Policy and Administration Manual

Assistive Devices Program

Ministry of Health and Long-Term Care

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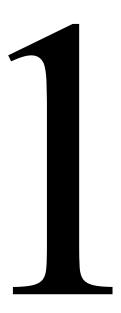
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Section 1 Introduction



1 INTRODUCTION

100 The Policies and Procedures Administration Manual

Purpose of this Manual

The purpose of this Manual is to present the policies and procedures of the Limb Prostheses Category in one document. This Manual is intended to complement the Assistive Devices Program Policy and Procedures Manual (Program Manual).

This Manual forms part of the contractual agreement between the Ministry of Health and Long-Term Care and the ADP Registered Vendor, and the agreement between the Ministry of Health and Long-Term Care and the ADP Registered Authorizer. The Ministry reserves the right to revise this Manual.

Intended Target Audience

This Manual is intended to be used by Registered Authorizers and Registered Vendors who have a contract with the Assistive Devices Program (ADP) to provide devices and services related to Limb Prostheses.

105 <u>The Assistive Devices Program (ADP)</u>

The Ministry of Health and Long-Term Care administers the Assistive Devices Program (ADP).

<u>Legislation Governing the Program</u>

The Minister has authority pursuant to paragraph 6(1)4 of the Ministry of Health Act, R.S.O. 1990, c.M.26 to enter into agreements for the provision of devices.

Vision

To enable people with physical disabilities to increase their independence through access to assistive devices responsive to their individual needs.

Mandate

To provide consumer centered support and funding to Ontario residents who have long-term physical disabilities to provide access to personalized assistive devices appropriate for the individual's basic needs.

To provide Ontario residents with fair and affordable access to a range of devices and to provide vendors with a fair and predictable return on their investment.

Goal

The goal of the Limb Prostheses Category is to support an individual's purchase of a Conventional Limb Prosthesis or Externally Powered Upper Limb Prosthesis as a substitute for a partially or totally absent arm or leg.

110 Protecting Personal Health Information

The Program must ensure that ADP personnel, registered authorizers and vendors are in compliance with the Personal Health Information Act, 2004 (PHIPA).

See the Program Manual, Section 800, Protecting Personal Health Information and Section 805, Collection and Release of Information Policy.

115 DEFINITIONS

For the purposes of this Manual, these are the meanings of the following terms:

- **115.01 Agent:** A person who is legally authorized to act on the applicant's behalf.
 - (1) The following persons can sign an application on behalf of an individual to verify information and to consent to the collection, use and/or disclosure of information:
 - (a) where the applicant is less than sixteen (16) years of age, a person who has lawful custody of the individual;
 - (b) the applicant's attorney under a continuing power of attorney;
 - (c) the applicant's guardian of property;
 - (d) the applicant's attorney under a power of attorney for personal care; and
 - (e) the applicant's guardian of the person,

as evidenced by supporting documents.

- (2) Only the following persons can sign on behalf of the individual to indicate that payment is to be made out to someone other than the applicant:
 - (a) where the applicant is less than sixteen (16) years of age, a person who has lawful custody of the individual;
 - (b) the applicant's attorney under a continuing power of attorney; and
 - (c) the applicant's guardian of property,

as evidenced by supporting documents.

Amputee Team: Membership of an ADP-registered Amputee Team must minimally consist of a physiatrist, an orthopaedic surgeon or other physician recognized as specializing in the field of amputee rehabilitation; a certified prosthetist; and a registered occupational therapist and/or a physiotherapist. This team is responsible for assessing the applicant's prosthetic needs, prescribing and authorizing conventional limb prostheses, approving the final product, suggesting modifications or replacements, and providing education and functional use training.

115.03 Applicant: An individual who applies for ADP funding assistance for:

- a) a conventional limb prosthesis, or
- b) an externally powered upper limb prosthesis, or
- c) related sockets, additions, supplements, suspension systems, modifications, adjustments and components, or
- d) replacement of an existing prosthesis, socket, components, and other options which were prescribed, authorized and funded by the ADP.
- **Application Form:** The Application for Funding Limb Prostheses form provided by the Program and used to request ADP funding assistance for a listed device.
- **Approved Amount:** The dollar amount specified in the product manual; where no dollar amount is specified in the product manual, the dollar amount determined by the Program.
- **Authorized Device:** A listed device which the authorizer, having assessed the needs of the applicant has specified as appropriate for the applicant.
- Authorizer: a certified prosthetist who is a certified member in good standing with the Canadian Board for Certification of Prosthetists and Orthotists, who has established eligibility for membership or is a member in good standing with the Ontario Association of Prosthetists and Orthotists. The certified prosthetist must be an active member of an ADP registered Amputee Team and registered with the Program as an Authorizer for conventional limb prostheses or externally powered upper limb prostheses.
- **115.08 Certified Prosthetist:** means a health care professional certified by the Canadian Board for Certification of Prosthetists and Orthotists (CBCPO) to practice prosthetics, who is a member in good standing of the Board.
- **115.09 Child:** In this manual, the word child applies to a person from 2 to 18 years of age.
- **Client:** A person who applies to the Program, is eligible, and receives funding assistance from the Program for a device.
- **Eligible Person:** A person who is an insured person within the meaning of the Health Insurance Act, R.S.O. 1990, c.H.6 or any successor legislation thereto; and meets the eligibility criteria as specified in the device-specific Policy and Administration Manual.
- **Externally Powered Upper Limb Prostheses (EPULP):** Externally powered devices which include electric and myoelectric prostheses.

115.13 Externally Powered Upper Limb Prostheses (EPULP) Clinic (also referred to as Myoelectric Clinic): An ADP-registered Externally Powered Upper Limb Prostheses Clinic must minimally consist of a physiatrist, orthopaedic surgeon or other physician recognized as specializing in the field of upper limb amputee rehabilitation, a certified prosthetist and an occupational therapist and/or a physiotherapist. Clinic members are responsible for assessing the client's needs, for prescribing and authorizing externally powered upper limb prostheses, socket replacements and major component replacements, as well as for approving the final product. They are also responsible for coordinating and/or providing associated rehabilitation services.

- **Independent Consideration (IC):** Items listed in the device catalogue which do not bear an ADP-OAPO price require client prices to be established using the OAPO Pricing Model.
- Infant: In this Manual the word infant applies to a person from 3 months to 2 years of age. Infants 3 months to 10 months of age, requiring a primary paediatric passive prosthesis are covered under the Conventional Limb Prostheses program. Infants 10 months to 2 years of age, fitted with an externally powered device, are covered under the Externally Powered Upper Limb Prostheses program. ADP does not fund an externally powered upper limb prosthesis for infants 3 months to 10 months of age.
- **Listed Device:** Specific devices, sockets, additions, supplements, suspension systems, modifications, adjustments and components that are approved for listing in the product manual.
- 115.17 Manual: The Limb Prostheses Policy and Administration Manual
- **Maximum Contribution:** means the maximum amount payable by the Program to the Vendor for a particular group of components specified in the Product Manual of which ADP will fund 75% of any retail price up to that amount.
- **Ministry:** The Ministry of Health and Long-Term Care.
- **Occupational Therapist:** means a regulated health care professional registered as a practising member in good standing with the College of Occupational Therapists of Ontario.
- **Personal Health Information:** The personal information as defined in Section 2 of the Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31 or any successor legislation thereto.

See the Assistive Devices Program Policy and Procedures Manual Section 800, Protecting Personal Health Information and Section 805, Collection and Release of Information Policy.

- **Physiotherapist (Physical Therapist):** means a regulated health care professional registered as a practising member in good standing with the College of Physiotherapists of Ontario.
- **Prescriber:** means a licensed physiatrist, orthopaedic surgeon or other physician recognized as specializing in the field of amputee rehabilitation, who is a member of an ADP-registered Amputee Team. The physician is responsible for prescribing conventional limb prostheses and procedures and/or externally powered upper limb prostheses funded by ADP.
- 115.24 Primary Paediatric Active Prosthesis (PPAP): An active infant prosthesis fitted from 10 months of age or older. The activation components include a one-muscle, single-site voluntary opening control system and an electro-mechanical hand. This device is funded by the ADP through the Externally Powered Upper Limb Prosthesis section.

115.25 Primary Paediatric Passive Prosthesis (PPPP): A passive infant prosthesis fitted from 3 months of age or older. It generally consists of a thin walled socket, a cosmetic foam cover and a soft passive hand. This device is funded by the ADP through the Conventional Limb Prosthesis section.

- **115.26 Product Manual:** The Listing and Approved Prices for Limb Prostheses.
- **115.27 Program:** The Ministry's Assistive Devices Program (ADP).
- **Prosthesis:** means a removable appliance (fastened externally to the body) intended to substitute for a partially or totally absent body part to restore its function.
 - a) **Definitive Prosthesis:** A device that is provided following gait and functional training, wound healing and the period of rapid physiological change in the residual limb and is thus intended for a longer wear period than the preparatory device. Physiological changes must still be anticipated as a result of rapid weight fluctuations, medical complications and additional residual limb atrophy/growth caused by the dynamics of using the prosthesis. When severe physiological change occurs, a new socket or prosthesis must be considered. Endo-skeletal and exo-skeletal finishings are a usual part of a definitive device.
 - b) **Preparatory Prosthesis:** A device that allows for extensive gait training for lower limb amputees and extensive functional training for upper limb amputees. A person with a preparatory prosthesis is still undergoing wound healing and rapid and extensive changes to the residual limb that will preclude fitting of the definitive prosthesis. Endo-skeletal or exo-skeletal finishings are not usually part of the preparatory device.
- **Prosthetic Intern:** means an individual who has successfully completed a clinical program in prosthetics at a school accredited by the Canadian Board for Certification of Prosthetists and Orthotists (CBCPO) and who is working towards certification in prosthetics. An intern must be supervised by a certified prosthetist during all hands-on client activities including casting/tracing, fitting and dispensing prostheses funded by ADP.
- 115.30 Prosthetic Technician: mean an individual trained in the fabrication of prosthetic devices either through successful completion of a technical course in prosthetics at a college of applied arts and technology, or completion of an apprenticeship in prosthetics under the supervision of a Canadian Board certified prosthetist. A technician would not be involved in direct client contact activities. A technician must receive appropriate supervision from a Canadian Board certified prosthetist when working on prostheses funded by ADP.
- **Registered Vendor:** A business or nonprofit organization that has met all registration requirements with the Program and holds an executed vendor contract with the Program.
- **Regulated Health Professional:** A health professional holding a valid certificate with a regulatory college specified by the Regulated Health Professions Act.
- **Rehabilitation:** Refers to any goal-oriented and time-limited process aimed at enabling an impaired person to reach an optimum mental, physical and/or social functional level for the individual. Rehabilitation seeks to compensate for a loss of function or functional limitation, and aims to facilitate social re-adjustment.
- 115.34 Rehabilitation Assessor: means a regulated health professional who is a registered occupational therapist or physiotherapist registered with the Program as a Rehabilitation Assessor and is an active member of an ADP Amputee Team. They have met all registration requirements with the Program

and hold an executed Authorizer Agreement with the Program.

Vendor Personnel: Includes the vendor's directors, officers, employees, independent contractors, members, subcontractors, shareholders, owners, agents and assigns.

See Section 110 of the Assistive Devices Program Policy and Procedures Manual (Program Manual) for more definitions.

120 ROLES AND RESPONSIBILITIES

In the process of confirming eligibility for funding assistance, the ADP Applicant/Client and/or Agent, the ADP Registered Authorizer and the ADP Registered Vendor have a specific role and certain rights and responsibilities. Additional information may be found in the Program Manual, the Authorizer Agreement, and the Vendor Contract.

120.01 Role of the ADP Applicant/Client and/or Agent:

- Has the right to choose from the list of ADP Registered Authorizers, any authorizer in their community working in the private or public sectors.
- Will be provided with accurate information from the ADP Registered Authorizer, the ADP Registered Vendor and all other Amputee Team members during the prosthetic assessment and the ADP application process that will enable him/her to make an informed decision about types of prosthesis and components, choice of vendor and whether or not to proceed with an application for ADP funding assistance.
- Must be informed about the Personal Health Information and Privacy Act, 2004 including their
 right to withhold any of his/her personal health information on the ADP application form,
 which may or may not impact on the Program's ability to process his/her application for
 funding.
- Has the right to seek a second opinion if they disagree with the ADP Registered Authorizer's assessment of his/her prosthetic needs.
- Is responsible for paying his/her portion of the cost for the limb prosthesis directly to the ADP Registered Vendor.

120.02 Role of the ADP Registered Authorizer:

- Is the gatekeeper to the Program and assumes the leadership role in the assessment process, confirmation of the applicant's eligibility, and completion of the ADP application form in a timely fashion.
- Ensures that the prescribed limb is properly fabricated, fitted and dispensed to the client.
- Is responsible for all direct client care activities including the assessment, measuring, casting, fitting, dispensing, adjustments, client instructions and follow up care.
- Is responsible for explaining the warranty conditions, costs and care of the limb.
- Will inform his/her client and/or his/her agent about the ADP policies, eligibility criteria, and procedures, so that the Applicant/Client and/or Agent can make a well informed decision regarding submitting an application to the Program.

• Will provide his/her client and/or his/her agent with a list of ADP Registered Vendors serving his/her community, if applicable. (Lists are available on the ADP website.)

- Must follow-up with the client once the limb prosthesis has been delivered/provided to ensure that the prosthesis continues to fit the client appropriately and meets the client's needs
- Must not submit an application for funding assistance to the Program for an individual who
 does not meet the ADP eligibility criteria.
- Must provide appropriate supervision for prosthetic interns and/or technicians.
- Must be an active member of an ADP registered amputee clinic/team.
- Must continue to meet all conditions specified in his/her executed Authorizer Agreement.

120.03 Role of the Rehabilitation Assessor

- Must be an active member of the Amputee Clinic/Team.
- Completes a rehabilitation assessment of the applicant.
- Confirms that the applicant should be able to use the prosthesis for a range of activities of daily living.
- Communicates any concerns or recommendations to the prescriber and certified prosthetist at the time of the clinic visit or at any time during treatment.
- Develops an OT or PT treatment plan, if appropriate.
- Is responsible for training for functional integration of the limb into the client's activities of daily living. The rehabilitation program may be provided by the team's therapist(s) or a referral may be made to other hospital or community rehabilitation services.
- May coordinate referral to other community or hospital programs if required.

120.04 Role of the Prescriber

Must be an active member of an ADP Registered Amputee Clinic/Team.

- Provides diagnostic information about the applicant.
- Responsible for prescribing limb prostheses.

120.05 Role of the ADP Registered Amputee Clinic/Team

- Assesses the applicant's prosthetic needs.
- Prescribes and authorizes limb prostheses, approving the final product and suggesting modifications or replacements.
- Provides education and functional use training.
- Coordinates and/or provides associated rehabilitation services.
- Members of the Amputee Team will evaluate the fit and function of the prosthesis at least once during the 3 month period following the receipt of an initial device.
- Responsible for arranging regular follow up visits with the client to confirm fit and effectiveness of the prosthesis.
- Responsible for completing any required adjustments or for any additional physical treatment and/or training in functional use, as required.
- Individual team members are responsible for seeing that any client with a suspected change in medical condition is referred to the team physician for medical review.
- Ensures that the ADP has up to date information about clinic/team membership to ensure that applications can be processed.

120.06 Role of the ADP Registered Vendor:

- The ADP registered vendor must employ an authorizer who is registered with the ADP in the Limb Prostheses Category.
- Must provide quotes to the client and/or his/her agent and the ADP as required.
- Must honour manufacturer's warranties and ensure that follow up is provided as needed.
- Must be an active member of an ADP registered Amputee Clinic/Team.
- Must continue to meet all conditions specified in their executed Vendor contract.

Devices Covered



2 DEVICES COVERED

200 Limb Prostheses approved for ADP funding are listed in the product manual.

Two (2) types of limb prostheses are funded by the ADP:

- 1. Conventional Limb Prostheses; and
- 2. Externally Powered Upper Limb Prostheses (EPULP).

The procedure for **manufacturers** or authorizers to apply for ADP approval of a new and/or updated socket, suspension system, addition, supplement or componentry is available upon request from the Program Coordinator.

200.01 Conventional Limb Prostheses

- Conventional Upper and Lower Extremity Prostheses
- Preparatory Sockets and additions
- Definitive Sockets and supplements
- Modifications and adjustments costing \$100 and over
- Preparatory and definitive socket replacements
- Component replacements

200.02 Externally Powered Upper Limb Prostheses

- Eligible electric and myoelectric prostheses
- Definitive socket replacements
- Some component replacements

200.03 Upper Extremity Prosthesis Funding

An applicant is eligible to receive funding for **either** an upper extremity conventional limb prosthesis **or** an externally powered upper limb prosthesis at one time.

205 Options

ADP funding assistance is available for the sockets, additions, supplements, suspension systems, modifications, adjustments and components listed in the Product Manual.

NOTE: The applicant must pay the vendor directly for any non ADP funded items he/she may choose to purchase.

210 Repairs

The ADP does not provide funding towards the cost of repairs and/or maintenance and/or batteries for any listed devices.

215 Modifications to Limb Prostheses Not Funded by the ADP

Individuals may request funding assistance for modifications for a limb prosthesis that was not funded by the ADP.

The authorizer must confirm and document during the assessment that:

- the limb prosthesis is on the approved list of ADP devices; and
- the limb prosthesis is in good condition; and
- with the modifications requested the limb prosthesis will continue to meet the applicant's needs.

Applicant Eligibility for Program Benefits



3 APPLICANT ELIGIBILITY FOR PROGRAM BENEFITS

The following criteria must be met:

300 Not Eligible for Other Benefits

The applicant must not be entitled to coverage for the same authorized device, based on the same medical condition, under the *Workplace Safety and Insurance Act*, 1997, S.O. 1997, c.16, Schedule A or any successor legislation thereto.

The applicant must not be entitled to coverage for the same authorized device, based on the same medical condition, under the Veterans Treatment regulations made under the *Department of Veteran's Affairs Act* (Canada), R.S. 1985, c. V-1, or any successor legislation thereto (Group A).

305 Valid Health Card

The applicant must be insured as defined in the Health Insurance Act and have a valid Ontario Health Number.

310 <u>Permanent Residence</u>

The applicant must hold permanent residency in Ontario.

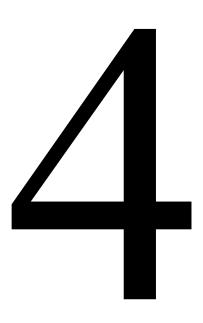
For applicants who reside in a long-term care home, the home must agree to accept the limb prosthesis.

A limb prosthesis for applicants who reside temporarily in an acute care or rehabilitation facility must be appropriate for use in their permanent residence.

315 <u>Physical Disability</u>

The applicant must have a chronic physical disability requiring the use of a limb prosthesis for a minimum of six months.

Applicant Eligibility Criteria for Limb Prosthesis



4 APPLICANT ELIGIBILITY CRITERIA FOR LIMB PROSTHESES

The applicant must require the limb prosthesis as a substitute for a partially or totally absent arm or leg.

405 Non Eligible Items

The Program does not provide funding for the following:

- A second prosthesis for the same amputation site;
- An ancillary prosthesis (ex. for sports, recreation);
- Purely cosmetic prostheses;
- Repairs to prostheses and accessories;
- Modifications and adjustments to Externally Powered Upper Limb Prostheses;
- Batteries:
- Interface products;
- Claims under \$100;
- Limb Prostheses fabricated by vendors not registered with the ADP.

410 <u>Individual Identified Ineligible by Authorizer</u>

An Application for Limb Prostheses form, requesting ADP funding assistance, must **not** be submitted to ADP if, after assessing the prosthetic requirements of his/her client, the authorizer confirms that the individual does not meet ADP eligibility criteria.

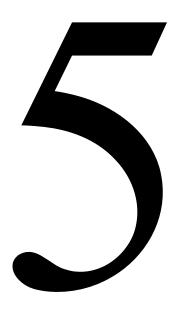
415 Applicant Identified Ineligible by the ADP

An individual who applies for funding assistance may be deemed ineligible if the criteria for applicant access to the Program is not met and/or insufficient, incomplete and/or inaccurate information is provided on the application form.

In the case of a denial the vendor will be advised of the reason for rejection.

The authorizer may submit a request in writing that the application be reviewed if additional documentation which confirms the applicant's eligibility for funding is available and provided in writing.

Confirmation of Eligibility for Prosthesis



5 CONFIRMATION of ELIGIBILITY for PROSTHESIS

A person seeking Assistive Devices Program funding of a conventional limb prosthesis, for the first time, must make an appointment with an ADP-registered Amputee Team and be assessed by the inter-disciplinary team.

Once the assessment has been completed and the ADP Amputee Team confirms eligibility for ADP funding assistance the Application for Limb Prostheses form may be completed.

505 Clinic Delivery Model

The Clinic Delivery Model is used for:

- Initial preparatory limb prostheses upon first time entry into ADP funding or following a change in amputation level;
- Initial definitive limb prostheses upon first time entry into ADP funding or following a change in amputation level;
- All replacement definitive sockets and definitive prostheses up to one year after authorization of the first ADP definitive prosthesis.

The Amputee Team members meet together in the same location to assess the client, discuss the client's needs and preferences, determine whether the client requires a preparatory prosthesis, definitive limb prosthesis or socket replacement, determine the type of prosthesis required and establish the client's eligibility for ADP funding assistance. Prescription for the limb prosthesis is based upon discussion and recommendations of all Amputee Team members including the client.

510 TWO-TIER CONSULTATION DELIVERY MODEL

The two-tier consultation model is designed for people who require replacement or major adjustment of an existing prosthesis, but not necessarily a meeting or assessment by all members of the Amputee team. This involves either the physician or rehabilitation assessor plus the certified prosthetist.

The team **PHYSICIAN** must assess the applicant and sign the Application for Limb Prosthesis Funding Assistance for:

- replacement preparatory sockets due to physiological change, growth, change in medical condition or minor surgery;
- replacement definitive limb prostheses and definitive sockets due to a change in medical condition, or minor surgery;
- replacement components due to a change in medical condition or minor surgery; or
- modifications and adjustments ≥\$100 to preparatory or definitive limb prostheses when the applicant undergoes a change in medical condition or minor surgical intervention.

NOTE: For a change in level of amputation, refer to the Clinic Delivery Model in policy 505.

The team **PHYSICIAN** <u>or</u> the **REHABILITATION ASSESSOR** may assess the client and sign the Application for Limb Prosthesis Funding Assistance for:

- **replacement definitive prostheses and sockets** due to physiological change or growth, after the first year following authorization of the previous definitive limb prosthesis; and
 - replacement definitive limb prostheses and sockets worn out due to heavy use, not applicant negligence.

Team members may see the applicant independently and then communicate their findings by telephone, letter or informal meeting. It is assumed that the applicant will be referred to other appropriate health care professionals such as an occupational therapist, physiotherapist, social worker, or psychologist if professional assessment and/or intervention is indicated.

515 ONE-TIER DELIVERY MODEL – CONVENTIONAL LIMB PROSTHESES

Under the one-tier delivery model, the team **PROSTHETIST** assesses the client and authorizes the Application for Limb Prosthesis Funding Assistance for:

- modifications, lengthening and adjustments costing \$100 or more to preparatory limb prostheses and definitive limb prostheses when the applicant experiences physiological change or growth;
- **replacement components costing \$100 or more**, listed in the Conventional Limb Prosthesis Manual, worn out because of heavy use and not applicant negligence. (a prorated contribution will apply during the designated funding period in this latter situation)

NOTE: This policy and administration manual specifies the <u>minimum</u> required delivery models for access to ADP funding. Each ADP registered Amputee Team is free to use more involved delivery models if they so choose.

520 Funding for Both a Wheelchair and a Lower Extremity Prosthesis

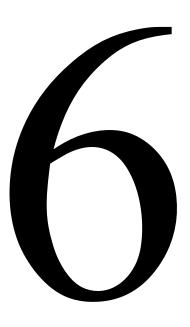
An ADP authorizer registered in the Mobility Devices Category will assess the applicant's eligibility for a wheelchair, if requested. If this authorizer is not also a member of the Amputee Team, it would be beneficial for the Occupational Therapist or Physiotherapist, who is a member of the ADP Registered Amputee Team, to consult with the Mobility Devices Authorizer to provide input about the applicant's status. This will help to ensure that prescription of the mobility device is not contradictory to the goals which the prosthetic team has established with the applicant.

It is stated in the Mobility Devices Policy and Procedures Manual:

"A wheelchair should not be authorized until both the individual's ambulatory status using the prosthesis and his/her permanent residence has been established.

As part of the assessment process, the authorizer must ensure and document that the authorization of the wheelchair is not contradictory to any goals the amputee team may have established with the individual."

Device Eligibility



6 DEVICE ELIGIBILITY

600 Number of Devices Funded & Funding Periods

Based on the authorizer's clinical assessment findings, the applicant may require more than one device. One prosthesis per amputation site is funded.

This is the **minimum** period of time that a device is expected to remain useful.

Designated Funding Periods:

- 1. Conventional Limb Prosthesis Preparatory Sockets (except laminated) and Additions—3 allowable in one year;
- Conventional Limb Prosthesis Laminated Preparatory Sockets 1 year;
- 3. Conventional Limb Prosthesis, Sockets, Suspensions, Supplements and Components 3 years
- 4. Externally Powered Upper Limb Prosthesis, Suspensions, Additions and Components 3 years.

The designated funding period is calculated from the date the authorizer signed the previous Application form.

605 Requests for Replacements

Limb prostheses are only eligible for replacement funding under the ADP when the applicant's current device is no longer usable or safe. Prostheses are <u>not</u> automatically replaced when the normal replacement period has been reached. There must exist a proven need to replace the prosthesis such as an applicant's growth or atrophy, a change in medical condition or deterioration of the device which would jeopardize the client's safety or ability to function.

For all replacement requests, a new Application for Funding Limb Prostheses form must be submitted. Refer to Policy 500 for details regarding assessment requirements.

605.01 Socket Replacements - Conventional Limb Prostheses

Socket replacements will be funded when the affected limb undergoes physiological **change**, **growth**, or a **change in medical condition** sufficiently severe in nature to require a socket replacement. In these cases, socket replacements will be funded at 75% of any amount which does not exceed the ADP listed price.

Preparatory Sockets

maximum of 1 initial and 2 prefabricated, plaster, thermoplastic or casting tape socket replacements will be funded within a twelve month period.

Laminated preparatory socket replacements will not be considered for replacement with another laminated preparatory socket during a 12-month period, unless the client undergoes a change of medical condition or minor surgery.

• Definitive socket replacements

Definitive socket replacements will be funded **at any time** when the affected limb undergoes **physiological change**, **growth/atrophy**, or a **change in medical condition** sufficiently severe in nature to require a socket replacement.

605.02 Component Replacements – Conventional Limb Prostheses

Within the designated funding period, the ADP will provide funding for replacement components, costing \$100 or more, worn out because of heavy use rather than applicant negligence. This funding will be pro-rated by month from authorization of the previous identical or similar component.

Within the designated funding period, ADP will provide funding for components such as feet, terminal devices, shanks and forearms, which must be replaced due to **physiological growth changes**. These components will be funded at 75% of any amount negotiated between the applicant and vendor not exceeding the ADP maximum contribution.

605.02 Replacement of Additions and Suspensions – Conventional Limb Prostheses

Within the designated funding period, the ADP will provide full funding for replacement additions and suspensions required in conjunction with replacement sockets or worn out due to normal wear, not due to client negligence.

605.03 Socket Replacements – EPULP

Within the designated funding period, the ADP will fund a socket replacement **at any time**, if required because of a client's relevant **physiological growth/atrophy or relevant change in medical condition.**

605.04 Electric Hand and Elbow Replacements – EPULP

Within the designated funding period, the ADP will fund replacement of an electric hand or electric elbow at any time if required because of a client's relevant physiological growth or relevant change in medical condition.

605.05 Replacement of Other Items – EPULP

The ADP will fund replacements for only the following major components within the designated funding period, due to the client's physiological growth/atropy or change in medical condition:

- replacement sockets,
- electric hands and
- electric elbows.

All other replacement equipment must be funded by either the client or other third party payment agencies.

605.07 Damage Beyond Repair – After Replacement Period

If, **following the designated funding period** the limb prosthesis or any part of it previously funded is irreparably damaged due to normal use or where past and current costs of repairs are excessive, the Program will fund a new limb prosthesis, additions and/or components.

605.08 Loss or Damage

No funding is available to replace a limb prosthesis or components within the designated funding period when the device or components are lost, stolen or damaged beyond repair due to client negligence. Clients are advised to obtain home, auto, travel, extended health or out of country insurance for financial assistance in the event of loss.

610 Warranty

There several types of warranties::

610.01 <u>Warranty for Breakage</u>

The ADP-registered vendor warrants that under normal use, the authorized device is GUARANTEED AGAINST BREAKAGE for six (6) months from the date the completed device was delivered to the applicant. The vendor must provide a written warranty statement to the applicant. During the warranty period, the vendor will provide, or cause to be provided any service (including repairs or replacement of the authorized device or any parts) free of charge.

610.02 Warranty for Fit

The vendor will warrant **in writing to the client** that the **FIT of the limb prosthesis** will remain satisfactory for **three (3) months** after the **final fitting** of the device unless there has been a significant change in the medical condition or physiological growth/atrophy of the applicant's residual limb.

610.03 Repeated Technical Failure

When there is repeated technical failure, the device would be replaced by the issuer of the warranty. Repair and service of devices, because of technical failure, are the responsibility of the vendor, manufacturer or their service designate. The device should be inspected by the vendor and the vendor should contact the manufacturer/distributor for replacement of faulty components.

ADP funding is not available when the manufacturer's warranty is in effect.

615 Modifications to Conventional Limb Prostheses

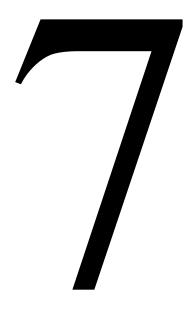
Funding is available for modifications/adjustments costing \$100 or more when required due to a relevant change in the applicant's medical condition, growth or atrophy.

Modifications must provide a more cost effective solution to meeting an applicant's changing needs than replacement of the equipment. This means that the modifications must substantially extend the equipment's life and make imminent replacement unnecessary.

Examples of modifications/adjustments include, but are not limited to:

- Use of a socket insert to build up a socket to accommodate for residual limb shrinkage or change in shape thereby eliminating the need for socket replacement;
- Expansion of a socket to accommodate an increase in residual limb volume; and
- Lengthening prosthesis to accommodate for physiological growth.
 Refer to Policy 500 for required assessments.

Application for Funding Limb Prostheses Form

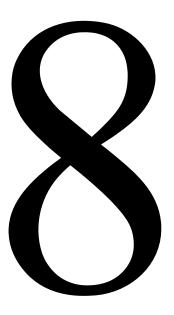


7 APPLICATION FOR FUNDING LIMB PROSTHESES

700 Guide to Completing the Form

Refer to the Assistive Devices Program Policy and Procedures Manual, Section 9, Application Forms for details.

Funding and Payment



8 FUNDING AND PAYMENT

800 Policies

No payment of an approved device shall be made to anyone other than an ADP Registered Vendor in the limb prostheses category.

Vendors are registered with the ADP separately as Conventional Limb Prostheses vendors and Externally Powered Upper Limb Prostheses vendors.

Lists of registered vendors in specific geographic areas can be obtained directly from the ADP.

Detailed information about payment is found in the Program Manual **Section 9 Invoice Submission**, **Processing and Payment**.

805 <u>Funding Amount for ADP Clients</u>

805.01 Conventional Limb Prostheses

The Program will pay seventy-five per cent (75%) of the ADP approved price for the custom made parts of the conventional limb prostheses listed in the product manual.

Vendors may **not** bill the client more than the ADP approved prices listed in the product manual.

The Program will pay seventy-five per cent (75%) up to a maximum approved price for components for conventional limb prostheses listed in product manual.

Vendors **may** charge the client **less** than the ADP approved price.

The vendor **must** charge the client twenty-five per cent (25%) of the ADP approved price and bill ADP for 75% of the ADP approved price.

NOTE: Should the vendor charge the client less than the maximum ADP approved amount, or provide a rebate or discount to the client for their ADP approved devices, both the client portion (25%) and the ADP portion (75%) must be adjusted accordingly.

805.02 Externally Powered Upper Limb Prostheses

Externally Powered Upper Limb Prostheses are funded at 100% up to the listed Maximum Contribution amount for prostheses, socket replacements, electric hand replacements and electric elbow replacements.

810 Funding for MCSS Recipients

Co-payment for clients receiving Social Assistance Benefits:

- Ontario Works (OW)
- Ontario Disability Support Program (ODSP)
- Assistance to Children with Severe Disabilities (ACSD)

810.01 Conventional Limb Prostheses

Applicants receiving social assistance benefits through OW, ODSP or ACSD on the ADP Authorizer's date will receive one hundred per cent (100%) of the ADP approved price for all custom-made parts of the prosthesis.

Applicants receiving social assistance benefits through OW, ODSP or ACSD on the ADP Authorizer's date will receive one hundred per cent (100%) of the ADP maximum contribution for all approved components.

810.02 Externally Powered Upper Limb Prostheses

Applicants receiving social assistance benefits through OW, ODSP or ACSD on the ADP Authorizer's date will receive one hundred per cent (100%) of the ADP maximum contribution for all approved device codes.

815 <u>Delivery of Prosthesis</u>

The vendor will deliver/provide the limb prosthesis, sockets, supplements, suspension system, additions, components and/or modifications and adjustments as prescribed and authorized. The vendor will also advise the client regarding warranty and follow up services offered.

820 Payment Procedures

Vendors receive a **Status of Applications Report**, an **Invoice Report** every two weeks from the Ministry's Financial Management Branch.

These reports show the **ADP assigned number** and include the following information:

1. Status of Applications Report:

- **Approved**: Please note that the client will **not** receive notification of approval.
- Rejected: Vendor should contact the authorizer if the application has been rejected.
- **In Process**: The application has been received and entered into the system and is pending adjudication.

2. Invoice Report:

- On Hold: Refers to those invoices that can not be processed and identifies the error(s).
- Payment Amount: Indicates the date that the vendor's invoice will be paid.
- **Invoices Deleted**: An invoice "on hold" due to errors will be deleted from the system if it has not been corrected by the vendor within ninety (90) days.

825 Expiry Date of the Application for Limb Prostheses Form

The application form is considered current and valid for one (1) year from the authorizer assessment date.

NOTE: The expiry date will **NOT** be extended. After the expiry date a new assessment must be completed and a new application form must be submitted to the Program.

INVOICING PROCEDURES



9 INVOICING PROCEDURES

900 Guide to Completing the Invoice

Refer to the Assistive Devices Program Policy and Procedures Manual, Section 10, Invoice Processing and Payment for details.

905 <u>ADP Processing Errors</u>

In the event of an ADP processing error being identified following funding approval, the ADP will cooperate with the authorizer and client to make any necessary corrections.

The authorizer must notify the ADP in writing of the error(s) along with a request for the approval to be amended.

910 <u>Authorizer Prescription Errors & Omissions</u>

In the event of an authorizer prescription error and/or omission being identified following funding approval, the ADP will co-operate with the authorizer to make any necessary corrections.

The authorizer must return a copy of the page of the application form to the ADP with the errors highlighted along with a request for the approval to be amended.

915 <u>Client Refusal of Delivered Prostheses</u>

In the event of client refusal either at the time of delivery or immediately thereafter, the ADP will cooperate with the client, authorizer and vendor to resolve the situation.

Section 10
Authorizers

Ontario Ministry of Health and Long-Term Care Assistive Devices Program (ADP)

May 2011

10 AUTHORIZERS

1000 ADP Registered Authorizer Status

Certified Prosthetists wishing to be registered with the Program for limb prostheses must be registered as authorizers in the respective device category. Registration must be completed separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

Occupational Therapists and Physiotherapists wishing to be registered with the Program as Rehabilitation Assessors in the Limb Prostheses Category must be registered as authorizers in the respective device category. Registration must be completed separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

1005 General Authorizer Policies

Detailed information about authorizer registration, policies and procedures, are found in the Assistive Devices policies and Procedures Manual Section 2 Authorizer Registration, Section 4 General Authorizer Policies and Section 6 General Authorizer and Vendor Policies.

1010 Authorizer Agreement

The Program must establish relationships with health professionals in order to ensure that ADP clients are assessed for cost-effective devices that best suit their needs.

The Agreement sets out the responsibilities of ADP Registered Authorizers. In particular please note that in order to **maintain** registered status the authorizer must:

- maintain an understanding of policy and procedures related to the Program and the Limb Prostheses Category;
- maintain a good working knowledge of device authorization and knowledge of currently available products listed in the product manual;
- recommend equipment only for individuals whom he/she has assessed in person and determined eligible for funding assistance;
- not have a professional affiliation with a registered vendor, unless within a legitimate employer/employee relationship;
- not have a professional affiliation with a manufacturer; and
- once the ADP funded limb prosthesis has been delivered/provided to the client, provide follow-up to ensure that the prosthesis continues to meet the client's needs.

1015 Record Keeping

Accurate record keeping is essential. The Program may ask to see the authorizer's clinical assessment findings to confirm the applicant's eligibility and/or as part of the Program's authorizer audit review procedures.

NOTE: Authorizers are required to keep and/or have immediate access to a complete copy of all Application for Limb Prostheses forms submitted to the Program.

Section 11
Vendors

Ontario Ministry of Health and Long-Term Care Assistive Devices Program (ADP)

May 2011

11 VENDORS

1100 <u>ADP Registered Vendor Status</u>

Vendors wishing to bill the Program for limb prostheses must be registered as vendors in the respective device category.

Vendors must register separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

Vendors applying for registration status must submit the names of staff members who have **professional qualifications to fabricate and/or fit limb prostheses** and proof of such qualifications.

1105 General Vendor Policies

Detailed information about vendor registration, policies and procedures, are found in the Policies and Procedures Manual for the Assistive Devices Program Section 3 Vendor Registration, Section 5 General Vendor Policies, Section 6 General Authorizer and Vendor Policies and Section 10 Invoice Processing and Payment.

Note in Particular:

- (i) Section 500 Maintaining Registration Status with the Program
- (ii) Section 505 Relationships of Hospitals and Registered Vendors
- (iii) Section 510 Relationships of Long-Term Care Facilities & Registered Vendors
- (iv) Section 520 Rebates
- (v) Section 540 Confidentiality
- (vi) Section 545 Solicitation of ADP Related Business
- (vii) Section 550 Advertising of ADP Related Business
- (viii) Section 555 Informing Persons about the Program
- (ix) Section 575 Refusal to Supply for Safety Reasons
- (x) Section 580 Warranties of Purchased Devices
- (xi) Section 585 Repairs of Purchased Devices

Registering an ADP Amputee Clinic

Ontario Ministry of Health and Long-Term Care Assistive Devices Program (ADP)

May 2011

12 REGISTERING AN ADP AMPUTEE CLINIC/TEAM

All ADP funded limb prostheses and socket replacements require prescription and authorization by members of an ADP registered amputee clinic/team.

There are two (2) types of amputee teams:

- Conventional Limb Prostheses, and
- 2. Externally Powered Upper Limb Prostheses.

Membership of an amputee team must include:

- 1. a physician who is a physiatrist, orthopedic surgeon or other physician recognized as a specializing in the field of amputee rehabilitation;
- 2. a certified prosthetist who is registered with the ADP, with applicable experience;
- 3. an Occupational Therapist or Physiotherapist who is registered with the ADP in the applicable device category.

The members must register separately for the two types of teams.

An application to register an amputee clinic must be completed. The application can be requested from the Program Coordinator.

The ADP Amputee Team is issued a clinic registration number that must be used on Application for Funding for Limb Prostheses forms, when applicable.

Refer to Policy 500 for assessment situations specifically requiring the clinic model.

All physicians, device authorizers and rehabilitation assessors must be active members of ADP registered ADP Amputee Clinics/Teams.