

Personal Independence Payment (PIP)

If you have a long term illness or disability – physical and/or mental – and you are aged between 16 and 64 years old then you may be entitled to Personal Independence Payment (PIP)

If you are between 16 and 64 and are not already getting DLA you can claim PIP.

The DWP are in the process of gradually reassessing working age DLA claimants for PIP.

They are doing this where claimants meet one of the following criteria:

- There is a reported change to your care or mobility needs
- You were aged 16 to 64 years old on 8 April 2013 and have a DLA fixed award due to expire
- You reach 16 years of age (unless you are a child and have been awarded DLA under the special rules for terminal illness)
- You choose to claim PIP instead of DLA

Note: Current DLA claimants do not need to take any action regarding PIP reassessment until they are told to do so by the DWP.

PIP can be paid regardless of your income, savings or National Insurance contribution record and is a tax free benefit. You can get PIP even if you are working or studying. If you are a carer who has care needs, you can claim PIP for yourself and this will not affect your Carer's Allowance.

Getting PIP does not reduce other benefits, it may even increase them. If you have a carer then claiming PIP may help them to qualify for certain benefits (such as [Carers Allowance](#)). PIP may also entitle you and/or your carer to further help with [Housing Benefit and/or Council Tax Reduction](#).

Who can claim PIP?

To qualify for PIP you must meet all the following criteria:

- be aged 16-64 years old (or if you are being reassessed you were under 65 on 8th April 2013 in England, Wales & Scotland or were under 65 on 20th June 2016 in Northern Ireland)
- satisfy the daily living and/or mobility activities test
- have satisfied the tests for at least three months and be likely to continue to satisfy the tests for at least nine months after the three month qualifying period (you can make your claim before the three months have passed, but you will not receive any payment until they have)
- have no immigration conditions attached to your stay in the UK subject to some exceptions (if you have immigration restrictions on your stay in the UK claiming benefits may affect your future right to remain in the UK, so seek specialist immigration advice before claiming.
- meet the residence and presence conditions

Note: You will not be able to make a new claim for PIP once you are 65 years old. If you are 65 or over and not getting DLA or PIP you can claim [Attendance Allowance](#). However you will be able to stay on PIP if you claimed or received it before you reached the age of 65.

How much is PIP worth?

There are two components of PIP:

- Daily Living Component
- Mobility Component

Each component can be paid at either:

- **Standard rate** – where your ability to carry out daily living/mobility activities is limited by your physical or mental condition.
- **Enhanced rate** – where your ability to carry out daily living/mobility activities is severely limited by your physical or mental condition.

To be awarded the standard rate of the daily living component you have to score at least eight points from the ten activities that assess daily living. To be awarded the enhanced rate of the daily living component you have to score at least 12 points from the ten activities that assess daily living.

To be awarded the standard rate of the mobility component you have to score at least eight points from the two activities that assess mobility. To be awarded the enhanced rate of the mobility component you have to score at least 12 points from the two activities that assess mobility.

For 2019/20 the weekly rates are:

	Standard	Enhanced
Daily Living Component	£61.20	£87.65
Mobility Component	£23.20	£61.20

How to claim PIP

Making an initial claim

The initial claim will generally be done by phone although paper claim forms are available in exceptional circumstances. To start a new claim for PIP you should telephone the Department for Work and Pensions (**DWP**) on **0800 917 2222**.

The phone call can be made by someone else but they will need to be with you.

The phone call sets the date of the claim.

This will be an administrative claim only and the information you will need is:

- Your full name and date of birth
- Your address and telephone number
- Your National Insurance number
- Your bank or building society account details
- Your GP or other health professional's details
- Details of any recent stays in hospitals, care home or hospices
- Details of any time you've spent out of the country
- Nationality or immigration status
- If you are terminally ill you will need to discuss your conditions during this initial claim

The DWP will then check basic eligibility conditions and if these are not met then a disallowance letter is sent. Otherwise an individually barcoded form is sent to you (PIP2 form).

How your disability affects you (PIP2 form)

The PIP2 form sent to you will ask for information about how your condition affects you. Additional evidence can be sent in with this form. On the form there is a section for 'additional information'. In this section, carers, friends or family could also provide information. It does not have to be filled in if you feel like you have included everything in the rest of the form.

You have one month to return the completed 'How your disability affects you' form. Failure to return the form without good cause can result in the claim being terminated. If you are unable to complete the form within the given timescales you should contact the DWP by phone to ask for a 2 week extension. If the form has not been received and the DWP have identified that you need additional support you may be invited to a face-to-face consultation.

Medical Assessment

The form and any additional information are then sent to a health professional. If there is enough information the assessment can be completed at this stage but most people will be asked to attend a face-to-face consultation. Claimants will be encouraged to take someone along with them to the consultation. Failure to attend the consultation without good cause can result in the claim being terminated.

The health professional then sends a report to the decision maker.

Completing the PIP2 form

- The PIP2 form is long and complex so take your time to complete the claim form, and remember that you don't have to complete it all in one go.
- Look at the 12 activities and work out which tests you satisfy before you fill in the form. It may be a good idea to get your carer to do the same to make sure that you don't miss anything out.
- What matters is whether you need the help, not whether you are already getting it.
- If you are not sure about how much help you need, or how long things take, keep a diary for a week or so. This would be particularly useful with fluctuating conditions.
- If you are applying for the 'moving around' activity (activity 12), do make a proper measurement of how far you can walk and how long it takes you to walk that far before you fill in the form.
- Evidence is important. It is a good idea to collect evidence and submit it either with the claim pack or as soon as you can afterwards. Evidence might include a report from an occupational therapist or consultant, information from your doctor or a support worker, or a statement from a carer/friend/ family member.
- Keep a copy of your form and any evidence you send.
- You could ask for help to complete the claim form from a local advice agency. To find out about advice agencies in your area, please contact our Welfare Rights Officers.

The decision

The decision maker will review the report from the health professional and any other evidence and make a decision. Shorter term awards of up to two years could be given, or longer term awards of five or ten years could be given. On-going awards will be given in the minority of cases where needs are stable and changes are unlikely. However, all claimants will have their award periodically reviewed, regardless of the length of the award, to ensure that everyone continues to receive the most appropriate level of support.

The DWP will send you a letter giving a decision on the PIP claim and a clear reasoned explanation of how that decision has been reached. If you have been awarded PIP, the letter will detail the amount of the award, the length of the award and the reasons for making that decision. Specific details of PIP payments including the date payments will start and their frequency will also be included in the letter.

If you have not been awarded PIP, the letter will give all the same information as the award letter and will include a full statement of reasons for the decision.

Challenging the decision

If you are refused PIP or it is awarded at a lower rate than you expected (including where the decision on PIP follows your transfer from DLA), you can ask the DWP to look at the decision again. You must do this before you appeal. This is called a mandatory reconsideration.

If you still disagree once they have done this you must lodge an appeal with the Tribunal Service and attach a copy of the mandatory reconsideration notice with the appeal.

It is important to challenge a decision or get advice as quickly as possible because there are time limits that generally mean you must take action within one month. If you fall outside of this time limit then it may still be possible to challenge the decision.

If you have a terminal illness

Special rules allow people who are terminally ill to get help quickly. You are considered to be terminally ill if you have a progressive illness that is likely to limit your life expectancy to six months or less. It is impossible to say exactly how long someone will live and some people who receive PIP under these rules live much longer than six months.

Under these special rules you do not have to satisfy the qualifying period (ie that you have had the disability or been in ill health for at least three months, and that you are likely to have the disability or been in ill health for a further nine months). You also do not have to have been present in Great Britain for 104 weeks out of the last 156 weeks before claiming – you only need to be present at the time of claiming.

If you are claiming PIP under these rules, your claim should include a DS1500 form which is available from your GP or consultant. You (or the person making the claim on your behalf) will be given a freepost address for the DS1500 when you make the claim over the phone.

You will not have to complete the 'How your disability affects you' form and will not need a face-to-face consultation. Instead, you or the person claiming on your behalf will be asked some extra questions whilst you are on the phone about your condition and how it affects your ability to get around.

You will automatically qualify for the enhanced rate of the daily living component, however payment of the mobility component will depend on whether you need help to get around, and if you do how much help you need.

The way to claim for terminally ill people is by telephone on **0800 917 2222**.

The phone call can be made by someone supporting you without you needing to be present. However, you should be told about the claim because the DWP may need to contact you to verify your details and the DWP will send notifications and any payment to you.