



**D.S.P.A.A.**

**Disability Support Pension Advocacy Australia**

Knowledge is Power and Persistence Pays Off

## **FAQ and MYTHS ©**

- **What are the “Tables” and what are they used for?**

The Tables are the legislative (law) tool used by CL to assess whether a person is severely impaired enough to qualify for DSP. After a person has been assessed as formally diagnosed, fully treated and not likely to significantly improve within 2 years, then they will compare the medical evidence provided to the appropriate tables. A severe 20 point impairment rating in at least one of the tables is required for eligibility unless a person has completed a Program of Support (POS) in the 3 years prior to lodging their claim. A continuing inability to work in an unsupported environment is also required to qualify.

- **What is POS? (Program of Support)**

Program of Support is a requirement of DSP eligibility in the particular situation where a person is assessed as having an impairment rating of 20 points over multiple tables as opposed to a single table. It specifies active participation in job search or other suitable activities (see link), for 18 months or completion of program, within the 3 years prior to lodgement of claim. There is a specific exemption to this but is very difficult to actualise.

- **My doctor won't listen or write what I need.**

This is one of the greatest barriers to success. Sadly most of the medical profession are not familiar with the stringent criteria and level of detail required for successful assessments. Possible options include sourcing new medical professionals that will support you if that's possible, or sending them our resources explaining that your advocate has explained that this is what is required etc. The latter may give more credibility to your request.

- **Does my condition qualify?**

Any condition is accepted for DSP as long as it meets the following criteria: it is formally diagnosed, fully treated, not likely to improve within 2 years, and has a severe impact on your ability to function as assessed in the tables.

- **What if I am waiting for surgery?**

You might still be able to qualify if you are waiting for surgery when the wait time is expected to be longer than 2 years minimum or if it is documented that the surgery is not likely to provide significant improvement or in spite of improvements you will still be expected to be severely impaired in line with a severe rating in the tables.

- **Do I need to be “stabilised” for 2 years before I can claim?**

This is a widely shared **MYTH!!!** You are required to be stabilised according to the CL definition but there is NO time frame attached to this requirement. The 2 year rule is that no significant improvement is expected within 2 years. This forms a part of the Stabilised definition, requiring also that you are fully treated.

- **Am I exempt from job search obligations when I have a claim or appeal pending?**

Technically you are exempt from obligation when you have a claim pending BUT you may need to call Services Australia to have them manually activate this in their system.

If you have been rejected and have an appeal in place you may need a medical certificate for exemption.

Please be aware of “Program of Support” requirements when considering exemptions, as this could make a difference to the success of a claim.

- **How long will my claim/appeal take?**

Time frames vary considerably. Manifest claims are generally fast tracked and can be finalised within a matter of weeks.

Standard claims can take on average up to approximately 6 months to be finalised. You should consider applying for Jobseeker in the interim.

Appeals can potentially take up to a year sometimes.