



Applying for the Disability Support Pension (DSP)

A disability advocacy service (like DRAS) cannot help you apply for the Disability Support Pension, but can help you appeal if your application is refused by Centrelink.

To be eligible for a DSP you will be required to show:

- Proof that your medical condition/s is *Fully Diagnosed, Treated and Stable* – FDTs:
 - has been fully diagnosed (not still being investigated);
 - has been fully treated and that there is no further medical intervention planned (eg, no surgeries that could improve the condition); and
 - is stabilised to the degree that the condition will not either improve or change in the near future.
- Involvement with either a Workcover employment support service **or**
- Involvement with a Disability Employment Service (DES) program for a period of 18 months in the last 3 years. This is called a program of support (POS). A client can also show that due to their FDTs conditions they are not able to actively job search. *To use this to apply for the DSP you will need a report from your employment service.*

From 16 years old: Applicants may be eligible for a DSP if they can provide evidence that they

- Can show a past involvement in a special education program, or
- Can provide an assessment for an intellectual disability with a level below 70 points, or
- That they are legally blind.

This evidence might include reports from specialists such as educational psychologists, neurologists, school reports, general practitioners and/or ophthalmologists.

Other applicants will need to supply medical evidence to establish that their condition is FDTs.

This evidence should document the condition for the past three (3) years.

These conditions are then assessed using a 'Table of Impairment' and assigned a point value between 0 and 30. Conditions that are severe and that get a score of 20 or more - *in one category* - will make the application eligible for a DSP. Scores of lower than 20 points will need to be added up, if multiple conditions are being claimed, to equal 20 or more points. You can find the Table of Impairment on the website of the Department of Social Services.

If the client makes up their impairment points from more than one table they will also have to show they have been actively involved with a POS from a recognised employment support provider for a period of more than 18 months in a 3 year period to be approved for a DSP.

Review or appeal of DSP decisions

When an advocate is assisting you with your DSP appeal you, as the client, need to be considerate of the following

1. The medical evidence required from you not only needs to confirm the condition is FDTS, but also should explain the *functional impact* of your condition to Centrelink. In other words, the effect this condition has on your ability to work or actively job search.
2. Evidence should not be dated more than three (3) years prior to the application date. Conditions before this period can be included if they are still present and no treatment or changes occurred within three years prior to the DSP application date.

Examples:

Condition	When Diagnosed	Status
Intellectual Disability	At school	No change in past 3 years
Spinal cord injury	10 years ago	No change in past 3 years
Multiple Sclerosis	2 years ago	Treatment stabilised condition

3. You need to be aware that your DSP application or internal review of the DSP will take some time to process and this process is *not under the control of your advocate*. About twelve (12) weeks for a DSP application and a further 12 weeks for a review is a common timeframe. We recommend that you contact Centrelink or log on to your MyGov portal to check on the progress of your application roughly every four (4) weeks before requesting a review meeting with an advocate.
4. Unless an advocate feels they need to, they will not make enquiries about applications or appeals on behalf of clients.
5. Clients who do not actively stay in touch with their advocate about their case may have their case closed by their advocate after a period of ninety (90) days of inactivity. This is a DRAS policy.
6. Written consent forms that you sign with DRAS do not allow your advocate access to Centrelink for enquiries on your behalf. Some private medical clinics will ask the client to sign their formal consent form. Your advocate will need to see these signed forms before they contact medical professionals.
7. Before your advocate starts an action plan with you, they will assess the strength of your claim to the best of their ability, in line with the DRAS's policies. In other words, they will advise you of the likely success of your claim.
8. If your review of the decision made by Centrelink is refused, then you can tell your advocate that you would like to further review the application with the Administrative Appeals Tribunal (AAT). They will support you through this process.

Useful links:

Disability Support Pension:

<https://www.humanservices.gov.au/individuals/services/centrelink/disability-support-pension>

How your claim is assessed:

<https://www.humanservices.gov.au/individuals/services/centrelink/disability-support-pension/how-we-assess-your-claim>

Impairment Tables:

<https://www.dss.gov.au/our-responsibilities/disability-and-carers/benefits-payments/disability-support-pension-dsp-better-and-fairer-assessments/review-of-the-tables-for-the-assessment-of-work-related-impairment-for-disability-support-pension/social-security-tables-for-the>

How Impairment Tables are used:

<https://www.humanservices.gov.au/individuals/services/centrelink/disability-support-pension/how-we-assess-your-claim/impairment-rating>

*Disclaimer – the information given here is of a general nature only and you should seek clarification of any statements made
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