



12 May 2022

Tēnā koe

On 18 March 2022, you emailed the Ministry of Social Development (the Ministry) requesting, under the Official Information Act 1982 (the Act), the following information:

- *I'm keen to find out, for the years 2016, 2017, 2018, 2019, 2020, and 2021:*
- *How many people were receiving the Supported Living Payment*
- *How many of those people were exempt from the two-yearly health condition reviews*
- *How many people underwent a Supported Living Payment review*
- *How many people were asked to provide a Work Capacity Medical Certificate*
- *How many people lost their access to the Supported Living Payment as a result of one of these reviews*
- *If known, how many people with permanent disabilities were asked to complete a Work Capacity Medical Certificate*
- *I'm also keen to see a copy of the guidance that MSD staff use to assess whether someone needs to complete a health review or not.*

On 13 April 2022, the Ministry emailed you to advise that more time was required to respond, due to the consultations necessary to make a decision on your request.

I have grouped your questions for the sake of clarity and will respond to each group in turn.

- *I'm keen to find out, for the years 2016, 2017, 2018, 2019, 2020, and 2021:*

- *How many people were receiving the Supported Living Payment*
- *How many of those people were exempt from the two-yearly health condition reviews*

Please refer to **Table One** below in response to your request.

Table One: Number of clients receiving Supported Living Payment as at end of December in the years 2016 to 2021, broken down by calendar year

Year ending	Clients exempt from two-yearly reviews	Total number of clients
December 2016	43,980	89,448
December 2017	41,658	89,310
December 2018	39,402	89,241
December 2019	37,728	90,411
December 2020	37,167	91,452
December 2021	36,909	91,074

Notes for Table One:

- This table only includes working age clients (18 to 64 years).
- To protect confidentiality the Ministry uses processes to make it difficult to identify an individual person or entity from published data.
- These data tables have had random rounding to base three applied to all cell counts in the table.
- The published counts will never differ by more than two counts.

The Supported Living Payment (SLP) is for people who are permanently and severely restricted in their capacity for work because of a health condition, injury, or disability or totally blind; or they are caring for a person who requires full-time care and attention at home. A permanent and severe health condition, injury, or disability is one that is expected to continue for at least two years and means that the client cannot work 15 hours or more per week in open employment.

When a client applies for SLP, supporting information is used to decide whether the client is both permanently and severely restricted in their capacity to work. A client’s capacity for work is assessed by a person who is registered with an authority as a practitioner of a particular health profession. They can provide either a medical certificate or suitable existing assessments. This supporting information is also used to determine if the client’s capacity will be reassessed in a two-year period, or never.

For some clients, it is reasonable to expect the impact of their permanent health condition or disability may change over time and the client's ability to work may improve. These clients will have their benefit reassessed in two years through a medical reassessment. You can find more information about medical reassessments in the public domain, here: www.workandincome.govt.nz/map/income-support/main-benefits/supported-living-payment/medical-reassessment-for-supported-living-payment-01.html

When reviewing entitlement for Supported Living Payment (health condition, injury or disability), a client can provide either a medical certificate from their health practitioner or suitable existing assessments

Some clients may qualify for simplified access to SLP if they have a specific diagnosis and their health condition or disability is unlikely to improve over time. Clients with simplified access will never require medical reassessment. There are four diagnosis categories that meet this criteria:

- Totally blind
- Terminally ill
- Severe intellectual or cognitive impairment
- Disorder that has reached a stage of deterioration to extent that condition severely impacts on their ability to function and is unlikely to improve.

You can find more information about specific diagnosis in the public domain, here: www.workandincome.govt.nz/map/income-support/main-benefits/supported-living-payment/simplified-access-to-supported-living-payment-01.html.

In addition to two-yearly medical reassessments, clients receiving SLP are subject to a periodic Review of Circumstances, which confirms that the client still meets the qualifications for SLP, checks for any changes in their circumstances, reviews the rate of SLP payable and any 'Extra Help' they may be receiving. All clients are subject to a Review of Circumstances, which is undertaken every 52 weeks while the benefit remains current. More information about Reviews of Circumstances can be found in the public domain, here: www.workandincome.govt.nz/map/income-support/main-benefits/supported-living-payment/changes-and-reviews-supported-living-payment/review-of-circumstances-01.html.

A client is obligated to advise the Ministry of any changes in their circumstances that may affect their entitlement to SLP, so that their benefit entitlement can be reviewed. Case Managers may also review a benefit at any time to ensure that the client still meets the qualifications and is receiving the correct rate of payment. You can read more about changes and reviews to SLP entitlement, here: workandincome.govt.nz/map/income-support/main-benefits/supported-living-payment/changes-and-reviews-supported-living-payment-01.html.

[living-payment/changes-and-reviews-supported-living-payment/changes-and-reviews.html](#)

- *How many people underwent a Supported Living Payment review*

The Ministry has interpreted your request for information relating to the 'Supported Living Payment review' as referring to the two-yearly medical reassessment. The Ministry does not centrally record how many clients in receipt of SLP underwent a two-yearly medical reassessment each year. As indicated, a client's benefit may be reviewed at any time and for a range of different reasons. The Ministry's centralised reporting is not able to disaggregate two-yearly medical reassessments from other types of review; that is, not without a substantial manual search of client files.

As such, I refuse your request for how many clients underwent a medical reassessment under section 18(f) of the Act. The greater public interest is in the effective and efficient administration of the public service.

- *How many people were asked to provide a Work Capacity Medical Certificate*
- *How many people lost their access to the Supported Living Payment as a result of one of these reviews*
- *If known, how many people with permanent disabilities were asked to complete a Work Capacity Medical Certificate*

The Ministry does not centrally record the number of clients from whom a Work Capacity Medical certificate has been requested, whether as part of a two-yearly medical reassessment for SLP or for another reason (e.g., initial benefit application). As with your previous question, to provide you with this information, Ministry staff would have to manually review a substantial number of client files. As such, I refuse your request for how many clients underwent a medical reassessment under section 18(f) of the Act. The greater public interest is in the effective and efficient administration of the public service.

If a client's medical reassessment determines that the impact of their health condition or disability has improved and their capacity to work has increased, a client's SLP may be cancelled, or the client might be transferred to a different benefit if they meet the appropriate qualifications.

However, the Ministry does not centrally record the number of SLP recipients whose two-yearly medical reassessments have resulted in the cancellation of their payments or a transfer to another benefit. Although it does record the number of benefit cancellations and benefit transfers among SLP recipients for various reasons, the Ministry is not able to disaggregate just those cancellations and transfers that resulted from a two-yearly medical reassessment; or, rather, this cannot be done without a manual review.

All other clients will be reassessed in 2 years as their capacity for work could improve enough that they could regularly work 15 hours per week or more in open employment. The reassessment, however, is not reviewing whether the health condition is permanent or not.

As outlined above, some clients who are assessed as having qualifying conditions that are not deemed likely to improve may be granted Supported Living Payment through simplified access. These clients will never have their capacity to work reassessed.

- *I'm also keen to see a copy of the guidance that MSD staff use to assess whether someone needs to complete a health review or not.*

Manuals and Procedures (MAP) is a direct copy of the Ministry's internal website that Ministry staff use to interpret legislation and regulations. You can find the guidance followed by staff when determining whether a client will need to complete a medical reassessment when they are receiving SLP, here: www.workandincome.govt.nz/map/income-support/main-benefits/supported-living-payment/changes-and-reviews-supported-living-payment/review-of-clients-health-condition.html.

The principles and purposes of the Official Information Act 1982 under which you made your request are:

- to create greater openness and transparency about the plans, work and activities of the Government,
- to increase the ability of the public to participate in the making and administration of our laws and policies and
- to lead to greater accountability in the conduct of public affairs.

This Ministry fully supports those principles and purposes. The Ministry therefore intends to make the information contained in this letter and any attached documents available to the wider public. The Ministry will do this by publishing this letter on the Ministry's website. Your personal details will be deleted, and the Ministry will not publish any information that would identify you as the person who requested the information.

If you wish to discuss this response with us, please feel free to contact OIA_Requests@msd.govt.nz.

If you are not satisfied with this response regarding Supported Living Payment two-yearly medical reassessments, you have the right to seek an investigation and review by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz or 0800 802 602.

Ngā mihi nui


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