

‘at a glance guide to’ PERSONAL INDEPENDENCE PAYMENTS differences

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PERSONAL INDEPENDENCE PAYMENTS(new system)	DISABILITY LIVING ALLOWANCE(age 16-64) (old system)
<ul style="list-style-type: none"> For new claimants from April 2013(a phased start throughout the country). 	<ul style="list-style-type: none"> Existing claimants will continue on this benefit. All claimants will start to be migrated to the new system from October 2013(change of circumstances or where an award comes to an end) or from October 2015+.
<ul style="list-style-type: none"> Awards will generally be time limited with a more regular reassessment regime. 	<ul style="list-style-type: none"> Awards could be time limited or ‘indefinite’.
<ul style="list-style-type: none"> Assessment will normally always require a medical assessment(with ATOS/ CAPITA or a delivery partner). 	<ul style="list-style-type: none"> Assessment sometimes involves a medical(with ATOS) but relies more on self assessment and gathering other evidence from involved professionals.
<ul style="list-style-type: none"> Disability test- Complex disability test with many terms defined by regulation. Specific conditions will not qualify client. 	<ul style="list-style-type: none"> Complex disability tests with many terms defined by case law. Some conditions will qualify client.
<ul style="list-style-type: none"> Disability test-500,000 less to qualify for PIP. 	<ul style="list-style-type: none"> Around 2,000,000 qualify for DLA age 16- 64.
<ul style="list-style-type: none"> Disability test- when viewing descriptors assess whether client can perform then 'safely', 'to an acceptable standard', 'repeatedly' and in a 'reasonable time period'. 	<ul style="list-style-type: none"> Different disability tests have differing tests of these terms.
<ul style="list-style-type: none"> Aids and adaptations would generally help get 2 points as part of the descriptors. 	<ul style="list-style-type: none"> Aids and adaptations would generally diminish the need for care or mobility
<ul style="list-style-type: none"> Disability test-Daily living component only looks at day time difficulties. 	<ul style="list-style-type: none"> Care component looks at day and night difficulties.
<ul style="list-style-type: none"> Non disability test- qualifying period for benefit to be paid- need to qualify for 3 months before claim and expect to qualify for 9 months after. 	<ul style="list-style-type: none"> Qualifying period for benefit to be paid- need to qualify for 3 months before claim and expect to qualify for 6 months after.
<ul style="list-style-type: none"> Non disability test- Habitual residence test applies. Client need presence for 104 weeks out of the 156 weeks. 	<ul style="list-style-type: none"> Ordinarily resident and present tests. DLA/ AA/ CA rules now changed to align with PIP rules.
<ul style="list-style-type: none"> Non disability test-Temporary absence abroad- 13 weeks limit, or for medical treatment 26 weeks. 	<ul style="list-style-type: none"> Temporary absence abroad- 26 weeks allowed or longer for medical treatment. DLA/ AA/ CA rules now changed to align with PIP rules.

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<ul style="list-style-type: none"> • Motability scheme agreement stops when PIP stops after 28 days in hospital. • Non disability test- Blue Badge automatic eligibility to those people who score 8 points or more in the 'Moving Around' activity of PIP. 	<ul style="list-style-type: none"> • Rules changed to align with PIP rules. • Blue Badge automatic eligibility to those people who qualify for the high rate of the mobility component.

Similarities-

- Always paid on top of other benefits(except some war pensions/ armed forces compensation scheme equivalents).
- Does not matter if in work/ out of work or who you live with or whether you get care.
- Doesn't count as income for means tested benefits.
- Often increases means tested benefits as new premiums may be payable.
- Paid to the individual.
- Carers allowance may be claimed if the daily living or equivalent care component are awarded.
- Not taxable.
- National insurance contributions are unnecessary.
- On first claim, no backdating allowed.
- Mobility component unaffected by residential care stay.
- State Funded residential care/ Hospital treatment- all PIP/ DLA care or daily living stops whilst in hospital after 28 days. Linking rules- where two periods separated by less than 28 days can be linked.
- Terminal illness rules(and DS1500 report) and definition.
- All combinations of different components and rates possible.
- Appeal- need to go for internal DWP revision(mandatory reconsideration) before requesting an appeal.

Last update- October 2018 Disclaimer— This guide is meant as a memory aid and is not a detailed statement of changes in Social Security rules. Social Welfare Training has tried to ensure that the information in this guide is accurate. However, we will not accept liability for any loss, damage or inconvenience arising as a consequence of any use of information. Please ensure that you get advice from your local advice agency/ other source of Social Security Legal Advice.