025–26.

Meal Services Under CHSP

CHSP includes meal delivery services, assistance with grocery shopping, or help preparing nutritious meals at home. However, providers vary significantly in what they cover. As a rule, those who are on a Commonwealth Home Support Program are not generally covered for delivery of prepared ready-meals

from commercial providers — CHSP meal support is typically provided through local community organisations such as Meals on Wheels. Following a recent \$37 million funding boost for meal providers, more than 500 organisations funded under the CHSP Meals service type now receive additional support from the Australian Government.

How CHSP Costs Work

CHSP clients pay a contribution or fee (which varies between providers) towards the cost of their services. Clients are expected to contribute towards the cost of the services they receive, if they can afford to do so. Clients will not be asked to cover the full cost of services, and any fees must be agreed between the client and the service provider before services start as part of their service agreement.

There are more than 1,300 CHSP providers across Australia, including government, non-government and not-for-profit organisations.

Side-by-Side Comparison Table

| Feature | ****NDIS**** | ****Support at Home**** | ****CHSP**** | |---|---|---|---| | ****Primary purpose**** | Disability support | Complex aged care | Entry-level aged care | | ****Age eligibility**** | Under 65 at entry | 65+ (50+ for First Nations) | 65+ (50+ for First Nations) | | ****Means-tested?**** | No | Yes (income & assets) | Yes (client contributions) | | ****Meal funding type**** | Labour/delivery only (not food) | Meal prep & delivery (Everyday Living category) | Meal prep & local delivery (community-based) | | ****Ready-meal delivery covered?**** | Yes (NDIS-registered providers) | Yes (approved providers) | Generally no (community meals only) | | ****Access pathway**** | NDIA application | My Aged Care assessment | My Aged Care assessment (RAS) | | ****Dietitian report required for providers?**** | No | Yes (Aged Care Rules 2025) | No | | ****Annual funding cap**** | Individualised plan (no fixed cap) | Up to \$78,000/year (8 tiers) | Entry-level only | | ****Governing legislation**** | NDIS Act 2013 (amended 2024) | Aged Care Act 2024 | Aged Care Act 2024 |

The Critical Question: NDIS or Aged Care at Age 65?

This is the most consequential decision point in the entire landscape — and one where getting the answer wrong has lasting consequences.

The Age 65 Boundary

Two recent developments have brought the interface between Australia's aged care system and the National Disability Insurance Scheme (NDIS) into focus. Age 65 has been the age limit for entry to the NDIS since its establishment in 2014, and the NDIS Review that reported in October 2023 left this limit unchanged.

In contrast, no age of entry to aged care applied until the new Aged Care Act passed in November 2024: Clause 58 of the Act requires that, to be eligible for a needs assessment for any aged care services, an individual is aged 65 and over, or is an Aboriginal or Torres Strait Islander person aged at least 50, or is homeless or at risk of homelessness.

Can You Stay on the NDIS After Turning 65?

Yes — with important conditions. From the NDIS perspective, participants entering the scheme before age 65 can continue after reaching age 65 or elect to transfer to an aged care programme for either community or residential care.

There is no automatic transition out of the scheme for NDIS participants once you turn 65. You can remain in the NDIS over 65. You cannot use the NDIS and My Aged Care at the same time. Once you leave the NDIS for aged care, you cannot return.

That last point deserves emphasis: ****leaving the NDIS for aged care is permanent and irreversible.****

What Happens If You Move Into Residential Aged Care?

You can stay on the NDIS once you turn 65, as long as you became a participant before your 65th birthday. If you move into a residential aged care facility permanently after turning 65, you'll have to leave the NDIS. This is a legal requirement. If you start receiving permanent home care services after turning 65, you'll also have to leave the NDIS.

The Dual-Funding Grey Zone

When a participant receives Support at Home for daily living support and an NDIS plan for disability-specific supports, the question of which system funds which service is not always clear-cut. Personal care, transport, meal preparation, and social participation can all fall into grey areas.

As the reforms tighten definitions and categories, these grey areas will not disappear, but the consequences of getting them wrong will increase. Providers claiming a service against the wrong funding stream may face audit queries, payment clawbacks, or compliance action.

Practical Decision Framework: Which Program Applies to You?

Use this step-by-step framework to identify your correct pathway:

****Step 1: Determine your age and disability status**** - Are you under 65 with a permanent and significant disability? → ****Apply for NDIS**** - Are you 65 or over (or 50+ if Aboriginal or Torres Strait Islander)? → ****Apply via My Aged Care**** - Are you under 65 with no permanent disability but with age-related care needs? → You are unlikely to qualify for either; explore state-based programs or private options

****Step 2: If you are approaching 65 and currently on the NDIS**** - You may stay on the NDIS after turning 65, provided you joined before your 65th birthday - Weigh the key trade-off: NDIS is not means-tested and offers individualised funding; aged care is means-tested but may provide access to residential care and broader services - To make your NDIS aged care transition as smooth as possible, it is best to start thinking about it at least 1–2 years in advance, before your 65th birthday.

****Step 3: If you are 65+ and need aged care meal support**** - ****CHSP**** is your entry point if you need occasional help (one or two services per week) — typically community-based Meals on Wheels-style delivery - ****Support at Home**** is your pathway if you have more complex or ongoing care needs — this allows access to approved registered meal delivery providers under your quarterly budget - Both are accessed via My Aged Care (call 1800 200 422)

****Step 4: Understand the means-testing implications**** - Co-contributions for non-clinical services under Support at Home are means-tested based on income and assets. Clients with a Commonwealth Seniors Health Card (CSHC) will have lower contributions, and there's a \$130,000 lifetime cap on contributions.

A Note on State-Based Community Meal Programs

Beyond the three federal programs, most states and territories operate their own community meal programs, typically administered through local councils or community health services. These programs generally target older adults and people with disability who do not qualify for — or are waiting for — federal funding. Eligibility criteria, co-payment structures, and coverage vary significantly by state. They are not a substitute for NDIS or aged care funding but can serve as a valuable bridge during assessment wait times. (For more on managing gaps in regional and rural areas, see our guide on

NDIS Meal Delivery for Participants in Regional and Rural Australia: Coverage, Gaps, and Solutions.)

Key Takeaways

- **Age 65 is the defining boundary.** New applicants must be under 65 to join the NDIS; aged care programs (Support at Home and CHSP) require participants to be 65 or over (or 50+ for Aboriginal and Torres Strait Islander people). - **Existing NDIS participants can stay after 65, but the decision is irreversible.** Once you leave the NDIS for aged care, you cannot return — making the transition decision one of the most consequential in the disability and aged care system. - **The NDIS funds meal preparation and delivery labour, not food.** Aged care programs (Support at Home and CHSP) take a different approach: meals are treated as a holistic service, and the food/delivery cost is partially subsidised. - **CHSP and Support at Home are currently running in parallel.** The CHSP will not transition to Support at Home until no earlier than 1 July 2027 — meaning two separate aged care meal pathways exist simultaneously in 2025–26. - **Claiming from the wrong funding stream carries real consequences.** As post-2024 reforms tighten definitions, providers and participants who misattribute meal costs between the NDIS and aged care systems face audit risk, payment clawbacks, and compliance action.

Conclusion

Identifying the right government meal funding program is not a bureaucratic formality — it determines the type of support you receive, how much you pay, and what flexibility you have to choose providers and services. For most Australians, the answer is clear once age and disability status are known. But for the tens of thousands of people at the NDIS–aged care interface — particularly those approaching 65 or those with complex dual eligibility — the decision requires careful, early planning.

If you are on the NDIS, understanding how meal preparation and delivery is funded within your Core Supports budget is essential before making any transition decisions (see our guide on *What Is NDIS Meal Funding?*). If you are navigating aged care meal options for yourself or a loved one, our companion article *Government-Funded Meal Delivery for Seniors: CHSP, Support at Home, and Meals on Wheels Explained* provides a deeper dive into the aged care pathway. And if you are a support coordinator or plan manager working across both systems, the billing and invoicing distinctions explored in *How NDIS Meal Delivery Billing Works* are essential reading as post-2024 compliance expectations continue to tighten.

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