CHAPTER 14

STUDY PLAN

SPECIAL BENEFITS

OBJECTIVE

To learn about the additional special benefits available to veterans with disabilities, their families, and their survivors.

REFERENCES

- Title 38, U.S. Code, Chapters 11, 17, 18, 21, and 39
- Adjudication Manual M21-1 Part I, Appendix B
- Adjudication Manual M21-1MR (Manual Rewrite), Part 9, Subpart I, Chapters 2–7
- Veterans Benefits Manual, §§ 7.7, 10.3, 10.23, 11.5

SUMMARY

A wide range of special services and benefits are available for veterans with disabilities. These may include prosthetic devices, medical accessories and similar appliances, or monetary grants for alteration and/or adaptation of a home or automobile to accommodate the particular disability. The qualifying disability does not necessarily need to be service-connected, although eligibility requirements may be different for service-connected disabilities than for nonservice-connected ones.
Appliances and devices available include, but are not limited to, artificial limbs, braces, canes, crutches, wheelchairs, orthopedic shoes, eyeglasses, and hearing aids. These may all be furnished as a necessary part of any medical care, whether inpatient or outpatient, which the veteran is eligible to receive and is receiving. Once issued, such appliances or devices may be repaired or replaced by VA as necessary. In addition, if such appliances require the wearing of special clothing, the clothing may be purchased, made, or repaired by VA or at VA expense. All such items are provided by the Prosthetics and Sensory Aids Service (PSAS) at the VA Medical Center having jurisdiction for the veteran’s area of residence, upon application and determination of feasibility and need. This will usually be based upon a written order or request from the veteran’s treating physician. VA will also provide any necessary training in the use of the appliances and devices.

VA will provide invalid lifts for certain veterans who have been determined to be in need of regular aid and attendance, whether service-connected or for special monthly pension. The qualifying disability on which such need is based is anatomical loss or loss of use of both lower extremities plus the loss or loss of use of at least one upper extremity, together with a medical determination that as a result, the veteran is incapable of transferring from the bed to a wheelchair or back without the aid of an attendant, and a lift is a feasible means for accomplishing such transfers. In addition, the veteran may be furnished other therapeutic and rehabilitative devices, including medical equipment and supplies (but not medications) which are determined to be medically necessary.

Veterans who are service-connected for hearing loss, and who are rated 80% or more for such hearing loss, may be furnished assistive devices including telecaptioning decoders to help overcome their hearing handicap.

Blind veterans who are entitled to compensation for any service-connected disability (the blindness need not be service-connected) may be furnished a trained guide dog and/or mechanical or electronic blind aid equipment as appropriate. VA will furnish the training, and will also provide for the period of adjustment to the guide dog, including the expenses of travel, food and lodging if the veteran is required to be away from his or her usual place of residence during this period of adjustment.
Service dogs are trained to help those with disabilities other than visual or hearing impairment. Service dogs typically perform tasks for the benefit of an individual with a physical or hearing disability. Veterans approved for service dogs are referred to Assistance Dogs International-accredited agencies. There is no charge for the dog or the associated training. Veterans with working service dogs are provided veterinary care and equipment through VA Prosthetics and Sensory Aids. VA does not pay for boarding, grooming, food, or any other routine expense associated with owning a dog.

**CLOTHING ALLOWANCE**

In addition to the goods and services listed above, VA also provides certain monetary benefits to qualified disabled veterans: if a veteran has a service-connected condition which requires the wearing or use of an orthopedic or prosthetic appliance (including a wheelchair) that tends to tear or wear out clothing, or has a service-connected skin condition and uses medication for it that tends to stain or otherwise damage the clothing, an annual clothing allowance is payable upon application to the Prosthetics and Sensory Aids Service (PSAS) at the VA Medical Center of jurisdiction. If the veteran is service-connected for anatomical loss or loss of use of one or more extremities, the allowance is automatically authorized after the initial application. In all other cases PSAS must determine if the veteran has a qualifying disability, and if so, whether the need for the orthopedic or prosthetic device or the medication for the skin condition is permanent. If PSAS determines that the need is permanent, the allowance is automatically paid thereafter; if the need is not shown to be permanent, the veteran must reapply for the clothing allowance each year. As of December 2015, the annual clothing allowance is $753.

*Relevant VA Form:*

- 10-8678, *Application for Annual Clothing Allowance*
HEALTH CARE COVERAGE FOR DEPENDENTS

In addition to the special benefits for veterans, VA will also provide healthcare insurance coverage for the dependents or survivors of certain totally disabled veterans (whether rated 100% schedular or rated totally disabled by reason of individual unemployability) under the Civilian Health and Medical Program, VA (CHAMPVA). For a dependent to be eligible under this program, the veteran-sponsor must:

- Be rated permanently totally disabled from service-connected disability; or
- Have died on active duty, in line of duty; or
- Have died after service from a service-connected disability; or
- Have been rated service-connected and permanently totally disabled at the time of death from any cause not willful misconduct.

Eligible persons include the veteran’s spouse or surviving spouse, minor children under age 18, children between the ages of 18 and 23 who are attending an approved school, and children over age 18 who have been determined to be permanently incapable of self-support (“helpless”). Dependents of retired or other military personnel who are eligible for health care coverage under TRICARE are not eligible for coverage under CHAMPVA.

An eligible surviving spouse who is over age 55 and who remarries will not lose eligibility for health care coverage under CHAMPVA. (Similar provisions exist for other survivors’ benefits including DIC, but the qualifying age at time of remarriage is 57.)

Previously, coverage under CHAMPVA terminated at age 65 for beneficiaries who were eligible for Medicare Part A hospital insurance. Beginning June 5, 2001, Public Law 107-14 extended eligibility for CHAMPVA benefits to persons entitled to the hospital insurance under Medicare part A, but only if the individual was (and is) also enrolled in the supplementary medical insurance program under Medicare Part B. When a person is eligible under both programs, CHAMPVA is always the secondary payer to Medicare. A covered
beneficiary is not required to enroll in Medicare Part D to remain eligible under CHAMPVA. (38 C.F.R. § 17.271(b).) CHAMPVA is always the secondary payer to Medicare Parts A and B, Medicare supplemental insurance plans, and Medicare HMO plans for services received on or after October 1, 2001.

CHAMPVA will cover part of the cost for most health care services and supplies that are considered medically or psychologically necessary. VA’s share of the cost of a health care service under CHAMPVA is based on what is termed an “allowable” amount. The CHAMPVA program pays 75% of the allowable amount.

In general, a person covered under CHAMPVA may seek treatment from any licensed health care provider or at any licensed medical facility, including many VA medical facilities. CHAMPVA administration, including applications and claims processing, is centralized to the VA Health Administration Center, Denver, Colorado. For more information on coverage and exclusions, see 38 C.F.R. § 17.272 and www.va.gov/hac/forbeneficiaries/champva/champva.asp.

There are three types of CHAMPVA decisions that a veteran may seek to challenge:

1. whether an applicant has legal eligibility for CHAMPVA benefits;
2. whether the services received by an approved CHAMPVA beneficiary are covered; and
3. how the cost-sharing is calculated.

If the disagreement is with basic eligibility, appeals are handled through the standard VA appellate procedure. If the disagreement is with the second or third type of determination, then the usual appeal process is not applicable. The first step for the veteran is to request reconsideration from the Health Administration Center in Denver, CO. The request must be received within one year of the decision, it must offer reasons why the decision is in error, and it must include any new evidence. If the veteran disagrees with the reconsideration, that
he or she may, within 90 days of the date of the reconsideration decision, request review by
the Health Administration Center Director. The Director’s decision is final.

Relevant VA Form:

■ 10-10d, Application for CHAMPVA Benefits

**SPINA BIFIDA ALLOWANCE**

VA will pay a special monthly allowance to or for the natural child of a veteran who was
exposed to Agent Orange in service if the child was conceived after the date of the
veteran’s exposure to Agent Orange and the child is suffering from *spina bifida* (an anomaly
where a portion of a baby’s neural tube fails to develop properly, causing defects in the
spinal cord and the bones of the spine – mayoclinic.org). Exposure to **Agent Orange** is
presumed for a veteran serving in Vietnam between January 9, 1962 and May 7, 1975, or in
or near the Korean demilitarized zone during April 1, 1969 to August 31, 1971. (A child with
spina bifida born to a veteran who served in or near the DMZ in Korea between September
1, 1967 to April 1, 1968 may also be eligible but Agent Orange exposure is not conceded, it
must be proven.) For purposes of this benefit, the term “spina bifida” means all forms and
manifestations of spina bifida except spina bifida occulta. (38 C.F.R. § 3.814(c)(2).)

The current age or marital status of the child is not relevant to this allowance, and receipt of
the allowance has no bearing on any other VA benefit payable to or for the child based on
the child’s relationship to the veteran. In addition, payment of the spina bifida allowance
may not be counted as income or assets for the purpose of establishing or denying
eligibility for any other Federal or Federally-assisted program. If both of the natural parents
are Vietnam veterans, only one allowance is payable to or for the affected child.

Application for the allowance is made by submitting a completed VA Form 21-0304,
*Application for Benefits for Certain Children with Disabilities Born of Vietnam Veterans and
Certain Korean Service Veterans*, together with appropriate supporting medical evidence to
show that the child has spina bifida and the severity of the condition.
The VA Regional Office, Denver, Colorado, has exclusive jurisdiction over all claims for spina bifida allowance. Payment will be based on three levels of disability, from Level I (able to ambulate unassisted, with minimal to mild impairment of functioning or intellect) to Level III (grossly impaired, nonambulatory, severely mentally retarded, and/or completely incontinent of bladder and bowel). The rates of payment for each level of impairment are set out at: http://www.benefits.va.gov/COMPENSATION/rates-index.asp.

If the supporting medical evidence is not adequate to show the child’s level of disability, a rating of Level I will be assigned and a VA examination scheduled for a definitive assessment. Infants under one year of age at time of application will be rated as Level I unless the medical evidence shows neurological deficits of such severity as to warrant an immediate rating at Level III. In either event, the level of disability will be reassessed when the child is one year of age. Children between the ages of 5 and 21 will be periodically reassessed, at intervals not greater than five years, until they reach age 21. After age 21, VA will not further reassess the level of disability unless there is evidence of material change in the severity of the child’s condition, or evidence that the current rating may be incorrect.

Besides payment of the special monthly allowance to or for an eligible child suffering from spina bifida, VA will also provide the child with a program of appropriate vocational rehabilitation and training. This is similar to the training programs provided for eligible veterans under 38 U.S.C., Chapter 31, except that subsistence allowance, independent living services and certain other related services may not be provided for the child.

In addition, VA will provide all necessary treatment for the spina bifida and any conditions directly arising from it. Treatment will be furnished by VA, either directly or under contract with an approved health care provider. Other arrangements for the child’s spina bifida related care may also be honored, provided they are authorized in advance. In these cases, the authorization is issued by the VA Health Administration Center in Denver, Colorado. Claims for payment are handled on the same basis as claims under the CHAMPVA program.
Relevant VA Form:
- 21-0304, Application for Benefits for Certain Children with Disabilities Born of Vietnam Veterans and Certain Korea Service Veterans

**MONETARY ALLOWANCE FOR CHILDREN OF WOMEN VIETNAM VETERANS BORN WITH CERTAIN BIRTH DEFECTS**

In addition to the allowance described above for spina bifida in a child of any Vietnam veteran, male or female, the Veterans Benefits and Health Care Improvement Act of 2000 authorized payment of a monetary allowance for each biological child of a woman Vietnam veteran who served in Vietnam between February 28, 1961 and May 7, 1975, conceived after the date the veteran first served in the Republic of Vietnam, who suffers from any of certain identified birth defects. All birth defects are included unless specifically excluded.

The classes of those excluded (not covered) birth defects are:

- Familial disorders including hereditary genetic conditions, such as cystic fibrosis or sickle cell disease;
- Congenital malignant neoplasms, such as neuroblastoma;
- Chromosomal disorders, such as Down's syndrome;
- Conditions due to birth-related injuries, such as cerebral palsy
- Conditions due to fetal or neonatal infirmity with well-established causes, such as hyaline membrane disease or maternal-infant blood incompatibility;
- Conditions that are developmental disorders, such as autism or learning disorders; or
- Conditions that do not result in permanent mental or physical disability, including conditions that are rendered non-disabling through surgical or other treatment.

As with the spina bifida allowance, the current age or marital status of the covered child is not relevant, and receipt of this allowance has no bearing on any other VA benefit payable to or for the child based on the child's relationship to the veteran. In addition, payment of
this allowance may not be counted as income or assets for the purpose of establishing or denying eligibility for any other Federal or Federally-assisted program.

VA Form 21-0304 has been revised and re-titled Application for Benefits for Certain Children with Disabilities Born of Vietnam Veterans and Certain Korea Service Veterans, and is used to apply both for the spina bifida allowance and for the allowance under this program. VARO Denver, Colorado, has exclusive jurisdiction over both programs. The evidentiary requirements for this allowance are essentially the same as for the spina bifida allowance. Five levels of disability have been established, from Level 0 (no current disability) to Level IV (physical or mental defects that prevent age-appropriate self-care; or, behavior, communication, intellectual functioning, or social interaction are grossly inappropriate for age; or, disfigurement or scarring of the head, face, or neck with either gross distortion or gross asymmetry of features). The monetary rates payable for each level are listed at: [www.benefits.va.gov/COMPENSATION/rates-index.asp](http://www.benefits.va.gov/COMPENSATION/rates-index.asp).

If an eligible child’s only covered birth defect is spina bifida, the child may only be paid the spina bifida allowance. If the child has any other covered birth defect in addition to spina bifida, then only the allowance under this program may be authorized; however, the allowance paid may not be less than the amount of the allowance that would have been payable if the child’s only covered birth defect was spina bifida.

As with the spina bifida allowance, VA will provide an eligible child with appropriate vocational rehabilitation and training, with similar limitations. In addition, VA will provide any and all necessary treatment for the covered birth defect(s) and resulting conditions, either at a VA medical facility or by contract with an approved local health care provider. Health care claim and authorization requirements are similar to those for the spina bifida allowance.

Relevant VA Form:
RESTORED ENTITLEMENT PROGRAM FOR SURVIVORS (REPS)

The REPS Program is one of the least-known VA programs for survivors of deceased veterans. The Omnibus Budget Reconciliation Act of 1981 eliminated Social Security benefits for certain surviving spouses with children. Congress restored benefits for the veteran’s surviving spouse until the youngest child reached age 18, and for unmarried post-secondary school students between ages 18 and 22. REPS is a unique hybrid program—it is funded by the Department of Defense, but is administered by VA using a mixture of VA and Social Security Administration (SSA) eligibility criteria.

Qualifying eligibility for REPS requires that:

- The veteran died in service before August 13, 1981.
- If the veteran died in service after August 12, 1981, the condition which caused or contributed to death must have had its onset before August 13, 1981. (This includes persons listed as missing in action prior to August 13, 1981, for whom a casualty report shows a date of (presumed) death after August 12, 1981.)
- If the veteran died after service, the service-connected condition which caused or contributed to death must have had its onset before August 12, 1981, and must have been incurred or aggravated in line of duty. The character of discharge from service is not a factor for purposes of REPS eligibility. Any disease which may be presumptively connected to service prior to August 13, 1981 (to specifically include presumptively herbicide-related diseases for veterans who served in Vietnam during the Vietnam-era or near the Korean DMZ between 1968 and 1971) will establish eligibility. DIC under either 38 U.S.C. § 1318 or 38 U.S.C. § 1151 does not establish eligibility.

The rules and criteria for establishing relationship to the veteran are specified by SSA. Those rules are similar, but not identical, to the corresponding VA rules. The surviving spouse is eligible for REPS benefits if the youngest child of the veteran in the spouse’s care is at least
16 years old but younger than 18. Under certain circumstances, the veteran's grandchild may be recognized as a "child" for REPS purposes. A surviving spouse who remarries may re-establish eligibility if the remarriage is subsequently terminated. A child who is over age 18 but under age 22 must be attending post-secondary school full-time. A schoolchild who marries after REPS eligibility has been established loses eligibility. The child may re-establish REPS eligibility if the marriage is voided or annulled, but not if the marriage is terminated by death or divorce.

Application for REPS benefits is made by submitting a completed VA Form 21-8924.1, *Application of Surviving Spouse or Child for REPS Benefits*, plus appropriate proof of the veteran's service, acceptable proof of death, and proof of relationship (if not previously submitted) to the VA Regional Office, St. Louis, Missouri, which has exclusive jurisdiction of REPS claims. There is no time limit for applying—if eligibility is established, benefits will be paid from the earliest date eligibility is shown (but not earlier than January 1, 1983). If VARO St. Louis needs additional evidence or a rating or other determination to establish basic eligibility, it will be requested from the VA Regional Office having jurisdiction of the claims file.

Although both benefits require a service-connected death, eligibility for REPS benefits is independent of receipt (or denial) of DIC. Further, there is no requirement that the claimant must have previously applied for Social Security, and failure to file an application for Social Security benefits does not preclude awarding REPS benefits. If the recipient is receiving Social Security, the amount of Social Security will be offset from the REPS award. A schoolchild may be paid benefits for periods of non-attendance of four months or less (such as vacation periods), providing that the child was attending school full-time immediately before the break and resumes full-time attendance immediately after the break. Periodic certification of continued attendance is required.
Rates payable under the REPS program are based on the deceased veteran’s Social Security earnings record and the number of eligible beneficiaries (or potential beneficiaries). In addition, there are limitations on wages and earned income for all beneficiaries, and periodic reporting of income is required. If the earned income limits are exceeded, the REPS rates otherwise payable will be reduced by $1 for each $2 the income is over the annual limits.

Relevant VA Form:

- 21-8924.1, Application of Surviving Spouse or Child for REPS Benefits
STUDY QUESTIONS

Using the assigned references and reading materials, answer the following questions:

1. To qualify for payment of the annual clothing allowance, the veteran need not be service connected. (T/F) 38 C.F.R. § 3.810

2. If the veteran retired from service based on longevity (length of service) and later establishes a service-connected disability ratable at 100%, is the veteran’s spouse eligible for health care insurance coverage under both TRICARE and CHAMPVA? (Y/N) 38 C.F.R. § 17.271(a)(1)

3. Beneficiaries who have health care coverage under CHAMPVA may be furnished treatment at a VA medical facility. (T/F) 38 C.F.R. § 17.274(a)

4. The special allowance for spina bifida in a child of a Vietnam veteran or veteran covered service in Korea may only be paid so long as the child is under the age of 18, or age 23 if he or she is in school fulltime. (T/F) 38 C.F.R. § 3.814(c)(3); 38 U.S.C. § 1811(1)

5. When it is established that a Vietnam veteran or veteran covered service in Korea has a child between the ages of one and twenty-one who suffers from spina bifida, the severity of the child’s disability will be reviewed:
   
   a. Only once, at the time that eligibility to the award is initially established. The disability is considered to be static thereafter.
   
   b. As often as may be considered necessary, based on the facts of the particular case.
   
   c. At intervals of not more than five years, up to age 21. After that the disability will be reviewed only if there is evidence of material change in the severity of the disability.
   
   d. None of the above. 38 CFR 3.814(6)

6. The Department of Veterans Affairs is responsible for providing or providing for, all necessary health care as required for spina bifida and associated disabilities in a child of a Vietnam veteran or veteran covered service in Korea. (T/F) 38 CFR 17.901(a)
7. If a female Vietnam veteran or veteran covered service in Korea has a child with spina bifida, the child may be paid the spina bifida allowance and the allowance for birth defects. (T/F) 38 CFR 3.814(a)

8. Which of the following birth defects are not covered under the allowance for birth defects in children of female Vietnam veterans?
   a. Cystic fibrosis
   b. Cerebral palsy
   c. Autism
   d. All of the above 38 CFR 3.815(c)

9. A covered disabled child of a Vietnam veteran or veteran covered service in Korea may receive appropriate Vocational Rehabilitation programs and services from VA similar to a disabled veteran, except that a subsistence allowance may not be paid to the child. (T/F) 38 CFR 21.8050(c)


11. REPS benefits for a schoolchild are only payable while the school the child is attending is actually in session. (T/F) Section 156 (a)(1) and (b)(1) of Pub. L. Law 97-377

12. The definition of a "child" for REPS benefits purposes is the same as for any other VA program. (T/F) 38 CFR 3.812(a)(2)

13. There is no time limit for filing a claim for REPS benefits, and if eligibility is established, benefits may be paid retroactively. (T/F) 38 CFR 3.812(f)
AUTOMOBILE AND SPECIAL ADAPTIVE EQUIPMENT

If a veteran is entitled to compensation (including compensation under 38 U.S.C. § 1151) because of anatomical loss or permanent loss of use of one or both hands, or one or both feet, or because of permanent impairment of vision in both eyes, or because of severe burn injury, VA will pay up to $20,114.34 towards the purchase of an automobile or other conveyance plus any necessary special adaptive equipment which will allow the veteran to safely and effectively operate the automobile or other conveyance. This is a one-time payment only. The Prosthetics and Sensory Aids Service at the VA Medical Center may also authorize special adaptive equipment for veterans who are entitled to compensation for complete ankylosis of one or both hips or one or both knees, as well as authorizing adaptive equipment for subsequent vehicles for any veteran who has any of the above disabilities. The special adaptive equipment may be repaired, reinstalled, or replaced as necessary; however, a veteran may not be authorized adaptive equipment for more than two vehicles at a time or during any four-year period, except for unusual circumstances beyond the veteran’s control.

Relevant VA Forms:

- 21-4502, Application for Automobile or Other Conveyance and Adaptive Equipment (Under 38 U.S.C. 3901-3904)
- 10-1394, Application for Adaptive Equipment - Motor Vehicle

SPECIALY ADAPTED HOUSING (SAH), SPECIAL HOME ADAPTATION (SHA), AND HOME IMPROVEMENT AND STRUCTURAL ALTERATION (HISA)

Specially Adapted Housing is a benefit for veterans with severe disabilities to help them build, adapt, or purchase an adapted home. Eligible veterans are those who are entitled to compensation (including compensation under 38 U.S.C. § 1151) and rated permanently and totally disabled based on any of the following disabilities or combinations:
- Anatomical loss or loss of use of both lower extremities, such as to preclude locomotion without the aid of braces, canes, crutches, or a wheelchair;
- Blindness of both eyes, having only light perception, plus anatomical loss or loss of use of one lower extremity;
- Anatomical loss or loss of use of one lower extremity plus residuals of organic disease or injury which so affect the functions of balance or propulsion as to preclude locomotion without the aid of braces, canes, crutches, or a wheelchair;
- Anatomical loss or loss of use of one lower extremity plus anatomical loss or loss of use of one upper extremity which so affects the functions of balance or propulsion as to preclude locomotion without the aid of braces, canes, crutches, or a wheelchair;
- Anatomical loss or loss of use of both upper extremities such as to preclude use of the arms at or above the elbows; or
- A severe burn injury.

A veteran may receive no more than three Specially Adapted Housing grants in her/his lifetime. The maximum benefit for this program in fiscal year 2014 was $70,465. If the veteran has Loan Guaranty entitlement available and meets credit-worthiness and other criteria, VA may also authorize an additional **direct loan** to help defray the costs of buying, building, or modifying the home.
SPECIAL HOME ADAPTATION (SHA)

If the veteran does not qualify for Specially Adapted Housing, he or she may qualify for a Special Home Adaptation grant, which is to be used to increase mobility within the veteran’s residence. The maximum dollar amount allowable for SHA grants for fiscal year 2015 is $14,093. This amount will be adjusted annually based on a cost-of-construction index. SHA is for veterans entitled to compensation for permanent and total disability based either on blindness in both eyes, or anatomical loss or loss of use of both hands. If the veteran has been previously found eligible for Specially Adapted Housing, the Special Home Adaptation grant may not be authorized; however, a veteran who is eligible for a Special Home Adaptation grant may later be authorized for Specially Adapted Housing if additional qualifying disability arises, but the number of grants are limited to three altogether and the total combined amounts may not exceed $50,000 in the aggregate. If the veteran qualifies for both types of grants, only Specially Adapted Housing may be authorized. In any event, no particular type of adaptation, improvement, or structural alteration may be provided the veteran beyond the specified limits.

If the veteran does not qualify under either of the above programs but nonetheless needs assistance with alteration of his or her home to make it wheelchair-accessible or for other special needs, he or she may qualify for a grant under the Home Improvement and Structural Alteration (HISA) program administered by the Prosthetics and Sensory Aids Service (PSAS) at the VA Medical Center. The eligibility requirements for this program are complex; to see a full listing of categories of veterans eligible to receive this benefit, please
see 38 C.F.R. § 17.3102 and 38 U.S.C. § 1710(a). The most common type of eligibility, however, is for veterans with a service-connected disability rating of 50% or more, where the HISA benefit is for a service-connected disability.

New rules regarding HISA became effective January 2, 2015. In general, veterans applying for HISA benefits for a service-connected disability (or for a non-service-connected disability, but the veteran has a service-connected disability of at least 50%), have a maximum lifetime benefit of $6,800 if the veteran applies for benefit on or after May 5, 2010. Applications before May 5, 2010 have a maximum lifetime benefit of $4,100.

Relevant VA Form:
- 26-4555, Application in Acquiring Specially Adapted Housing or Special Home Adaptation Grant
STUDY QUESTIONS

Using the assigned references and reading materials, answer the following questions:

1. To qualify for special adaptive equipment through the prosthetics and sensory aids service at the VA Medical Center, veterans must be entitled to compensation for complete ankylosis of one or both hips or one or both knees. (T/F)

2. The Department of Veterans Affairs will issue an invalid lift for a veteran’s use provided:
   a. The veteran has anatomical loss or loss of use of both lower extremities and at least one upper extremity.
   b. The veteran is entitled to additional rates of special monthly compensation or special monthly pension because of being in need of regular aid and attendance.
   c. The veteran is unable to transfer from bed to a wheelchair and back again without the aid of an attendant.
   d. All of the above. 38 C.F.R. § 17.151

3. VA will provide monetary assistance for a veteran to purchase a specially adapted automobile or other conveyance only one time. (T/F) 38 C.F.R. § 3.808; 38 U.S.C. § 3902

4. How many autos or other conveyances will VA provide special adaptive equipment for an eligible veteran?
   a. Two
   b. Four
   c. There is no limit to the number of vehicles VA will equip.
   d. There is no limit to the number of vehicles VA will equip, but VA will not authorize adaptive equipment for more than two vehicles at any one time. 38 C.F.R. § 17.158

5. To qualify for a Special Home Adaptation grant, a veteran must be permanently and totally disabled and must have suffered the anatomical loss of one hand. (T/F) 38 C.F.R. § 3.809a (b)(1)
6. To be eligible for a grant under the Home Improvement and Structural Alteration (HISA) program, the disability which causes the need for alteration of the veteran’s home must be service-connected. (T/F)

38 U.S.C. § 1717(a)