Benefits factsheet

Personal Independence Payment – April 2020

Personal Independence Payment (PIP) is the new disability benefit that will replace Disability Living Allowance (DLA) for adults of working age – that is for people aged 16 – Qualifying Pension Age. There are no plans to change arrangements for children under the age of 16. They will still claim Disability Living Allowance as normal. If you are getting PIP before you reach Qualifying Pension Age you will continue to receive it beyond retirement age, as long as the qualifying conditions continue to be met.

Timetable for change

People who receive DLA and had reached their 65th birthday before 9 April 2013 will stay on DLA as long as they continue to meet the qualifying conditions. They will not have to make a claim for PIP. For other people the timetable is as follows:

- It is no longer possible for working age people to make new claims for Disability Living Allowance. If a person of working age wants to make a new claim for a disability benefit they can only claim Personal Independence Payment.

- The Department for Work and Pensions (DWP) has said it intends to reassess all existing working age people receiving DLA and transfer them to PIP.

- People whose DLA awards are coming to an end, and some children who are about to reach the age of 16, will find that their DLA will not be renewed and they will be invited to claim Personal Independence Payment. In addition, if people report a change in their circumstances they may face being reassessed for PIP.

- From **October 2015** the Department for Work and Pensions (DWP) started reviewing the remaining DLA claims. This includes people who have ‘indefinite’ or ‘life’ awards. People will be invited to make a claim for PIP. If they are successful they will move onto PIP. If they are not successful their DLA will end.

- It is important to telephone and get the PIP form when the letter about changing over is received. If a form is not requested DLA will stop. If the form has been requested the DLA will end 4 weeks after a decision has been made about PIP.

Main features of Personal Independence Payment

- It does not depend on people having National Insurance contributions.
- It is not means tested.
- People have to be ‘habitually resident’ in the UK and have been here for two out of the last three years.
- PIP has a ‘daily living’ component for people who have personal care needs.
• It has a mobility component for people who have problems with getting around.
• A person must have had their problem for at least three months and it must be likely to last for at least another nine months.

How much is PIP?
• The daily living component has two rates – a standard rate at £59.70 per week and an enhanced rate at £89.15 per week.
• The mobility component has two rates – a standard rate at £23.60 per week and an enhanced rate at £62.25 per week.

How to claim PIP
Initial claims are usually made by telephone – 0800 917 2222. The person is then sent a questionnaire about their care and mobility needs. Most claimants will have an assessment carried out by a medical assessor employed by a company who are under contract to the DWP. Some of the assessments will be carried out at an office near to where the claimant lives while others may be carried out at the claimant’s home.

How PIP is assessed
There are 12 ‘activities’ that are used to decide whether somebody can qualify for PIP. The first 10 are for the daily living component and the remaining 2 are for the mobility component. Each activity has a number of ‘descriptors’ based on the difficulties the person has. Points are awarded according the difficulty the person has. These descriptors, and more details of the claim process, are shown in a separate factsheet.

To qualify for PIP a person must get the following number of points:

Daily living component
Standard rate – at least 8 points
Enhanced rate – at least 12 points

Mobility component
Standard rate – at least 8 points
Enhanced rate – at least 12 points

Challenging decisions
People are not able to appeal as soon as they receive a negative decision. Instead they have to ask the DWP to reconsider the decision – known as a ‘mandatory reconsideration’. This must be requested within a month of the date that the decision letter is sent. You can send in further information and evidence at this stage.

If this fails to change the decision in the claimant’s favour then they can appeal. Again, within one month of the decision being sent by the DWP. Appeals are made directly to the Tribunal service, rather than to the DWP. They can now be made online. The appeal must contain a copy of the Mandatory Reconsideration decision – two copies of this decision will be sent to the claimant. For online appeals, there will be questions about parts of the Mandatory Reconsideration Notice on the form, to ensure that this has been issued.

This factsheet is a general guide. It is not a full statement of the law.

Last updated July 2020