The Timms Review of Personal Independence Payment (PIP): Background information about PIP

About Personal Independence Payment

1. Personal Independence Payment (PIP) is a non-taxable, non-means tested cash benefit designed to contribute towards the extra costs of living with a long-term health condition or disability. It is available to those both in and out of work.

2. PIP was introduced in 2013 to focus on the impacts of living with a long-term health condition or disability. This replaced the Disability Living Allowance (DLA), which focused primarily on the medical condition itself. Since 2013, working age adults moved from DLA to PIP through natural migration and Full PIP Rollout (FPR), which invited DLA claimants to claim PIP. Originally, this meant assessing around 2 million existing DLA claimants. In response to the covid-19 pandemic, FPR was paused. Adult DLA claimants were and are still invited to claim PIP if they report a change of circumstance (improvement or deterioration) in their health condition(s), or their fixed-term DLA award expires. An adult DLA claimant can also voluntarily make a claim to PIP at any time. As of March 2026, there are 157,000 working age adults still in receipt of DLA.

3. Unlike DLA, PIP introduced a functional assessment which was designed to consider an individual's ability to carry out key everyday activities. It aimed

to take better account of sensory impairments, developmental disorders, learning disabilities, cognitive impairments and mental health conditions.

4. The intent of a functional assessment was to ensure that the benefit was awarded in accordance with functional ability, with the enhanced rates of the daily living and mobility components being awarded to those individuals assessed to have the highest level of need.

5. PIP was designed to be a more dynamic benefit, recognising that people's conditions change over time. Previously most people on DLA received an indefinite award, however PIP introduced fixed-term awards with built-in reviews. This aimed to ensure people continued to receive the correct level of award for a specific period aligned with their current support needs.

6. PIP also plays an important role in recognising that a person living with a long-term health condition or disability may also be entitled to other benefits or premiums, depending on the individual's circumstances. For example, it enables D/deaf and disabled people and people with long-term health conditions to access the Motability scheme, an independent scheme which helps with leasing a car, powered wheelchair or scooter using an individual's qualifying benefit. If a person is in receipt of the daily living component of PIP, someone who cares for them may be able to claim Carer's Allowance. PIP also passports to a wide range of local authority and

other government department benefits, schemes and provisions that use entitlement to PIP as proof of being disabled (such as the Blue Badge scheme).

Eligibility for PIP

7. An individual may be entitled to Personal Independence Payment if they:

   - are aged 16 or over
   - have a long-term physical or mental health condition or disability
   - experience difficulties carrying out certain everyday activities or with mobility
   - expect those difficulties to continue for at least 12 months from the date they began

8. In most cases, individuals must be below State Pension age to make a new claim for PIP. Those who reach State Pension age while receiving PIP may continue to receive the benefit, provided they continue to satisfy the entitlement conditions. DLA remains in place for children to help meet the additional costs associated with looking after a child under the age of 16 who has difficulties with mobility or requires substantially more care and supervision than a child of the same age without an impairment. Shortly after a recipient's 16th birthday, DWP generally issues an invitation to claim PIP. Unless

a claim for PIP is made by the date specified in the invitation, DLA payments will cease.

Initial contact to claim PIP

9. A PIP claim begins when an individual contacts DWP. During this initial stage, DWP gathers basic personal information and assesses non-medical eligibility criteria to determine whether the individual can proceed with a claim. This process is typically completed by telephone, although a paper application form (PIP1) is also available. Following completion of the PIP1 stage, the individual is issued with the PIP2 questionnaire, *How your disability affects you*, which is generally provided in paper format, or a digital form. DWP also offers the PIP2 form in large print, Braille, or audio CD.

Completion of the PIP2 – 'How your disability affects you' questionnaire

10. The PIP2 questionnaire collects detailed information about the impact of an individual's health condition or disability on their daily living and mobility needs. Claimants are normally given one calendar month to return the completed form. Where the questionnaire is not returned within this timeframe, a reminder is

issued and the deadline is extended by 2 weeks. DWP will always consider requests for more time at the initial request, or any subsequent time. Where an individual has an Additional Support (AS) marker recorded and they do not return the form, they are automatically referred for an assessment.

11. Individuals are encouraged to provide any supporting evidence alongside their completed PIP2 form, or subsequently when such evidence becomes available. Digital submission routes are being introduced through a phased transformation programme run by the Health Transformation Programme (HTP), though these options are not yet available to all claimants.

Functional assessment

12. Functional assessments are delivered by external assessment providers. These providers employ health professionals to conduct assessments and provide clinical advice that supports DWP case managers in determining entitlement to PIP.

13. The most appropriate assessment route is considered on a case-by-case basis. Where sufficient evidence is available, a claim may be assessed through a paper-based review. In most cases, however, a health professional carries out a functional assessment to evaluate how the individual's condition affects their ability to undertake

daily living and mobility activities.[1] Assessments may be conducted by telephone, video call or face-to-face.

DWP decision making

14. After considering the available information and evidence, the health professional prepares a report for DWP. This report outlines the individual's circumstances and includes recommendations relating to the assessment criteria to support decision making on a PIP award.

15. A DWP case manager reviews all available evidence, including the assessment report, the claimant's completed PIP2 questionnaire and any additional supporting information. The case manager then determines whether the individual is entitled to PIP, the rate payable and the duration of the award. The individual is subsequently notified of the decision in writing.

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1 Data about the mode of assessments is available here: Personal Independence Payment decisions by health assessment mode - GOV.UK

Mandatory reconsideration and appeals

16. Individuals who disagree with a decision about their PIP award may request that the decision is reviewed by a different DWP case manager through a process known as a Mandatory Reconsideration (MR). Requests should normally be made within one month of the decision date and should include the reasons for disputing the decision, together with any additional supporting evidence. Requests may be submitted by telephone or in writing.

17. Following completion of the MR process, the individual receives a further decision notice. The original decision may either be revised or upheld. If the individual remains dissatisfied with the outcome, they may appeal to an independent tribunal within one month of the date shown on the MR notice.

18. Tribunals are administered by HM Courts and Tribunals Service. The tribunal considers all available evidence, including evidence presented during the hearing, and determines the decision that should have been reached.

Award review and change of circumstances

19. Once someone has been awarded PIP, which can be paid at one of eight rates, that award will, at a later date, either be reviewed or the claimant will be required to submit a new claim. Award durations are based on an individual's circumstances and can vary from nine months to an on-going award, with a light touch review at the ten-year point.

20. Where an individual receives a fixed-term PIP award with a review date, DWP undertakes a review before the award expires. This process is known as an award review, and the individual is issued with an AR1 form to complete. From 6 April 2025, DWP made some small operational changes to the duration of certain awards to reduce unnecessary award reviews where there is no change in outcome for claimants. For most claimants over 25, their first review will be a minimum of 3 years and, assuming they remain entitled, 5 years for their next review.

21. Some individuals with long-term conditions or impairments where needs are unlikely to change, as well as those receiving the highest level of support whose needs are expected to remain the same or increase, receive an ongoing award. These awards are subject to a light-touch review after ten years, for which an AR2 form is issued.

22. Most individuals who have reached State Pension age also receive an ongoing award with a review after ten years and are similarly issued with an AR2 form.

23. If an individual's circumstances change during the award period, they can notify DWP by telephone. Simple changes, such as a change of address, can generally be recorded over the phone. More complex changes, including changes in health conditions or needs, require completion of an AR1 UI form.

24. Both award reviews and reported changes of circumstances result in DWP making a new determination of entitlement to PIP. As with an initial claim, individuals who disagree with the decision may request a Mandatory Reconsideration and, if they remain dissatisfied, appeal to an independent tribunal.

Special Rules for end of life

25. Special provisions apply to individuals nearing the end of life under the Special Rules for End of Life (SREL). The legislative criteria require that the individual is suffering from a progressive disease and that death as a consequence of that disease can reasonably be expected within 12 months.

26. Individuals who indicate that they are nearing the end of life when applying for PIP are not required

to complete the PIP2 questionnaire or undergo a functional assessment. Instead, DWP advises them to obtain an SR1 form from an appropriate clinician, such as a GP, consultant, specialty doctor, hospice doctor or senior specialist nurse. The SR1 provides medical evidence in support of the claim and contains factual information on the individual's condition, diagnosis or prognosis, and treatment.

27. Claims made under the SREL provisions are prioritised and fast-tracked. As of April 2026, such claims were processed in an average of four days. Individuals are automatically entitled to the enhanced rate of the daily living component. Entitlement to the mobility component is determined through a paper-based review, with almost all SREL claimants (95%) receiving the enhanced rate. DWP also provides dedicated telephone support for individuals nearing the end of life. Staff handling these cases receive additional training to help ensure that claims are processed both quickly and sensitively.