

DISABILITY SUPPORT PENSION

Last updated February 2020

This factsheet provides information on the Disability Support Pension (DSP), a payment provided by Centrelink to people who have a condition that stops them from working or are permanently blind.

This factsheet covers:

- How do I know if I'm eligible for DSP?
- What evidence do I need to apply for DSP?
- What can I do if my application for DSP is rejected?
- What can I do if my condition gets worse after I lodge my claim or appeal?

How do I know if I'm eligible for DSP?

There are a number of requirements you must meet in order to be eligible for DSP. These include medical requirements, residence requirements and an income and assets test. This factsheet only covers the medical requirements for DSP.

Centrelink will consider:

- If your condition has been fully diagnosed, treated and stabilised
- If you can be awarded 20 points or more under one or more of the impairment tables
- If you have a continuing inability to work

Fully diagnosed, treated and stabilised



A condition is considered **fully diagnosed** by reference to whether there is medical evidence of the condition and whether further medical testing is required. Some conditions require specific specialists to confirm the condition. You should confirm with Centrelink whether this is required for your condition before lodging an application.

A condition is considered **fully treated** by reference to what treatment or rehabilitation had occurred in relation to the condition, and whether treatment is continuing or is planned in the next 2 years.

A condition is considered **fully stabilised** if:

- The person has undertaken reasonable treatment for the condition and any further reasonable treatment is unlikely to result in the person being able to work in the next 2 years
- The person had not undertaken reasonable treatment for the condition, any reasonable treatment is unlikely to result in the person being able to work in the next 2 years, and there is a medical or other compelling reason for the person not to undertake reasonable treatment

20 or more points under one or more of the Impairment Tables



Centrelink uses Impairment Tables to assess how your disability impacts on your functioning and everyday life. You will not receive any points on the Impairment Tables if you don't meet the Diagnosed, Treated and Fully Stabilised criteria referred to above.

There are 15 tables that cover different forms of functioning. The tables can be found [here](#).

You will need a doctor or a specialist to complete a form which asks questions about how your condition affect your everyday life and your ability to work. Centrelink uses this information to assess your functioning against the Impairment Tables. Check the individual tables to see what type of medical professional you need to complete the form for you.

You must be assessed as having 20 points on at least one Impairment Table to qualify for DSP.

If you are assessed as having 20 points spread over multiple tables, you may have to participate in a Program of Support in order to qualify for DSP.

A Program of Support is a program that helps you prepare for, find or maintain work with the assistance of an Employment Services Provider or a Disability Employment Services Provider.

You need to have actively participated in a Program of Support for a total of 18 months in the 3 years before you claim DSP. Your Provider may be able to discontinue your Program of Support if the program would not improve your capacity to prepare for or find work.

A continuing inability to work



To be eligible for DSP you must be assessed as only being able to work for less than 15 hours per week within the next 2 years.

This assessment will be based on an interview with you or the person applying on your behalf and the medical evidence you have provided.

What evidence do I need to apply for DSP?



Before applying for DSP, it is very important that you gather evidence about all your medical problems and their impact on you. The DSP Medical Evidence Form to be completed by your doctor can be found [here](#). This form is used to assist doctors and specialists but still needs to be supported by other medical evidence.

Evidence can include:

- Specialist reports
- Operation reports
- Scans or rehabilitation reports
- A letter from your current treating health professional explaining your health problems. You can find an example of a letter asking your doctor for evidence at the end of this factsheet.

What can I do if my application for DSP is rejected?



If your application for DSP is rejected, you have the right to appeal this decision.

You should lodge an appeal within 13 weeks of the decision notification.

See our factsheet on Appealing to Centrelink for more information on this process.

It is a good idea to speak to Centrelink to determine why your claim was rejected. You may need to gather additional evidence and lodge a new claim.

If you do not understand the reasons for your application being rejected it may be helpful to speak to a member centre to obtain legal advice. See the link below for the contact details of a member centre closest to you.

What can I do if my condition gets worse after I lodged my claim or appeal?



If your circumstances change after you lodge a claim, you should lodge a new claim for DSP. Changed circumstances include your condition deteriorating, you seeing further specialists, or completing a Program of Support.

This new claim does not prevent you from proceeding with your appeal if you have lodged one.

If your circumstances change after you lodge an appeal, the reviewer will only assess your qualification for DSP from the time you lodged the application. This means that it may be worth lodging a new claim for the DSP rather than appealing the original decision.

Where can I get help?



You can get free legal advice from your closest member centre which can be found at <http://ejaustralia.org.au/legal-help-centrelink/>

This factsheet was informed by previously published factsheets from Social Security Rights Victoria and Basic Rights Queensland. Social Security Rights Victoria also have a DSP Toolkit that can be found [here](#). This document has some helpful letters that can be used to assist you talking to your doctor.

This factsheet does not constitute legal advice.

Please contact any of our member centres if you wish to obtain free legal advice.
Find your closest member centre at www.ejaustralia.org.au

Example Letter to a Doctor

Dear Doctor

I am collecting evidence relevant to whether I am eligible for the disability support pension. Your report may be given to Centrelink or to the Administrative Appeals Tribunal.

I need information about my medical conditions and their functional impact at around the date I claimed the disability support pension. Your answers to the questions below should state specifically that they are about my conditions and their impact at the relevant time.

If there is more than one condition, please answer the questions separately for each condition.

Please answer the following:

1. Describe the diagnosis and date of onset of the condition.
2. Describe the symptoms of the condition (including their frequency and severity) and their functional impact, focussing on day to day activities and work capacity.
3. The functional impact of the condition is assessed by reference to the Impairment Tables, accessible at <https://www.legislation.gov.au/Details/F2011L02716>. Please indicate the Impairment Table(s) applicable and your opinion about the appropriate impairment rating. Please explain your opinion about the appropriate impairment rating by reference to the criteria in the applicable table.
4. Is the condition expected to persist for more than two years from the date of the disability support pension claim?
5. Is the functional impairment resulting from the condition expected to persist for more than two years from the date of the disability support pension claim?
6. Describe the treatment history of the condition, including dates and period of treatment.
7. Is there any planned treatment for your patient's condition? If so, do you expect the planned treatment to result in change in the functional impact of the condition and to what extent?