Withdrawn

This publication was withdrawn on 23 November 2018.

This publication is no longer current. Read the current guidance about <u>Personal Independence Payment (PIP)</u>.

Personal Independence Payment (PIP) myth buster

	Myth	Fact
Reassessment	"If I decide not to claim PIP or I am not awarded, my DLA payments will stop immediately."	 You will have 28 days to make a claim to PIP when you are invited to claim. If you fail to do this, your DLA may be suspended after four weeks and after a further four weeks it may be terminated. If you do not comply with the PIP new claims process you may not be awarded PIP and your existing DLA award will be terminated. In these circumstances your DLA will continue to be paid for a further 13 days following your next payday. If PIP is not awarded your DLA will stop being paid 28 days after the next payday following the decision on the PIP claim. This extra 28 days of payment is to allow you more time to adjust to any change in entitlement brought about by the new PIP decision.
Reassessment	"Any existing DLA claimant can volunteer to claim PIP."	 Existing DLA claimants who want to voluntarily claim PIP will be able to do so only if they live in a reassessment area. Reassessment activity is already happening across all of Great Britain and will be completed from 27July 2015 for people living in the following areas: Hebrides, Kirkwall, Lerwick, London North West, St Albans, Kingston, Uxbridge, Sutton, Tonbridge, Twickenham, Harrow, Watford, London North, London West, Enfield, Slough, Canterbury and Maidstone – postcodes HS, KW, ZE, NW, AL, KT, UB, SM, TN, TW, HA, WD, N, W, EN, SL, CT and (ME)
General	"Personal Independence Payment will not be paid to people who are	No, that's not correct. Personal Independence Payment can be paid to people who are in or out of work.

	Myth	Fact
	working."	
General	"Going into work will affect the amount of Personal Independence Payment or stop it all together."	 No, this is not true. Personal Independence Payment is not affected by income gained from employment. Personal Independence Payment is non taxable and can be paid in or out of work. The 'Access to Work' programme can also offer financial support to help people move into, or stay in work.
General	"Mobility component is going to be removed."	 No. Personal Independence Payment will continue to have a Mobility component, paid at either a standard or enhanced rate The assessment criteria will assess a person's ability to plan and follow a journey as well as their ability to move around physically.
General	"Personal Independence Payment will not have the same components as DLA."	 Personal Independence Payment will have a Daily Living component and a Mobility component. Awards will be made up of one or both of these components. Each component will have two rates – standard and enhanced.
General	"People over 65 who receive DLA will have to claim Personal Independence Payment"	No. If you are aged 65 or over on 8 April 2013 (the day that Personal Independence Payment was introduced) you will not be able to claim Personal Independence Payment and will continue to receive DLA for as long as you meet the entitlement conditions.
General	"People in receipt of Attendance Allowance will be affected by the introduction of Personal Independence	No. If you get Attendance Allowance you will not be affected by the introduction of Personal Independence Payment.

	Myth	Fact
	Payment."	
General	"Parents of children under 16 will need to make a claim to Personal Independence Payment."	No. There are no plans to replace DLA for those under the age of 16.
General	"Injured soldiers can claim Armed Forces Independence Payment and Personal Independence Payment."	No. Claimants who choose to claim Armed Forces Independence Payment will not also be eligible for Personal Independence Payment, Disability Living Allowance or Attendance Allowance. Claimants who choose not to apply for Armed Forces Independence Payment will be treated as a Disability Living Allowance, Personal Independence Payment or Attendance Allowance applicant in the usual way.
General	"If I move to Personal Independence Payment my carer will have to re-apply for Carer's Allowance."	 If you have a carer, then being entitled to either rate of the Daily Living component of Personal Independence Payment can help them to qualify for Carer's Allowance. If your carer already receives Carers' Allowance they will continue to receive the benefit for as long as you continue to receive a qualifying benefit and they satisfy the conditions.
General	"The Motability scheme is going to be scrapped."	No. The Motability Scheme will work with Personal Independence Payment in the same way as it does with DLA. Motability will continue to lease cars, powered wheelchairs and scooters to claimants who receive the enhanced rate of the mobility component of Personal Independence Payment.
General	"These changes are driven purely to save money."	No. DLA has been in place for over 20 years, largely unchanged and no longer properly takes into account the

	Myth	Fact
		 needs of disabled people today. DLA also does not have some of the checks that are a key part of other state benefits and it needs to be brought up to date. Most DLA claimants will continue to receive support under Personal Independence Payment.
Making a claim	"The entitlement criteria for Personal Independence Payment are the same as it is for DLA."	 No. Personal Independence Payment has different entitlement criteria to those for DLA to better reflect today's understanding of disability. We look at a person's individual circumstances and entitlement will depend on how their ability to carry out daily living or mobility activities (or both) is affected by their condition or disability. Entitlement will not depend on what health condition or disability they have.
Making a Claim	"Everyone who received DLA will automatically be entitled to Personal Independence Payment."	 There is no automatic transfer from DLA to Personal Independence Payment. If you are already getting DLA and are aged 16 to 64 on 8 April 2013 you will need to make a claim for Personal Independence Payment when invited to do so.
Making a Claim	"Everyone currently getting lowest rate DLA care component will lose out."	 No. Personal Independence Payment will have different entitlement criteria to those for DLA. Entitlement will depend on the person's circumstances and the impact of their health condition or disability on their everyday lives. Some people will receive more support, some people broadly the same, others less and some will

	Myth	Fact
		 leave the benefit altogether. Those who will not get Personal Independence Payment are most likely to be people with conditions that have a low impact on their day to day lives and who have a high level of participation in society without needing expensive aids and appliances or a lot of help from others. They will come from across the full range of disabilities.
Making a Claim	"Personal Independence Payment is only for people with physical disabilities."	 No. In the past DLA focused too much on physical disability. The assessment criteria for Personal Independence Payment reflect a more complete consideration of the impact of individuals' health conditions or impairments whether physical, sensory, mental or cognitive.
Making a Claim	"Everyone receiving DLA will have to make a claim to Personal Independence Payment on 8 April 2013."	 No. Personal Independence Payment has been fully introduced from 10 June 2013 for new claims only. People in receipt of DLA will be invited to claim PIP if either there's a change in how their condition affects them or their DLA is due to end. This is already happening across all areas of Great Britain apart from Hebrides, Kirkwall, Lerwick, London North West, St Albans, Kingston, Uxbridge, Sutton, Tonbridge, Twickenham, Harrow, Watford, London North, London West, Enfield, Slough, Canterbury and Maidstone – postcodes HS, KW, ZE, NW, AL, KT, UB, SM, TN, TW, HA, WD, N, W, EN, SL, CT and (ME). People living in these areas will be invited to claim

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		 PIP from 27 July 2015. From 13 July 2015 some people with a long or indefinite award of DLA will be invited to claim PIP if they live in the following areas: Blackburn (BB), Bolton (BL), Manchester (M), Oldham (OL), Preston (PR), Warrington (WA), Wigan (WN), Derby (DE), Leicester (LE) and Stoke on Trent (ST). Claimants will be selected at random and in small numbers, not every claimant with an indefinite or long award who lives in these postcodes will be contacted. Claimants who are not contacted during this period will continue to receive their DLA as normal, until they are contacted at some point between July 2015 and September 2017.
Making a Claim	"I have been told that my claim to Personal Independence Payment will not be considered for three months."	 No. If you want to claim Personal Independence Payment for the first time there is a three month qualifying period (this is the period during which you have had a health condition or disability) and the needs arising from your condition or disability must be expected to last for a further nine months as well (we call this the "prospective test") to qualify for the new benefit. You will not necessarily have to wait three months, as the qualifying period starts from when your eligible needs arise and not from when you make a claim. If you already receive DLA and apply for Personal Independence Payment you will not have to meet the three month qualifying period but will have to meet the prospective test (that the

	Myth	Fact
		need is expected to last for a further nine months).
Making a Claim	"Terminally ill people will have to go through a face-to-face consultation."	Individuals with a terminal illness and who are not expected to live for six months will be fast tracked on to a guaranteed payment of the enhanced rate of the Daily Living component of Personal Independence Payment. They will also be able to apply for the Mobility component without having to wait for a payment.
		To make a claim to PIP claimants phone 0800 917 2222 – a dedicated special rules for terminal illness team will take those calls and complete the claim.
		We expect that most people who are terminally ill would not have a face-to-face consultation. In all circumstances we would look at what is in the best interest of the claimant and would consider the evidence they provide with their application and that from their hospital consultant or GP.
Making a Claim	"I have been told that there will be a break in my benefit payments if I move from DLA to Personal Independence Payment."	If you are awarded Personal Independence Payment we will ensure there are no gaps between benefit payments so long as you send us the information we need when we ask for it.
Making a Claim	"I have heard that Personal Independence Payment introduction will be a big bang."	 No. We have taken a controlled approach to the introduction of PIP, continuously testing and reviewing the processes to ensure they are right. We started by taking new claims to Personal Independence Payment from 8 April 2013 and extended this nationally from 10 June 2013.

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		 From 28 October 2013, some people currently getting DLA living in reassessment postcodes (see p2) are being invited to claim Personal Independence Payment. For example, where we receive a report of a change in their condition, those who reach the end of a fixed term award, or those who turn 16. From 13 July 2015 we will start to invite some DLA claimants with an indefinite or long award to claim PIP. However we will continue to undertake this activity on a small scale, in small numbers and in selected areas where our assessment providers have confirmed they have sufficient local capacity to handle the increased volumes. We expect to have contacted all DLA claimants between July 2015 and September 2017 to explain how their DLA will be affected.
Telling Your Story	"I have been told that you cannot send in any additional information with the 'How your disability affects you' form"	 The 'How your disability affects you' form gives you the opportunity to tell us how your disability affects your daily life, both on good and bad days and over a range of activities. You should return the form with supporting evidence already held. Examples of evidence that is important for you to provide include prescription lists, care plans, GP or outpatient clinic letters, medical test results like, scans, diagnostic tests, audiology, x-rays, your hospital discharge letters, your statement of special educational needs, your certificate of visual impairment, reports or information from professionals such as a GP, hospital

	Myth	Fact
		doctor, specialist nurse, occupational therapist, physiotherapist, social worker, support worker or counsellor. The supporting evidence you send should be relevant to your condition and not be more than 2 years old. • We don't need to see:
		 appointment cards or letters or information from the internet about your condition. general information or fact sheets
		about your condition(s) that are not about you personally information about tests you are going to have photographs letters about your medication letters from family, friends, neighbours, Welfare Rights
		 You should only send in photocopies of things you already have available. You shouldn't request other documents that might slow down your claim or for which you might be charged a fee, for example from your GP. If we need this we will ask for it ourselves. You have one month to return the form, but can phone DWP within that time to request an extension.
		You may find it helpful to keep a diary – write down a list of things you've needed help with or found difficult over a number of days. If the impact of your health condition or disability varies over time, you may want to keep a record of this. You can send in the diary with your form if you want to.
Assessment	"Disabled people will	No. We are encouraging individuals

	Myth	Fact
	have to attend face-to- face consultations by themselves."	attending face-to-face consultations to take a family member, carer or someone else with them for support.
Assessment	"There will be no home visits for people who are housebound."	Home visits will be available where necessary.
Assessment	Assessors and Decision Makers will not understand the range of barriers disabled people face."	Assessors and DWP Decision Makers have been given all the necessary specialist training and guidance to carry out their roles and will be able to draw on specialised support where needed.
Assessment	"I will be expected to attend the face-to-face consultation regardless of how long it takes me to get there."	DWP have asked assessor providers to make sure claimants travel no more than 90 minutes by public transport to their assessments (absolute maximum for single journey – majority expected to be far less.)
Assessment	"Individuals with fluctuating conditions will lose out."	 No. We will take into account that people's conditions fluctuate and their level of ability may be changeable. The assessment will not be a
		'snapshot' of any one day.
		We will consider an individual's ability to carry out activities over a one year period.
		We will consider the impact of an impairment where it applies on over 50 per cent of the days in this period.
Assessment	"When I attend the face-to-face assessment I will have to pay my own travel expenses."	No. The assessment provider will pay back your travelling or other expenses and those of a person accompanying you when you attend a face-to-face consultation.
Assessment	"If you cannot attend the consultation appointment you will not be given another	If you are unable to attend the appointment you must tell the assessment provider as soon as possible. The assessment provider

	Myth	Fact
	date."	may be able to offer you a further date for a consultation.
Assessment	"All assessments will be conducted annually and review checks could be as frequently as weekly or monthly."	 No. Following the assessment we will decide on the length of the benefit award. This will be based on individual circumstances and the likelihood of changes occurring. Some people will get shorter awards, others will get longer ones and some will get indefinite awards (which will be subject to review). To ensure that people continue to receive the right level of benefit we may reassess a claimants needs within an award period to ensure that it is still correct. This will also be based on individual circumstances and the likelihood of changes occurring.
Assessment	"The Employment and Support Allowance (ESA) Work Capability Assessment and Personal Independence Payment assessments are the same."	 No. The assessments are separate and look at very different things. The Personal Independence Payment assessment will focus on an individual's ability to carry out key activities and participate in society, rather than their capability to work. We have, however, learned from the experience of the ESA Work Capability Assessment and the reviews by Professor Harrington in developing the assessment for Personal Independence Payment.
Assessment	"I've been told no one can get the enhanced rate mobility component if they can walk more than 20 metres."	 Individuals who cannot walk more than 50 metres will be entitled to some rate of the Mobility component – either standard or enhanced. Individuals who cannot walk 20 metres will receive 12 points, and therefore the enhanced rate Mobility component, regardless of whether

	Myth	Fact
		 they need an aid or appliance. Individuals who can walk distances longer than 20 metres could still receive enhanced rate Mobility, if they are not able to do so safely, to an acceptable standard, repeatedly and in a reasonable time period. In addition, if someone can walk more than 20 metres they could still score enough points to receive the enhanced rate Mobility component, if they have scored points in the other mobility activity which looks at their ability to plan and follow journeys.
Assessment	"Awards will be decided by the trained health professional and no other evidence considered."	 No. The DWP Decision Maker will make the decision as is the case with DLA. We want them to use the widest range of evidence to ensure awards are made correctly. We will be asking disabled people to tell us who would be best placed to provide this evidence. That might include information given by the individual, or a relevant professional who supports the individual on a regular basis. Information gathered during the face-to-face consultation will form part of the evidence considered. We want to ensure that individuals are given the opportunity to tell us how their condition affects them. They may find it helpful to keep a diary-write down a list of things they've needed help with or found difficult over a number of days. If the impact of their health condition or disability varies over time, they may want to keep a record of this. They

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		can send in the diary with their form if they want to.
Decision	"If you disagree with the decision you cannot present any further evidence."	No. You can discuss the reasons for the decision with the DWP Decision Maker and identify whether you have any further information that hasn't been considered.
		If you disagree with the decision you can ask the DWP Decision Maker to look at it again, this is known as a reconsideration.

Where can I find more information about Personal Independence Payment? We have published various documents, including the responses to consultations, to keep people informed of our plans. These can be found at www.gov.uk/dwp