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Australian Government
Services Australia

Claiming Disability Support Pension (DSP) 008-03010010

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Background

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This document outlines how customers can claim DSP. It explains what to do upon receipt of claim documents.

DSP cancelled or suspended return to work

DSP should be restored without a new claim where:

- DSP was suspended, or cancelled (deemed suspended), due to a [valid return to work](#) reason, and
- the customer wants DSP restored within 2 years of the suspension or cancellation because they:
 - ceased work, or
 - have reduced their hours of work below 30 hours per week, and
 - their earnings no longer preclude payment of DSP

[DSP can be restored](#) after confirming all personal, payment and income and asset details are correct. A DSP new claim or new medical evidence is not required.

Initial contact

If a person wants to claim DSP:

- explain the [benefits of claiming online](#)
- offer an online claim first as the best way to claim
- if they do not want to claim online, offer an Assisted Customer Claim (ACC)
- if an online claim or ACC is not suitable, issue a DSP paper claim through the [First Contact Service Offer \(FCSO\) workflow](#)

If they indicate they have a terminal illness or a life expectancy of less than 2 years then customers may complete a Claim for Disability Support Pension for a Terminal Illness (SA494) and/or Verification of terminal illness (SA495) form.

In all cases, staff **must** tell the customer or nominee the claim:

- must be complete
- should be submitted as soon as possible
- will not be assessed until all required information is provided. This includes:
 - questions are answered in the claim and relevant modules
 - [Identity Confirmation](#) is complete
 - medical evidence
- will be assessed more quickly if all required information is provided
- may be rejected without prior notice if required information is not provided

Use the DSP Medical Evidence Checklist (SA473) to help explain [what medical evidence is needed for DSP](#).

Claims are assessed from the date a complete claim is submitted **with** all required documents. [Exceptions can apply for vulnerable customers](#).

Terminally ill customers

To make sure these claims are actioned as a priority, customers can lodge:

- Claim for Disability Support Pension for a Terminal Illness (SA494), and/or
- Verification of terminal illness (SA495) form

The [Resources](#) page contains links to these forms.

See [Prioritising Disability Support Pension \(DSP\) claims for terminally ill customers](#).

Early identification of likely manifestly eligible DSP claims is **essential**. These claims are sensitive and of a time critical nature.

There are [2 lists of conditions](#) that may indicate a customer is manifestly eligible.

Details given by customers, their nominees or doctors might indicate terminal illness, or a significantly reduced life expectancy.

Where a person is being treated for cancer or other serious illnesses, the doctor may provide limited details about the prognosis. Recognising this can help the [Medical Assessment Team](#) to contact the doctor and discuss the details.

Identity Confirmation

Customers with a confirmed identity status provide a higher level of confidence in the claimed identity and reduces:

- identity fraud, and
- security and privacy risks for the customer, and Services Australia (the agency)

Customers can get [Identity Confirmation](#):

- **s47E(d)**
-

Some customers may require support to confirm their identity. Customers unable to confirm their identity must complete an [Alternative Identity](#) assessment in person. They may complete by phone if there is a valid reason a customer is unable to attend in person.

A nominee can provide the customer's identity documents on behalf of the customer, either:

- in person
- online, or
- by phone

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JobSeeker Payment (JSP) or Youth Allowance (YA) provisional payment

Customers claiming DSP can also claim [JSP/YA \(provisional\)](#). Customers paid JSP/YA (Provisional) are exempt from their mutual obligations while their DSP claim is being assessed. Exemptions can affect [program of support](#) requirements.

If the customer is not getting a payment, ask if they want to claim another payment while waiting for their DSP claim to be assessed.

JSP claim can be claimed within the DSP online claim and DSP Assisted Customer Claim, without the need for a separate claim. Otherwise, a separate JSP or YA claim is needed.

Service Officers can run ACC if the customer wants to claim another payment.

Customers with nominees

Correspondence nominees can use their online account to claim DSP on behalf of their principal.

If the nominee does not want to claim online, offer an ACC or issue a paper claim.

Organisation nominees that have transitioned to Business Hub can use Nominee Services in Business Hub to claim DSP online on behalf of their principal.

Inviting a claim for DSP

Customers can be invited to claim DSP where:

- it is a more suitable payment for their circumstances, and
- evidence shows they likely meet both [non-medical and medical rules for DSP](#)

Customers invited to claim DSP:

- may need to provide medical evidence. This depends on:
 - their circumstances, and
 - any available advice from agency health and allied health professional assessors
- will likely need to attend Job Capacity Assessment (JCA)
- may need to attend a Disability Medical Assessment (DMA)

Examples of where customers may be invited to claim DSP include:

- where an Employment Services Assessment (ESAt) is upgraded to a JCA recommending eligibility for DSP under the Impairment Tables
- where recommended by an agency health and allied health professional assessor, or the Health Professional Advisory Unit
- where the medical evidence indicates possible manifest eligibility due to a List 1 or List 2 condition
- a medical certificate indicates a possible terminal illness with a significantly reduced life expectancy
- an income support payment recipient lodges a medical certificate and other medical evidence which indicates they likely meet the medical rules

Do not invite a claim for DSP just because a medical certificate states the customer has a permanent condition with a functional impact duration of 24 months or more.

Customers can seek to claim DSP at any time where their circumstance have changed and they believe they are likely eligible.

Transfers to DSP without a claim in exceptional cases

Most customers must lodge a claim to access DSP. This is required by social security law. The claim process ensures the assessment considers relevant information about the customer's circumstances.

Vulnerable people already getting a payment may be transferred to DSP without a claim in specific circumstances. Vulnerable people include those who:

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In these limited cases, the agency may decide that a person can be transferred from another income support payment to DSP without lodging a claim. This provision in the [Social Security \(Administration\) Act 1999](#) is known as a Section 12 Deemed Claim.

For more information, see [Supporting customers experiencing vulnerability to claim Disability Support Pension \(DSP\)](#)

Impairment Table changes from 1 April 2023

From 1 April 2023, a new version of Impairment Tables was introduced. The new Tables are used to assess a customer's medical eligibility for all DSP claims lodged on or after this date. See [The Impairment Tables](#).

Abridged claims for customers turning 16 (SA439)

Some customers may get invited to claim DSP via an abridged form. This applies where:

- a young person with a disability is turning 16, and
- their carer gets Carer Payment (CP) for them, and
- the CP start date was:
 - before 1 July 2009, and the young person is assessed as profoundly disabled, or
 - on or after 1 July 2009, and the young person has a [Treating Health Professional \(THP\) score](#) of more than 4 and an [Assessment of Care Load \(ACL\)](#) score of more than 300

The personalised claim form is automatically issued when they turn 15 years and 10 months via a covering letter to the FTB parent. The form can be re-issued from the parent's s47E(d) screen.

Where a parent or nominee of a CP child care receiver with a 'profoundly disabled condition' contacts about claiming DSP, the [First Contact Service Offer \(FCSO\) workflow](#) will identify if they can use the abridged claim process. A message displays to advise the SA439 has been issued.

The [Resources](#) page contains:

- links to the website and forms
- approved **DOC** text, and
- information to help customers complete the claim form

Related links

[Claim lodgement of Centrelink claims](#)

[Claiming income support payments from Centrelink](#)

[Commencing or returning to work or self-employment Disability Support Pension \(DSP\)](#)

[Confirming a customer's identity](#)

[Contact in relation to an intended claim \(CLK\)](#)

[Eligibility for Disability Support Pension \(DSP\)](#)

[First Contact Service Offer \(FCSO\) workflow](#)

[Initial contact by a customer who is ill, injured or has a disability](#)

[JobSeeker Payment \(JSP\) and Youth Allowance \(YA\) \(Provisional\)](#)

[Pension Supplement](#)

[Prioritising Disability Support Pension \(DSP\) claims for terminally ill customers](#)

[Restoration of Disability Support Pension \(DSP\)](#)

[Sighting, recording and returning original documents](#)

[Standards for helping customers complete claims and forms](#)


[Streaming a new claim for Disability Support Pension \(DSP\)](#)

[What is medical evidence for Disability Support Pension \(DSP\)?](#)

Process

This document outlines how customers can claim DSP. It explains what to do upon receipt of claim documents.

Select the relevant tab:

-  Self service tab explains how to help customers make a claim online
- Assisted tab explains initial contact, claiming options, inviting a claim and receipt of documents

Self service

Make a claim for DSP online

Step	Action
1	<p>Check online access + Read more ...</p> <p>Check the customer can access their Centrelink online account via myGov.</p> <p>Service Officers can help customers:</p> <ul style="list-style-type: none"> • using self service terminals • by starting an Assisted Customer Claim (ACC) for the customer to complete and submit online <p>Tell the customer to start and submit the claim as soon as possible so they can be paid from the earliest possible date. Unless an exception applies, customers need to provide all required documents before they can submit their claim.</p> <p>See Apply for a payment or concession card options online for general help with:</p> <ul style="list-style-type: none"> • claim navigation • how to access a started claim • messaging and notification • uploading documents • what happens after they submit the claim
2	<p>Update My profile + Read more ...</p> <p>On the My profile page, information from the customer's record pre-fills.</p> <p>Customers or their nominees need to select Update Section for any sections such as Address or Relationship details that need an update. Note: accommodation details are covered within the claim questions.</p> <p>For each part of My profile updated, they need to select Save.</p> <p>Electronic messaging</p> <p>Customers or their nominees who give a mobile phone number or email address are advised they will be subscribed to Electronic Messaging (EM) services. This is unless they have previously declined EM. They will be asked to nominate a preferred contact method (SMS or email) for electronic messages.</p> <p>They will be subscribed to receive their Centrelink mail online via their myGov Inbox.</p> <p>They can opt out of these services at any time.</p>
3	<p>Getting started + Read more ...</p>

	<p>See Centrelink online account help - Claim a payment online.</p> <p>To start a DSP claim, customers will need to:</p> <ul style="list-style-type: none"> • Sign into myGov and select their linked Centrelink account • From their homepage menu, select Payments and Claims > Claims > Make a claim • From the Payment Types page, select Read More under the Disabled, ill or injured tab • Under Disability Support Pension • Select Apply for Disability Support Pension • Answer questions to check their eligibility. They will be able to submit the claim before providing all required documents if they indicate: <ul style="list-style-type: none"> ○ they are claiming due to one of the listed manifest medical conditions, or ○ they are in crisis ○ they fit one of the other exception categories • Select Begin <p>Early claims</p> <p>Customers can start a DSP claim up to 13 weeks before the date they are eligible. However, it must be within 14 days for them to confirm the information and submit the claim. They will get a reminder 14 days before their eligibility date.</p>
4	<p>Claim questions + Read more ...</p> <p>There are 3 sections to complete. They include the following questions for the customer to provide or confirm details.</p> <p>Your personal details</p> <ul style="list-style-type: none"> • Relationship details • Contact Requirements - Permit to Enquire, Nominee • Australian Residence • Accommodation • Child Details <p>Your circumstances</p> <ul style="list-style-type: none"> • Claiming JobSeeker Payment Provisional • Independence (if under 21) • Previous circumstances • Medical conditions • DVA eligibility • Medical Information • Treatment details • Medical evidence • Treating Health Professional details and consent • Program of Support details <p>Your financial details</p> <ul style="list-style-type: none"> • Payment destination • Savings • Investments • Business, trust and companies • Other assets • Income

	<ul style="list-style-type: none"> • Additional circumstances
5	<p>Review and confirm + Read more ...</p> <p>Outstanding items</p> <p>If the customer chose to 'Provide details later' for any section, they can select the item here to give details.</p> <p>Confirm details</p> <p>Customers should check all details they have provided to make sure they are correct. Details include their answers to claim questions and a summary of details in My profile.</p> <p>They can select Update to correct details.</p> <p>Declaration</p> <p>Once all details are correct, the customer must tick this box to continue. This is like signing a claim form.</p> <p>Acknowledgement</p> <p>The customer must tick this box to acknowledge they understand and agree to the terms of their claim.</p> <p>Confirm Information</p> <p>Selecting this button will save all the claim information. The customer will not be able to go back and change details. Although the claim is saved, it is not yet submitted.</p>
6	<p>Next steps + Read more ...</p> <p>This page displays:</p> <ul style="list-style-type: none"> • a list of required tasks and supplementary tasks <ul style="list-style-type: none"> ○ To submit their claim, the customer must first complete all required tasks. Exceptions apply for vulnerable customers. Customers claiming DSP and JSP can submit the claim before providing medical evidence ○ Identity Confirmation documents are required if the Identity Status is Not Confirmed ○ If they have an invite to claim letter that says they do not need to provide further medical evidence, the customer will still see a task to upload medical information. They can upload the invite to claim letter to complete this task ○ If the customer provides a document, Service Officers can run the s47E(d) to change the document status from Required to Provided • a link to download or print required forms • a link to upload documents. After they upload documents, the relevant task will show as done <p>There is a link to Additional information about tasks, how long they have to submit the claim, and legislation for requesting documents.</p>
7	<p>Submitting the claim + Read more ...</p> <p>After completing all required tasks, the Save button will change to Submit. The customer can now submit their claim.</p> <p>The Submitted page displays:</p> <ul style="list-style-type: none"> • Claim ID • Estimated completion date

	<ul style="list-style-type: none"> • A 'withdraw claim' option • Tabs that link to Notifications, Task & Review claim details
8	<p>Progress of claim + Read more ...</p> <p>The customer will get a message to let them know:</p> <ul style="list-style-type: none"> • the progress of the claim • if any further information is required • if a specialist or medical assessment is required <p>Customers can use the claim tracker to check the progress of their claim.</p>

Assisted

On this page

[Initial contact](#)

[Inviting a current income support customer to claim DSP](#)

[Assisted Customer Claim \(ACC\)](#)

[Claim or supporting documents lodged](#)

Initial contact

Table 1

Step	Action
1	<p>Customer contact + Read more ...</p> <p>Customers should access the Payment and Service Finder on the website to check if DSP is an appropriate payment for them.</p> <p>For more help, see:</p> <ul style="list-style-type: none"> • Initial contact by a customer who is ill, injured or has a disability • Eligibility for DSP <p>Customer circumstances</p> <ul style="list-style-type: none"> • If DSP is suspended (or cancelled deemed suspended) due to a valid return to work reason, DSP may be restored. Procedure ends here • If turning 16 and a carer is getting Carer Payment (CP) for them, go to Step 2 • If inviting a current customer to claim DSP, See Table 2 • If overseas, go to Step 3 • Otherwise, go to Step 4
2	<p>Abridged claim for young person turning 16 (SA439) + Read more ...</p>

	<p>This applies if:</p> <ul style="list-style-type: none"> • their carer gets CP for them until they turn 16, and • the CP start date was: <ul style="list-style-type: none"> ○ before 1 July 2009, and they are assessed as 'profoundly disabled', or ○ on or after 1 July 2009, and they have a Treating Health Professional (THP) score of more than 4 and an Assessment of Care Load (ACL) score of more than 300 <p>The system issues claim forms and information for eligible customers when they turn 15 years and 10 months:</p> <ul style="list-style-type: none"> • Disability Support Pension Claim at age 16 (SA439), pre-filled with some details. It does not include all questions from the full claim (SA466) as the details are recorded for CP or Family Tax Benefit (FTB) • a covering letter, and • a nominee authorisation form (SS313) <p>The claim form issues in the customer's name via a covering letter to the FTB parent.</p> <p>If required, re-issue the form via the parent's s47E(d) screen.</p> <p>Service Officers can use the First Contact Service Offer (FCSO) workflow to confirm eligibility for an abridged claim. A message displays to advise the SA439 has been issued.</p> <p>When accepting a claim, tell the customer or nominee:</p> <ul style="list-style-type: none"> • whenever possible, medical eligibility for DSP will be assessed using medical evidence already provided. For example, for a previous CP claim • if they choose to claim DSP online, they can upload the covering letter issued with the SA439 as their medical evidence • they will be advised if they need to provide further evidence <p>Procedure ends here.</p>
3	<p>Customers who are overseas + Read more ...</p> <p>Customers must be present and residing in Australia when they lodge their DSP claim.</p> <p>If the customer does not meet Australian residence requirements, their claim may be rejected.</p> <p>The customer may want to claim an Australian payment under an International Social Security Agreement.</p> <p>Procedure ends here.</p>
4	<p>Online claim offer + Read more ...</p> <p>Is the customer or nominee willing and able to make an online claim?</p> <ul style="list-style-type: none"> • Yes, see Self service tab • No, go to Step 5
5	<p>Assisted Customer Claim (ACC) + Read more ...</p> <p>Service Officers can use ACC to complete a claim with the customer or nominee. ACC can also be used to start a claim for the customer to complete and submit online, or to submit a claim started by the customer online.</p>

	<p>ACC copies the questions in the online claim. Use ACC only when the customer is present and can answer the questions.</p> <p>ACC will identify any documents required for the claim. These can be uploaded by the Service Officer or the customer.</p> <p>If the required documents include a form, it can be issued by the Service Officer or printed by the customer from the Services Australia website.</p> <p>Unless an exception applies, they must provide all required documents before the claim can be submitted.</p> <p>Can ACC be used?</p> <ul style="list-style-type: none"> • Yes, see Table 3 • No, go to Step 6
6	<p>Issue forms + Read more ...</p> <p>First Contact Service Offer (FCSO) workflow is used to issue the DSP claim pack to the customer or nominee. If both members of a couple want to claim a payment, complete the FCSO for both.</p> <p>The DSP claim pack contains:</p> <ul style="list-style-type: none"> • Claim for Disability Support Pension (SA466), or • Claim for Disability Support Pension for a terminal illness (SA464) and Verification of Terminal Illness (SA495) <p>Workflow will also issue:</p> <ul style="list-style-type: none"> • Income and Assets (SA369) if required • Disability Support Pension Medical Evidence Checklist (SA473) • Consent to disclose medical information (SA472) <p>See Resources page for links to forms.</p> <p>Always tell customers:</p> <ul style="list-style-type: none"> • their claim must be fully completed • they should submit the claim as soon as possible • a DSP claim cannot be assessed until all required information is provided. This can include Identity Confirmation, current medical evidence, relevant forms and information identified in the claim • their claim can be assessed more quickly if they provide all required information when lodging the claim. This includes medical evidence • the claim may be rejected if they do not provide required information. This includes medical evidence <p>Use the medical evidence checklist in the SA466 or the SA473 to discuss with the customer what medical evidence is required.</p> <p>If the customer wants to claim another income support payment while they wait for their DSP claim to be assessed, tell them how to claim or use ACC or FCSO for that payment.</p> <p>When the customer lodges the claim, see Table 4.</p>

Inviting a current income support customer to claim DSP

Table 2

Step	Action
1	<p>When to invite a claim for DSP + Read more ...</p> <p>Customers are invited to claim DSP if:</p> <ul style="list-style-type: none"> they get one of the following payments with a status of current (CUR), zero rate (CZR) or cancel next pay (CNP): <ul style="list-style-type: none"> JobSeeker Payment (JSP) Parenting Payment Single (PPS) Youth Allowance (YA) they are likely to meet all medical eligibility and non-medical criteria (for example, residence – see Residence assessment for customers claiming Disability Support Pension (DSP)) <p>Valid sources of medical evidence include:</p> <ul style="list-style-type: none"> a recommendation in one of the following reports: <ul style="list-style-type: none"> Job Capacity Assessment (JCA) Employment Services Assessment (ESAt) health and allied health professional advice from either: <ul style="list-style-type: none"> Assessment Services Health Professional Advisory Unit (HPAU) evidence the customer is manifestly eligible (for example, they are terminally ill or have a list 1 condition) <p>Customers who do not meet the above criteria will need to apply for DSP by either:</p> <ul style="list-style-type: none"> claiming online speaking to a Service Officer who can run the: <ul style="list-style-type: none"> Assisted Customer Claim (ACC), or First Contact Service Offer (FCSO) workflow to send a DSP claim pack <p>A Potential DSP eligibility Fast Note is created by an assessor if:</p> <ul style="list-style-type: none"> an ESAt is upgraded to a JCA indicating DSP medical eligibility, or the assessor identifies the condition is manifest <p>The Fast Note is allocated to a Service Officer. They action the ESAt report and decide if the 'Invite to claim DSP' process applies.</p> <p>Make sure the ESAt Report is checked and accepted, see Checking and actioning Employment Services Assessment (ESAt) reports. View the report on the s47E(d) screen and on the s47E(d).</p> <p>Invite the customer to claim DSP when:</p> <ul style="list-style-type: none"> they are in receipt of an appropriate payment, and they are likely to meet medical eligibility and non-medical criteria, see Eligibility for Disability Support Pension (DSP) <p>Do not invite a customer to claim DSP when:</p> <ul style="list-style-type: none"> they already have a DSP claim in progress DSP status is SUS or RTW, see Restoration of Disability Support Pension (DSP) <p>Note: in exceptional circumstances, s47E(d) some customers can be transferred from their current ISP to DSP, without a claim. For</p>

	<p>more information, see Supporting customers experiencing vulnerability to claim Disability Support Pension (DSP).</p> <p>Document the customer record.</p>
2	<p>Contact the customer + Read more ...</p> <p>Service Officers must make 2 genuine contact attempts to invite the customer to claim DSP.</p> <p>If the customer or nominee is registered for electronic messaging, issue a Pre call SMS via the s47E(d) screen to let them know they will be getting a call.</p> <p>Note: if the medical evidence indicates manifest criteria Terminal Illness (T), do not issue the Claim for Disability Support Pension for a Terminal Illness (SA494) as the customer may not be aware of their terminal prognosis.</p> <p>First contact attempt - DSP Invite to claim workflow</p> <p>The s47E(d) workflow will not be present in Process Direct if the customer does not meet the criteria for an invite to claim for example if they are:</p> <ul style="list-style-type: none"> • already have a DSP claim in progress • getting DSP or DSP is suspended, this includes DSP/RTW, or • not getting a relevant income support payment (JSP/YA/PPS) <p>Open the s47E(d) workflow in Process Direct:</p> <p>s47E(d)</p> <p>Was the first contact successful?</p> <ul style="list-style-type: none"> • Yes, go to Step 5 • No, go to Step 3
3	<p>Customer contact is not successful + Read more ...</p> <p>s47E(d)</p>

	<p>s47E(d)</p> <p>When the system allocates the Fast Note, the Service Officer is to make a second contact attempt.</p> <p>Second contact attempt</p> <p>If the customer or nominee is registered for electronic messaging, issue a Pre call SMS via s47E(d)</p> <p>In Process Direct:</p> <p>s47E(d)</p> <p>Was the second contact attempt successful?</p> <ul style="list-style-type: none"> • Yes, go to Step 5 • No, go to Step 4
4	<p>Finalise s47E(d) workflow and issue invite letter + Read more ...</p> <p>In the s47E(d) workflow in Process Direct:</p> <p>s47E(d)</p> <ul style="list-style-type: none"> • A DSP Invite to claim letter will automatically issue to the customer/nominee (if applicable) <ul style="list-style-type: none"> ○ The letter tells the customer about DSP claiming information on the Services Australia website ○ If more medical evidence to support the claim is not required, the letter says the customer does not need to provide any extra medical evidence. It also says they can upload the invitation to claim letter instead of medical evidence if they claim DSP online <p>Procedure ends here until the customer replies to the invitation to claim letter, then go to Step 8.</p>
5	<p>Customer contact is successful + Read more ...</p> <p>Explain to the customer:</p> <p>'A recent review of your circumstances indicates Disability Support Pension may be a more suitable payment. You may need to attend a Disability Medical Assessment, to help us decide if you are eligible for Disability Support Pension.'</p>

	<p>Note: Disability Medical Assessment (DMA) is not applicable if customer is manifestly medically eligible.</p> <p>Did the customer accept the invitation to claim DSP?</p> <ul style="list-style-type: none"> • Yes, go to Step 6 • No, go to Step 7
6	<p>Customer accepts the invitation to claim DSP + Read more ...</p> <p>Discuss the option and benefits of submitting an online claim with the customer/nominee. If they choose to claim online, explain the process as set out in the Self Service tab.</p> <p>If the customer chooses not to claim online, offer to run Assisted Customer Claim (ACC) with them. If accepted, see Step 1 in the Assisted Customer Claim (ACC) table on the Assisted tab.</p> <p>If the customer chooses not to claim online or do the ACC, run the First Contact Service Offer (FCSO) workflow to send the claim pack for DSP. Tell the customer to return the claim as soon as they have all their required documents to make sure the earliest possible start date.</p> <p>s47E(d)</p> <ul style="list-style-type: none"> • A DSP Invite to claim letter will automatically issues to the customer/nominee (if applicable) • If the customer does not need to provide any further medical evidence, tell them: <ul style="list-style-type: none"> ○ Services Australia has current medical information for them ○ They do not need to provide any additional medical information for their claim at this time ○ The 'Invite to claim' letter advises they can upload the letter instead of medical evidence if they choose to claim DSP online • If the customer does need to provide further medical evidence, tell them: <p>'You need to complete a Disability Support Pension claim and provide medical evidence that supports your claim. You should be aware it can take a number of weeks to finalise a claim for Disability Support Pension. You can help the process by making sure all required evidence is lodged with your claim. We may ask you to go to both a Job Capacity Assessment and Disability Medical Assessment. If you have any new evidence you haven't already given us, you can bring it to these appointments'</p> • Consider appropriate assistance if the customer is vulnerable <p>s47E(d)</p> <p>Procedure ends here.</p>
7	<p>Customer does not accept the invitation to claim DSP + Read more ...</p> <p>Complete the s47E(d) workflow in Process Direct:</p> <p>s47E(d)</p>

	<p>s47E(d)</p> <ul style="list-style-type: none"> Talk to an appropriate staff member (for example, Assessor, Social Worker) to explore possible alternative approaches if: <ul style="list-style-type: none"> the customer declines the invitation to claim DSP, and it appears the customer may lack insight into their condition <p>Procedure ends here.</p>
8	<p>Customer contacts in regard to DSP Invite to Claim letter + Read more ...</p> <p>Explain to customer/nominee:</p> <p>'A recent review of your circumstances indicates DSP may be a more suitable payment. You may need to attend a Disability Medical Assessment, to help us decide if you are eligible for Disability Support Pension.'</p> <p>Note: Disability Medical Assessment (DMA) is not applicable if customer is manifestly medically eligible.</p> <p>Customer accepts invitation to claim DSP:</p> <ul style="list-style-type: none"> Discuss the option and benefits of submitting an online claim with the customer/nominee. If they choose to: <ul style="list-style-type: none"> claim online, explain the process as set out in the Self Service Tab not claim online, offer to run Assisted Customer Claim (ACC) with them. If accepted, see Step 1 in the Assisted Customer Claim (ACC) table on the Assisted tab not claim online or do the ACC, run the First Contact Service Offer (FCSO) workflow to send the claim pack for DSP. Tell the customer to return the claim as soon as they have all their required documents to make sure the earliest possible start date, if eligible Record a Note/DOC with action taken Procedure ends here <p>Customer declines invitation to claim DSP:</p> <ul style="list-style-type: none"> Talk to an appropriate staff member (for example, Assessor, Social Worker) to explore possible alternative approaches if: <ul style="list-style-type: none"> the customer declines the invitation to claim DSP, and it appears the customer may lack insight into their condition Record a Note/DOC with action taken Procedure ends here

Assisted Customer Claim (ACC)

Table 3

Step	Action
1	<p>Before starting ACC + Read more ...</p> <p>In Customer First:</p> <p>s47E(d)</p>

	s47E(d)
2	<p>Start ACC + Read more ...</p> <p>Access ACC via s47E(d)</p> <p>s47E(d)</p>
3	<p>Claim Introduction + Read more ...</p> <p>Introduction text advises the customer about collecting and confirming information before the claim can be submitted.</p> <ul style="list-style-type: none"> • s47E(d) . Advise the customer: <ul style="list-style-type: none"> ○ Submit their claim as soon as possible to be paid from the earliest date ○ What to expect during their claim process and the steps they need to take ○ Information may need to be provided to complete the claim • s47E(d)
4	<p>Claim navigation + Read more ...</p> <p>This screen displays:</p> <ul style="list-style-type: none"> • Sections of the claim to be completed. Complete them in the order displayed • Claim status <p>The claim does not have to be completed in one session. Select s47E(d) at any time to save responses and continue later with the customer</p>
5	<p>Claim questions + Read more ...</p> <p>There are 3 sections to complete. They include the following questions for the customer to provide or confirm details.</p> <p>Your personal details</p> <ul style="list-style-type: none"> • Relationship details • Contact Requirements - Permit to Enquire, Nominee • Australian Residence • Accommodation • Child Details <p>Your circumstances</p> <ul style="list-style-type: none"> • Claiming JobSeeker Payment Provisional

	<ul style="list-style-type: none"> • Independence (if under 21) • Previous circumstances • Medical conditions • DVA eligibility • Medical Information • Treatment details • Medical evidence • Treating Health Professional details and consent • Program of Support details <p>Your financial details</p> <ul style="list-style-type: none"> • Payment destination • Savings • Investments • Business, trust and companies • Other assets • Income • Additional circumstances <p>The customer may still need to complete forms:</p> <ul style="list-style-type: none"> • Private Trust (MOD PT) • Special Disability Trust (MOD SDT) • Private Company (MOD PC) • Business details (MOD F)
6	<p>Review claim and Customer declaration + Read more ...</p> <p>Check all information is correct on the Review your claim page.</p> <p>If mandatory information is missing, a red Update required message will display.</p> <p>Customer declaration</p> <p>Read the customer the verbal declaration script</p> <p>If they accept, tick the box on the Review your claim page. This confirms the declaration script has been read, and the customer accepts it.</p> <p>Outstanding items</p> <p>If the customer chose to 'Provide details later' for any section, they can select the item here to give details.</p> <p>Confirm details</p> <p>Customers should check all details they have provided to make sure they are correct. Details include their answers to claim questions and a summary of details in My profile.</p> <p>They can select Update to correct details.</p> <p>Declaration</p> <p>Once all details are correct, the customer must tick this box to continue. This is like signing a claim form.</p>

	<p>Acknowledgement</p> <p>The customer must tick this box to acknowledge they understand and agree to the terms of their claim.</p> <p>Confirm Information</p> <p>Selecting this button will save all the claim information. It will then not be possible to go back and update the claim information. The claim is saved but not yet submitted.</p>
7	<p>Completing tasks + Read more ...</p> <p>Help customers upload supporting documents and submit their claim online if they can.</p> <p>If the required document is a form, Service Officers can issue the form to the customer' or the customer can print it from the website.</p> <p>To submit their claim, the customer must first complete all required tasks. Exceptions apply for vulnerable customers. Customers claiming DSP and JSP can submit the claim before providing medical evidence.</p> <p>Identity Confirmation documents are required if the Identity Status is Not Confirmed. In some cases, customers may require support to Confirm their Identity. Customers unable to confirm their identity must complete an Alternative Identity assessment in person, or by phone when there is a valid reason a customer is unable to attend in person.</p> <p>If they have an invite to claim letter that says they do not need to provide further medical evidence, the customer will still see a task to upload medical information. The invite to claim letter can be uploaded to complete this task.</p> <p>If the customer provides a document, Service Officers must s47E(d)</p>
8	<p>Submitting the claim + Read more ...</p> <p>After completing all required tasks, the Save button will change to Submit. The customer can now submit their claim.</p> <p>The Submitted page displays:</p> <ul style="list-style-type: none"> • Claim ID • Estimated completion date • A 'withdraw claim' option • Tabs that link to Notifications, Task & Review claim details
9	<p>Progress of claim + Read more ...</p> <p>The customer will get a message to let them know:</p> <ul style="list-style-type: none"> • the progress of the claim • if any further information is required • if a specialist or medical assessment is required <p>Customers can use the claim tracker to check the progress of their claim.</p>

Claim or supporting documents lodged

Table 4

Item	Action
1	<p>Claim lodged in person + Read more ...</p> <p>Encourage customers to lodge a fully completed claim.</p> <p>A fully completed claim includes:</p> <ul style="list-style-type: none"> • All relevant questions answered, including the medical details section • The claim is signed. A customer unable to complete or sign the claim may have it completed by a responsible person • For non-current ISP customers, a completed Income and Assets (SA369) form and any relevant Modules as per questions in the claim <p>Service Officers must not refuse to accept a DSP claim.</p> <p>Note: payments can start from the date the customer submits a complete claim with all required documents. There are exceptions for vulnerable customers</p> <p>If the claim is not fully completed</p> <p>Explain what information is required to submit a complete claim. Encourage the customer to lodge the claim when they have completed all required information.</p> <p>Vulnerable customers may not be able to fully comply or may be disadvantaged if they do not lodge the claim now.</p> <p>If the customer wants to lodge an incomplete claim, encourage them to provide the required information as soon as possible. Tell the customer the claim cannot be processed until all the required information and documents are provided.</p> <p>Consider Alternative Identity if the only item outstanding is identity confirmation.</p> <p>Check supporting documents</p> <ul style="list-style-type: none"> • s47E(d) Original documents must be sighted, recorded and returned. Code the identity documents • Tax File Number (TFN) • Check all forms issued via the First Contact Service Offer (FCSO) workflow have been lodged. A letter is sent with the forms advising what documents are required to support a claim • Medical evidence. Use the medical evidence checklist to discuss with the customer what medical evidence is required. If they have barriers to getting the medical evidence, record these on a DOC • Other supporting documents. For example, proof of rent <p>Any differences between the documents and the record must be addressed, resolved and documented before coding.</p> <p>Scan documents</p> <p>Scan the documents straight away.</p> <ul style="list-style-type: none"> • From 8 April 2024, a new version of the SA466 was released which included a separator page between the main sections of the claim, therefore scanning requirements vary depending on which version is lodged. The change in forms occurred from form version SA466.2404 <p>Note: staff can continue to accept the old version after 8 April 2024</p> <ul style="list-style-type: none"> • When a pre 8 April 2024 SA466 is lodged (versions 2006 to 2305): <ul style="list-style-type: none"> ○ A Separator page must be manually inserted between the claim and non-medical documents and the Medical Details Section (MEDSA466) and Consent to disclose

	<p>medical information (SA472), so the documents are correctly stored and classified on the customers record</p> <ul style="list-style-type: none"> • When a post 8 April 2024 SA466 is lodged (versions 2404 or 2412): <ul style="list-style-type: none"> ○ The separator pages with barcode, included in the claim form, must be lodged and scanned with the claim – this will automatically split the documents and correct store and classify the medical documents (MEDSA466 and SA472) <p>See, Scanning Centrelink medical/sensitive documents using an MFD</p> <p>For more information about the new SA466 claim form, see the Resources page.</p> <p>Scanning the DSP claim will generate a DSP new claim Social Online Application (SOA) which automatically creates a Medical Assessment Team (MAT) referral.</p>
2	<p>SA472 Consent to contact Treating Health Professional (THP) + Read more ...</p> <p>Check the customer has signed the form before scanning to eMIFE. The Consent to Contact THP in Process Direct will default to YES. Consent to Contact THP only must be updated if the customer no longer provides consent to contact their THP or it has previously been recorded as NO.</p> <p>If SA472:</p> <ul style="list-style-type: none"> • has not been lodged, implied consent is given. Consent to Contact THP application does not need to be updated • has been lodged and consent is not given for Services Australia (the agency) to contact their THP. The Consent to Contact THP must be recorded as NO. This can occur at any stage of the claim process, even if prior consent has been given <p>Recording or Updating the Consent to Contact THP in Process Direct:</p> <p>s47E(d)</p>
3	<p>Supporting documents lodged at service centre + Read more ...</p> <p>Is the document for an online claim or ACC?</p> <ul style="list-style-type: none"> • Yes, <ul style="list-style-type: none"> ○ Scan all documents to the customer's record ○ s47E(d) ○ ○ <p>For more details, see Circumstance Change Monitor (CCM).</p> <ul style="list-style-type: none"> • No, scan the documents to the customer's record.
4	<p>Lodgement via Agent or by mail + Read more ...</p> <p>Claims go to the Scanning Operations Centre (SOC) to be scanned.</p>

	<p>Note: SOC Service Officers will not check the claim before scanning.</p> <p>Once scanned, this will generate a DSP new claim SOA with a status of On hold and an automatic MAT referral.</p>
5	<p>Lodgement by fax + Read more ...</p> <p>The National Business Gateway will scan and attach all documents to the customer's record.</p> <p>Once scanned, this will generate a DSP new claim SOA with a status of On hold and an automatic MAT referral.</p>
6	<p>Uploaded online + Read more ...</p> <p>If a customer lodges a DSP claim via Upload documents:</p> <ul style="list-style-type: none"> the claim and any supporting medical evidence uploads to the customer's record a DSP new claim SOA with a status of On hold and an automatic MAT referral are generated
7	<p>Customers with a terminal medical condition - escalate DSP new claim + Read more ...</p> <p>When the claim is lodged online or through the ACC, the questions will identify where a customer is vulnerable and/or terminal s47E(d) See Prioritising Disability Support Pension (DSP) claims for terminally ill customers.</p>

References

Policy

[Social Security Guide, 8.1.1, Claim lodgement provisions](#)

[Social Security Guide, 8.1.1.20, Claim lodgement - general provisions](#)

[Social Security Guide, 3.6.2.20, Manifest grants & rejections for DSP](#)

[Social Security Guide, 1.1.T.86, Terminal condition \(CA, CP\)](#)

Legislation

Links to the Federal Register of Legislation site go to a 'Series' page. Select the 'Latest' version.

[Social Security \(Administration\) Act 1999](#)

- section 11, General rule
- section 16, How to make a claim
- section 67, Person who has made a claim

[Veterans' Entitlements Act 1986](#)

Resources

Services Australia website

[People with disability](#)

[Disability Support Pension](#)

[Centrelink online accounts](#)

[Electronic messaging](#)

[Centrelink letters online](#)

[Payment and Service Finder](#)

Forms

[Claim for Disability Support Pension form \(SA466\)](#)

[Claim for Disability Support Pension for a Terminal Illness form \(SA494\)](#)

[Verification of Terminal Illness form \(SA495\)](#)

[Disability Support Pension Medical Evidence Checklist form \(SA473\)](#)

[Income and Assets form \(SA369\)](#)

[Consent to disclose medical information form \(SA472\)](#)

[Disability Support Pension Medical evidence requirements Information for treating health professionals form \(SA478\)](#)

Forms (staff)

[Disability Support Pension Claim at age 16 \(SA439\)](#)

Verbal declaration script

Table 1: this script displays in an Assisted Customer Claim (ACC) for DSP. It must be read to the customer before they submit the claim.

Item	Description
1	I declare that:

	<p>The information I have provided in this claim for Disability Support Pension is complete and correct.</p> <ul style="list-style-type: none"> • I have read and understand the Privacy Notice • I have read the terms and conditions for Electronic Messaging and Online Letters if I have provided a mobile phone number and/or email address • I have read and understand the 'Information you need to know about your claim for Disability Support Pension' booklet <p>I understand that:</p> <p>I may need to provide further information if requested.</p> <p>Giving false or misleading information is a serious offence.</p> <p>The Australian Government Services Australia can make relevant enquiries to make sure I receive the correct entitlement.</p> <p>Any information I provide on this claim may be used to determine eligibility and suitability for services for me and where relevant third parties.</p> <p>I must notify the Australian Government Services Australia within 14 days of the changes in my circumstances.</p> <p>I must declare to Services Australia the gross amount of any income if I am in receipt of a payment, which is affected by income.</p> <p>Entitlements cannot start until this statement is accepted and all supporting documentation is provided to Services Australia.</p> <p>My claim of Disability Support Pension may be affected if I do not do any of the above.</p>
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Completing the Claim for DSP (SA466) – post 8 April 2024 form versions 2404 and 2412

Table 2: a new version of the DSP paper claim (SA466) was released on 8 April 2024. The form is identified by versions 2404 and 2412.

Pages	Description
Pages 1-5	<p>Information only</p> <p>These pages provide general information about DSP including:</p> <ul style="list-style-type: none"> • how to claim, • returning the form, • help with completing the form, • authorising a person or organisation to help the customer deal with us • how to complete each section (step) of the claim form • medical evidence requirements • how we assess the claim • other payments, services and supports available
Pages 7 - 9	Step 1 - your details

	<p>This Step is about the customer's personal details and includes:</p> <ul style="list-style-type: none"> • customer CRN (if known) • name, address, phone details • if the customer needs a Nominee or Person Permitted to Enquire (PPE) • if the customer is currently imprisoned / date of release • if they are permanently blind • in receipt of a Dept of Veterans Affairs (DVA) payment or Compensation <p>This Step must be completed.</p>
Page 10	<p>Step 2 – your payment details</p> <p>This Step is about how the customer will receive their payment (if they are eligible):</p> <ul style="list-style-type: none"> • bank account details for payment destination, and • frequency of the Pension Supplement. <p>This Step must be completed.</p>
Pages 11 – 23	<p>Step 3 – your circumstances</p> <p>This Step asks the customer more about their circumstances including:</p> <ul style="list-style-type: none"> • if they require an Interpreter (language/Auslan/Sign) and preferred language • if they are Aboriginal or Torres Strait Islander descent, • country of residence, overseas travel, country of birth, citizenship and visa details for the customer (and their partner if they have one) • marital status, living arrangements • accommodation details – the customer must advise if they: <ul style="list-style-type: none"> ○ Are in a home they own (this includes paying it off) ○ Share the ownership of the home jointly with another person or organisation (this includes living in the home that is jointly owned with someone else, or a home owned by a private company, or a home held by a private trust in which the customer is involved in) ○ Are in a retirement village ○ Are in a home or hospital for people with disabilities ○ Are in a residential aged care home (nursing home or hostel) which provides nursing care ○ Are in accommodation which they have the right to use free for life (such as a granny flat to use for life) ○ Are in public housing (that is, housing owned by a public housing authority such as the Housing Commission or Department of Housing. This does not include paying rent to a Community Housing Organisation) ○ Are in a place where they pay private rent, site fees, mooring fees or other fees. (This includes living in a rented house or unit, living in a caravan or mobile home, living in a boat or other similar accommodation) ○ Are paying board and lodgings. (This includes living in a private home, for example with their parents, a boarding house, hostel, private hotel or other similar accommodation) ○ Are living in another type of accommodation not described above. (This could be a place where the customer receives free board and lodging or they do not have a fixed address) • Employment and leave entitlements • Tax File Number or authority to use previous TFN <p>This Step can be skipped if the customer is already in receipt of an ISP, and has no change in circumstances for themselves and/or their partner (if they have one),</p>

Pages 24 - 25	<p>Step 4 – your independence</p> <p>This Step is for customers aged 16 – 20 years old, to determine if they can be paid at the dependent or independent rate of DSP, if they are found eligible.</p> <p>This Step is skipped for customers 21 years or older.</p>
Pages 26- 27	<p>Step 5 – your checklist and declaration</p> <p>The checklist helps customers with the documents they need to support their claim.</p> <p>Customers must read the Privacy Notice and Declaration and sign the claim form.</p> <p>This Step must be completed.</p> <p>Note: if a customer is unable to complete and/or sign the claim form because of a disability, they may have the form completed on their behalf by a responsible person. Details of this person should be included on the claim form. If the customer is unable to sign they need to provide, or have provided for them, verification from a medical practitioner or other health professional they are unable to sign.</p>
Page 28	<p>Separator page with barcode and messaging</p> <p>If the customer is returning their claim at a service centre or by post:</p> <ul style="list-style-type: none"> • They should include this separator page • Staff must include this page when scanning the forms as it will automatically separate the claim and the medical details section (MEDSA466) <p>If the customer is uploading their claim:</p> <ul style="list-style-type: none"> • They should upload pages 7 – 27 using code SA466 (DSP claim), and • Upload pages 29 – 34 using code MEDSA466
Pages 29 - 35	<p>Step 6 – your medical details</p> <p>Medical details section</p> <p>If the customer has indicated their condition is or may be terminal the claim is to be treated as a high priority. See Prioritising Disability Support Pension (DSP) claims for terminally ill customers (dept.local)</p> <p>The customer must advise:</p> <ul style="list-style-type: none"> • any medical conditions they have, starting with the condition they think has the most impact • when their conditions began to significantly impact their ability to work • if they are claiming for a condition which may meet the manifest criteria e.g permanent blindness, terminal • if they are claiming because of a condition which requires specialist medical evidence e.g. mental illness • details about past, current and planned or future treatments • whether the customer has attended special school or classes because of a disability, illness or injury • their recent employment history, including types of work and how their condition(s) affected this work • if they have, or had, any additional support in the workplace because of their condition(s)

	<ul style="list-style-type: none"> • if they have participated in a Program of Support, such as Disability Employment Services to help prepare for, find and keep a job • the name and contact details of the doctor they usually see as well as any other health professionals who can tell us about the customer's medical conditions and impacts (for example, psychologist, physiotherapist, specialist or other doctors, counsellor, social worker, case manager, community health worker, teacher) <p>This section includes a medical evidence checklist to help customers identify what types of supporting medical evidence must be lodged with their claim.</p>
Page 36	<p>Separator page with barcode and messaging</p> <p>If the customer is returning their claim at a service centre or by post:</p> <ul style="list-style-type: none"> • They should include this separator page. • Staff must include both the separator pages when scanning the forms as it will automatically separate the claim, the medical details section (MEDSA466), and the Consent form (SA472) <p>If the customer is uploading their claim:</p> <ul style="list-style-type: none"> • They should upload pages 7 – 27 using code SA466 (DSP claim), and • Upload pages 29 – 34 using code MEDSA466, and • Upload the final page (Step 7) using code SA472 Consent to disclose medical information
SA472 – consent to disclose medical information	<p>Step 7 – consent to disclose medical information</p> <p>The Consent to disclose medical information (SA472) form is used to confirm the customer consents to their treating health professionals and/or health providers disclosing relevant information about their disability or medical conditions to Services Australia, or assessors engaged by Services Australia. This assists to assess their eligibility for DSP.</p> <p>Customers are not required to complete this Step, but it may help assess their claim more quickly.</p>

Completing the Claim for DSP (SA466) versions 2006 - 2305

Table 3

Questions	Description
Pages 1-2	<p>When to use this form</p> <p>These pages tell the customer how to complete the form, what supporting medical evidence is required, returning the form and other payments and services available.</p>
Questions 1-18	<p>Personal details</p> <p>This section is for the customer's personal details.</p> <p>This section also identifies requirements for services, such as language/interpretation services, hearing and sight impaired services and publications (audio, Braille etc.) and for Aboriginal and Torres Strait Islander customers.</p>
Question 19	<p>Payment details</p>

	<p>The section is for details of the customer's nominated bank account where they wish to have their payments made.</p>
Questions 20-32	<p>Relationship details</p> <p>This section asks for the partner's personal details (if applicable) and whether the customer gives Services Australia permission to provide information to their partner if they enquire.</p>
Questions 33-35	<p>Living Arrangements details</p> <p>This section looks at the customer's living arrangements.</p>
Questions 36-57	<p>Residence details</p> <p>This section looks at whether the customer is an Australian resident or not.</p> <p>Customers who do not qualify for Disability Support Pension (DSP) for the sole reason they do not meet residence requirements for DSP (as their continuing inability to work or permanent blindness occurred prior to their being an Australian resident) may qualify for Special Benefit.</p> <p>If the customer was born outside Australia, they must provide:</p> <ul style="list-style-type: none"> • details of their date of arrival • citizenship information • the type of visa they arrived on • whether or not they have had an assurance of support • the dates and countries they have lived in since birth • whether they lived in New Zealand <p>The same questions are asked of the partner in this section.</p>
Questions 58-73	<p>Dependent Children details</p> <p>This section must be completed if the customer has dependent children in their or (their partner's) care.</p>
Questions 74-76	<p>Tax details</p> <p>The customer and partner (if applicable) need to provide their Tax File Number (TFN) and if it is not provided within 28 days from the date of the claim, the customer may not be paid.</p> <p>If the customer or partner is unable to provide their TFN, they will be able to complete an application for a TFN.</p>
Questions 77-110	<p>Accommodation details</p> <p>This section looks at the kind of accommodation the customer and/or their partner is living in.</p> <p>The customer must advise if they:</p> <ul style="list-style-type: none"> • Are in a home they own (this includes paying it off) • Share the ownership of the home jointly with another person or organisation (this includes living in the home that is jointly owned with someone else, or a home owned by a private company, or a home held by a private trust in which the customer is involved in) • Are in a retirement village • Are in a home or hospital for people with disabilities • Are in a residential aged care home (nursing home or hostel) which provides nursing care • Are in accommodation which they have the right to use free for life (such as a granny flat to use for life)

	<ul style="list-style-type: none"> • Are in public housing (that is, housing owned by a public housing authority such as the Housing Commission or Department of Housing. This does not include paying rent to a Community Housing Organisation) • Are in a place where they pay private rent, site fees, mooring fees or other fees. (This includes living in a rented house or unit, living in a caravan or mobile home, living in a boat or other similar accommodation) • Are paying board and lodgings. (This includes living in a private home, for example with their parents, a boarding house, hostel, private hotel or other similar accommodation) • Are living in another type of accommodation not described above. (This could be a place where the customer receives free board and lodging or they don't have a fixed address)
Questions 111-116	<p>Other details</p> <p>This section asks a range of questions related to the following:</p> <ul style="list-style-type: none"> • Permanent blindness • Studying • Rent assistance • New Zealand Government payment • Payments from Department of Veterans' Affairs (DVA): <ul style="list-style-type: none"> ○ if the customer is in receipt of a DVA Disability Compensation Payment at the Special Rate (Totally and Permanently Incapacitated (TPI)) paid under the Veterans' Entitlements Act 1986 there is a set of questions for them to complete ○ to confirm their DVA payment status, the customer can provide a copy of the Special Rate decision letter from DVA, or they can authorise Services Australia to obtain the relevant information directly from DVA ○ they will not be required to provide additional medical evidence or undergo a JCA where Services Australia can confirm they are receiving a DVA Disability Compensation Payment at Special Rate (Totally and Permanently Incapacitated (TPI)) • Self-Employment Assistance (SEA) • Compensation and/or insurance
Questions 117-130	<p>Work, training and study details</p> <p>This section asks a range of questions associated with work, training and study.</p> <p>An Employer Separation Certificate (SU0001) form may need to be completed depending on how particular questions are answered.</p>
Questions 131-134	<p>Previous claims and leave entitlements</p> <p>This section covers any previous claims in the last 14 days. If the customer has not claimed a payment, other than Family tax Benefit (FTB) they are required to complete the Income and Assets form (SA369) included in the claim pack.</p> <p>Asks for details of any leave payments in the last 12 months or redundancies received since 20 September 2006.</p>
Questions 135-152	<p>Independent rate</p> <p>Disability Support Pension Youth Rates are aligned with Youth Allowance Rates for customers under 18.</p>

	<p>This section needs to be completed by customers who are aged under 21 years to determine if they are dependent or independent of their parents.</p> <p>This information is required to assess the rate of DSP for customers aged under 21 years.</p>
Checklist - Question 153	<p>Documents that may need to be attached</p> <ul style="list-style-type: none"> • completed all sections • provided all required documentation • requested, or been provided with, any further modules or forms needed
Questions 154-155	<p>Statement and signing form</p> <p>The customer needs to read the statement and sign and date the form before it can be processed.</p> <p>If a customer is unable to complete and/or sign the claim form because of a disability, they may have the form completed on their behalf by a responsible person. Details of this person should be included on the claim form. If the customer is unable to sign, they need to provide, or have provided for them, verification from a medical practitioner or other health professional they are unable to sign.</p>
Medical Evidence requirements - Question 156	<p>Medical Evidence Requirements Checklist</p> <p>This section helps customers identify what types of supporting medical evidence must be lodged with their claim.</p>
Questions 157-188	<p>Medical details</p> <p>If the customer has indicated their condition is (or may be) terminal, the claim is to be treated as a high priority.</p> <p>The customer must advise any medical conditions they have and when these conditions first impacted on their ability to work or study.</p> <p>This section asks:</p> <ul style="list-style-type: none"> • for details about current, planned or future treatments • for details of the name of the doctor they usually see as well as any other health professionals (for example, counsellor, social worker, case manager, community health worker, teacher, psychologist, physiotherapist, specialist or other doctors) • their recent employment history • whether they have been offered or received additional support in the workplace because of their disability, illness or injury • whether the customer has attended special school or classes because of a disability, illness or injury • the customer's participation in programs of support such as Disability Employment Services
Questions 189-190	<p>Statement and signing form</p> <p>Question 195 is where the customer needs to read the statement and sign and date the Medical Details section before it can be processed.</p> <p>The customer needs to read the statement and sign and date the form before it can be processed.</p> <p>If a customer is unable to complete and/or sign the claim form because of a disability, they may have the form completed on their behalf by a responsible person. Details of this person</p>

	should be included on the claim form. If the customer is unable to sign, they need to provide, or have provided for them, verification from a medical practitioner or other health professional that they are unable to sign it.
Consent to Disclose Medical Information (SA472)	<p>Consent to disclose medical information</p> <p>This form is used to confirm the customer consents to their treating health professionals and/or health providers disclosing relevant information about their disability or medical conditions to Services Australia (the agency), or assessors engaged by the agency to assist in assessing their eligibility for DSP.</p>

Completing the DSP Claim at age 16 (SA439)

Table 4

Page/Part A	Description
Pages 1-2	<p>Completing the form</p> <p>This page provides information on when and how the form is to be completed.</p>
Questions 1-32	<p>Personal details</p> <p>This part of the form asks the customer to provide personal details.</p> <p>Some information already held by Services Australia will be pre-populated into this section.</p> <p>This section also identifies requirements for services, such as language/interpretation services, hearing and sight impaired services and publications (audio, Braille etc.) and for Aboriginal and Torres Strait Islander customers.</p> <p>Other information includes:</p> <ul style="list-style-type: none"> • Residency details • Bank account details • Income and assets • Compensation details • Living arrangements • Independent details • Tax file number details • Study details
Questions 33-34	<p>Statement and signing form</p> <p>The customer needs to read the statement and sign and date the form before it can be processed.</p> <p>If they are unable to complete and/or sign the claim form because of a disability, they may have the form completed on their behalf by a responsible person. Details of this person should be included on the claim form.</p> <p>If the customer is unable to sign, they need to provide, or have provided for them, verification from a medical practitioner or other health professional, that they are unable to sign.</p>

Approved DOC text

Text to be used for a **DOC** when a customer decides to not lodge their DSP claim.

Extra Details: DSP Claim Not Lodged

Body: Customer attended office to lodge claim for DSP however after discussion regarding eligibility criteria for DSP, customer decided not to continue with lodgement at this time. Customer was advised if they reconsider and claim DSP in the future, they will need to lodge a new claim, along with supporting documents and medical evidence.

Training & Support

Add the course number to the s47E(d) field in the s47E(d) in ESSentials:

- s47E(d) - Lodging a claim
- s47E(d) - Welcome and introduction - DSP
- s47E(d) - Getting started with DSP
- s47E(d) - Streaming DSP claims