



Eligibility Summary Category A Manual Wheelchair

Protected A (when completed)

Alberta Aids to Daily Living (AADL)

The information on this form is being collected and used by Alberta Health pursuant to sections 20, 21, 22 and 27 of the *Health Information Act*, sections 33(a) & (c) and 34 of the *Freedom of Information and Protection of Privacy Act (FOIP)* and the *Alberta Aids to Daily Living and Extended Health Benefits Regulations* for the purpose of obtaining an AADL benefit. If you have any questions about the collection of this information, you can contact the Alberta Aids to Daily Living program at ATB Place North, 10025 Jasper Avenue NW, Edmonton, AB, T5J 1S6. Telephone: 780-427-0731, Fax: 780-422-0968.

This form must be completed and uploaded with an authorization to the Alberta Blue Cross online health portal to confirm client eligibility for funding assistance from Alberta Aids to Daily Living (AADL).

Client name:	Client PHN
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Check type of category A chair

<input type="checkbox"/> Category A standard wheelchair	<input type="checkbox"/> Category A tilt-in-space with headrest and back	<input type="checkbox"/> Recliner
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Check all that apply

A comprehensive seating assessment, such as the AADL Seating Assessment form, has been completed and a copy kept on client's file.	<i>This must be available upon request</i>
The client's weight and condition has been stable for minimum of three months.	<i>Client not eligible if not stable</i>
Confirmed client is not eligible for primary funding through WCB, private insurance, NIHB or Veteran's Affairs.	<i>Client who is eligible through these funding agencies are not eligible for AADL benefits</i>
Client has or is applying for a power wheelchair.	<i>Power mobility clients are eligible for category A recycle only.</i>
Pediatric client requires adult wheelchair as no pediatric wheelchair on the program meets the child's needs due to the following reasons:	
Client requires tilt as unable to be seated upright or:	<i>Explain:</i>
Client willing to accept comparable substitute.	

Check off options and confirm eligibility

*W104	OAD – One-arm drive	Impaired unilateral upper extremity strength, unable to propel wheelchair.
W105	OAD – One-arm drive for tilt-in-space	Impaired unilateral upper extremity strength, unable to propel wheelchair.
*W106	Elevating leg rests	Limited range of motion in knees.
*W107	Angle adjustable footplates	Limited range of motion in ankles.
W110	Oxygen holder	
*W111	Extra-wide option	Does not require heavy duty but requires increased width.
W112	Vent tray	To be added with original order.

*Not available on tilt-in-space or recliners

Other reason for any above:

Authorizer Information

<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Authorizer name and number (print)	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Authorizer signature	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Date
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