



Orthotic and prosthetic benefits

Alberta Aids to Daily Living
Program Manual Section OP

This publication is issued under the Open Government Licence – Alberta
(<http://open.alberta.ca/licence>).

Alberta Health
Alberta Aids to Daily Living
Telus House, 13th Floor
10020 100 Street NW
Edmonton, Alberta T5J 0N3

This publication is available online at <https://open.alberta.ca/publications/aadl-program-manual-op>

Alberta Aids to Daily Living Program Manual Section OP – Orthotic and Prosthetic Benefits | Alberta Health
© 2022 Government of Alberta | June 28, 2022 | ISBN XXX-X-XXXX-XXXX-X

Contents

Policy OP – 01	5
Orthotics and Prosthetics Benefits Description	5
• Policy Statement	5
Policy OP – 02	6
Eligibility Criteria.....	6
• Policy Statement	6
• Procedure	7
Policy OP – 03	8
Process for Obtaining Orthotic and Prosthetic Benefits.....	8
• Policy Statement	8
• Procedure	8
Figure 1	10
Process for Obtaining Orthotic and Prosthetic Benefits.....	10
Policy OP – 04	11
Prior Approval for Orthotic and Prosthetic Benefits	11
• Policy Statement	11
• Procedure	11
Policy OP – 05	13
Quantity and Frequency Limits.....	13
• Policy Statement	13
• Procedure	14
Policy OP – 06	16
Specialty Assessor Qualifications	16
• Policy Statement	16
• Procedure	17
Policy OP – 07	19
Specialty Supplier Qualifications	19
• Policy Statement	19
• Procedure	19
Policy OP – 08	21
Approved Product Lists	21
• Policy Statement	21
• Procedure	21

Policy OP – 09	23
Validation Certificate	23
• Policy Statement	23
• Procedure	23
Policy OP – 10	25
Service Dates	25
• Policy Statement	25
• Procedure	25
Policy OP – 11	26
Patient Claim Statement.....	26
• Policy Statement	26
• Procedure	26
Policy OP – 12	27
Definitions	27

Policy OP – 01

Orthotics and Prosthetics Benefits Description

Policy Statement

Alberta Aids to Daily Living (AADL) provides funding to individuals who have a documented ongoing, chronic need for an orthotic or prosthetic device.

Clients must meet AADL general and benefit-specific eligibility criteria to qualify for AADL orthotic and/or prosthetic benefits.

Orthotic and/or prosthetic benefit providers must hold qualifications stipulated under policy OP – 06 Specialty Assessor Qualifications and be employed by a facility that has an agreement with AADL to provide orthotic and/or prosthetic benefits.

AADL only provides funding for one device (either orthotic or prosthetic) per limb or limb segment at a time, subject to the limits described in Policy OP – 02 Eligibility Criteria.

The maximum funding amounts for orthotic and/or prosthetic benefits are listed in Alberta Aids to Daily Living Approved Product List O – Orthotics Benefits and Alberta Aids to Daily Living Approved Product List P – Prosthetics Benefits.

Authorizations and claims for orthotic and prosthetic benefits must be entered by AADL-approved authorizers on the Alberta Blue Cross online health portal.

Policy OP – 02

Eligibility Criteria

Policy Statement

AADL provides funding for one device (either orthotic or prosthetic) per limb or limb segment at a time. AADL provides funding for a primary device. Secondary devices, back-up devices or devices used exclusively for work activities or recreational activities are not eligible for funding as AADL benefits. Benefits that perform duplicate functions are not funded by AADL.

AADL clients are eligible for orthotic and/or prosthetic benefit funding under the following conditions:

- Benefits must be assessed and provided by an orthotic or prosthetic specialty assessor/supplier who is employed by a facility that has an agreement to provide AADL orthotic and/or prosthetic benefits.
- Benefits must be provided to address a documented ongoing, chronic clinical condition. When the need for orthotic and/or prosthetic benefits is for acute medical need, or short-term need such as pre-operative or post-operative indication, refer client to other resources.

Lower limb prosthetic benefits are not funded by AADL if the client has an AADL-funded:

- power wheelchair, or
- category B, C, or D manual wheelchair

AADL will not fund any modifications and/or repairs to an orthotic and/or prosthetic device within 90 days of provision of the device.

Prescriptions

Benefits are only provided when supported by a prescription from a physician or nurse practitioner. For a prescription to be deemed valid for the purpose of client eligibility for AADL-funded orthotic and/or prosthetic benefits, the prescription:

- Must be generic and free of any vendor advertising;
- Must be provided directly to the client, or provided to the orthotic/prosthetic provider of the client's choice;
- Cannot be written by the specialty assessor/supplier;
- Must be current and thus reflect the client's current clinical/functional status including pertinent comorbid medical status and/or condition(s) which confirms client's basic need for specific orthotic and/or prosthetic devices, including benefit replacement or early replacement;
 - a prescription is considered current for a period of three months from the date on the prescription
 - replacement of an AADL-funded device occurs after the frequency period if the previous device no longer meets the client's basic needs due to a documented significant and stabilized change in the client's current clinical/functional status including pertinent comorbid medical status and/or condition(s), or if the equipment cannot be cost-effectively repaired
- Must be written and signed by a physician who is registered and in good standing with the College of Physicians and Surgeons of Alberta or a nurse practitioner who is registered and in good standing with the College and Association of Registered Nurses of Alberta.

A prescription is not required for minor adjustments or repairs and/or if supplying additional soft supplies after original fitting of an AADL-funded orthotic and/or prosthetic device.

Assessment of Clients with Complex Medical Considerations

Clients with complex medical considerations – including but not limited to multiple limb amputations, a complex comorbid medical status and/or condition(s) such as suspected or known cognitive or neurological impairment – and/or a history of orthotic and/or prosthetic device fitting concerns with supplemental orthotic and/or prosthetic device services must be assessed by a physiatrist associated with a multidisciplinary rehabilitation team.

Exceptions can be discussed with the AADL Prosthetics and Orthotics Program Manager.

Procedure

Clients:

- Obtain a current valid prescription for a specific orthotic and/or prosthetic benefits. Clients with complex medical considerations must receive a prescription from a multidisciplinary rehabilitation team.
- Confirm eligibility with specialty assessor/supplier.
- Sign Client Consent form giving consent to use personal and health information.
- Must seek alternative funding for orthotic and/or prosthetic benefits if ineligible.

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

- Determine if clients meet AADL eligibility requirements, and verify client cost-share status.
- Confirm client's previous benefit consumption:
 - refer to Alberta Aids to Daily Living Approved Product List O – Orthotics Benefits and Alberta Aids to Daily Living Approved Product List P – Prosthetics Benefits for quantity limits
 - refer to the Patient Inquiry screen on the Alberta Blue Cross online health portal and check product consumption
 - submit authorization on the online health portal with any relevant documentation, including the Client Consent form
 - refer to Policy OP – 05 Quantity and Frequency Limits for clients who are over quantity/frequency limits for benefits
- Inform clients of their eligibility status.
- Obtain a current and valid prescription(s) from clients.

Policy OP – 03

Process for Obtaining Orthotic and Prosthetic Benefits

Policy Statement

Clients and providers must follow AADL general and benefit-specific policies and procedures for obtaining and providing orthotic and/or prosthetic benefits.

Clients must meet AADL general and benefit-specific eligibility criteria to qualify for AADL orthotic and/or prosthetic benefits. Any exceptions must receive prior approval from AADL. Orthotic and prosthetic specialty assessors/suppliers are responsible for ensuring a client is eligible to receive orthotic and/or prosthetic benefits prior to providing an orthotic or prosthetic device to the client.

AADL or Alberta Blue Cross may conduct audits of claims. Claims will be reversed if there is not sufficient evidence to support client eligibility.

Albertans with private insurance that covers 100 per cent of the cost of the benefit are not eligible for the same benefit under AADL. Once the private insurance coverage has been ruled out or exhausted, the client may become eligible for funding under AADL (Policy GN – 16 Client Eligibility).

Procedure

Clients:

- Obtain a current valid prescription for a specific orthotic and/or prosthetic benefits. Clients with complex medical considerations must receive a prescription from a multidisciplinary rehabilitation team.
- Select an AADL-approved specialty assessor/supplier of orthotic and/or prosthetic benefits from the AADL approved vendor list available at: <https://www.alberta.ca/aadl-approved-vendors-list.aspx>
- Provide a current and valid prescription to, and be assessed by, an AADL-approved orthotic and/or prosthetic specialty assessor/supplier.
- After assessment by an AADL-approved specialty assessor/supplier, review and sign the Client Consent form and the first section of the Validation Certificate.
- After fitting and trial of the device has occurred and the device has been received, review and sign the second section of the Validation Certificate form.
- Must seek alternative funding for orthotic and/or prosthetic devices if ineligible for AADL funding.

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

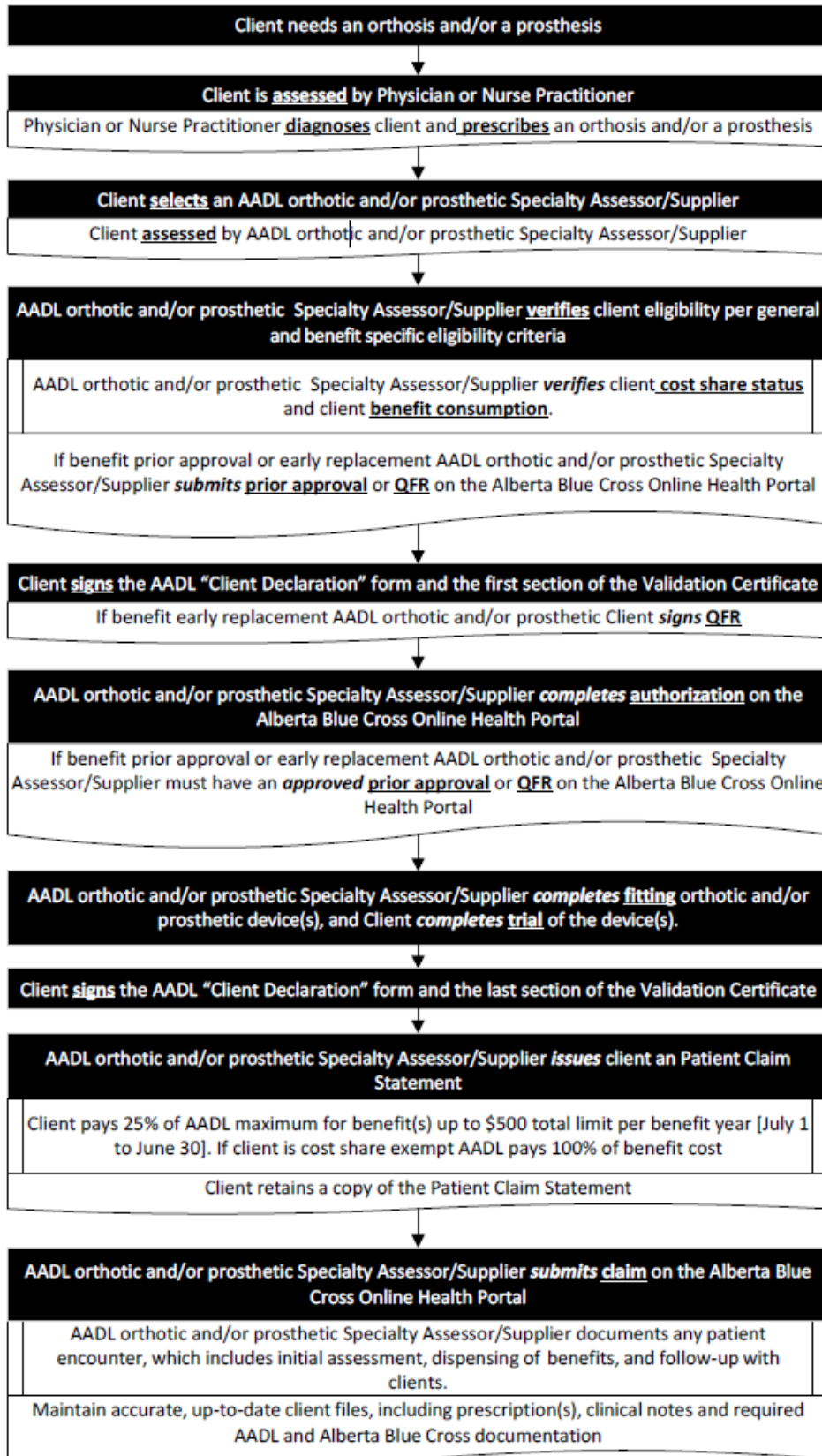
Follow the procedure(s) and process for obtaining orthotic and/or prosthetic benefits as described in AADL general and benefit-specific policies and procedures, as outlined in Figure 1, below.

- Confirm client eligibility for orthotic and/or prosthetic benefits.
- Obtain a current and valid prescription from client. Do not accept prescriptions that are older than three months old or that do not conform to prescription requirements stipulated under Policy OP – 03 Process for Obtaining Orthotic and Prosthetic Benefits.
- Assess client and recommend the most appropriate AADL-funded orthotic and/or prosthetic benefits that meet client clinical/functional basic needs.
- Explain AADL policies and procedures and documents as they pertain to AADL-funded orthotic and/or prosthetic benefits.
- After assessment, explain and have client sign the Client Consent form and the first section of the Validation Certificate.
- Maintain accurate, up-to-date client files with clinical notes and required AADL and Alberta Blue Cross documentation including current and valid prescription(s), original signed Client Consent form and Validation Certificates, and patient claim statement(s).
 - Document any client encounter, which includes initial assessment, dispensing of benefits, and followup with clients.

- Provide eligible clients orthotic and/or prosthetic benefits. Finalize client fitting and trial associated with orthotic and/or prosthetic benefits.
- After fitting and trial of the device has occurred and the device has been received, have client review and sign the second section of the Validation Certificate form.
- Complete authorization on the Alberta Blue Cross online health portal and upload the Client Consent form, Validation Certificate and any other required documentation. If AADL has authorized a prior approval, quantity and frequency review request or other exception, document clinical justification and approval in clinical records.
 - Submit a prior approval or quantity and frequency review request on the online health portal if prior approval or benefit early replacement is required.

Figure 1

Process for Obtaining Orthotic and Prosthetic Benefits



Policy OP – 04

Prior Approval for Orthotic and Prosthetic Benefits

Policy Statement

The following situations require prior approval from AADL before provision of the benefit:

- benefits listed as “prior approval” in the orthotics and/or prosthetics benefits approved product lists
- substitution of orthotics and/or prosthetics benefit-specific components
- exceptions to policies or procedures including, but not limited to, AADL general and benefit-specific eligibility criteria to qualify for AADL orthotic and/or prosthetic benefits, or
- other situations indicated in the AADL general and benefit-specific program manuals or orthotics and/or prosthetics benefits approved product lists

If the provision of AADL orthotic and/or prosthetic benefits requires a prior approval, the authorization(s) is/are not valid until the prior approval has been provided by AADL.

Procedure

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

Prior approval requests must be submitted via the Alberta Blue Cross online health portal.

- Identify a prior approval situation as indicated above.
- Provide the following information to AADL via the Alberta Blue Cross online health portal for consideration:
 - client information
 - current and valid prescription(s), original signed Client Consent form and Validation Certificates, and Patient Claim Statement(s), if available
 - detailed information to substantiate the nature, necessity, and validity of the prior approval request for AADL orthotic and/or prosthetic benefits, which must include:
 - clinical and/or functional justification for the request including detailed supporting clinical assessment findings and product specific information
 - pertinent catalogue numbers including but not limited to benefits listed as “prior approval” in the orthotics and/or prosthetics benefits approved product lists
 - verifiable and valid orthotics/prosthetics pricing information including but not limited to manufacturer quotes/invoices, labour time, and/or shipping costs, where applicable
- Contact Alberta Blue Cross regarding inquiries or assistance when submitting prior approval via the Alberta Blue Cross online health portal.

Alberta Blue Cross:

- Receives all prior approval requests for AADL orthotic and/or prosthetic benefits that are submitted via the Alberta Blue Cross online health portal.
- Escalates all pertinent prior approval requests for AADL orthotic and/or prosthetic benefits to AADL for adjudication.
- Updates prior approval request adjudication status and/or authorization(s) for AADL orthotic and/or prosthetic benefits on the Alberta Blue Cross online health portal.
- Notifies and/or responds to questions about prior approval requests including those generated by clients, orthotic and/or prosthetic specialty assessors/suppliers and AADL.

AADL:

- Receives and adjudicates prior approval requests for AADL orthotic and/or prosthetic benefits escalated to AADL from Alberta Blue Cross.
- Notifies Alberta Blue Cross about prior approval request adjudication status and/or decision(s) for AADL orthotic and/or prosthetic benefits.
- Notifies and/or responds to questions about prior approval requests including those generated by Alberta Blue Cross.

Policy OP – 05

Quantity and Frequency Limits

Policy Statement

AADL does not fund duplicate equipment. AADL only provides funding for one orthotic or prosthetic device per limb or limb segment at a time. AADL only provides funding for a primary orthotic or prosthetic device; secondary orthotic or prosthetic devices, back-up orthotic or prosthetic devices or orthotic or prosthetic devices used exclusively for recreational or work activities are not eligible for funding as AADL benefits.

The AADL program does not replace lost, stolen, or broken/damaged benefits. In these instances, it is the client's financial responsibility to cover the cost of replacement(s).

Replacement of an AADL-funded device may occur before the normal frequency period has elapsed if the previous device no longer meets the client's basic needs due to a documented significant and stabilized change in the client's current clinical/functional status, including pertinent comorbid medical status and/or condition(s), or if the equipment cannot be cost-effectively repaired.

Clients are eligible to receive orthotic and/or prosthetic benefits per the benefit-specific quantity and frequency limits listed on the AADL orthotic and/or prosthetic benefits approved product lists.

If required, orthotic and prosthetic benefits may be replaced every two years, with the following exceptions (also noted in the AADL orthotic and/or prosthetic benefits approved product lists):

- clubfoot orthoses
- knee orthoses
- microprocessor knees
- myoelectric prostheses
- non-rigid orthotic supports
- prosthetic soft supplies
- repairs and modifications
- any other exception noted in the approved product list

The process for requesting funding for early replacement is the quantity and frequency review request process (see Policy GN – 28 Quantity and Frequency Review Process). AADL orthotic and/or prosthetic benefits providers must submit a quantity and frequency review request on the Alberta Blue Cross online health portal for benefits that are over the quantity and frequency limit.

Early Replacement Authorization Streams

Benefits that can be replaced early and do not require a quantity and frequency review request have corresponding benefit early replacement authorization stream(s), adjusted quantity or frequency limits and/or associated early replacement catalogue numbers, which are listed in the orthotics and prosthetics benefits approved product lists and on the Alberta Blue Cross online health portal. These are in place to address commonly occurring or predictable client needs, as follows:

- Growth and developmental needs of children: AADL provides funding for one early replacement of an orthotic or prosthetic device within the two-year period in order to meet the child's evolving needs. No quantity and frequency review is required for this early replacement. Eligibility requires a documented significant and stabilized change in the client's body weight and dimensions and/or atrophy of the client's residual limb. Comparative objective measurements are required.
- The special needs of individuals who have newly incurred lower extremity amputation: AADL provides funding for one prosthetic socket early replacement within the two-year period in order to meet individual evolving needs. No quantity and frequency review is required for this early replacement for the following common or prevalent amputation levels: transfemoral, knee disarticulation, and transtibial. Eligibility requires a documented significant and stabilized change in the client's body weight and dimensions and/or atrophy of the client's residual limb. Comparative objective measurements are required.

Early replacement authorization stream(s), adjusted quantity or frequency limits, associated catalogue numbers or the quantity and frequency review process cannot be used to provide duplicate benefits.

For all other orthotic and/or prosthetic benefits that fall outside of early replacement authorization streams, a quantity and frequency review is required for early replacement.

Where early replacement of a benefit has occurred within a two-year period, or per the applicable quantity and frequency limits, the cost of additional orthotic and/or prosthetic device(s) within the initial two-year or specific quantity and frequency period must be referred to alternative funding sources.

Other exceptions to the quantity and frequency review request process are indicated in the orthotics and/or prosthetics benefits approved product list.

Procedure

Clients:

- Follow the quantity and frequency review request process as outlined in AADL Program Manual Section GN – General Policy and Procedures for situations of significant and stabilized change in condition. Client must sign the quantity and frequency review request.
- Pursue alternate funding sources prior to requesting additional funding via AADL or if the quantity and frequency review request process and/or criteria precludes the request from consideration for AADL funding.
- Are responsible for the cost of the benefit if the quantity and frequency review is denied.

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

- Check previous consumption of benefits via the Alberta Blue Cross online health portal.
- Advise clients of quantity and frequency limits.
- Explain quantity and frequency review policy and procedure to clients.
 - The preceding service date and associated quantity and frequency limits for the orthotic and/or prosthetic benefits determines the next eligibility date for AADL-funded orthotic and/or prosthetic benefits.
- If the client has previously received a benefit and if there is a clinically justifiable reason to seek replacement of the benefit, the specialty assessor must:
 - confirm request is not for duplicate benefits
 - confirm if replacement is not possible under warranty, and
 - confirm alternate funding has been explored and/or exhausted
- If there is no alternate funding available, use one of the following early replacement authorization streams:
 - growth and developmental needs of children for one early replacement of an orthotic or prosthetic device within the two-year or pertinent quantity and frequency period; no quantity and frequency review is required for this early replacement
 - needs of individuals who have newly incurred lower extremity amputation for one prosthetic socket early replacement within the two-year or pertinent quantity and frequency period. No quantity and frequency review is required for this early replacement
- For all other orthotic and/or prosthetic benefits, enter quantity and frequency review request authorization on the Alberta Blue Cross online health portal, including the following documents:
 - Quantity and Frequency Review Request form
 - Client Consent form
 - other eligibility-specific and required supporting documentation

Alberta Blue Cross:

- Receives and log quantity and frequency review requests.
- Forwards quantity and frequency review requests to AADL for adjudication.
- Updates quantity and frequency review status on the online health portal which can then be viewed on the provider portal.
- Provides notification to the authorizer when a quantity and frequency review decision is made.

AADL:

- Receives and reviews the quantity and frequency review via the Alberta Blue Cross online health portal.
- Adjudicates and notifies Alberta Blue Cross of decision.

Policy OP – 06

Specialty Assessor Qualifications

Policy Statement

Specialty assessors for AADL orthotic and/or prosthetic benefits must:

- have successfully completed the certification exam for a certified orthotist or certified prosthetist through the Canadian Board for Certification of Prosthetists and Orthotists
- be registered as a certified orthotist or certified prosthetist who is an active member in good standing with Orthotics Prosthetics Canada, and
- be employed by a facility with an agreement to provide AADL orthotic and/or prosthetic benefits

In limited circumstances, AADL may consider approving specialty assessors with other professional qualifications for a limited range of benefits. Consideration may be given to regulated healthcare professionals with documented competency in the assessment and provision for the types of devices that are benefits of the AADL program.

Competency is defined by fulfillment of all of the following requirements to the satisfaction of AADL:

- successful completion of an education program related to assessment and provision of orthotic and/or prosthetic benefits
- current professional certification with an appropriate Alberta or Canada-based certification body, and
- ongoing membership in good standing with an appropriate Albertan or Canadian professional college or association

Specialty Assessor Responsibilities:

Specialty assessors are responsible for providing benefits and services to clients in accordance with the AADL policies and procedures. General roles and responsibilities include:

- assessing clients' clinical needs
- assessing clients' eligibility for AADL benefits
- providing education to clients regarding the AADL program including information about benefits
- fabricating and providing devices
- providing clients with followup service
- maintaining detailed clinical notes
 - entries must be signed by the person who made the entry, including name and credentials
- submitting authorizations and claims in accordance with AADL program and Alberta Blue Cross online health portal policies and procedures

Specialty assessors must be on-site and present for the assessment and provision of all benefits to AADL clients including modifications and repairs.

Specialty assessors are accountable for all Alberta Blue Cross online health portal authorization and claim activity under their specialty assessor/supplier number.

AADL reserves the right to withdraw or withhold specialty assessor status at its own discretion.

Students, Residents, Interns

AADL specialty suppliers may employ a student, resident, and/or intern for the provision of AADL benefits. Residents, students, and interns:

- are not eligible to be an AADL specialty assessor

- are permitted to provide associated benefits and services to AADL clients, including assessment, developing the treatment plan, manufacturing or modifying devices, fitting devices, and followup activities only under direct supervision of an AADL-approved specialty assessor

The specialty assessor is responsible for direct supervision of any students, residents or interns and is ultimately responsible and accountable for all benefits that are provided. The specialty assessor is responsible for documenting their involvement in the client notes and to ensure clinical notes clearly indicate who provided the benefits to the client.

Procedure

Orthotic and/or Prosthetic Specialty Assessors:

- Complete and submit an AADL Specialty Assessor Application form, including any additional supporting documentation that is required.
- Once approved as a specialty assessor, conduct assessments as follows:
 - Determine the client eligibility and cost-share status by reviewing the client's history of provision of benefits and obtain the appropriate prescription(s) and documentation from the client;
 - Recommend the most appropriate benefit that will meet the client's assessed needs;
 - Recommend the eligible benefits required;
 - Explain cost-sharing and cost-share exemption policies to clients;
 - Explain benefit quantity and frequency limit to clients;
 - Discuss client's expectations regarding functional outcomes of the benefits; and
 - Obtain client's signature on both the Client Consent form and the first section of the Validation Certificate prior to provision of benefits.
- Provide benefits:
 - Provide only approved AADL benefits as per the current approved product lists;
 - Ensure replacement benefits are only funded by AADL when eligible;
 - Obtain prior approval for benefits as necessary;
 - Advise the client of their responsibilities related to benefits;
 - Educate clients regarding proper wear and care of their devices;
 - Once fitting and trial are completed for benefits, have client sign the final section of the Validation Certificate for receipt of all benefits; and
 - Ensure client is provided with a patient claim statement for all AADL benefits provided and invoiced to the AADL program. Patient claim statements can be printed from the online health portal.
- Provide service:
 - Ensure trained staff are accessible and available to clients concerning benefits;
 - Provide followup activity that will ensure AADL benefits serve the purpose for which they were provided;
 - Provide advice and educate clients about benefits;
 - Do not bill AADL for additional services, including modifications and repairs relating to the provided benefit, for a period of 90 days after the final fitting;
 - Honour manufacturers' warranties related to benefits;
 - Ensure defective benefits are replaced at no cost to the client or AADL;
 - Promptly resolve all errors relating to the assessment of a client's benefits (e.g., duplication of benefits, client's eligibility status, and assessment errors);
 - Ensure specialty assessor(s)/supplier(s) resolve any errors related to AADL benefits at no cost to the client or AADL.
- Maintain detailed clinical notes:
 - Maintain detailed clinical notes for all client/patient encounters. Notes must be date and time logged and signed by a specialty assessor.
- Promptly advise AADL and Alberta Blue Cross of any updates to name, location, or work status.

AADL:

- Reviews and/or adjudicates specialty assessor applications.
- Provides a specialty assessor number to approved applications and assigns appropriate product ranges.
- Monitors specialty assessor/supplier compliance with AADL and/or Alberta Blue Cross online health portal policies and procedures.

Alberta Blue Cross:

- Adjudicates authorizations and claims.
- Audits charges on claims for equipment submitted by vendors and pays claims.

Policy OP – 07

Specialty Supplier Qualifications

Policy Statement

AADL only provides funding to eligible clients who are assessed and provided orthotic and prosthetic benefits from vendors listed on the AADL Orthotic Suppliers or AADL Prosthetic Suppliers lists. The lists can be found at:

<https://www.alberta.ca/aadl-approved-vendors-list.aspx>

Specialty suppliers must be approved via the vendor application process in order to be considered an AADL specialty supplier.

Specialty suppliers must employ a specialty assessor as defined in Policy OP – 06 Specialty Assessor Qualifications. Specialty suppliers must adhere to Policy GN – 11 Vendor/Specialty Supplier Section in AADL Program Manuals Section GN – General Policy and Procedures.

Specialty suppliers are accountable for all specialty assessors it employs and are responsible for ensuring the specialty assessors follow AADL policies and procedure. In addition, specialty suppliers are responsible for submitting claims for benefits provided to eligible clients and for providing clients with a patient claim statement for all benefits provided. See Policy GN – 11 Vendor/Specialty Supplier Section for more information.

Client's Choice of Specialty Supplier

Clients have a choice of specialty supplier, unless they are inpatients at a health care facility that employs a publicly-funded specialty assessor.

Specialty suppliers are responsible for confirming the client is not being provided benefits by different specialty suppliers before submitting authorizations and claims to AADL via the Alberta Blue Cross online health portal.

Procedure

Clients:

- Select a(n) orthotic and/or prosthetic specialty supplier from the lists of approved orthotic and/or prosthetic vendors.
- Provide the current specialty supplier the opportunity to provide AADL benefits that meets the client's basic needs.
- Contact Alberta Blue Cross Client Services regarding concerns with service or a device that cannot be resolved with the specialty supplier.

Orthotic and/or Prosthetic Specialty Suppliers:

- Check the Alberta Blue Cross online health portal to verify if client has been provided AADL orthotic and/or prosthetic benefits. AADL does not fund duplicate equipment. AADL only provides funding for one orthotic or prosthetic device per limb or limb segment at a time.
- If a transfer of care is required to finalize the provision and follow up associated with ongoing AADL orthotic and/or prosthetic benefits, contact Alberta Blue Cross to find out who the previous specialty supplier was.
- Where indicated, refer client back to original specialty supplier to finalize the provision and followup associated with ongoing AADL orthotic and/or prosthetic benefits.
- If a client refuses to return to previous specialty supplier, the new specialty supplier must not commence the provision of follow up associated with ongoing AADL orthotic and/or prosthetic benefits unless the client is willing to fund the services privately.
- If a client wishes to switch specialty suppliers, contact the previous specialty supplier to discuss transferring care to the new specialty supplier. If needed, contact Alberta Blue Cross concerning the arrangement and/or agreement of a transfer of care.
 - Do not submit a quantity and frequency review request to switch specialty suppliers.
- If necessary, inform the client they may submit a formal complaint to AADL using the AADL Complaint form.

- Contact Alberta Blue Cross for advice as required.

AADL:

- Receives, reviews and, adjudicates vendor and specialty supplier applications.
- Provides a vendor number to approved applications and assigns appropriate product ranges.
- Informs Alberta Blue Cross of approved vendors/suppliers.
- Maintains lists of approved orthotic and prosthetic benefit suppliers.
- Monitors specialty assessor/supplier compliance with AADL policies and procedures.
- Reviews client's concerns via formal complaint process.

Alberta Blue Cross:

- Adds vendors/suppliers to the online health portal
- Monitors and audits specialty assessor/supplier compliance with Alberta Blue Cross and online health portal policies and procedures

Policy OP – 08

Approved Product Lists

Policy Statement

AADL only provides funding for orthotic and/or prosthetic benefits per the catalogue numbers listed on the orthotic and/or prosthetic benefits approved product lists.

The orthotic and/or prosthetic benefits provided to a client must match the description of the catalogue number(s).

Substitutions of orthotic and/or prosthetic benefits that are listed on the orthotic and/or prosthetic benefits approved product lists may be considered by prior approval only.

AADL will provide funding for the maximum quantity and frequency listed in the approved product lists (refer to Policy OP – 05 Quantity and Frequency Limits).

AADL will fund up to the price maximum for a benefit listed in the approved product list. All benefits pricing is subject to cost-share (as per Policy GN – 20 to GN – 25 in AADL Program Manual Section GN – General Policies and Procedures). A specialty supplier must provide the benefit to an eligible client for the maximum price listed or less. The specialty supplier may not invoice AADL or the client for more than the price maximum.

Some catalogue numbers listed on the orthotic and/or prosthetic benefits approved product lists have specific eligibility criteria that must be met in addition to the general AADL eligibility criteria. These specific eligibility criteria are outlined in the orthotic and/or prosthetic benefits approved product lists.

Generic Catalogue Numbers

AADL uses generic catalogue numbers for some benefits that are listed on the orthotic and prosthetic benefits approved product lists. A generic catalogue number represents a specific type of benefit, not a specific product or manufacturer and has a designated AADL maximum contribution amount. Costs over this maximum are considered upgrade costs.

The price invoiced to AADL is determined using the material cost(s) and/or manufacturer invoice cost(s). Refer to the orthotic and/or prosthetic benefits approved product lists for the pricing procedure associated with generic catalogue numbers and upgrades.

Upgrades

Some orthotic and/or prosthetic catalogue numbers listed on the orthotic and/or prosthetic benefits approved product lists are designated as “upgrade.” For these upgrade catalogue numbers, the specialty supplier is permitted to invoice the client for amounts over the price maximum. However, the maximum amount invoiced to AADL must not exceed the price maximum for catalogue numbers listed on the orthotic and/or prosthetic benefits approved product lists, subject to cost-share.

Procedure

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

- Review the orthotic and/or prosthetic benefits approved product lists and become familiar with AADL orthotic and/or prosthetic benefits that are funded.
- Ensure that eligible clients meet all pertinent AADL general and orthotic and/or prosthetic benefit criteria listed on the orthotic and/or prosthetic benefits approved product lists.
- Ensure that the AADL orthotic and/or prosthetic benefits provided to eligible clients match the description in the AADL orthotic and/or prosthetic benefits approved product list(s).
- Use the pricing listed in the AADL orthotic and/or prosthetic benefits approved product lists when invoicing clients and AADL for orthotic and/or prosthetic benefits.

Alberta Blue Cross:

- Responds to inquiries pertaining to AADL orthotic and/or prosthetic benefits approved product lists including inquiries associated with authorizations and claims for orthotic and/or prosthetic benefits.

AADL:

- Establishes, maintains and updates the benefits listed on the AADL orthotic and/or prosthetic benefits approved product lists in accordance with AADL regulation, agreements, policies and procedures, operational need and best practices.
- Provides support to Alberta Blue Cross as it pertains to the AADL orthotic and/or prosthetic benefits approved product lists, and associated orthotic and/or prosthetic provider roles and responsibilities in accordance with AADL regulation, agreements, policies and procedures, operational need and best practices.

Policy OP – 09

Validation Certificate

Policy Statement

The Prosthetic and Orthotic Device Validation Certificate is a document intended to ensure accountability and clarify expectations for all parties involved in the provision of AADL-funded orthotic and/or prosthetic benefits.

The validation certificate is a two-part form, in that the client will sign this form on two separate occasions:

- at time of assessment for AADL orthotic and/or prosthetic benefits whereby eligible clients and specialty assessors/suppliers acknowledge agreement to the type of AADL orthotic and/or prosthetic benefits being provided
- after final provision of AADL orthotic and/or prosthetic benefits whereby eligible clients and specialty assessors/suppliers acknowledge agreement that pertinent fitting and trial associated with AADL orthotic and/or prosthetic benefits has been completed

Alberta Blue Cross should be contacted if the client is unable to complete the final fitting/trial, or is unable or refuses to sign the validation certificate form.

A validation certificate form is not required for minor adjustments or repairs and/or if supplying additional soft supplies after original fitting of an AADL orthotic and/or prosthetic devices.

Procedure

Clients:

- Read the validation certificate fully prior to signing it.
- Request clarification from the specialty assessor/suppliers, if needed, prior to signing.
- Sign Section 1 of the validation certificate following the initial consultation with a specialty assessor/supplier, and sign Section 2 of the validation certificate after the final fitting, trial and full receipt of the device.
 - Clients who are unable to return for follow up may sign and submit the final section of the validation certificate by alternate methods (i.e., fax or mail).
- May request a copy of the signed validation certificate.
- Contact Alberta Blue Cross client contact centre if they:
 - Have any unresolved questions about the validation certificate; or
 - Are unable to sign the validation certificate.

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

- Provide eligible clients with a copy of the validation certificate to review.
- Discuss/resolve all questions clients may have regarding eligible client roles and responsibilities pertaining to the provision of their AADL-funded orthotic and/or prosthetic benefits.
- Ensure eligible clients sign all required section(s) of the validation certificate form at the appropriate times.
 - Section 1 of the validation certificate must be signed by eligible clients prior to fabricating the AADL orthotic and/or prosthetic devices. Offer the client a copy of the validation certificate and retain the original on the client's file.
 - Section 2 of the validation certificate form must be signed by eligible clients once the AADL orthotic and/or prosthetic devices is fabricated, fitted and trialed. Offer the client a copy of the validation certificate and retain the original on the client's file.
- The specialty supplier may not submit a claim for the final components or procedures until all sections of the validation certificate form are signed by the client; this is considered the service date for associated AADL orthotic and/or prosthetic benefits.
 - If the client is unable to complete the final fitting/trial, or is unable or refuses to sign the validation certificate, AADL may consider a specialty supplier's request to claim a portion of the cost of the procedure and/or components, as follows:

- Provide Alberta Blue Cross with a copy of the Client Consent form, validation certificate, a valid prescription and other supporting documentation. Provide evidence of attempts to contact client for follow up and/or resolve issue(s).
- Provide catalogue numbers and cost(s) for unclaimed items to Alberta Blue Cross. AADL will adjudicate in terms of potential billable amount.

Alberta Blue Cross:

- Responds to questions from client and specialty assessors/suppliers regarding the validation certificate.
- May request copies of the completed validation certificates.
- In consultation with AADL, reviews cases and addresses client and/or specialty assessor(s)/supplier(s) concerns pertaining to client inability to complete the final fitting/trial, or is unable or refuses to sign the validation certificate.

AADL:

- Maintains and updates the validation certificate in accordance with AADL regulation, agreements, policies and procedures, operational need and best practices.
- Provides support and direction to Alberta Blue Cross as it pertains to the validation certificate.

Policy OP – 10

Service Dates

Policy Statement

The service date used for submitting claims for orthotic and/or prosthetic benefits is the date the client actually receives the orthotic and/or prosthetic benefits and signs Section 2 of the validation certificate. Vendors and specialty suppliers must indicate the service date for each AADL-funded benefits on the claim according to the date the client received the benefit.

Procedure

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

- Submit claim to Alberta Blue Cross following the provision of orthotic and/or prosthetic benefits to the client.

Alberta Blue Cross:

- Adjudicate claims submitted through the online health portal.
- Input service date on the client's file.

Policy OP – 11

Patient Claim Statement

Policy Statement

Orthotic and/or Prosthetic benefit providers must provide every client with a patient claim statement for each benefit invoiced to the AADL program. The statement can be printed from the Alberta Blue Cross online health portal, and must include general information such as statement details, Alberta Blue Cross contact information and client data.

The patient claim statement is comprised of three sections: statement information, claim summary and claim details.

The claim summary displays the overall breakdown of how much each client is responsible for against the total claimed amount for all claims submitted:

- Total amount claimed – The sum of claimed amounts for all claims submitted.
- AADL will pay – The total amount that AADL will cover for all claims submitted.
- Client will pay – The total amount the client is responsible to pay for all claims submitted. This amount is the sum of any cost-share amount the client owes and upgrade charges that are not covered by AADL.

Clients must be provided with a copy of their patient claim statement.

Procedure

Orthotic and/or Prosthetic Specialty Assessors/Suppliers:

- Provide clients with a patient claim statement for AADL benefits. The patient claim statement must be printed from the Alberta Blue Cross online health portal.
- For cost-share clients, identify the AADL contribution and the client's cost-share contribution for each benefit.
- For cost-share exempt clients, identify AADL's contribution for each benefit.
- Retain a copy of the patient claim statement on the client's file.

Alberta Blue Cross:

- Provide vendors with a patient claim statement through the online health portal as required.

Policy OP – 12

Definitions

Assessment Date

The assessment date for an AADL authorization is the date that the client is assessed by the specialty assessor to determine eligibility for AADL benefits. Assessment includes a clinical assessment as well as evaluation of all required documentation to establish and confirm client eligibility for AADL benefits.

Functional Level

Specialty assessors determine the functional level that a client should be able to achieve with a prosthesis through an assessment and consultation with the client.

Functional level definitions are listed in Alberta Aids to Daily Living Approved Product List P – Prosthetic Benefits. A client's unique functional level is required to establish and confirm client eligibility for AADL benefits. For eligible clients, the functional level is also required by specialty assessors to enter authorizations and claims via the Alberta Blue Cross online health portal.

Functional Outcome

Specialty assessors determine the functional outcome that a client should be able to achieve with an orthotic device through an assessment and consultation with the client.

Functional outcome definitions are listed in Alberta Aids to Daily Living Approved Product List O – Orthotic Benefits. A client's unique functional outcome is required to establish and confirm client eligibility for AADL benefits. For eligible clients, the functional outcome is also required by specialty assessors to enter authorizations and claims via the Alberta Blue Cross online health portal.

Level of Amputation

The level of amputation is the surgical level of amputation, not the functional level associated with a client's remaining or residual limb.

Online Health Portal

The authorization and claims portal administered by Alberta Blue Cross for the purpose of AADL authorizers, vendors, and/or specialty assessors/suppliers submitting authorizations and/or claims on behalf of eligible clients for AADL-funded benefits.