

ALBERTA HEALTH

AADL approved product list: orthotic benefits

Effective October 4, 2021



General Information

Generic Pricing Procedure

Orthotic or prosthetic catalogue numbers starting with an "N" are generic benefits which have their prices indicated as a "Max. Each." Please use the AADL Generic Calculator to determine the maximum "AADL price" that is funded for generic benefit item catalogue numbers, including any associated "upgrade" amount that is not funded by the AADL Program.

The Specialty Supplier may only bill the client for upgrade costs up to the amount indicated in the calculator. Upgrade costs may be waived or reduced from the calculated amount at the Specialty Supplier's discretion. Refer to the General Policies and Procedures Manual for more information about upgrade costs.

Procedure:

- Ensure the client has a valid authorization for the appropriate benefit type on the Alberta Blue Cross Online Health Portal (OHP)
- Locate the catalogue number and enter the manufacturer invoice cost for the component into the calculator. Do not include shipping costs, exchange or any other cost. The cost used for the generic catalogue number must be the manufacturer's invoice cost only. The calculator will automatically add mark-up, shipping and labour costs.
- Costs over the program maximum are indicated in the calculator and are considered an upgrade.
- Record the calculation on the client's record, including manufacturer and model number of each product claimed; record must be provided to AADL or Alberta Blue Cross request.
- Explain any amounts payable by the client before providing the benefit. Use the claim predetermination function in OHP to determine the cost share amount if applicable.
- Submit a claim for the benefits in OHP, excluding upgrade costs from the claimed amount.

General Information

Orthotic Types

AFO	ANKLE FOOT ORTHOSIS
CF	CLUBFOOT ORTHOSIS
CO	CERVICAL ORTHOSIS
CTLSO	CERVICAL THORACIC LUMBAR SACRAL ORTHOSIS
EO	ELBOW ORTHOSIS
HELMET	HELMET
HERNIA	CUSTOM MADE HERNIA
HIPO	HIP ORTHOSIS
HKAFO	HIP KNEE ANKLE FOOT ORTHOSIS
KAFO	KNEE ANKLE FOOT ORTHOSIS
KO	KNEE BRACE
LSO	LUMBAR-SACRAL ORTHOSIS
NRS	NON-RIGID SPINAL ORTHOSIS
PF	PARTIAL FOOT PROSTHESIS/ORTHOSIS
RGO	RECIPROCATING GAIT ORTHOSIS
SO	SHOULDER ORTHOSIS
THKAFO	THORACIC KNEE ANKLE FOOT ORTHOSIS
TLSO	THORACIC LUMBAR SACRAL ORTHOSIS
WHO	WRIST HAND ORTHOSIS

Spinal Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Cervical Orthoses			
<i>Prescription Required</i>			
C.O.			
Custom Made - Molded to patient model, cervical and thoracic control (Minerva type)	1 Spinal Orthosis Per 2 Years	O166 CO	\$2,774.43 Each
Custom Made - molded to patient model, cervical and thoracic control (Minerva type) plus interface	1 Spinal Orthosis Per 2 Years	O168 CO	\$2,798.76 Each
Molded to patient model	1 Spinal Orthosis Per 2 Years	O088 CO	\$941.42 Each
Prefabricated C.O. which requires custom fitting (e.g. Philadelphia or thermoplastic designs or equivalent)	1 Spinal Orthosis Per 2 Years	O084 CO	\$215.19 Each
With occipital/mandibular supports with thoracic extension for increased cervical control, custom-fitted (e.g. S.O.M.I., Fi-way, La-cal, Guilford or equivalent)	1 Spinal Orthosis Per 2 Years	O090 CO, CTLSO	\$521.76 Each
Hensinger Head Support			
	1 Head Support Per 2 Years	O300 CO	\$449.94 Each
Thoracic Orthoses			
<i>Prescription Required</i>			
Pectus Brace			
	1 Thoracic Brace Per 2 Years	O342 TLSO	\$1,182.02 Each
Rigid Spinal Orthoses			
<i>Prescription Required</i>			
Rigid Spinal Orthosis			
Custom Made	1 Spinal Orthosis Per 2 Years	O135 LSO	\$1,467.72 Each
Generic Custom Fitted	1 Spinal Orthosis Per 2 Years	N117 LSO, TLSO	\$741.27 Max. Each
Additions to Rigid Spinal Orthoses			
Bariatric Option			
	1 Rigid Spinal Addition Per 2 Years	O497 CTLSO, LSO, TLSO	\$241.77 Each
<i>Client is 100 lb. over normal weight or over 275 lb. Eligibility criteria must be documented on client file and provided on request.</i>			

Spinal Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Rigid Spinal Orthoses			
Corset front As opposed to apron front	1 Rigid Spinal Addition Per 2 Years	O150 LSO	\$185.56 Each
Full corset As opposed to apron front	1 Rigid Spinal Addition Per 2 Years	O152 LSO	\$139.12 Each
Sub-Clavicular Extensions For rotary control	1 Rigid Spinal Addition Per 2 Years	O148 LSO, TLSO	\$171.49 Each
Total Contact T.L.S.O. (Body Jacket)			
<i>Prescription Required</i>			
<i>May be provided to a client who has had a spinal fracture or surgical intervention, when the orthotic is required for discharge from a general hospital. Vendor must clearly document clinical assessment and discharge plan.</i>			
Boston Jacket Custom made from cast	1 Spinal Orthosis Per 2 Years	O215 TLSO	\$1,879.85 Each
Custom made from measurement	1 Spinal Orthosis Per 2 Years	O506 TLSO	\$1,389.93 Each
Soft - Stock	1 Spinal Orthosis Per 2 Years	O505 TLSO	\$1,328.89 Each
Boston Orthosis Custom from cast	1 Spinal Orthosis Per 2 Years	O213 TLSO	\$1,912.78 Each
Custom from measurement	1 Spinal Orthosis Per 2 Years	O211 TLSO	\$1,822.26 Each
Stock custom fitted	1 Spinal Orthosis Per 2 Years	O218 TLSO	\$1,833.46 Each
Boston Overlap Orthosis or Equivalent Molded to patient	1 Spinal Orthosis Per 2 Years	O219 TLSO	\$1,428.88 Each
T.L.S.O. Molded antero-posterior design	1 Spinal Orthosis Per 2 Years	O123 TLSO	\$2,566.93 Each
Molded antero-posterior design with interface	1 Spinal Orthosis Per 2 Years	O125 CTLSO, TLSO	\$2,718.86 Each
Molded to patient model	1 Spinal Orthosis Per 2 Years	O122 TLSO	\$2,426.79 Each
Molded to patient model with interface	1 Spinal Orthosis Per 2 Years	O124 TLSO	\$2,578.89 Each

Spinal Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Total Contact T.L.S.O. (Body Jacket)			
<i>Prescription Required</i>			
<i>May be provided to a client who has had a spinal fracture or surgical intervention, when the orthotic is required for discharge from a general hospital. Vendor must clearly document clinical assessment and discharge plan.</i>			
T.L.S.O.			
Posterior, Anterior shell only with corset or equivalent front	1 Spinal Orthosis Per 2 Years	O127 TLSO	\$1,966.10 Each
Scoliosis procedure - Molded to patient model with interface	1 Spinal Orthosis Per 2 Years	O220 TLSO	\$2,681.30 Each
C.T.L.S.O. - Milwaukee			
<i>Prescription Required</i>			
Complete Milwaukee Orthosis			
Initial	1 Spinal Orthosis Per 2 Years	O188 CTLSSO	\$3,435.73 Each
<i>No additions</i>			
Protective Helmet			
<i>Prescription Required</i>			
Eligibility Criteria			
<i>Must be required for daily use for protection in cases of self-abusive behaviour, seizure disorder, and protect/facilitate healing of chronic wounds or cranial defects.</i>			
Custom Fitted Helmet			
A modular helmet system requiring measurement, modification of modular parts and assembly, based on DANMAR helmet.	1 Helmet Per 2 Years	O051 HELMET	\$1,135.96 Each
<i>Not funded for cranial molding orthoses.</i>			
Helmet Molded to Patient Model.			
Helmet made with high temperature thermoplastic with liner.	1 Helmet Per 2 Years	O053 HELMET	\$1,564.55 Each
<i>Not funded for cranial molding orthoses.</i>			

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Hip Abduction Control			
<i>Prescription Required</i>			
Dennis Brown Plate	1 L/E Orthosis Per 2 Years	O306 AFO, HIPO	\$232.94 Each
Dynamic Brace Pelvic control, adjustable hip motion control, thigh cuffs (Rancho Hip Action Design)	1 L/E Orthosis Per 2 Years	O241 HIPO	\$2,206.75 Each
Static Adjustable Custom Fitted	1 L/E Orthosis Per 2 Years	O235 HIPO	\$1,081.05 Each
Static Foam or Thermoplastic Design Custom Fitted (Von Rosen or equivalent)	1 L/E Orthosis Per 2 Years	O237 HIPO	\$377.20 Each
Custom Made (Von Rosen or equivalent)	1 L/E Orthosis Per 2 Years	O238 HIPO	\$783.18 Each
Static Pelvic Band or Spreader Bar Custom Fitted - with thigh cuffs	1 L/E Orthosis Per 2 Years	O233 HIPO	\$559.01 Each
Torsion Control			
<i>Prescription Required</i>			
Pelvic Band/Belt With bilateral rotation straps	1 Pelvic Band/Belt Per 2 Years	O294 HIPO	\$541.91 Each
With torsion cables and ball bearing hip joints, bilateral cable usage	1 Pelvic Band/Belt Per 2 Years	O298 HIPO	\$1,294.73 Each
With torsion cables and ball bearing hip joints, unilateral cable usage hip joints, unilateral cable usage	1 Pelvic Band/Belt Per 2 Years	O297 HIPO	\$895.10 Each
Abduction and Rotation Control			
<i>Prescription Required</i>			
Atlanta or Scottish-Rite Trilateral Orthosis	1 L/E Orthosis Per 2 Years	O305 HIPO	\$2,180.03 Each
SWASH	1 L/E Orthosis Per 2 Years	O242 HIPO, RGO	\$2,068.16 Each

Lower Extremity Orthoses

Qty. / Freq.

Cat. No.
Orth. Type

AADL Price

Knee Orthosis to Prevent Knee Flexion

*Prescription required. Prescriber must be a physician specialist practicing medicine in the area(s) of: Physiatry, Orthopedics, Rheumatology, Neurology, Neurosurgery, Pediatrics.
 The diagnosis or specific clinical condition(s) must be indicated on prescription.*

- Must require an unloading knee orthosis/orthoses for ambulation for 6 months or longer, for full-time activities of daily living and/or full-time activities at work. Full-time activity is defined as a minimum average of 6 hours per day.
- Not eligible for short-term need including but not limited to pre-operative or post-operative care. If required preoperatively, client surgery must not be scheduled within six months of receiving AADL funding for a knee orthosis/orthoses that prevents knee flexion. If required preoperatively, client must require a knee orthosis/orthoses that prevents knee flexion for 6 months and longer.

Total Contact Cylinder Orthosis

High temp. thermoplastics, molded to patient model	1 L/E Orthosis Per 4 Years	O257 KO	\$1,072.64 Each
Low temp. thermoplastics, molded directly to patient	1 L/E Orthosis Per 4 Years	O256 KO	\$586.01 Each

Knee Hyperextension Orthoses

Prescription Required

Required for 6 months and longer, for full-time activities of daily living and/or full-time activities at work. Full-time is defined as a minimum of 6 hours per day.

Generic Hyperextension Control Knee Orthosis

Custom Fitted	1 L/E Orthosis Per 4 Years	N317 KO	\$822.32 Max. Each
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Dynamic Knee Extension Assist Orthoses

Prescription Required

*Must be used for maintaining or increasing range of motion at the knee for clients with chronic flexion contractures. Clients are typically diagnosed with neuromuscular conditions (cerebral palsy, stroke) and must not be candidates for serial casting due to practical limitations of this option (swelling, access to service).
 The benefit cannot be provided to clients that require post-op ROM braces for short-term use.*

Documentation of clinical eligibility must be kept on client file and provided on request.

Dynamic Knee Extension Assist Orthoses

	1 L/E Orthosis Per 4 Years	O550 KO	\$778.94 Each
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Lower Extremity Orthoses

Qty. / Freq.

Cat. No.
Orth. Type

AADL Price

Unloading Knee Orthoses

Physician prescription required. The diagnosis or specific clinical condition(s) must be indicated on prescription, and accompanying diagnostic imaging must also confirm the existence, and extent of the diagnosis or specific condition(s).

Eligibility Criteria - Eligible clients must present with the following:

Must require an unloading knee orthosis/orthoses for ambulation for at least 6 months and longer, for full-time activities of daily living and/or full-time activities at work. Full-time activity is defined as a minimum of 6 hours per day, every day.

Not eligible for short-term need including but not limited to pre-operative or post-operative care. If required preoperatively, client surgery must not be scheduled within six months of receiving AADL funding for a stabilizing knee orthosis/orthoses. If required preoperatively, client must require a stabilizing knee orthosis/orthoses for 6 months and longer.

Must have severe valgus or varus deformity and joint space narrowing.

Prescriber - Must be a physician specialist practicing medicine in the area(s) of: Physiatry, Orthopedics, Rheumatology, Neurology, Neurosurgery, Pediatrics, Geriatrics or a physician with a diploma in Sports Medicine from the Canadian Academy of Sport and Exercise Medicine.

Prescriptions - Will only be accepted if accompanied by a knee x-ray(s) report indicating:

"Moderate" or "severe" knee osteoarthritis.

AADL will provide funding for "minor" or "mild" osteoarthritis, if based on clinical assessment by the Orthotist reveals documented findings that unloading or realignment of the joint resulted in functional pain relief (i.e., improved ambulation). Realignment can be demonstrated by trialing off-the-shelf bracing or taping techniques.

Clients must be offered a choice of unloading knee braces that are available to address their identified basic medical need at or below AADL's maximum contribution. "Upgrade" indicates a product whose cost exceeds the AADL maximum contribution, an additional cost that remains the client's responsibility.

Unloading Knee Orthosis

Generic CFAB (Custom)	1 L/E Orthosis Per 4 Years	N730	\$1,141.45 Max. Each
		KO	

Procedure to be added, no other additions.

Generic Custom Fit (OTS)	1 L/E Orthosis Per 4 Years	N712	\$782.12 Max. Each
		KO	

Procedure to be added, no other additions.

In-House (Custom) - Laminate	1 L/E Orthosis Per 4 Years	O537	\$1,267.39 Each
		KO	

Procedure and joints to be added

In-House (Custom) - Plastic	1 L/E Orthosis Per 4 Year	O259	\$886.48 Each
		KO	

Procedure and joints to be added

Unloading Knee Orthosis Procedure

CFAB (Custom)	1 KO Procedure Per 4 Years	O551	\$590.00 Each
		KO	

In-House Custom Procedure	1 KO Procedure Per 4 Years	O501	\$682.89 Each
		KO	

Presized OA	1 KO Procedure Per 4 Years	O565	\$371.54 Each
		KO	

Lower Extremity Orthoses

Qty. / Freq.

Cat. No.
Orth. Type

AADL Price

Stabilizing Knee Orthoses

Physician prescription required. The diagnosis or specific clinical condition(s) must be indicated on prescription, and accompanying diagnostic imaging must also confirm the existence and extent of the diagnosis or specific condition(s).

Eligibility Criteria - Eligible clients must present with the following:

Must require a **stabilizing knee orthosis/orthoses** for ambulation for at least 6 months and longer, for full-time activities of daily living and/or full-time activities at work. Full-time activity is defined as a minimum of 6 hours per day, every day.

Not eligible for short-term need including but not limited to pre-operative or post-operative care. If required preoperatively, client surgery must not be scheduled within six months of receiving AADL funding for a **stabilizing knee orthosis/orthoses** If required preoperatively, client must require a **stabilizing knee orthosis/orthoses** for 6 months and longer.

Must meet the Orthopedic Criteria or Neurological Criteria as listed below.

Neurological Criteria: Client has a progressive or chronic neurological condition that has resulted in severe knee instability as a result of weakened quadriceps, and/or lower extremity tone or spasticity about the knee.

Orthopedic Criteria: Client meets all three conditions below:

1. Client presents with one of the following:

Gross knee instability

Secondary to partial or total knee arthroplasty

Secondary to a single ligament tear and concurrent ipsilateral meniscectomy.*

Secondary to two ipsilateral 2nd or 3rd degree ligament tears.*

2. Client has a vocation that is physically demanding and requires bracing. The vocation must be indicated on client file, and via Alberta Blue Cross Online Health Portal (OHP) (where applicable).*

3. Client is not a surgical candidate. [e.g., skeletal maturity/health, comorbid medical condition(s), age, failed surgical repair, etc].*

* For the criteria indicated, prescriber must be a physician specialist practicing medicine in the area(s) of: Physiatry, Orthopedics, Rheumatology, Neurology, Neurosurgery, Pediatrics, Geriatrics or a physician with a diploma in Sports Medicine from the Canadian Academy of Sport and Exercise Medicine.

Clients must be offered a choice of stabilizing knee braces that are available to address their identified basic medical need at or below AADL's maximum contribution. "Upgrade" indicates a product whose cost exceeds the AADL maximum contribution, an additional cost that remains the client's responsibility.

Stabilizing Knee Orthosis

Generic CFAB (Custom)	1 L/E Orthosis Per 4 Years	N700 KO	\$1,170.60 Max. Each
<i>Procedure to be added, no other additions.</i>			
Generic Custom Fit (OTS)	1 L/E Orthosis Per 4 Years	N722 KO	\$785.05 Max. Each
<i>Procedure to be added, no other additions.</i>			
In-House Custom - Plastic	1 L/E Orthosis Per 4 Years	O545 KO	\$886.48 Each
<i>Procedure and joints to be added</i>			
In-House Custom - Laminate	1 L/E Orthosis Per 4 Years	O546 KO	\$1,267.39 Each
<i>Procedure and joints to be added</i>			
Stabilizing Knee Orthosis Procedure			
CFAB Custom	1 KO Procedure Per 4 Years	O570 KO	\$590.00 Each

Lower Extremity Orthoses

Qty. / Freq.

Cat. No.
Orth. Type

AADL Price

Stabilizing Knee Orthoses

Physician prescription required. The diagnosis or specific clinical condition(s) must be indicated on prescription, and accompanying diagnostic imaging must also confirm the existence and extent of the diagnosis or specific condition(s).

Eligibility Criteria - Eligible clients must present with the following:

Must require a **stabilizing knee orthosis/orthoses** for ambulation for at least 6 months and longer, for full-time activities of daily living and/or full-time activities at work. Full-time activity is defined as a minimum of 6 hours per day, every day.

Not eligible for short-term need including but not limited to pre-operative or post-operative care. If required preoperatively, client surgery must not be scheduled within six months of receiving AADL funding for a **stabilizing knee orthosis/orthoses** If required preoperatively, client must require a **stabilizing knee orthosis/orthoses** for 6 months and longer.

Must meet the Orthopedic Criteria or Neurological Criteria as listed below.

Neurological Criteria: Client has a progressive or chronic neurological condition that has resulted in severe knee instability as a result of weakened quadriceps, and/or lower extremity tone or spasticity about the knee.

Orthopedic Criteria: Client meets all three conditions below:

1. Client presents with one of the following:

Gross knee instability

Secondary to partial or total knee arthroplasty

Secondary to a single ligament tear and concurrent ipsilateral meniscectomy.*

Secondary to two ipsilateral 2nd or 3rd degree ligament tears.*

2. Client has a vocation that is physically demanding and requires bracing. The vocation must be indicated on client file, and via Alberta Blue Cross Online Health Portal (OHP) (where applicable).*

3. Client is not a surgical candidate. [e.g., skeletal maturity/health, comorbid medical condition(s), age, failed surgical repair, etc.].*

* For the criteria indicated, prescriber must be a physician specialist practicing medicine in the area(s) of: Physiatry, Orthopedics, Rheumatology, Neurology, Neurosurgery, Pediatrics, Geriatrics or a physician with a diploma in Sports Medicine from the Canadian Academy of Sport and Exercise Medicine.

Clients must be offered a choice of stabilizing knee braces that are available to address their identified basic medical need at or below AADL's maximum contribution. "Upgrade" indicates a product whose cost exceeds the AADL maximum contribution, an additional cost that remains the client's responsibility.

Stabilizing Knee Orthosis Procedure

Custom Fit (OTS)	1 KO Procedure Per 4 Years	0571 KO	\$371.54 Each
In-House Custom	1 KO Procedure Per 4 Years	0507 KO	\$682.89 Each

Ankle Foot Orthoses (AFO)

Prescription Required

AFO

Anterior Floor Reaction	1 L/E Orthosis Per 2 Years	0288 AFO	\$1,404.87 Each
Composite plastic molded to patient model layered lamination/carbon fibre	1 L/E Orthosis Per 2 Years	0265 AFO	\$2,318.23 Each

Eligibility Criteria: Severe deformity and greater than or equal to 200 lbs. and rotational stability required. Check socket should be used.

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Ankle Foot Orthoses (AFO)			
<i>Prescription Required</i>			
AFO			
Conventional with double uprights, calf band and free ankle	1 L/E Orthosis Per 2 Years	O280 AFO	\$806.35 Each
Conventional with single upright, calf band and free ankle	1 L/E Orthosis Per 2 Years	O278 AFO	\$667.03 Each
CROW (Bivalved AFO lined with Rocker Sole)	1 L/E Orthosis Per 2 Years	O602 AFO	\$2,482.61 Each
<i>Charcot Ankle Joint. Clients cannot have custom made footwear and a CROW.</i>			
Custom-made to patient model - Double form	1 L/E Orthosis Per 2 Years	O369 AFO	\$1,731.39 Each
Custom-made to patient model - Single form	1 L/E Orthosis Per 2 Years	O272 AFO	\$1,306.69 Each
Energy Storing/Return Ankle Foot Orthosis	1 L/E Orthosis Per 2 Years	O578 AFO	\$1,780.67 Each
<i>Eligibility Criteria: Active community ambulator, plantar flexion weakness, quads good.</i>			
Generic Pre-Fab	1 L/E Orthosis Per 2 Years	N280 AFO	\$894.74 Max. Each
Night Splints for Neuromuscular Peds	1 L/E Orthosis Per 2 Years	E601 AFO	\$306.67 Each
<i>Client not eligible for day and night AFO. Definitive brace policy confirmed with Physician. If KAFO required within 1 year, cost of AFO deducted.</i>			
PTB Prosthetic BK type socket molded to patient model with double uprights and free ankles	1 L/E Orthosis Per 2 Years	O275 AFO	\$2,055.07 Each
PTB, plastic molded to patient model ant/post shell	1 L/E Orthosis Per 2 Years	O277 AFO	\$2,055.07 Each
Supra malleolar - High temperature thermoplastic molded to patient model.	1 L/E Orthosis Per 2 Years	O155 AFO	\$1,059.07 Each
<i>Combined midfoot and hindfoot instability causing severe valgus or varus deformity at the ankle as a result of neuromuscular conditions such as CP, Spina Bifida, Down's Syndrome or orthopedic conditions such as post tibial dysfunction. Clients with soft tissue inflammatory conditions are not eligible.</i>			
Check for AFO	1 Check AFO Per 2 Years	N309 AFO	\$441.82 Each
<i>Skinny & boney prominent patients, Valgus / Varus greater than 10 – 15 degrees, severe sagittal deformity, rotational deformity, high body weight, unstable midfoot, scarring or adhesions greater than 8 square cm.</i>			

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Knee Ankle Foot Orthoses (KAFO)			
<i>Prescription Required</i>			
<i>Knee joints to be added.</i>			
<i>Cost for ankle joints, specialized straps, joint covers already included in AADL Price.</i>			
Check for KAFO			
	1 Check KAFO Per 2 Years	N310 KAFO	\$648.65 Each
<i>Skinny & boney prominent patients, Valgus / Varus greater than 10 – 15 degrees, severe sagittal deformity, rotational deformity, high body weight, unstable midfoot, scarring or adhesions greater than 8 square cm.</i>			
KAFO			
Conventional - double upright	1 L/E Orthosis Per 2 Years	O287 KAFO	\$2,489.06 Each
Conventional - single upright	1 L/E Orthosis Per 2 Years	O283 KAFO	\$2,069.86 Each
Conventional - single upright without knee joint	1 L/E Orthosis Per 2 Years	O285 KAFO	\$1,697.82 Each
Graphite - double upright	1 L/E Orthosis Per 2 Years	O299 KAFO	\$4,369.14 Each
Hybrid - double upright	1 L/E Orthosis Per 2 Years	O293 KAFO	\$3,174.25 Each
Hybrid - single upright	1 L/E Orthosis Per 2 Years	O292 KAFO	\$2,868.61 Each
Plastic - double upright	1 L/E Orthosis Per 2 Years	O291 KAFO	\$3,174.25 Each
Plastic - single upright	1 L/E Orthosis Per 2 Years	O290 KAFO	\$2,653.70 Each

Stance Phase KAFO

Prescription Required

Eligibility Criteria

weak quadriceps mechanism
adequate hip flexion and extension power
no spasticity
no knee flexion contracture > 10 degrees
no hip flexion contracture > 220 lbs.

Documentation of clinical eligibility must be kept on client file and provided on request.

Any comparable quality system to below listed items may be substituted with AADL prior approval.

Stance Phase KAFO

Free Walk Ottobock 170K1=L-120-OBA-7	1 L/E Orthosis Per 2 Years	O232 KAFO	\$3,932.81 Each
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Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Lower Extremity Orthoses			
<i>Total limit of 5 additions per orthoses. No duplicate additions permitted, except if individual sides (medial and lateral) are authorized separately, such as joints which are listed as "per side".</i>			
Ankle Joints			
Generic Ankle Joints	5 L/E Additions Per 2 Years	N308 AFO, HKAFO, THKAFO	\$246.90 Max. Per Side
Bail Locks Bar or Equivalent			
	5 L/E Additions Per 2 Years	O343 KAFO, KO	\$341.03 Per Pair
<i>To be added if the bail lock is activated by an extension assist, cable release, or other remote method, or in the case of bi-lateral joint uprights, the bail is contoured and attached to both joints. If only a single hinge/lock claim for 1/2 of price max.</i>			
Bariatric Option			
Lower Extremity Orthosis	5 L/E Additions Per 2 Years	O498 AFO, HKAFO, KAFO, THKAFO	\$362.66 Each
<i>Client is 100 lb over normal weight or over 275 lb.</i>			
Becker Cable Control for Trigger Lock			
MX003-HS/R	5 L/E Additions Per 2 Years	O184 AFO, KAFO, KO	\$407.65 Each
Calf Band			
Custom molded to patient model	5 L/E Additions Per 2 Years	O349 AFO, KAFO	\$416.90 Each
Calf Lacer			
Full, molded to patient model	5 L/E Additions Per 2 Years	O334 KAFO	\$547.20 Each
Half, non-molded	5 L/E Additions Per 2 Years	O330 KAFO	\$250.95 Each
Custom Fabricated Flexible Interface			
	5 L/E Additions Per 2 Years	O579 AFO, KAFO	\$302.21 Each
<i>For unstable, high tone, or severe foot deformity.</i>			
Dorsi Flexion Stop			
Custom	5 L/E Additions Per 2 Years	O351 AFO, KAFO	\$300.07 Each
Drop Lock or Equivalent			
	5 L/E Additions Per 2 Years	O341 HKAFO, KAFO, THKAFO	\$188.47 Per Pair
<i>To be added if the addition of magnets or corking screws are incorporated into the fabrication procedure. If only a single hinge/lock claim for 1/2 of price maximum</i>			
Extension for Lineal Adjustment for Growth for Side Bars			
	5 L/E Additions Per 2 Years	O388 KAFO, THKAFO, RGO	\$206.62 Each

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Lower Extremity Orthoses			
<i>Total limit of 5 additions per orthoses. No duplicate additions permitted, except if individual sides (medial and lateral) are authorized separately, such as joints which are listed as "per side".</i>			
Hip Joints			
Clevis type or thrust bearing, free	5 L/E Additions Per 2 Years	0381 HKAFO, KAFO	\$680.63 Each
Ischial Ring			
	5 L/E Additions Per 2 Years	0366 KAFO	\$647.09 Each
Knee Cage			
Pull Over	5 L/E Additions Per 2 Years	0359 KAFO	\$534.71 Each
Standard	5 L/E Additions Per 2 Years	0357 KAFO	\$439.82 Each
Knee Joints			
Adjustable Extension Ring Lock - Becker 1006	5 L/E Additions Per 2 Years	0391 KAFO, KO	\$306.62 Each
Automatic Spring Lever - Becker 1003	5 L/E Additions Per 2 Years	0379 KAFO, KO	\$356.11 Each
Disc or Dial Lock Joints for Adjustable Knee or Equivalent	5 L/E Additions Per 2 Years	0345 KAFO, KO	\$435.03 Per Pair
<i>If only a single hinge/lock claim for 1/2 of price maximum</i>			
Free Motion/Ring Lock - Becker - 1002/1005/1008	5 L/E Additions Per 2 Years	0375 KAFO, KO	\$253.22 Each
Free Motion/Ring Lock - Ottobock 17B43=16	5 L/E Additions Per 2 Years	0373 KAFO	\$214.63 Each
Generic	5 L/E Additions Per 2 Years	N699 KAFO, KO	\$456.97 Max. Each
Offset Bail Locks 17B33 or Equivalent	5 L/E Additions Per 2 Years	0352 KAFO	\$540.46 Each
Offset Drop Locks 17B20 or Equivalent	5 L/E Additions Per 2 Years	0350 KAFO	\$247.24 Each
Polycentric - Ottobock 17B46	5 L/E Additions Per 2 Years	0371 KAFO	\$448.67 Each
Polycentric Knee Joint - Becker	5 L/E Additions Per 2 Years	0377 KAFO, KO	\$366.91 Each
Ratchet Lock - Becker	5 L/E Additions Per 2 Years	0399 KAFO, KO	\$354.36 Each
Step Loc - OTS Corp	5 L/E Additions Per 2 Years	0401 KAFO, KO	\$398.19 Each
Swiss Lock - Ottobock 17B36/17B48	5 L/E Additions Per 2 Years	0380 KAFO, KO	\$369.77 Each
Locking Knee Hinge(s) or Equivalent			
For custom-made stabilizing knee orthosis	5 L/E Additions Per 4 Years	0477 KO	\$287.75 Each

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Lower Extremity Orthoses			
<i>Total limit of 5 additions per orthoses. No duplicate additions permitted, except if individual sides (medial and lateral) are authorized separately, such as joints which are listed as "per side".</i>			
Locking Knee Hinge(s) or Equivalent			
For custom-made unloading knee orthosis	5 L/E Additions Per 4 Years	O479 KO	\$287.75 Each
Molded Foot Section Attached to Stirrup			
	5 L/E Additions Per 2 Years	O353 AFO, KAFO	\$778.76 Each
Pad			
Gluteal	5 L/E Additions Per 2 Years	O386 HKAFO, KAFO, THKAFO	\$155.50 Each
Sub Patellar	5 L/E Additions Per 2 Years	O358 KAFO	\$53.36 Each
Pelvic Band, Belt and Hip Joint			
Bilateral	5 L/E Additions Per 2 Years	O384 HKAFO, KAFO	\$1,751.55 Each
Unilateral	5 L/E Additions Per 2 Years	O382 HKAFO, KAFO	\$1,129.11 Each
Plantar Flexion Stop			
Custom	5 L/E Additions Per 2 Years	O354 AFO, KAFO	\$168.33 Each
Pre-Tibial or Femoral Shell			
Molded to patient model	5 L/E Additions Per 2 Years	O336 AFO, HKAFO, KAFO, THKAFO	\$454.58 Each
Quadrilateral Brim			
Molded to patient model	5 L/E Additions Per 2 Years	O368 KAFO	\$907.45 Each
RGO (Reciprocating Gait Orthosis)			
Pelvic assembly and jacket only, does not include KAFO's.	5 L/E Additions Per 2 Years	O387 KAFO, RGO	Prior Approval
<i>Requests for Prior Approval benefits must be submitted to Alberta Blue Cross using the Prior Approval authorization stream. Include documentation of material costs, labour hours and clinical rationale as applicable.</i>			
Round Caliper Plate			
	5 L/E Additions Per 2 Years	O362 AFO, KAFO	\$299.28 Each
Specialized Strap			
Dorsal Ankle Strap (retention)	5 L/E Additions Per 2 Years	O413 AFO	\$49.59 Each
<i>High extensor tone requires additional strap.</i>			
Valgus or Varus "T" Straps	5 L/E Additions Per 2 Years	O415 AFO	\$124.34 Each

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Lower Extremity Orthoses			
<i>Total limit of 5 additions per orthoses. No duplicate additions permitted, except if individual sides (medial and lateral) are authorized separately, such as joints which are listed as "per side".</i>			
Stirrup			
Spilt stirrup and flat caliper plate or solid stirrup	5 L/E Additions Per 2 Years	O367 AFO, KAFO	\$301.79 Each
Thigh Lacer			
Full, molded to patient model	5 L/E Additions Per 2 Years	O374 KAFO	\$646.59 Each
Full, non-molded	5 L/E Additions Per 2 Years	O372 KAFO	\$439.90 Each
Half, custom made	5 L/E Additions Per 2 Years	O376 KAFO	\$380.44 Each
Stance Phase Knee Joint			
<i>Prescription Required</i>			
Criteria			
<ul style="list-style-type: none"> • weak quadriceps mechanism • adequate hip flexion and extension power • no spasticity • no knee flexion contracture > 10 degrees • no hip flexion contracture > 220 lbs. 			
<i>Any comparable quality system to below listed items may be substituted with AADL prior approval.</i>			
Becker Load Response			
	1 Joint Per 2 Years	O240 KAFO	\$1,254.44 Each
Horton Stance Phase			
	2 Joints Per 2 Years	O243 KAFO	\$1,620.96 Each
Stance Phase Knee Joint - Fillauer Swing Phase Lock			
	1 Joint Per 2 Years	O263 KAFO	\$3,860.68 Each
Thoracic-Hip-Knee-Ankle Orthoses			
<i>Standing frames can also be found under AADL Approved Products List: Pediatric Equipment. Please refer to the AADL website for more information.</i>			
Winnipeg Standing Frame			
	1 L/E Orthosis Per 4 Years	O222 THKAFO	\$2,313.17 Each
Additions to Footwear			
Transfer Of Caliper Plate From Shoe To Shoe			
	2 Transfers Per 2 Years	O442 AFO	\$373.44 Each

Lower Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Footwear			
Transfer of Dennis Brown Foot Plates To New Shoes	2 Transfers Per 2 Years	O446 AFO, HIPO	\$189.99 Each
Transfer Of Solid Stirrup From Shoe To Shoe	2 Transfers Per 2 Years	O444 AFO, KAFO	\$466.32 Each
Partial Foot Prostheses			
<i>Prescription Required</i>			
Partial Foot Prosthesis			
AFO Style Partial Foot Prosthesis	1 L/E Orthosis Per 2 Years	O207 PF	\$2,423.59 Each
<i>No additions</i>			
Custom Foot Orthosis Style with Toe Filler	1 L/E Orthosis Per 2 Years	O087 PF	\$504.54 Each
<i>No additions</i>			
Custom Foot Orthosis Style with Toe Filler and Sole Stiffener	1 L/E Orthosis Per 2 Years	O157 PF	\$742.49 Each
<i>No additions</i>			
Custom Silicone Prosthesis	1 L/E Orthosis Per 2 Years	O247 PF	\$2,717.08 Each
<i>UPGRADE, No additions</i>			
Enclosed Socket Style Prosthesis	1 L/E Orthosis Per 2 Years	O197 PF	\$1,679.16 Each
<i>No additions</i>			

Upper Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Shoulder and Shoulder-Elbow-Wrist-Hand Orthoses			
<i>Prescription Required</i>			
Functional Arm Orthosis With Shoulder Cap	1 U/E Orthosis Per 2 Years	O453 SO	\$2,199.62 Each
<i>No Additions</i>			
Highlander Shoulder Sling	1 U/E Orthosis Per 2 Years	O447 SO	\$665.13 Each
Humeral Orthosis			
Custom Fitted	1 U/E Orthosis Per 2 Years	O449 SO	\$304.49 Each
Molded to patient model	1 U/E Orthosis Per 2 Years	O451 SO	\$1,005.81 Each
Elbow Orthoses			
<i>Prescription Required</i>			
Elbow Orthosis			
Molded to patient - low temp thermoplastics	1 U/E Orthosis Per 2 Years	O454 EO	\$446.44 Each
Molded to patient model	1 U/E Orthosis Per 2 Years	O456 EO	\$878.16 Each
Hinged Elbow Orthosis			
Molded to patient model	1 U/E Orthosis Per 2 Years	O455 EO	\$1,289.24 Each
Wrist-Hand Orthoses - Dynamic			
<i>Prescription Required</i>			
CTI2 Wrist Brace			
Custom - made from cast	1 U/E Orthosis Per 2 Years	O140 WHO	\$1,529.96 Each
OTS Fit according to measurements	1 U/E Orthosis Per 2 Years	O153 WHO	\$553.08 Each
WHO			
Molded to patient model with joints	1 U/E Orthosis Per 2 Years	O463 WHO	\$1,151.19 Each
Rancho, Engen or equivalent	1 U/E Orthosis Per 2 Years	O465 WHO	\$1,735.36 Each
Wrist-Hand Orthoses - Static			
<i>Prescription Required</i>			
WHO			
Custom Fitted, long opponens kit type	1 U/E Orthosis Per 2 Years	O466 WHO	\$309.44 Each
Custom made, soft leather	1 U/E Orthosis Per 2 Years	O492 WHO	\$1,029.77 Each

Upper Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Wrist-Hand Orthoses - Static			
<i>Prescription Required</i>			
WHO			
Molded to patient model, high temperature thermoplastics	1 U/E Orthosis Per 2 Years	O462 WHO	\$962.66 Each
Static Molded to the patient model, working splint (wrist gauntlet)	1 U/E Orthosis Per 2 Years	O490 WHO	\$847.26 Each
Hand Orthoses - cannot be added to WHO			
<i>Prescription Required</i>			
Short Opponens			
Molded to patient model	1 U/E Orthosis Per 2 Years	O469 WHO	\$590.65 Each
Short Opponens Kit			
Custom Fitted - Rancho, Engen or equivalent	1 U/E Orthosis Per 2 Years	O464 WHO	\$252.52 Each
Finger Orthoses			
Generic Finger Orthosis			
Functional Ring Splints	1 Per Digit Per 2 Years	N305 WHO	\$300.21 Max. Each
<i>To control finger deformities. No Additions. Must indicate criteria on client file.</i>			
Additions to Upper Extremity Orthoses			
<i>Total limit of 10 additions per orthoses. No duplicate additions for the same digits or joint.</i>			
1st Dorsal Interosseous Assist			
	10 U/E Additions Per 2 Years	O470 WHO	\$160.80 Each
Adjustable MP Flexion Control			
	10 U/E Additions Per 2 Years	O486 WHO	\$313.81 Each
Adjustable MP Flexion Control and IP Flexion Control			
	10 U/E Additions Per 2 Years	O488 WHO	\$360.25 Each
Adjustable Position Lock			
Contracture reduction	10 U/E Additions Per 2 Years	O460 EO	\$356.41 Each
With Active Control	10 U/E Additions Per 2 Years	O461 EO	\$1,141.45 Each
Dynamic Elbow Extension Assist			
	10 U/E Additions Per 2 Years	O365 EO	\$778.94 Each
<i>To maintain/increase ROM chronic non-fixed flexion contractures.</i>			

Upper Extremity Orthoses

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Additions to Upper Extremity Othoses			
<i>Total limit of 10 additions per orthoses. No duplicate additions for the same digits or joint.</i>			
Figure 8 Harness and Bowden Cable	10 U/E Additions Per 2 Years	O485 EO	\$269.97 Each
Flexion or Extension Assist	10 U/E Additions Per 2 Years	O484 WHO	\$165.82 Each
Flexion/Extension Assist	10 U/E Additions Per 2 Years	O458 EO	\$243.83 Each
IP Ext. Assist	10 U/E Additions Per 2 Years	O472 WHO	\$67.96 Each
Lumbrical Bar	10 U/E Additions Per 2 Years	O473 WHO	\$189.23 Each
Metal Uniaxial Hinge with Adjustable Postion Lock			
Beckers 4001C/4001B	10 U/E Additions Per 2 Years	O360 WHO	\$383.60 Each
Beckers Flexion or Extension Assist 4001C/4001B	10 U/E Additions Per 2 Years	O356 WHO	\$383.60 Each
MP Ext. Assist	10 U/E Additions Per 2 Years	O476 WHO	\$67.96 Each
MP Ext. Stop	10 U/E Additions Per 2 Years	O474 WHO	\$96.34 Each
Spring Swivel Thumb	10 U/E Additions Per 2 Years	O480 WHO	\$221.10 Each
Tamarack Hinge for Elbow			
Dorsiflexion assist or non-dorsiflexion assist	10 U/E Additions Per 2 Years	O158 EO	\$243.97 Per Pair
Tamarack Hinge for Wrist			
Dorsiflexion assist or non-dorsiflexion assist	10 U/E Additions Per 2 Years	O160 WHO	\$243.97 Per Pair
Thumb MP Stop With Thumb IP Ext. Assist	10 U/E Additions Per 2 Years	O482 WHO	\$218.26 Each
Thumb Post	10 U/E Additions Per 2 Years	O471 WHO	\$105.81 Each
Wrist-Hand Orthosis Added to EO	10 U/E Additions Per 2 Years	O508 EO	\$311.66 Each

Non-Rigid Musculoskeletal Supports

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Spinal Orthoses - Non-Rigid			
<i>Prescription Required</i>			
Generic Dorso-Lumbar Support			
1st Fitting	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N741 NRS	\$347.45 Max. Each
2nd Support - No Fitting Fee	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N301 NRS	\$161.68 Max. Each
Generic Lumbo-Sacral Support			
1st Fitting	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N744 NRS	\$359.39 Max. Each
2nd Support - No Fitting Fee	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N302 NRS	\$173.62 Max. Each
Lumbosacral Support			
Custom Made	1 Custom Made Support Per 12 Months	O128 NRS	\$371.61 Each
Sacroiliac Support			
Custom Made	1 Support Per 12 Months	O156 NRS	\$593.59 Each
Thoraco-Lumbo-Sacral support			
Custom Made	1 Custom Made Support Per 12 Months	O097 NRS	\$563.58 Each
Soft Support Additions			
Bariatric Option for Soft Supports	2 Additions Per 12 Months	N746 HERNIA, NRS	\$185.77 Each
Hernia Supports			
<i>Prescription Required</i>			
Generic Abdominal Hernia Support			
1st Fitting	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N740 HERNIA	\$290.33 Max. Each
2nd support - No Fitting Fee	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N306 HERNIA	\$104.56 Max. Each
Generic Inguinal Hernia Support			
1st Fitting	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N742 HERNIA	\$246.47 Max. Each

Non-Rigid Musculoskeletal Supports

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Hernia Supports			
<i>Prescription Required</i>			
Generic Inguinal Hernia Support 2nd support - No Fitting Fee	1 "1st Fitting" & 1 "2nd Support" Per 12 Months	N307 HERNIA	\$60.70 Max. Each
Hernia Support Cloth/elastic Type Custom Made	1 Custom Made Support Per 12 Months	O179 HERNIA	\$626.06 Each

Orthotic Benefits for Clubfoot

Qty. / Freq.

Cat. No.
Orth. Type

AADL Price

Orthotic Benefits for Clubfoot

A validation certificate is **not** required for minor adjustments or repairs after original fitting of an AADL funded orthotic device.

Eligibility Criteria:

Clients must be diagnosed with clubfoot and have an orthosis recommended by an orthopedic surgeon or specialized clubfoot team.

Clients are not eligible for a clubfoot orthosis and another lower extremity orthosis at the same time.

Clubfoot benefits are not eligible for AADL funded modifications, repairs or maintenance. As such, the cost of any modifications, repairs or maintenance outside of the manufacturer's warranty is the client's responsibility.

Procedure – For eligible clients, create a clubfoot authorization on the Alberta Blue Cross Online Health Portal (OHP). Clubfoot benefits can then be administered and claimed on the basis of client subsequent, ongoing eligibility and clinically assessed basic need(s). Claims are to be submitted via the Alberta Blue Cross Online Health Portal (OHP).

Assessment

Complete Orthotic Assessment	3 Complete Assessments Per 5 Years	O750 CF	\$139.33 Per Assessment
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*Includes the assessment, measurement, and fitting of clubfoot AFOs and abduction bar.
 Only available to non-AHS vendors.*

Follow-Up Assessment	10 Follow-Ups Per 5 Years	O753 CF	\$74.31 Per Assessment
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*Includes the assessment, measurement and fitting of replacement components (AFOs or abduction bar).
 Only available to non-AHS vendors, if new measurements are taken by the vendor.*

Generic Abduction Bar

All sizes	3 Abduction Bars Per 5 Years	N751 CF	\$111.32 Max. Each
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Generic AFOs/Boots

All sizes	8 Pairs of AFOs/Boots Per 5 Years	N753 CF	\$341.72 Max. Per Pair
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If only one boot required, maximum price is \$170.86

Orthotic Service Fees

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Orthotic Modifications and Repairs			
<i>AADL will not fund any modifications or repairs to an orthotic device within 90 days of provision of the device. Specialty Suppliers are required to provide all necessary follow-up to ensure the device is able to be used for the purpose intended without additional cost to AADL or the client.</i>			
<i>Modifications, repairs and replacement parts are only funded for the client's current primary orthosis. Modifications, repairs and replacement parts are not funded for secondary, duplicate or back-up components. Replacement components must be claimed using the same catalogue numbers as when the parts were originally provided, subject to benefit-specific quantity and frequency limits. Specialty Suppliers must document the nature and details of the work completed and the clinical justification and retain these benefit notes on client file for all authorized replacement components.</i>			
<i>A prescription and validation certificate are not required for minor adjustments or repairs after original fitting of an AADL funded orthotic device.</i>			
Adjustments			
Adjustment for Pressure Area	3 Adjustments Per 12 Months	O605 All except CF, HERNIA, NRS	\$62.66
<i>For adjustments due to a documented area of pressure or significant irritation.</i>			
Sizing/Fit Adjustment	3 Adjustments Per 12 Months	O603 All except CF, HERNIA, NRS	\$62.66
<i>For adjustments due to a change in the size or shape of the client's body.</i>			
Orthotic Modification and Repairs			
Major Modification or Repair	3 Modifications/Repairs Per 12 Months	O609 All except CF, HERNIA, NRS	Prior Approval
<i>Component will not be replaced for at least 6 months.</i>			
<i>Requests for Prior Approval benefits must be submitted to Alberta Blue Cross using the Prior Approval authorization stream. Include documentation of work required, material costs, labour hours and clinical rationale as applicable.</i>			
Minor Modification or Repair	3 Modifications/Repairs Per 12 Months	O607 All except CF, HERNIA, NRS	\$146.25
<i>To maintain structural integrity and/or function orthosis.</i>			
Non-Warranty Repair by Manufacturer	3 Modifications/Repairs Per 12 Months	O627 All except CF, HERNIA, NRS	Prior Approval
<i>Eligible only if component will not be replaced for at least 6 months.</i>			
<i>Fax the following information to AADL for prior approval:</i>			
<i>- Client information</i>			
<i>- Detailed description of the work to be done</i>			
<i>- Clinical justification</i>			
<i>- Cost breakdown, including all labour and materials</i>			

Orthotic Service Fees

Qty. / Freq.

Cat. No.
Orth. Type

AADL Price

Orthotic Modifications and Repairs

AADL will not fund any modifications or repairs to an orthotic device within 90 days of provision of the device. Specialty Suppliers are required to provide all necessary follow-up to ensure the device is able to be used for the purpose intended without additional cost to AADL or the client.

Modifications, repairs and replacement parts are only funded for the client's current primary orthosis. Modifications, repairs and replacement parts are not funded for secondary, duplicate or back-up components. Replacement components must be claimed using the same catalogue numbers as when the parts were originally provided, subject to benefit-specific quantity and frequency limits. Specialty Suppliers must document the nature and details of the work completed and the clinical justification and retain these benefit notes on client file for all authorized replacement components.

A prescription and validation certificate are **not** required for minor adjustments or repairs after original fitting of an AADL funded orthotic device.

Orthotic Modification and Repairs

Warranty Repair by Manufacturer

3 Modifications/Repairs Per
12 Months

O625

\$232.21

All except CF,
HERNIA, NRS

For commercial components only. Not to be used for fit adjustments. Eligible only if component will not be replaced for at least 6 months.

Includes removal and re-installation of the component.

Orthotic Replacement Components

AADL will not fund any modifications or repairs to an orthotic device within ninety (90) days of provision of the device. Specialty Suppliers are required to provide all necessary follow-up to ensure the device is able to be used for the purpose intended without additional cost to AADL or the client.

A prescription and validation certificate are **not** required for minor adjustments or repairs after original fitting of an AADL funded orthotic device.

Eligibility Criteria: Must only be used to replacement straps on the client's most current, primary orthosis/orthoses. **Not eligible with the provision of a new device, or as a secondary, duplicate or back-up component.** If the component(s) to be replaced was/were originally authorized using a specific catalogue number(s), it/they must be authorized using the same original catalogue numbers, subject to eligible benefit-specific quantity and frequency limits. Specialty Supplier must document the nature and details of the work completed and the clinical justification and retain these benefit notes within client files for all authorized replacement components.

Replacement Liner

Cervical Orthosis

1 Liner Per 12 Months

O495

\$36.25 Each

CO

After 6 months

Generic Knee Orthosis Liner Kit

1 Set of Liners Per 12 Months

N708

\$120.35 Max. Each

KO

After 6 months

Replacement Parts for Milwaukee Orthosis

Kyphosis pad

3 Replacement Parts Per 2
Years

O192

\$163.28 Each

CTLSO

Orthotic Service Fees

	Qty. / Freq.	Cat. No. Orth. Type	AADL Price
Orthotic Replacement Components			
<i>AADL will not fund any modifications or repairs to an orthotic device within ninety (90) days of provision of the device. Specialty Suppliers are required to provide all necessary follow-up to ensure the device is able to be used for the purpose intended without additional cost to AADL or the client.</i>			
<i>A prescription and validation certificate are not required for minor adjustments or repairs after original fitting of an AADL funded orthotic device.</i>			
<i>Eligibility Criteria: Must only be used to replacement straps on the client's most current, primary orthosis/orthoses. Not eligible with the provision of a new device, or as a secondary, duplicate or back-up component. If the component(s) to be replaced was/were originally authorized using a specific catalogue number(s), it/they must be authorized using the same original catalogue numbers, subject to eligible benefit-specific quantity and frequency limits. Specialty Supplier must document the nature and details of the work completed and the clinical justification and retain these benefit notes within client files for all authorized replacement components.</i>			
Replacement Parts for Milwaukee Orthosis			
Lumbar pad	3 Replacement Parts Per 2 Years	O194 CTLSO	\$82.86 Each
Skirt	3 Replacement Parts Per 2 Years	O214 CTLSO	\$1,776.12 Each
Sternal pad	3 Replacement Parts Per 2 Years	O198 CTLSO	\$120.54 Each
Replacement Straps			
Lower Extremity Strap - Lower Leg	4 Lower Leg Straps Per 12 Months	O526 AFO, HKAFO, KAFO, KO, THKAFO	\$33.15 Each
Lower Extremity Strap - Specialized Knee Strap - Generic	1 Knee Strap Per 12 Months	N714 HKAFO, KAFO, KO, THKAFO	\$58.87 Max. Each
<i>Primarily used as part of a CFAB KO</i>			
Lower Extremity Strap - Upper Leg	4 Upper Leg Straps Per 12 Months	O519 HKAFO, KAFO, KO, THKAFO	\$33.15 Each
Spinal/Pelvic Orthosis Strap	4 Spinal Straps Per 12 Months	O529 CO, CTLSO, HELMET, HIPO, HKAFO, LSO, RGO, THKAFO, TLSO	\$33.15 Each
Upper Extremity Strap	8 U/E Straps Per 12 Months	O528 EO, SO, WHO	\$34.79 Each