

Alberta Health

Alberta Aids to Daily Living General Policy & Procedures Manual

February 2021

Classification: Public



Revision History

Description	Date
Update to GN-16, update to eligibility for AADL benefits when the client has private insurance	February 2021
Update to GN-03, clarifying that wheelchairs are a secondary product range, update to links throughout, update to GN-25 clarification on application for temporary cost-share exemption.	February 2020
Removal of references to dressing supplies throughout	September 1, 2017
GN-03, removal of walking aids as primary product range for RNs	August 14, 2017
GN-11, updated wording	July 1, 2017
GN-28-29, clarification of wording	March 1, 2017
GN-05, addition of hearing aid practitioners and benefits	January 19, 2017
GN-03, update to product ranges and seating level A,B and C added as secondary product range	October 1, 2016
GN-26, change to income levels for hearing aid cost-share exemption	February 22, 2016
GN-03, GN-11, GN-20, GN-21, GN-23, GN-28 Updates	November 1, 2015
GN-01-10 Update to Authorizer Policies	October 1, 2014
GN-27-30 Wording Changes	July 1, 2014
GN-22-26 Update to Cost-Share Policies GN-27- Addition of Temporary Cost-Share policy GN-28- Addition of Cost-Share Exemption for Hearing Aid Benefit for Seniors Policy	January 1, 2014
GN-19 – Addition of Client Residence policy	October 1, 2013
Overall manual formatting revisions, including updating of all policy numbers.	September 20, 2013

Table of Contents

Policy GN – 01	7
Program Background	7
Policy Statement	7
Principles	7
Policy GN – 02	9
Program Benefits	9
Policy Statement	9
Procedure	10
Policy GN – 03	12
Application to be an Authorizer	12
Policy Statement	12
Procedure	14
Policy GN – 04	16
Authorizer Responsibilities	16
Policy Statement	16
Procedure	16
Policy GN - 05	18
Application to be a Specialty Assessor	18
Procedure	19
Policy GN - 06	20
Specialty Assessor Responsibilities	20
Policy Statement	20
Procedure	20
Policy GN – 07	22
Authorization of Benefits	22
Policy Statement	22
Procedure	22
Policy GN – 08	24
Explaining Policies and Procedures to Clients	24
Policy Statement	24
Procedure	24
Policy GN – 09	26
Documentation	26
Policy Statement	26
Procedure	26
Policy GN – 10	27
Assessor Qualifications	27
Policy Statement	27

Policy GN – 11	28
Vendor/Specialty Supplier Section	28
Policy Statement	28
Vendor Registration, Orientation and AADL Approval Status	28
Vendor Accountability	30
Client Documentation	30
Provision of Benefits	31
Pricing and Invoicing	32
Promotion of Benefits	33
Reporting and Auditing	33
Disciplinary Actions	33
Policy Revisions and Distribution	36
Policy Statement	36
Procedure	36
Policy GN - 13	37
Forms and Publications	37
Policy Statement	37
Procedure	37
Policy GN - 14	38
Benefit Evaluation	38
Policy Statement	38
Procedure	38
Policy GN - 15	39
Approved Product List/Catalogue Listing	39
Policy Statement	39
Procedure	39
Policy GN - 16	40
Client Eligibility	40
Policy Statement	40
Procedure	41
Policy GN - 17	42
Client Residence	42
Policy Statement	42
Procedure	44
Policy GN - 18	45
Client Choice of Vendor	45
Policy Statement	45
Procedure	45
Policy GN - 19	46
Client Responsibilities	46
Policy Statement	46
Procedure	46
Policy GN - 20	48
Definition of Cost Share	48
Policy Statement	48
Procedure	48
Policy GN - 21	49
Cost-Share Exemption Criteria	49
Policy Statement	49
Procedure	49

Policy GN - 22	51
Cost-Share Exemption Reapplication.....	51
Policy Statement.....	51
Procedure.....	51
Policy GN - 23	52
Cost-Share Exemption Maximum \$500 Contribution	52
Policy Statement.....	52
Procedure.....	52
Policy GN - 24	53
Cost-Share Appeal Process	53
Policy Statement.....	53
Procedure.....	53
Policy GN - 25	55
Temporary Cost-Share Exemption	55
Policy Statement.....	55
Procedure.....	55
Policy GN - 26	57
Cost- Share Exemption for Hearing Aid Benefit for Seniors.....	57
Policy Statement.....	57
Procedure.....	57
Policy GN - 27	58
Quantity and Frequency Limits	58
Policy Statement.....	58
Procedure.....	58
Policy GN - 28	59
Quantity and Frequency Review Process	59
Policy Statement.....	59
Procedure.....	60
Policy GN - 29	61
Quantity and Frequency Review Committee	61
Policy Statement.....	61
Procedure.....	61
Policy GN - 30	63
Quantity and Frequency Review – Director Appeal Process	63
Policy Statement.....	63
Procedure.....	63
Policy GN - 31	65
Complaint Registry	65
Policy Statement.....	65
Procedure.....	65
Policy GN - 32	67
Complaint Submission	67
Policy Statement.....	67
Procedure.....	67
Policy GN - 33	68
Client Verbal Complaint Submission	68
Policy Statement.....	68
Procedure.....	68

Policy GN - 34	69
Complaint Processing.....	69
Policy Statement.....	69
Procedure.....	69
Policy GN - 35	71
Complaint Investigations.....	71
Policy Statement.....	71
Procedure.....	71
Policy GN - 36	73
Action Requests.....	73
Policy Statement.....	73
Procedure.....	73
Policy GN - 37	74
Complaint Registry Database and Compiling Results.....	74
Policy Statement.....	74
Procedure.....	74
Policy GN - 38	75
Sharing/Communicating and Using Complaint Registry Database Results.....	75
Policy Statement.....	75
Procedure.....	75
Policy GN - 39	76
Privacy.....	76
Policy Statement.....	76
Procedure.....	76
Policy GN - 40	77
Complaints Filed by AADL.....	77
Policy Statement.....	77
Procedure.....	77
Policy GN - 41	78
Compliance Monitoring.....	78
Policy Statement.....	78
Procedure.....	78
Monitoring Compliance.....	78
Ongoing Non-compliance.....	79

Policy GN – 01

Program Background

Policy Statement

Alberta Aids to Daily Living (AADL) was established by the Government of Alberta on March 1, 1980 to assist Albertans with a long-term disability, chronic illness or terminal illness, in maintaining independence in their community through the provision of basic medical equipment and supplies to meet their clinically assessed needs.

AADL:

The *Public Health Act* mandates AADL to:

1. Establish scope of benefits provided.
2. Establish clinical eligibility.
3. Determine pricing of medical equipment and supplies
4. Encourage best practice in client assessment and care through education and collaboration with clinicians and suppliers.

Principles

1. Client Focus: Respects an individual's right to dignity, self-determination and risk by supporting their right to make choices and decisions.
2. Client Independence: Encourages client independence through the provision of AADL benefits.
3. Client Responsibility: Promotes client responsibility and accountability associated with health risks, benefits and consequences.
4. Needs Based: Provides benefits assessed by AADL authorized health professionals based on the client's clinically assessed needs. Encourages best practice in client assessment and care through education for clinicians and vendors.
5. Accessibility: Facilitates reasonable and timely access to AADL benefits.
6. Partnerships: Liaises with other community based services and advocacy groups in the delivery of AADL benefits and provides information to clients regarding health related services.

7. Program and Stakeholder Accountability: Demonstrates program stewardship and accountability through the effective delivery of benefits. Remains fiscally responsible and looks for new, better and more efficient ways of providing services. Program stakeholders include AADL, Clients, Authorizers, Specialty Assessors, Specialty Suppliers, Vendors, Health Care Professionals and Alberta Health Services.

Superseded

Policy GN – 02

Program Benefits

Policy Statement

The AADL program provides a wide range of benefits to eligible Albertans including:

1. Amplification Devices
2. Musculoskeletal Supports (Hernia abdominal and back supports)
3. Large and small Bathing and toileting equipment
4. Burn garments
5. Compression stockings and garments
6. Custom-made footwear
7. Custom-made ocular prostheses
8. Homecare beds and accessories*
9. Incontinence supplies (diapers and catheters)
10. Injection supplies (not provided for insulin injections)
11. Laryngectomy equipment and supplies
12. Breast prostheses
13. Orthotic braces (not foot orthotics)
14. Ostomy supplies
15. Oxygen
16. Patient Lifters*
17. Pressure reduction overlays
18. Prosthetic devices
19. Respiratory equipment*
20. Shoe elevations
21. Specialized pediatric equipment*
22. Specialized seating devices

23. Therapeutic Footwear
24. Transfer Aids
25. Walkers and walking aids
26. Wheelchair cushions and accessories
27. Wheelchairs, manual and power*
28. Vision aids – Administered by CNIB

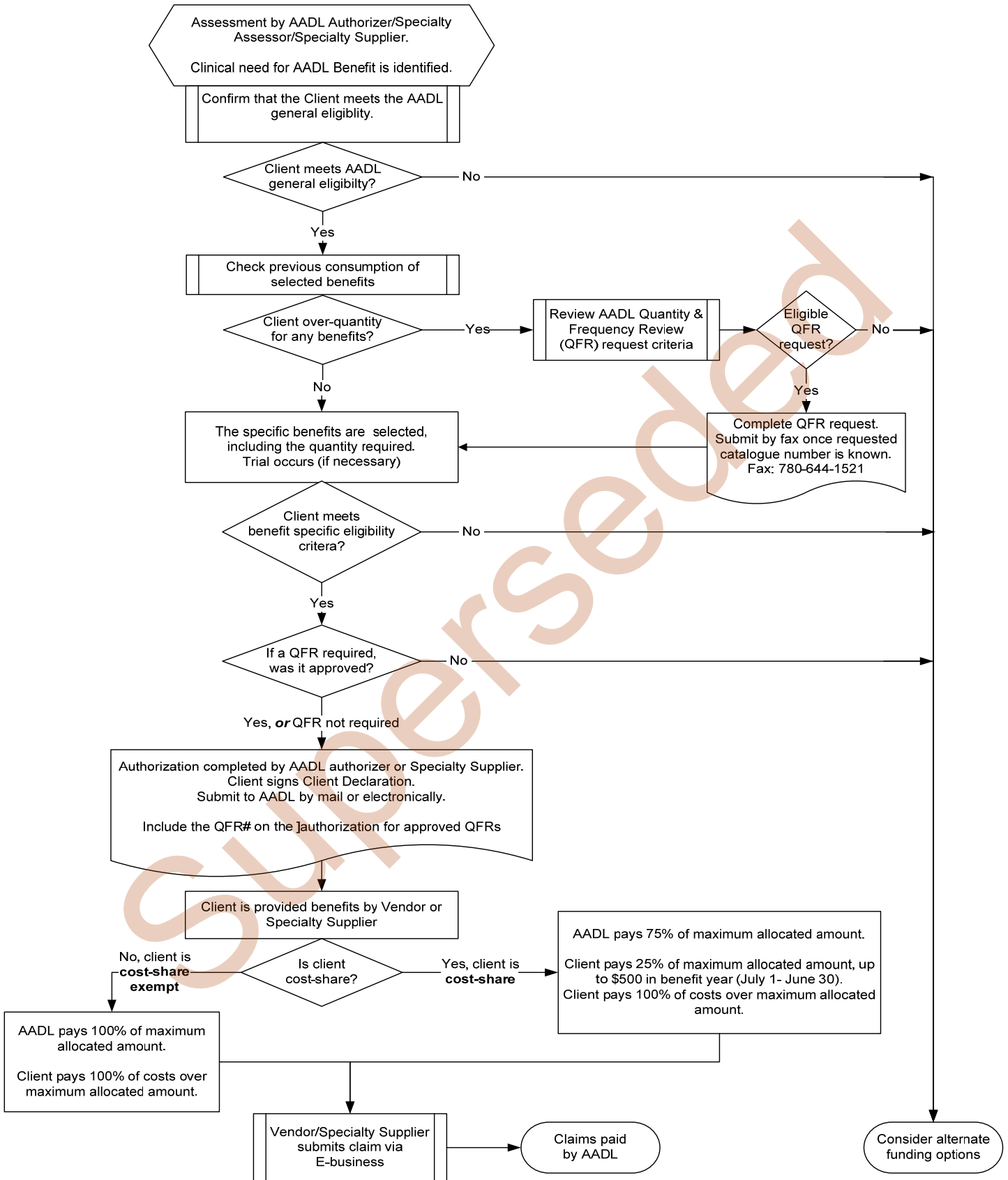
* Equipment received may be formally recycled

Procedure

1. Refer to the summary flow chart on the following page for the benefit authorization process.

Superseded

AADL Authorization Process



Policy GN – 03

Application to be an Authorizer

Policy Statement

All health care professionals **must meet** the following minimum eligibility criteria, prior to applying to be an Authorizer. Once approved, Authorizers will be able authorize for products in their primary product range. The primary product range is the range of products given to an Authorizer based on their registered health profession and is detailed in the tables in this policy. Secondary product ranges may be applied for after an Authorizer has been approved for primary product ranges and must meet additional eligibility criteria.

1. Be a resident of the Province of Alberta.
2. Be a health professional presently registered in, and in good standing, with one of the following professional organizations/associations:
 - Occupational Therapist - Alberta College of Occupational Therapists (ACOT)
 - Physical Therapist – Physiotherapy Alberta College + Association (Physiotherapy Alberta)
 - Registered Nurse - College and Association of Registered Nurses of Alberta (CARNA)
 - Speech Language Pathologist - Alberta College of Speech-Language Pathologists and Audiologists (ACSLPA)
3. Be employed as a health care professional for a minimum of three days per week (0.6 Full Time Equivalent).
4. Have a minimum of 1,700 hours clinical experience prior to applying to become an Authorizer.
5. Sign **declaration** statement regarding any conflict of interest as per part C of Authorizer Application Form.

In rare and exceptional circumstances AADL may consider applications from health care professionals who do not meet the above criteria. AADL at its sole discretion reserves the right to deny Authorizer status to applicants.

Primary Product Ranges

Primary product ranges are assigned according to an individual's registered health profession and AADL approval.

Registered Nurse	Primary Product Range	Type of benefits
	Small Bathing, Toileting, Homecare Equipment and Transfer Aids	Raised toilet seats, tub seat, grab bars and stationary commodes. Hospital beds, only for palliative and full-time use.
	Catheters	Catheters and supplies
	Incontinence Briefs and Liners	Incontinence briefs and supplies
	Musculoskeletal Supports	Hernia, abdominal and back supports
	Lifters	Lifts and slings, AADL does not fund tracks or installation
	Ostomy Supplies	Ostomy Supplies

Occupational & Physical Therapist	Primary Product Range	Type of benefits
	Small and Large Bathing, Toileting, Homecare Equipment and Transfer Aids	Raised toilet seats, tub seat, grab bars. Hospital beds, only for palliative and full-time use. Wheeled and stationary commodes.
	Lifters	Lifts and slings, AADL does not fund tracks or installation.
	Musculoskeletal Supports	Hernia, abdominal and back supports
	Specialized Pediatric Equipment	Sitters, gait trainers, etc.
Walking Aids	Walkers and accessories	

Speech Language Pathologist	Primary Product Range	Type of benefits
	Augmentative Speech and Communications Benefits	Electrolarynx, voice restorations products, communication products for tracheostomies.

Secondary Product Ranges

These will be assigned after the primary product range and must meet additional eligibility criteria.

Secondary Product Range	Type of benefits	Requirements
Burn Garments	Custom pressure garments.	<ul style="list-style-type: none"> • OT, PT or RN. • See Burn Garment Program Manual for criteria • Complete Product Range Request Form.
Manual Wheelchair and Seating Level A	Basic Seating and Manual Wheelchairs	<ul style="list-style-type: none"> • OT or PT • See Seating Program Manual Wheelchair Program manual for criteria. • Complete Manual Wheelchair & Seating Level A Authorizer Application
Seating Level B	Specialized Seating	<ul style="list-style-type: none"> • OT or PT • See Seating Program Manual for criteria • Complete Level B and C Authorizer Application
Seating Level C	Complex Seating	<ul style="list-style-type: none"> • OT or PT • See Seating Program Manual for criteria • Complete Level B and C Authorizer Application
Compression Garments	Includes ready-made and custom garments for chronic venous insufficiency and lymphedema.	<ul style="list-style-type: none"> • OT, PT or RN • See Compression Garment Program Manual for criteria. • Complete Compression Garment Product Range Request form
Incontinence Briefs and Liners	Incontinence briefs and supplies	<ul style="list-style-type: none"> • OT or PT • See Medical Surgical Program manual for criteria • Complete Product Range Request form
Power Wheelchairs	Power wheelchairs	<ul style="list-style-type: none"> • OT or PT • See Power wheelchair benefits program manual

Procedure

Health Care Professionals:

Applying for Primary Product Range

1. Ensure that all authorizer eligibility criteria are met.
2. Complete online Module 1 training <https://www.alberta.ca/aadl-authorizer-information-and-training.aspx>
3. Complete AADL Authorizer Application form available from: <https://www.alberta.ca/assets/documents/aadl/aadl-authorizer-application.pdf>.

- Complete the “Product Range Request” section of the Authorizer Application form. Authorizers will only be provided the primary product range listed for their registered health profession as determined by AADL.
 - Provide the documentation as listed on the application form.
4. Health care professionals who wish to authorize a benefit that is not on the list for their primary product range, according to an individual registered health profession, must receive prior approval from AADL. To request product ranges in addition to your primary product range, follow the procedure for the secondary product range.
 5. Send the fully completed application to AADL by email, fax or mail. Contact information is detailed on the Authorizer Application form. Ensure application is complete. Incomplete forms will not be processed and will delay access to the in person training session.
 6. Complete required training sessions
 - Speech Language Pathologists do not need to attend in-person Authorizer Training. Complete the online training modules and submit the Authorizer Training Request Form.
 7. Complete the Authorizer Declaration form. When the completed form is received and approved by AADL, an Authorizer Number will be assigned. The Authorizer Number is a unique identifier which must be included on all authorization forms.

Applying for Secondary Product Range

1. Only current AADL Authorizers can apply to have secondary product ranges.
2. Complete the appropriate “Secondary Product Range Request Form”.
3. Send application to AADL by email, fax or mail. Contact information is detailed on the Secondary Product Range request form.

AADL:

1. Reviews applications for eligibility.
2. Incomplete or ineligible forms are returned.
3. Registers eligible health care professionals in an AADL Authorizer training session.
4. Coordinates and delivers the Authorizer Training session.
5. Assigns the Authorizer Number to the health care professional and determines the product ranges for specific types of AADL benefits.

Policy GN – 04

Authorizer Responsibilities

Policy Statement

AADL Authorizers are accountable to:

- The Government of Alberta for the authorization of benefits for AADL clients.
- AADL for the use of provincial funding to provide services and benefits.
- Their respective professional and regulatory associations for their professional practice standards.

AADL Authorizers must:

- Comply with and keep updated of all AADL policies and procedures.
- Maintain clinical competencies related to the AADL benefit product ranges they are approved to authorize.
- Inform AADL of any changes related to their Authorizer information.
- Not charge clients for the authorization.
- Not directly or indirectly engage in the supply of AADL benefits.
- Not authorize benefits for themselves, family or friends without AADL prior approval.
- Not discriminate or intentionally malign an AADL vendor.

Procedure

Authorizers:

1. Follow policy GN-07 to authorize benefits.
2. When the need for benefits is short-term or acute, refer client to other resources.
3. Attend AADL Authorizer Training, Question and Answer Sessions and other lectures/courses regularly to maintain the competency to authorize for AADL benefits.
4. Update clinical assessment skills regularly.
5. Maintain clinical standards as required by their professional associations and Colleges.
6. Stay current on new equipment and/or supplies.
7. Reference the AADL online policy manuals.

8. Authorize benefits regularly through the AADL program. Authorizer numbers will become inactive after 18 months without an authorization by the Authorizer.
9. Reapply for Authorizer status as per Policy GN-03 following the inactivation of an Authorizer Number.
10. Read AADL correspondence, including Bulletins and Newsletters.
11. Subscribe to the E-subscription list available on the AADL website homepage.

AADL:

1. Monitors authorizer compliance with policies and procedures.
2. Notifies Authorizer if reported changes affect their Authorizer status.
3. Suspends Authorizer status if applicable according to policy GN-41.
4. Initiates corrective action as required according to policy GN-41.

Superseded

Policy GN - 05

Application to be a Specialty Assessor

Policy Statement

All health care professionals must meet the following eligibility criteria, prior to being a Specialty Assessor for AADL:

1. Be a resident of the Province of Alberta.
2. Be a registered health professional registered in, and in good standing with the health professional organizations/associations as outlined in the benefit specific program manuals.
3. Be employed by a facility that has an agreement with AADL. Each location must have at least one Specialty Assessor.

Health Professionals may assess AADL benefits as per the following lists:

Audiologists:

- Hearing Aids
- Personal Listening Devices
- FM Systems
- Cochlear Implants
- Bone Anchored Hearing Devices (BAHD)

Hearing Aid Practitioners:

- Hearing Aids
- Personal Listening Devices

Respiratory Therapists:

- Oxygen, Humidity or Suction Therapy
- Tubes and resuscitator/bagging units for Tracheostomy patients
- Home ventilators
- Home BPAP

Breast Prosthesis Fitters:

- Breast Prosthesis

	Orthotist	Prosthetist	Pedorthist	Pedorthic Master Craftsman	Pedorthic Technician	Ocularist
Health Benefit						
Orthotic Devices (not including foot orthotics)	x					
Prosthetics		x				
Ocular Prosthesis						x
Custom Footwear	x		x	x		
Therapeutic Footwear	x		x	x		
Shoe Elevations	x		x	x	x	

Procedure

Specialty Assessors:

1. Complete the AADL Specialty Assessor Application form available from:
<https://www.alberta.ca/assets/documents/aadl/aadl-specialty-assessor.pdf> Complete online Module 1.
2. Provide documents as required.

AADL:

1. Assigns a Specialty Assessor Number and assigns product ranges for specific AADL benefits.
2. Confirms Specialty Assessor status in writing.
3. May revoke assessor status at AADL’s discretion.

Policy GN - 06

Specialty Assessor Responsibilities

Policy Statement

AADL Specialty Assessors are accountable to AADL for the provincial funding to provide services and benefits to clients. Specialty Assessors must comply with all AADL policies and procedures and will not order benefits for themselves or for family members.

Procedure

1. Assess clients who have a long term disability or chronic illness for benefits with their approved product range.
2. Determine eligibility of clients for AADL benefits.
3. Recommend the most appropriate benefit that would best match the client's basic needs with the benefits available through the AADL Program.
4. Recommend the benefit quantity required.
5. Explain cost sharing and benefit assistance policies pertinent to the client.
6. Explain the quantity limits related to the benefits that the client is eligible to receive.

Provision of Benefits

1. Ensure clients are aware of their responsibilities related to the AADL Program benefits.
2. Provide only approved benefits.
3. Ensure that replacement items are assessed for only when the current device is no longer meeting the client's needs.
4. Comply with AADL's policies and procedures.
5. Supply AADL benefits only to eligible clients as defined by the client eligibility criteria listed in specific benefit sections of the Program Manual.

Service

1. Provide appropriate follow-up activity, which will ensure that the benefits serve the purpose for which they were provided.
2. Ensure they are accessible to clients.
3. Ensure defective supplies and equipment is replaced at no cost to the client or AADL.
4. Honor manufacturer's warranties.
5. Provide advice to clients.
6. Resolve supplier's errors.
7. Resolve promptly all errors relating to the assessment of a client's benefits (e.g., duplication of benefits, client eligibility status, and assessment errors).

Documentation

1. Complete required documentation as outlined in the specific benefit program manual.
2. Provide required documentation to appropriate AADL staff as requested.
3. Ensure billing for benefit occurs after an AADL authorization is complete and benefit is provided to client.

Pricing and Invoicing

1. Collect cost share amount from client prior to providing the benefit.
2. Collect upgrade amounts from the client.
3. Invoice AADL for benefits provided.

Superseded

Policy GN – 07

Authorization of Benefits

Policy Statement

Authorizers may authorize AADL benefits that are within their approved product range(s).

AADL will only accept complete and accurate authorizations. Incomplete authorizations are not valid and will be returned.

Authorizations include both paper forms (i.e., 1250 and 1251 forms) and electronic authorizations (i.e., E-business authorizations).

Authorizers cannot complete an authorization if the client is over-quantity unless there is an approved Quantity and Frequency Review Request for that client. See Policies GN-27 to GN-30 for more information.

The Authorizer is responsible for the assessment and must be able to address questions related client eligibility for AADL funding.

Procedure

Authorizers:

1. Follow the procedure outlined in Policy GN-02.
2. Ensure a clinical assessment has been completed prior to authorization of a benefit. Ensure the assessment considers current and future needs of the client, including prognosis and progression of their condition. In order to authorize for AADL benefits the client's condition must be stable. The clinical assessment must be completed by an AADL Authorizer or Assessor. For criteria to be an Assessor see Policy GN-10.
 - Indicate the person who completed the client's assessment; the Authorizer and Assessor may be different individuals. Ensure that the Assessors meet qualifications as per Policy GN-10.
3. Determine/confirm client eligibility for the AADL program prior to the authorization of benefits according to policies and procedures pertaining to specific benefits as per Policy GN-16. This includes the confirmation of previous provision of benefits.
4. Discuss all costs with clients, such as cost share and benefit upgrades.
5. Complete the AADL authorization paper form or electronic authorization.
6. Ensure the assessment date on the authorization is accurate. The **assessment date** is the date the Authorizer determines the client meets the eligibility criteria for a particular type of health benefit and the catalogue number(s) has been identified.
7. Must not backdate or post-date the assessment date for any reason.

8. Have the client sign the “Client Declaration Section” of the AADL authorization form or client declaration form. If the client is unable to sign, provide the name and phone number of the individual who is financially responsible for the client (Minor: Parent/Legal Guardian, Adult: Informal Trustee/Enduring Power of Attorney/Legal Trustee). This individual is also required to sign and print their name on the form on behalf of the client.
9. Authorizers using 1250/1251 forms, must sign the form. If applicable also have the Assessor sign the form.
 - Submit the original 1250/1251 authorization form to AADL within 20 business days of the completion of the client’s complete clinical assessment, including equipment trials, so that the client’s cost-share status is accurate and the vendor may submit a claim.
 - Submit a copy of the paper authorization form to the vendor and the client. Keep a copy on the client’s file. Electronic authorizations do not need to be printed.
10. Follow-up with the client to ensure that the authorized medical equipment and/or supplies meet the client’s needs.
11. Resolve all authorization errors within 10 business days of detecting the error.
12. Document all client encounters related to AADL benefits. This includes assessment, trial, follow-up, education, etc. Include the date of encounter, relevant details and signature of the appropriate health care professional.

Clients:

1. Fully participate in their assessment. This includes any testing required to determine eligibility.
2. Sign the “Client Declaration Section” of the AADL authorization form. If the client is unable to sign, provide the name and phone number of the individual who is financially responsible for the client (Minor: Parent/Legal Guardian, Adult: Informal Trustee/Enduring Power of Attorney/Legal Trustee). This individual is also required to sign and print their name on the form on behalf of the client.

Vendors:

1. Receive a copy of the authorization from the client or the Authorizer. Electronic authorizations can be viewed on E-business.

Specialty Suppliers:

1. Follow procedures for both Authorizers and Vendors as listed in this policy.

Policy GN – 08

Explaining Policies and Procedures to Clients

Policy Statement

Authorizers/Specialty Assessors are responsible to explain applicable AADL policies and procedures to clients and the clients' families/caregivers.

Procedure

Authorizers:

1. Explain to clients and the clients' families/caregivers:
 - a) The importance of their active participation in the clinical/functional assessment process.
 - b) Client choice of vendor
 - i. Ensure clients are aware that they have a choice of a minimum of three (3) vendors (where available), and that a list of all AADL approved vendors for the assessed benefit is available.
 - c) Cost-sharing and Cost-Share Exemption policies.
 - i. Provide cost-share exemption application form, and instructions for completion and submission if applicable.
 - d) Benefit quantity and frequency limits and the quantity and frequency review processes.
 - e) Responsibilities related to benefits, including vendor trial and loan policies.
 - f) Upgrade charge(s) and how it is calculated and who is responsible for upgrade charges.

Specialty Assessors:

1. Explain to clients and their families/caregivers:
 - a) The importance of their active participation in the clinical/functional assessment process.
 - b) Provide information about the vendor list if applicable.
 - i. Ensure clients are aware that they have a choice of a minimum of three vendors (where available), and that a list of all AADL approved vendors for the assessed benefit is available.

- c) Cost-sharing and Cost-Share Exemption policies.
 - i. Provide cost-share exemption application form, and instructions for completion and submission if applicable.
- d) Benefit quantity and frequency limits and the quantity and frequency review processes.
- e) Responsibilities related to benefits, including vendor trial and loan policies.
- f) Upgrade charge(s) and how it is calculated and who is responsible for the upgrade charge.

Superseded

Policy GN – 09

Documentation

Policy Statement

Authorizers and Specialty Assessors must provide documentation relating to the provision of AADL benefits as required by AADL.

Authorizers and Specialty Assessors will maintain documents in a manner consistent with the *Information and Privacy Act* under which they and their employing organization operates. Refer to the *Health Information Act* (HIA) https://www.assembly.ab.ca/HIARReview/Health_Information_Act.pdf and the *Freedom of Information and Protection of Privacy Act* (FOIP) http://www.qp.alberta.ca/1266.cfm?page=F25.cfm&leg_type=Acts&isbncln=9780779762071.

Documents with a signature must be stored as an original copy.

Procedure

AADL:

1. Provides reasonable notice when requesting documentation.

Authorizers:

1. Provide, within a specified time frame, any documents, records or reports required by the AADL Director or designate.
2. Allow AADL Director or designate access to documentation during normal business hours.

Policy GN – 10

Assessor Qualifications

Policy Statement

AADL permits health professionals that are not Authorizers to participate in the assessment of AADL benefits. These health professionals are considered to be “Assessors”. In order to qualify as an AADL Assessor, the health professional must meet the following criteria.

An Assessor:

1. Must be a resident of Alberta.
2. Must not charge for an AADL assessment.
3. Must be a qualified health professional and be registered with one of the following professional associations/College, and upon request provide AADL with proof of current registration.
 - Registered Nurse – College and Association of Registered Nurses of Alberta (CARNA)
 - Occupational Therapist - Alberta College of Occupational Therapists (ACOT)
 - Physical Therapist - Physiotherapy Alberta College + Association (Physiotherapy Alberta)
 - Respiratory Therapist - College & Association of Respiratory Therapists of Alberta (CARTA)
 - Clinical Audiologist - Alberta College of Speech-Language Pathologists and Audiologists (ACSLPA)
 - Speech Language Pathologist - Alberta College of Speech-Language Pathologists and Audiologists (ACSLPA)
4. Assessor must adhere to the following responsibilities:
 - a) Must not complete Authorization Forms unless they are also an AADL Authorizer.
 - b) Must provide clinical assessment information to an AADL Authorizer.
 - c) Must comply with all AADL policies and procedures.
 - d) Must not backdate authorization forms for any reason.
 - e) Must ensure that their assessment information is correct and provided to an AADL Authorizer in as timely a manner as possible.
 - f) Must resolve all assessment errors in as timely a manner as possible.
 - g) Must ensure that their training in needs assessment (clinical expertise) and knowledge of available equipment and/or supplies is continuous, timely, and effective.

Policy GN – 11

Vendor/Specialty Supplier Section

Policy Statement

All AADL vendors and specialty suppliers (from this point forward specialty supplier will be referred to as a vendor) must act in accordance with AADL policies and procedures as set out in the AADL Program Manual(s).

Vendors must meet all terms and conditions of the individual vendor agreements and/or contracts signed with AADL, including all schedules and appendices as referred to for specific benefit areas.

AADL Vendors:

The time periods for which a vendor does not have a signed agreement with AADL in effect, they will not be recognized as an approved vendor and will be unable to invoice AADL. No retroactive payments will be made.

An AADL vendor must:

1. Have applied for status as an AADL vendor as per AADL's application process for which they have been approved.
2. Be registered as an approved AADL vendor in order to provide program benefits and to receive payment from AADL for the same benefits.
3. Sign a time specific agreement with AADL.
 - a) Agreements are not automatically renewed.
 - b) AADL will send existing vendors a new agreement prior to the date of expiration of an existing agreement.
4. Return the signed agreement within the time allocated on the agreement cover letter.
 - a) For all vendors, agreements with AADL will become effective on the date specified by AADL.
5. Sign up for AADL notifications through e-subscription at <https://www.alberta.ca/aadl-authorizers-and-vendors.aspx>
6. Sale of Business and/or Change in Business Ownership

In those instances where there has been a sale of a business or a change in the ownership of a business with approved AADL vendor status, **the new owner must** notify AADL in writing of the sale or change in ownership. AADL will then assign a new AADL vendor number.

Service Accessibility

Unless otherwise stated in the benefit specific program manual, the vendor must:

1. Meet accessibility requirements under section 3.8 of the Alberta Building Code, *Safety Codes Act*, which provide the minimum requirements for barrier free design to ensure wheelchair accessibility.
2. Operate a storefront in Alberta open a minimum 40 hours per week. Other hours of operation require special arrangement with AADL.

General Requirements

The vendor must:

1. Adhere to the terms and conditions of their individual vendor agreement with AADL.
2. Take full responsibility for their individual actions and their employee actions.
3. Ensure that they and their employees:
 - a) Are educated regarding the AADL Policies and Procedures as stated in the most current AADL Program Manual and updates.
 - b) Advise clients regarding access to the AADL Program.
 - c) Have the necessary expertise regarding the provision of AADL benefits and associated invoicing and business processes.
 - d) Are accessible to assist clients and authorizers.
4. Ensure that directors, officers, shareholders, and all employees associated with the vendor's company are not in a conflict of interest position.
 - a) Such a conflict may occur when one of the above has a personal relationship with an authorizer(s) or client(s).
 - b) All potential conflict of interest situations must be brought to the attention of the AADL Director. Approvals are at the discretion of the Director.

Employee Qualifications

The vendor must:

1. Ensure the following certifications/qualifications for employees associated with the supply and provision of specific AADL benefits:
 - a) Respiratory Therapy Benefits: Respiratory Therapy Vendors must employ Registered Respiratory Therapists who are members in good standing with the College and Association of Respiratory Therapists of Alberta (CARTA), for the set-up of equipment and assessment of clients.
 - b) Hearing Aid Benefits: As a specialty supplier, hearing aid vendors must employ clinical audiologists or hearing aids practitioners for client assessment and rehabilitation purposes. The clinical audiologist and hearing aid practitioner must meet the qualifications as further defined in the program specific AADL benefit manual.
 - c) Footwear Benefits: As a specialty supplier, vendors must employ staff who are members in good standing with the Podiatric Association of Canada for client assessment and therapy related services.
 - d) Eye Prostheses Benefits: As a specialty supplier, vendors must employ staff who are members in good standing with the American Society of Ocularists for clinical assessment and related services.
 - e) Prosthetic and Orthotic Benefits: As a specialty supplier, vendors must employ staff who are members in good standing with the Canadian Board of Certification of Prosthetists and Orthotists for clinical assessment and related services.

- f) Breast Prostheses, Graduated Pressure Garments, Burn Garments, Hernia Supports: Vendors must ensure that staff filling/dispensing these benefits have completed a recognized Fitter's Course. Copies of course completion and/or certificates must be provided to AADL.
- g) Manual Wheelchair Benefits: Vendor must employ at least one wheelchair technician who has a minimum of two years of experience repairing manual wheelchairs. Work experience records may be requested by AADL and equivalencies will be considered.
- h) Power Wheelchair Benefits: Vendor must employ at least one wheelchair technician who has a minimum of two years of experience and a certificate indicating successful completion of a manufacturer's power wheelchair training course for two consecutive years for each manufacturer line they carry. The Vendor must have a technician with a certificate for all manufacturer lines that they represent, working on the bench.

In addition to this section, staffing requirements are further detailed in each of the specific benefit areas, as well as the agreements with the AADL Program.

Vendor Accountability

All AADL Program stakeholders, including vendors, are accountable for their duties and actions associated with the Program.

Accountability is defined as the "obligation to answer for the execution of one's assigned responsibilities".

AADL Program vendors are accountable to AADL and to their clients for resource utilization and the quality of services they provide to clients. Their staff are also accountable to their respective professional and regulatory associations for the quality of their professional practice when providing these services, where applicable.

For effective accountability:

1. Vendors should understand their relationship, roles, and responsibilities associated with the AADL Program, and be accountable for their associated actions.
2. AADL should provide regular review and feedback to the vendors regarding their associated actions.

Client Documentation

The vendor must:

1. Have and retain on file all necessary documentation relating to active clients for specific benefits.
 - a) Documentation must include the following:
 - i. Copy of the AADL authorization form.
 - ii. Copy of the physician's prescription (own personal or clinic prescription pad) for those benefits requiring a physician's prescription.
2. Verify with AADL that the client's authorization has not expired prior to the provision of a benefit.
3. Refer errors or omissions to AADL approved authorizers for correction prior to the provision of a benefit.
4. Not backdate or request authorizers to backdate authorizations.
5. Not fill out authorization forms.

All records created, obtained, and maintained by vendors pertaining to the authorization and/or provision of AADL benefits, are to be retained for a period of 10 years and then disposed of in a manner that will protect the confidentiality of personal information.

The 10-year retention period is to be calculated by the last day of the AADL benefit year in which the benefit was provided.

Provision of Benefits

The vendor must:

1. Supply only those benefits for which they have been registered with AADL to supply.
(Reference: Scope for the provision of benefits is identified in individual contracts/agreements with AADL)
2. Supply benefits only to clients who have a valid authorization.
 - a) It is the vendor's responsibility to ensure that the client's authorization is valid and current on the service date. An authorization is not valid if the client is over quantity for the requested benefit or does not meet the benefit-specific eligibility criteria or if the vendor is not indicated on the authorization form.
 - b) An invoice generated pursuant to an expired authorization will not be paid by AADL. As this is the vendor's responsibility, the vendors should not bill or invoice clients for their error.
3. Provide only the benefits listed on the AADL Authorization Form.
4. Provide only the benefits which have a valid catalogue number as identified in the most current AADL Program Manual and updates.
5. Adhere to AADL standards for equipment, supplies, and service.
 - a) Applicable standards are defined in the specific benefit sections of the manual.
6. Ensure that no product substitution occurs without prior approval from AADL.
7. Ensure that clients have prior approval from AADL for benefits, which exceed AADL program parameters for quantity and frequency limits.
8. Provide new unused benefits/products to AADL clients.
 - a) Exceptions are:
 - i. Large recyclable equipment
 - ii. Recycled seating
 - iii. Wheelchairs
 - iv. Artificial Larynx
 - v. Respiratory therapy equipment
9. Ensure that manufacturer's warranties are honored.
 - a) Ensure that defective supplies and equipment are replaced at no cost to the client or AADL.
10. Return the authorization form to the authorizer or the client if the vendor is unable to supply the benefit authorized.
11. Ensure that AADL's principles for benchmark pricing are adhered to.
 - a) AADL defines product quality standards and set the benchmark price for identified AADL benefits.
 - b) Vendors registered with AADL must provide a product, which meets the product quality standards at, or below, the AADL benchmark price.
 - c) AADL will fund benefits at the current benchmark, retail, or sale shelf price, whichever is lower.
 - d) Vendors registered with AADL must be allowed to operate in a competitive free market environment.
 - e) By use of a mutually agreed process between AADL and vendor representatives, AADL must provide a mechanism for regular and exceptional reviews and pricing adjustments.

12. Not refuse to provide AADL benefits and/or services to an AADL client or authorizer. In the event of concerns with an AADL client or authorizer, the vendor must inform AADL in writing detailing the circumstances and concerns.
13. In the event that AADL has been informed in writing by an authorizer or client that a vendor has provided unacceptable service to an authorizer and/or client, AADL will follow up directly with the vendor.

Pricing and Invoicing

The vendor must:

1. Ensure that AADL is invoiced only after the vendor has received a valid AADL Authorization Form and that the authorization is current on the service date.
 - a) AADL will not pay a vendor in the event that the vendor provides a benefit after a client's authorization has expired. The vendor should not bill the client for vendor errors associated with expired authorizations. Clients will be informed of the reasons why AADL did not pay for the benefit(s).
2. Ensure that AADL is invoiced only on or after the date the client has received the benefit (service date).
3. Adhere to AADL pricing and pricing methodologies as listed in the specific areas and updates by AADL.
 - a) Additional details are included with individual contracts/agreements.
4. Adhere to AADL invoicing procedures as further defined in the AADL Program Manual or on E-business.
5. Be responsible for the accuracy of invoicing, as well as the timely correction of invoicing errors.
 - a) It is inappropriate for vendors to bill a client for errors the vendor has made. Clients will be informed of the reasons why AADL did not pay for the benefit(s).
6. Ensure that extra charges to clients occur only as determined by AADL policies and procedures.
 - a) Vendors must not bill the client for an AADL benefit if the vendor has exceeded the maximum amount of time allowable for submission of claims to AADL. Clients will be informed of reasons why.
7. Be responsible for the determination of client cost-share status (eligibility) at the time of the provision of the benefit (date of service).
 - a) Cost-share status is determined by AADL on the benefit year (July 1st through June 30th).
8. Be responsible for the collection of the cost-share portion from the client.
9. Submit claims to AADL no later than six (6) months from the client's date of service.
 - a) Invoices received by AADL later than six (6) months from the client's date of service will not be paid by AADL. Clients should not be invoiced for a vendor's error.
 - b) Vendors have twelve (12) months from the client's date of service to resolve claim errors.
10. Vendors must provide every client with statement of account for each benefit invoiced to the AADL program. The statement of account must include the AADL contribution, the cost-share portion, and any upgrade charges for each benefit (when applicable).
11. Not waive the client cost-share portion for any reason unless the client is exempt from AADL's cost-share policies.
12. Not include upgrade costs on AADL invoices. All AADL clients are responsible for costs associated with upgrades.
 - a) It is the vendor's responsibility to explain that 100% of upgrade costs are not paid by AADL.
13. Not charge AADL for GST in the invoicing of benefits. AADL is not subject to the Goods and Services Tax or the Harmonized Sales Tax.

Promotion of Benefits

The vendor may:

1. Use the reference “AADL Vendor” in verbal and/or written promotional activities.
 - a) Verbal or written promotional activities must not contain the following:
 - i. Direct reference to the “Alberta Aids to Daily Living Program” on the front cover.
 - ii. Claim “copyright” on AADL information and policies.
 - iii. Make use of AADL policies and procedures as part of any merchandising strategy.
 - b) While it is recognized that vendors are a valuable resource, clients and/or authorizers should be encouraged to contact AADL with their concerns or questions.
 - c) AADL is available to review the contents of verbal and/or written promotional activities to ensure compliance with AADL policies and procedures.
2. Not solicit business by promoting “Approved (Registered) AADL Vendor” or other similar wordings while engaged in verbal or written promotional activities.
3. Not solicit business by informing clients verbally or in writing that they are “due or eligible for replacement benefits”.
4. Not solicit business by waiving the client cost share portion of the cost of the benefit.
5. Not reproduce any part or whole of the AADL Program Manual or Pricing Information without the prior written approval of the AADL Director.

Reporting and Auditing

The vendor must:

1. Within 30 days of the receipt of a written request from the AADL Director (or designate), provide records, reports and returns as specified in the request. This includes information regarding AADL clients and the provision of benefits and services.
2. Within 30 days of the receipt of a written request from the AADL Director (or designate), provide current business information as required under the terms of the AADL vendor contract/agreement.
3. Allow access at any time to AADL staff, or other agents authorized by the AADL Director, to inspect any properties associated with the provision of benefits and services to AADL clients.
4. Allow access during normal business hours to AADL staff, or other agents authorized by the AADL Director, to documents or records in the possession of the vendor, to make copies of them, or to temporarily remove them for the purpose of making copies.

AADL staff and other agents of Alberta Health who remove documents or other records from the vendor shall:

1. Provide a receipt for the items to the person from whom the items were taken.
2. Provide a copy of items removed to the person from whom they were taken or to a person who is entitled to custody of them.
3. Return the items to the person from whom they were taken when they have served the purpose for which they were taken.

Disciplinary Actions

AADL and vendors work in partnership to provide clients with benefits and services in a high quality and timely manner. It is anticipated that in most cases AADL and the vendor will be able to resolve any inappropriate practice or unsatisfactory performance.

Failure to comply with the Vendor Section of the AADL Program Manual, and/or vendor agreements will result in the initiation of disciplinary actions by AADL.

Disciplinary actions are at the discretion of the AADL Director, and may result in any or all of the following:

- Credit of funds to AADL from future payments to the vendor
- Suspension of vendor status
- Termination of vendor status.

The steps involved in the investigation of non-compliance with vendor responsibilities, policies and procedures and agreements is as follows:

Step 1:

1. AADL will advise the vendor of any inappropriate practice, unsatisfactory performance, or non-compliance with vendor with the contract(s) or policies and procedures. The appropriate AADL consultant will contact the vendor by telephone to:
 - a) Confirm that an inappropriate / non-compliant practice or conduct has occurred.
 - b) Confirm the actions the vendor is to take to rectify such practice or conduct.
2. Discussions will be documented and filed at AADL with a copy provided to the vendor.

Step 2:

1. If vendor performance is not resolved by Step 1, AADL will advise the vendor in writing of inappropriate practices or non-compliant conduct.
2. If necessary, a meeting will be scheduled and include AADL, and vendor staff as appropriate.
3. All correspondence will be faxed and sent via mail.
4. The vendor must acknowledge in writing their receipt of AADL correspondence by the date specified.
5. The vendor must confirm in writing that the vendor agrees to comply with the actions specified by AADL by the date specified in correspondence.
6. If there is no response to AADL by the specified date, AADL will suspend vendor status and payment of invoices for a maximum of 30 days.
 - a) Successful compliance with remedial actions and attainment of an acceptable level of performance may result in the reinstatement of vendor status.
7. If there is no written response and compliance by the specified date, vendor status will be terminated.

Step 3:

If a vendor's inappropriate practice(s) or conduct is not resolved after Step 2, then:

1. Payments to the vendor will cease immediately.
2. A meeting will be scheduled between AADL management and staff, and vendor management and staff. The meeting will review concerns and inform the vendor of disciplinary actions.
 - a) The meeting will be documented in writing and minutes provided to both parties.
 - b) Copies of all correspondence will be filed in AADL and copied to other authorities as appropriate, including professional associations.

Termination of Vendor Status

In the event of termination of vendor status, a vendor will be considered for reapplication as an AADL vendor:

1. After a period of no less than six months.
2. After there is evidence indicating that the inappropriate/non-compliant practice or conduct will not occur again.
3. Readmission to the AADL Program as a vendor is at the discretion of the AADL Director.
4. All vendors re-applying for vendor status with the AADL Program must attend a Vendor Question and Answer session and sign a new agreement.

Immediate Suspension

In the event that the AADL Program considers the inappropriate/non-compliant practice or conduct made to be significant, AADL reserves the right to immediately suspend vendor status pending the outcome of a full investigation.

Superseded

Policy GN - 12

Policy Revisions and Distribution

Policy Statement

AADL is responsible for developing and disseminating all policies and procedures associated with the program.

Procedure

AADL:

1. Develops policies and procedures and consults when necessary.
2. Obtains appropriate approval prior to dissemination of policy and procedures.
3. Disseminates revised and new policies to all stakeholders through the AADL website.

Authorizers/Specialty Assessors/Specialty Suppliers/Vendors:

1. Provide input to AADL upon request.
2. Access current policies and procedures from the AADL website.
3. Keep all information current in their AADL program manual.
4. Register for the AADL E-subscription list found here: <https://www.alberta.ca/aadl-authorizers-and-vendors.aspx>.

Policy GN - 13

Forms and Publications

Policy Statement

All requests to AADL must be submitted on the designated AADL forms.

Procedure

Clients:

1. To view AADL forms on our website: <https://www.alberta.ca/aadl-forms-and-documents.aspx>

Authorizers/Specialty Assessors/Specialty Suppliers and Vendors:

1. To view AADL forms and publication on our website: <https://www.alberta.ca/aadl-forms-and-documents.aspx>
2. To order AADL forms and publications:

Website: <https://www.alberta.ca/assets/documents/aadl/aadl-order-form.pdf>

Policy GN - 14

Benefit Evaluation

Policy Statement

AADL monitors existing benefits on the Approved Product Lists (APLs) and responds to requests to consider new or replacement benefits that fits within AADL's mandate.

Procedure

AADL:

1. Determines product inclusion or exclusion on an Approved Product List/Catalogue Listing, based on product evaluations, research and best practice.
2. May run an ad hoc committee to review current and potential AADL Benefits.
3. Disseminates Approved Product List, Catalogue Listing.

Authorizers/Specialty Assessors:

1. Advise AADL of product performance.
2. May be asked to participate in ad hoc committees.
3. Submits clinical support information for additional benefits to address gaps in AADL benefits.

Vendors/Specialty Suppliers:

1. Advise AADL of product performance.
2. Advise AADL of changes in pricing or specifications of products.
3. May be asked to participate in ad hoc committees.
4. Provides product evaluation submissions for new or replacement benefits.

Policy GN - 15

Approved Product List/Catalogue Listing

Policy Statement

Information about products provided through AADL may be found on an Approved Product List or a Catalogue Listing. This information includes:

1. Products by benefit area.
2. A catalogue number
3. A description.
4. AADL maximum allocated amount (i.e., price).
5. Quantity and Frequency information.
6. Benefit-specific eligibility criteria

Procedure

AADL:

1. Creates and maintain Approved Product Lists.
2. Disseminates product information to Authorizers, Vendors and Specialty Suppliers.

Policy GN - 16

Client Eligibility

Policy Statement

All clients must meet the following criteria to be eligible for AADL benefits:

1. Be a permanent resident of the Province of Alberta.
2. Reside at home or in a community setting (refer to Policy GN-17).
3. Have a valid Alberta Personal Health Number (PHN).
4. Require benefits due to a long term disability or chronic illness (six months or longer) or palliative diagnosis. Exceptions are identified in the specific benefit area.
5. Have a valid authorization completed by an AADL Authorizer or Specialty Supplier.
6. Meet additional criteria defined by the specific benefit areas.
7. Sign the “Client Declaration”.

Albertans in acute care hospitals are eligible to receive specific AADL benefits if they:

1. Are identified as medically stable.
 2. Have a completed discharge plan.
- AND/OR
3. Are assessed and approved for placement in a continuing care centre.
 4. Are paying continuing care resident fees.

Albertans may not be eligible for AADL benefits if they are eligible to receive the same or similar benefits through another source, including:

1. Non-Insured Health Benefits Program (NIHB), Health Canada
2. Workers’ Compensation Act
3. Department of Veterans Affairs (Canada) Health Care Benefits – “A” Clients
4. Federal programs such as: RCMP and Armed Forces
5. Correctional Institutions
6. Private Insurance

Albertans with private insurance that covers 100% of the cost of the benefit are not eligible for the same benefit under AADL. Once the private insurance coverage is exhausted, the client may become eligible under AADL.

Procedure

AADL:

1. Adheres to the *Public Health Act* AADL Regulation 236/85 in regards to client eligibility.
2. Determines specific benefit eligibility criteria.
3. Validates the client's eligibility.

Authorizers/Assessors/Specialty Assessors/Specialty Suppliers:

1. Ensure the client meets the eligibility criteria prior to authorizing for benefits.
2. Ensure the client signs the AADL "Client Declaration". If the client is unable to sign, provide the name and phone number of the individual who is financially responsible for this client (Minor: Parent/Legal Guardian, Adult: Informal Trustee/Enduring Power of Attorney/Legal Trustee). This individual is also required to sign and print their name on behalf of the client.
3. Refer individuals to the appropriate agencies/organizations for equipment/supply needs if the client is not eligible for AADL benefits.

Clients:

1. Sign the AADL "Client Declaration". If the client is unable to sign, provide the name and phone number of the individual who is financially responsible for this client (Minor: Parent/Legal Guardian, Adult: Informal Trustee/Enduring Power of Attorney/Legal Trustee). This individual is also required to sign and print their name on behalf of the client.

Policy GN - 17

Client Residence

Policy Statement

Alberta Aids to Daily Living (AADL) benefits are provided to eligible Albertans residing in a variety of residence types. Client eligibility for AADL benefits varies by residence type.

Residence Types and Benefit Eligibility

Home Living	Supportive Living and Designated Supportive Living	Facility Living
Independent Living (e.g., house, apartment, condominium)	Supportive Living (e.g., lodge, group home)	Long-Term Care Facility (e.g., nursing homes, auxiliary hospitals)
	Designated Supportive Living (e.g., SL3 and SL4, SL4D)	

Home Living: Albertans residing in their own home, apartment, condominium or another independent living option. Residences may be privately owned, rented or leased.

Eligible for:

- Back and abdominal supports
- Bathing and toileting aids (includes stationary commodes)
- Beds and mattress overlays, bed rails
- Breast prosthesis
- Burnscar and compression garments
- Custom footwear
- Hearing and communication aids
- Medical/Surgical supplies (ostomy, catheters, syringes, incontinence supplies)
- Patient lifters, transfer pole aids
- Prosthetics and Orthotics
- Respiratory equipment and supplies
- Walking aids and accessories
- Wheelchair accessories and seating
- Wheelchairs and mobility bases

Supportive Living (not including Designated Supportive Living spaces): Includes many different types of settings such as (but not limited to) seniors lodges, retirement communities, personal care homes and group homes. Settings may be operated by private for-profit, private not-for-profit or public operators.

Eligible for:

- Back and abdominal supports
- Bathing and toileting aids (includes stationary commodes)
- Beds and mattress overlays, bed rails
- Breast prosthesis
- Burnscar and compression garments
- Custom footwear
- Hearing and communication aids
- Medical/Surgical supplies (ostomy, catheters, syringes, incontinence supplies)
- Patient lifters, transfer pole aids
- Prosthetics and Orthotics
- Respiratory equipment and supplies
- Walking aids and accessories
- Wheelchair accessories and seating
- Wheelchairs and mobility bases

Designated Supportive Living: Provides additional health and personal care services to support residents in remaining in the community in a home-like setting. Alberta Health Services (AHS) controls access to designated supportive living spaces and provides care services according to a contractual agreement with the operator. AHS assesses clients according to individual supportive living needs and categorizes them as Supportive Living (SL) SL3, SL4 and SL4D (Dementia).

Eligible for:

- Back and abdominal supports
- Breast prosthesis
- Burnscar and compression garments
- Custom footwear
- Hearing and communication aids
- Medical/Surgical supplies (ostomy, catheters, syringes, incontinence supplies)
- Prosthetics and Orthotics
- Respiratory equipment and supplies
- Walking aids and accessories
- Wheelchair accessories and seating
- Wheelchairs and mobility bases

Long-Term Care Facility: Includes nursing homes and auxiliary, sub-acute hospitals. Facilities are for clients with complex health needs requiring 24-hour access to nursing services. Care services are provided under contract with AHS.

Eligible for:

- Back and abdominal supports
- Breast prosthesis
- Burnscar and compression garments

- Custom footwear
- Hearing and communication aids
- Prosthetics and Orthotics
- Walking aids and accessories
- Wheelchair accessories and seating
- Wheelchairs and mobility bases

Procedure

AADL:

1. Validates the client eligibility per residence code on the AADL Authorization Form 1250 or 1251 or on E-Business.

Authorizer/Assessor/Specialty Assessor/Specialty Supplier:

1. Ensures the client meets the eligibility criteria prior to being authorized for benefits.
2. Refers the individual to the appropriate facility manager, agencies/organizations for equipment/supply needs if the client is not eligible for AADL benefits.

Superseded

Policy GN - 18

Client Choice of Vendor

Policy Statement

Clients must choose a vendor. Authorizers must provide clients with a choice of vendors and must advise clients that a full list of all AADL approved vendors is available.

Procedure

AADL:

1. Creates and maintains the vendor list.

Authorizers/Specialty Assessors:

1. Provide **each** client with:
 - a) Contact information for a minimum of three vendors. In some geographic areas and for some benefits, there may not be a choice of three vendors.
 - b) A full list of all approved vendors upon request.
2. Must indicate the client's choice of vendor on the authorization prior to submitting to AADL.

Clients:

1. Choose a vendor and inform the Authorizer, Specialty Assessor or AADL of the choice.

Vendors:

1. Must be identified as the vendor of choice on the authorization prior to providing benefit(s).

Policy GN - 19

Client Responsibilities

Policy Statement

Clients who receive benefits through AADL must comply with the AADL policies and procedures.

Procedure

Clients:

1. Participate honestly and fully in their assessment; including full disclosure of any other funding sources and participating in any testing required to determine eligibility. Clients must also follow any clinical recommendations.
2. Must be aware of the specific benefit's eligibility criteria. Ask questions and express concerns to their Authorizer/Specialty Assessor/Specialty Supplier/ Vendor or AADL.
3. Comply with AADL policies and procedures.
4. Provide documentation to determine their cost-sharing status.
5. Pay cost-share portion of benefits directly to Specialty Supplier or Vendor.
6. Consult AADL Client Services if \$500 cost-share amount has been reached, but Cost-Share Exemption status has not been confirmed and thus the 25% cost-share is charged on subsequent purchases.
7. Pay 100% of costs above AADL maximum contribution.
8. Pay for the installation of any program benefit.
9. Abide by AADL/Vendor Trial or Loan policies.
10. Request or accept only equipment and/or supplies that will be used.
11. Take proper care of and be responsible for all benefits received through AADL.
12. Acknowledge that AADL does not replace lost, damaged due to misuse or stolen benefits and obtain appropriate insurance as required.
13. Return recyclable equipment to the Vendor when it is no longer required, or if client is permanently moving outside the Province of Alberta.
14. Sign the AADL "Client Declaration".
15. Consult with another Authorizer/Specialty Supplier or AADL staff when there are unresolved assessment issues with the initial Authorizer/Specialty Supplier.
16. Submit appeals to AADL Director that fall outside the program limits.

Authorizers/Specialty Assessors/Specialty Suppliers/Vendors:

1. Advise clients of these responsibilities.
2. Explain to clients AADL policies and procedures

Superseded

Policy GN - 20

Definition of Cost Share

Policy Statement

AADL is a cost-share program. Clients and AADL share the cost of approved benefits received through the program. Low-income clients may be cost-share exempt (refer to Policy GN-21). Seniors that do not qualify for cost-share exemption may qualify for cost-share exemption based on Special Needs Assistance for Seniors criteria (refer to Policy GN-26). Seniors who are eligible for prosthetic, orthotic, breast prostheses or ocular prostheses are not required to cost share on those benefits.

Procedure

Clients and/or Families:

1. Pay 25% of AADL maximum contribution for benefits received directly to the providing vendor or manufacturer.
2. Contribute no more than a maximum of \$500 per family, per benefit year (July 1st to June 30th) for all benefits received.
3. Are exempt from additional cost-sharing for the remainder of the benefit year once the maximum annual contribution of \$500 per family is reached.
4. Clients are responsible for all additional costs resulting from an upgraded product choice.
5. Additional charges resulting from an upgraded product choice do not count towards the \$500 program cost-share maximum.

AADL:

1. Monitors the client's cost-share status.
2. Updates the client's Cost-Share Exemption status when the maximum annual cost-share contribution is reached.

Vendors:

1. Verify the client's cost-share status using e-business or Interactive Voice Response (IVR) System.
2. Calculate the cost-share portion for the approved benefit amount for items provided.
3. Must collect the cost-share payment from the client, before ordering the goods.
4. Report cost-share on the claim invoice to AADL.

Policy GN - 21

Cost-Share Exemption Criteria

Policy Statement

Cost-share exemption is available to clients whose taxable income (line 260 of the most recent income tax return) is :

- \$20,970 or less for a single person,
- \$33,240 or less for a family with no children, or
- \$39,250 or less for a family with children.

Clients receiving income supplement benefits from the following Alberta government programs may be exempt from cost sharing.

- Income Support Program benefits
- Assured Income for the Severely Handicapped (AISH)
- Alberta Adult Health Benefits (AAHB)
- Child and Youth Support Program
- Children Services (minors in foster care)
- Seniors who are eligible for prosthetic, orthotic, breast prostheses or ocular prostheses are not required to cost share on those benefits.

Clients are not eligible to apply for cost-share exemption if they are:

- A new or returning resident from outside Canada, who has not yet resided in Alberta for 12 consecutive months,
- Exempt from paying income tax for religious, charitable or communal reasons, or
- A foreign student temporarily residing in Canada.

Procedure

Clients:

1. If applying based on taxable income level, complete the Application for Cost-Share Exemption found here; <https://www.alberta.ca/aadl-forms-and-documents.aspx> under General forms.. The application is available from your Authorizer, Assessor, supplier, vendor or AADL Client Services at 780-427-0731 or toll-free in Alberta at 310-0000, then 780-427-0731 for an application.

2. If applying for cost-share exemption based on participation in a government-sponsored program as listed above, contact AADL Client Services at 780-427-0731 or toll-free in Alberta at 310-0000, then 780-427-0731. Clients participating in these programs do not need to fill out the application for cost-share exemption.

AADL:

1. Receives application and determines eligibility for cost-share exemption.
2. If eligible enters the appropriate pay code into the AADL mainframe.
3. Advises the client if they are not eligible and provides appeal information.

Superseded

Policy GN - 22

Cost-Share Exemption Reapplication

Policy Statement

Clients who are cost-share exempt may need to reapply prior to the end of the benefit year (June 30th) for Cost-Share Exemption for the next benefit year starting July 1st.

Procedure

Clients:

1. Clients under 65 years with a spouse under 65 years old must re-apply each benefit year (July 1-June 30).
2. Clients 65 years and older, and clients under 65 years with a spouse over the age of 65 years who are Cost-Share Exempt, if a client has Cost-Share Exemption status and client has received an AADL benefit in the previous benefit year, the client does not have to reapply.
3. All clients granted Temporary Cost-Share Exemption for all or part of the AADL benefit year must reapply for cost-share exemption for the next benefit year.

Policy GN - 23

Cost-Share Exemption Maximum \$500 Contribution

Policy Statement

When an individual or family (as identified by Alberta Health Care Registration) has paid the \$500 maximum AADL benefit year contribution, the individual or family becomes cost-share exempt for the remainder of the AADL benefit year (July 1 to June 30).

Procedure

Vendors:

1. Check IVR or E-business to verify client's cost-share status.
2. If the client has contributed \$500 in cost share for the AADL benefit year (July 1 to June 30) do not charge the cost-share portion to the client and invoice AADL 100% of the cost of the approved product.

AADL:

1. Monitors individual or family cost-share contributions.
2. Changes pay code status on the AADL mainframe so vendors and suppliers are aware the client is cost-share exempt for the remainder of the benefit year .
3. Refunds client any cost-share paid exceeding the \$500 maximum AADL benefit year contribution.

Policy GN - 24

Cost-Share Appeal Process

Policy Statement

The Alberta Aids to Daily Living Regulation sections 4.1 and 4.2 provide authority for clients to appeal their cost-share status.

Clients may appeal their cost-share status if they *believe* they will experience financial hardship by cost-sharing.

AADL will conduct an internal administrative review of the appeal for cost-share exemption, considering individual circumstances to determine if the client adequately demonstrates that he/she will experience financial hardship.

If the client is experiencing a recent change in circumstances AADL may forward the Application for Temporary Cost-Share Exemption. Otherwise the application will proceed to the appeal.

After administrative review, cost-share appeals may be heard by a Citizen's Appeal Panel, comprised of citizens-at-large appointed by the Alberta Government. Panels are located in 31 communities across the province and are independent, quasi-judicial bodies.

Procedure

Clients:

1. Complete AADL Cost-Share Exemption Notice of Appeal form found here: <https://www.alberta.ca/aadl-forms-and-documents.aspx> under general forms. form.
2. Submit form to AADL at 10th Floor, Milner Building, 10040-104 Street, Edmonton, AB T5J 0Z2 or via fax at 780-422-0968.

AADL :

1. Determines if the situation meets requirements for temporary cost-share exemption according to policy GN-25 and sends application to client. If it does not meet requirements, proceed to step 2.
2. Receives and logs the cost share appeal.
3. Ensures that all required documents are present and correctly completed.
4. Contacts clients regarding incomplete or missing information.
5. Forwards client file to Director for internal administrative review.

AADL Director:

1. Performs an administrative review.
2. Reviews AADL Cost-Share Exemption Notice of Appeal and supporting documents.
3. Determines if financial hardship applies.
4. Approves or denies appeal.
5. Returns decision to Client Services.

AADL Client Services:

1. Informs client in writing of appeal decision.
2. Sends a letter to the client outlining reasons appeal is denied.
3. If denied, outlines the next steps of the appeal process to client in the letter.
4. Informs client of the date in which they must respond, in writing, if they want appeal to be heard by the Citizens Appeal Panel.
5. Client informed that the appeal panel may confirm, reverse or vary AADL denial decision.

Clients:

1. Contact AADL, in writing, within date provided to request appeal be forwarded to the Citizen's Appeal Panel.

AADL Client Services:

1. Transfers appeal to the Citizen's Appeal Panel, administered by the Appeal Secretariat.

Appeal Secretariat:

1. Notifies AADL and the client in writing of the hearing date, time and location.

AADL Program Manager:

1. Represents AADL program's decision at the appeal hearing, either by teleconference or in person.

Citizens Appeal Panel:

1. Hears the appeal of the client and the decision of the AADL program.
2. Makes a decision on the appeal.
3. Informs client and program in writing confirming the panel's decision.
4. The decision of the panel is final.

Policy GN - 25

Temporary Cost-Share Exemption

Policy Statement

Temporary cost-share exemption is for clients who do not qualify for cost-share exemption based on their last tax return, but expect their income to be lower than AADL's cost share exemption thresholds in the current year.

Clients will only be considered for Temporary Cost Share Exemption if they submitted a regular Application for Cost Share Exemption in the current benefit year, and it was denied because their taxable income was higher than AADL thresholds. Clients must have their most recent tax return on file with the Canada Revenue Agency (CRA), even if their income is below mandatory filing thresholds.

Clients can submit the Applications for Cost Share Exemption and Temporary Cost Share Exemption at the same time, if they expect to be denied for regular Cost Share Exemption.

Eligibility is based on the average gross monthly income before deductions for the three months prior to the date of application.

Clients applying for temporary cost-share exemption must include proof of the last three months of gross income.

If approved, temporary cost-share exemption remains in effect from the time of approval until the end of the benefit year, June 30.

If the need continues to exist, the client will need to apply for cost-share exemption for the new benefit year.

Procedure

Clients:

1. Complete the Application for Temporary Cost-Share Exemption found here: <https://www.alberta.ca/aadl-forms-and-documents.aspx> under general forms. or contact your Authorizer, Assessor, supplier, vendor or AADL Client Services at 780-427-0731 or toll-free in Alberta at 310-0000, then 780-427-0731 for an application.
2. Submit the completed application to AADL, including proof of the last three months of gross income.

AADL:

1. Confirms client submitted an Application for Cost-Share Exemption in the current benefit year, and that it was denied due to taxable income on file with the Canada Revenue Agency (CRA).

2. Determines eligibility for temporary cost-share exemption.
3. If eligible, enters the appropriate pay code into the AADL mainframe.
4. Advises the client of decision and, if they are not eligible, provides appeal information.

Superseded

Policy GN - 26

Cost- Share Exemption for Hearing Aid Benefit for Seniors

Policy Statement

Seniors with income above the AADL threshold for cost-share exemption may qualify for maximum hearing aid funding if they meet Alberta Seniors Benefit Program eligibility criteria.

<https://www.alberta.ca/alberta-seniors-benefit.aspx>

Clients need to apply and be eligible for the Alberta Seniors Benefit program prior to applying to AADL for cost-share exemption for Hearing Aid Benefits for Seniors.

Procedure

Clients:

1. Ensure they have applied for the Alberta Seniors Benefit and confirm they are eligible.
2. Complete the Application for Cost-Share Exemption for Seniors and their Adult Dependents found here: <https://www.alberta.ca/aadl-forms-and-documents.aspx> under general forms., or contact a hearing aid Assessor, supplier, vendor or AADL Client Services at 780-427-0731 or toll-free in Alberta at 310-0000, then 780-427-0731 for an application.

AADL:

1. Determines eligibility for Special Needs Assistance for Seniors.
2. If eligible, updates into the AADL mainframe to reflect this status.
3. If the client is not eligible, advises the client and provides appeal information.

Policy GN - 27

Quantity and Frequency Limits

Policy Statement

AADL determines benefit quantity and frequency limits based on best practice and current research. Quantity and frequency limits:

- Describe the maximum number of each benefit (quantity) a client can receive over a given period of time (frequency).
- Are noted in the AADL Approved Products Lists (APLs).

AADL considers exceptional requests for exceptions to quantity and frequency limits through a prior approval process described under Policy GN-28, Quantity and Frequency Review (QFR) Process

Procedure

Authorizers/Specialty Suppliers:

1. Refer to the program manual for quantity and frequency limits.
2. Verify consumption prior to authorizing benefits.
3. Follow the QFR Process Policy GN-28 if the benefit is over the client's quantity or frequency limits.

Vendor/Specialty Suppliers:

1. Verify consumption by the client prior to requesting benefit authorization from AADL.
2. Provide benefits according to client eligibility and quantity and frequency limits.
3. Refer the client to an AADL authorizer/specialty assessor if over the quantity or frequency limit.

Policy GN - 28

Quantity and Frequency Review Process

Policy Statement

The QFR process is intended for exceptional circumstances only.

The AADL Program Manager reviews requests for benefits over the quantity and frequency limits through a Quantity and Frequency Review (QFR). Requests denied by the AADL Program Manager may be appealed per Policy GN-29, Quantity and Frequency Review Committee (QFRC).

QFRs must be approved prior to submitting an authorization for the benefit.

All QFR requests require the following:

1. A detailed assessment identifying clinical need.
2. Detailed explanation of alternate funding options, alternate strategies employed or other efforts on behalf of the client to meet basic needs within available quantity and frequency.
3. Rationale explaining why the existing benefit no longer meets the client's clinical needs (i.e. a documented significant and stabilized change in clinical condition since the previous benefit was provided).
4. Refer to the specific AADL program manual for additional criteria.

The following requests are outside the QFR process:

- Benefits for which the client does not meet the eligibility criteria.
- Requests for medical equipment and supplies which are not on the APLs.
- **Replacement of lost, stolen or damaged benefits.**
- Replacement of benefits due to misuse or inadequate care and maintenance.
- Replacement of benefits for convenience or lifestyle.
- Replacement of benefits due to technological advancements.
- Funding for charges above AADL maximum approved limits (i.e. upgrading costs).
- Funding for duplicate benefits (i.e., two products for the same functional purpose).
- AADL Program Cost-Share Exemption Appeals (refer to Policy GN-24).
- Difference of opinion between two assessors.
- Assessment errors related to the original benefit.

Procedure

Authorizers/Specialty Assessors/:

1. Confirm the request meets QFR criteria above.
2. Advise the client of QFR process and procedures.
3. Complete the **QFR Request form available on the website:** <https://www.alberta.ca/aadl-forms-and-documents.aspx> under Quantity and Frequency Review request forms.
4. Ensure the client reviews and signs the consent on the QFR form.
5. Sign the QFR form and submit all required documentation to AADL by fax or mail within 20 working days of the assessment date.
6. Provide a copy of the completed request to the client.
7. Inform client that authorization will proceed only if QFR is approved.

Clients:

1. Review and sign the QFR form indicating understanding and consent.

AADL Appeals Coordinator:

1. Reviews QFR for completeness.
2. Returns incomplete and withdrawn requests to the Authorizer.
3. Records receipt of QFR and forwards to appropriate benefit area.
4. Records decision of benefit manager.
5. Sends notification of decision to the Client and Authorizer.

AADL Program Manager:

1. Reviews QFR.
2. Returns incomplete or withdrawn requests to Appeals Coordinator.
3. Approves or denies QFR and documents decision on QFR form including rationale for decision.
4. Documents QFR #, date of decision and rationale on AADL mainframe.
5. Returns QFR indicating decision to the Appeals Coordinator.

Policy GN - 29

Quantity and Frequency Review Committee

Policy Statement

All submissions for review by the Quantity and Frequency Review Committee (QFRC) must follow AADL defined procedures.

Membership:

- Committee Chair: AADL Appeals Coordinator or designate
- Minimum of two (2) AADL Program Manager representatives (not including the Program Manager presenting the QFR submission)
- Minimum of three (3) additional members employed by the Government of Alberta.:

Members are familiar the AADL mandate, clients served and benefits provided.

Meetings:

- Attendance by four (4) Committee members constitutes a quorum.
- Monthly, or as needed-additional meetings may be called at the discretion of the Chair.

Procedure

Authorizers/Specialty Assessors/Specialty Suppliers:

1. May, within 20 working days of a QFR denial by the AADL Program Manager, resubmit the Quantity and Frequency Review form by fax (780-644-1521) to the attention of the QFRC. Additional information may be required and/or submitted.
2. Manager will screen QFRC submissions to ensure adequate information is available to the committee to effectively consider the request. A QFR will not be submitted to the QFRC until sufficient clinical information is provided.

Clients:

1. To ensure fairness and consistency throughout the province, clients are not permitted to make personal presentations (includes family members and advocates) to the QFRC.

Quantity and Frequency Review Committee:

1. Reviews Quantity and Frequency Review Committee Submissions.
2. Requests any additional information the Committee deems appropriate.

3. Makes decisions by consensus of the committee members based on the relevant information presented, clinical best practice guidelines, client need, other relevant information and previous benefit consumption.
4. Exercises their authority in a fair and timely manner.
5. Is permitted to impose any limitations and/or conditions deemed appropriate (e.g., time limits, recycle equipment only, follow up consultations/assessments).
6. Issues written decisions including:
 - the date of the decision;
 - a statement of the request;
 - the decision;
 - the rationale for the decision;
 - a description of the Appeal Process including how to file an Appeal and the time permitted to Appeal; and
 - the Quantity and Frequency Review Committee members in attendance; and the Chair's name and signature.
7. Forwards decision to Appeals Coordinator.

AADL Appeals Coordinator:

1. Logs QFRC decision.
2. Sends a letter to the Client and the Authorizer/Specialty Assessor/Specialty Supplier (attaching the signed decision) within 10 working days of the QRFC meeting.
3. If submission is denied, a Quantity and Frequency Appeal to the AADL Director form will be included. Logs Quantity and Frequency Review Committee decision.

Client/Authorizer/Specialty Assessor/Specialty Supplier:

1. May appeal a QFRC denied request to the AADL Director (refer to Policy GN-30)

Policy GN - 30

Quantity and Frequency Review – Director Appeal Process

Policy Statement

If a Client/Authorizer/Specialty Assessor/Specialty Supplier is not in agreement with the decision of the Quantity and Frequency Review Committee, the Client/Authorizer/Specialty Assessor/Specialty Supplier may appeal this decision to the AADL Director according to the AADL defined procedures.

Procedure

Clients/Authorizers/Specialty Assessors/Specialty Suppliers must:

1. Complete the Quantity and Frequency Appeal to the AADL Director form found here: <https://www.alberta.ca/aadl-forms-and-documents.aspx> under Quantity and Frequency Review request forms.
2. Submit the request within 20 working days of the decision date on the Quantity and Frequency Review Committee Decision form. This time frame may be extended at the discretion of the AADL Director.

Authorizers/Specialty Assessors/ Specialty Suppliers:

1. May assist the client (to the extent reasonably possible) in completing the appeal form.
2. Are not required to assist clients in submitting forms that are not in accordance with AADL's appeal process or if in agreement with the decision of the Quantity and Frequency Review Committee.

AADL Appeals Coordinator:

1. Logs receipt of appeal and prepares applicable material (e.g., original submission to Quantity and Frequency Review Committee) and forwards to Director.

AADL Director:

1. Reviews the original submission, the decision under appeal, the appeal documentation and any additional information provided by the Client/Authorizers/Specialty Assessor/ Specialty Suppliers.

2. May contact the Client/Authorizer/Specialty Assessor/Specialty Supplier, Program Manager, the client's health care providers, or the Quantity and Frequency Review Committee Chair to request additional information or to ask questions.
3. May allow in-person client presentations.
4. Makes decision which may include:
 - upholding the original decision in whole or in part,
 - making another decision, with or without conditions.
5. Issue written decisions that include: the date of the decision, the decision(s), the rationale for the decision; and the Director's name and signature.
6. The decision of the Director is final.

AADL Appeals Coordinator:

1. Logs decision.
2. Sends notification of Director's decision(s) to the Client and Authorizer/Specialty Assessor/Specialty Supplier (attaching the signed decision) within 10 working days of the Director's decision.
3. Notifies appropriate Program Manager to implement Director's decision.

Policy GN - 31

Complaint Registry

Policy Statement

The complaint registry is AADL's internal complaint mechanism used to resolve specific types of complaints.

The Complaint Registry is also a tool to be used to improve the AADL Program by providing quality service and fostering improved relationships with all stakeholders.

Complaints are only accepted on issues within the jurisdiction of AADL and which are not addressed by the Quantity and Frequency Review Process or Cost-share Appeals.

Procedure

Complainant:

1. May submit complaints related to the following:
 - AADL Business Policy
 - AADL Business Process (e.g., Authorization, Claim)
 - AADL Computer System
 - AADL Staff Activity
 - Assessor Activity
 - Authorizer Activity
 - Client Activity
 - Eligibility Criteria
 - Product
 - Specialty Supplier Activity
 - Vendor Activity
 - Wait Time
 - Other

Complaints can be about more than one issue (e.g., product and wait time). If the complaint issue is not included in the above categories, the exact nature of the complaint must be specified. Complaints are not accepted on Quantity and Frequency Review Committee decisions.

Superseded

Policy GN - 32

Complaint Submission

Policy Statement

Formal complaints must be documented in writing using the AADL Complaint Form.

Procedure

Complainant:

1. Complete the AADL Complaint Form according to the instructions provided with the form. This form is available online at:
2. <https://www.alberta.ca/aadl-forms-and-documents.aspx> under general forms.

3. This form can be sent to AADL:

Mail: AADL
Fax: (780) 422-0968
10th Floor, Milner Building
10040 – 104 Street NW
Edmonton, AB T5J 0Z2

Complaints Investigator:

1. May verify or clarify information on the complaint form in order to initiate an investigation.
2. Will accept a written letter of complaint (including where a copy of the letter has been sent to the Premier, Minister or MLA), as a formal written complaint, and process it as per policies GN-31 and GN-32.
3. Must ensure that the letter writer is made aware of the statement on the Complaint Form Section F – *I acknowledge that I am aware that all the information I provide with my complaint, may be released to necessary individuals during a complaint investigation and is not considered confidential.*
4. Logs the letter of complaint in the Complainant Registry Database as per policy GN-38.

Policy GN - 33

Client Verbal Complaint Submission

Policy Statement

Verbal complaints from clients may be submitted as formalized complaints only through the AADL Complaints Investigator.

Procedure

AADL:

1. When a client calls AADL by telephone with a complaint, the staff member will attempt to resolve the issue and/or obtain the assistance of other AADL staff members.
2. If the complaint cannot be resolved or the client remains dissatisfied, the staff member should ask the client if they wish to file a formal complaint.
3. If the client wishes to file a formal complaint, the call should be transferred to the Complaints Investigator.

Complaints Investigator:

1. Will refer the client to the complaint form available at:
<http://www.health.alberta.ca/documents/AADL-Complaint-Form.pdf> to complete independently as per the instructions provided with the complaint form, or
2. May complete a complaint form on the client's behalf as outlined in Policy GN-32.
 - Ensure the statement on the Complaint Form Section F –
I acknowledge that I am aware that all the information I provide with my complaint, may be released to necessary individuals during a complaint investigation and is not considered confidential is read to the client.
 - Complete Section F on the Complaint form with their name and sign it on behalf of the client.

Policy GN - 34

Complaint Processing

Policy Statement

To ensure that formal complaints are addressed in an equitable and efficient manner, all must be reviewed and investigated by the Complaints Investigator.

Procedure

AADL:

1. Staff other than the AADL Complaints Investigator should not retain or investigate formal complaints. Complaints include written letters from complainants (including those where a copy of the letter has been sent to the Premier, Minister or MLA). Staff receiving the complaint form or letter will forward them to the receptionist.
2. The receptionist will stamp the complaint form or letter with the AADL receiving date stamp, and forward the complaint form or letter directly to the Complaints Investigator for further processing (See Policy GN-32 if complaint is a letter).

Complaints Investigator:

1. Reviews all complaints and determines if the issue is under the jurisdiction of AADL. If the Complaints Investigator cannot investigate the complaint, a letter will be sent to the complainant providing an explanation and, if possible, referral information.
2. Makes a copy of complaints about AADL Staff Activity and presents to the staff member's direct supervisor for further action according to Ministry Human Resources practices. The Complaints Investigator will not conduct any further investigation but will register the complaint on the Complaint Registry database.
3. Reviews all complaints and ensures that a signature has been obtained in Section F. If a signature has not been obtained, the Complaints Investigator will make best efforts to contact the complainant to ensure the complainant is aware of the statement on the Complaint Form Section F:

I acknowledge that I am aware that all the information I provide with my complaint, may be released to necessary individuals during a complaint investigation and is not considered confidential.

If the complainant cannot be reached within 10 business days, no further action on the complaint will take place.

4. Assigns all complaints within 5 business days of the date of receipt by AADL.

5. Logs all complaints in the Complaint Registry database within 10 business days of the date of receipt by AADL.
6. Completes eighty percent of complaints within 45 days of the date on the complaint form.

Superseded

Policy GN - 35

Complaint Investigations

Policy Statement

The AADL Complaints Investigator will conduct investigations in a manner appropriate to the situation, taking into account all aspects of the Administrative Fairness Guidelines as outlined by the Office of the Ombudsman at <http://www.ombudsman.ab.ca/fairness-guidelines.php>.

Procedure

Complaints Investigator:

1. Focuses on mutually beneficial results (whenever possible).
2. Documents the investigation and the efforts to reach a solution.
3. Contacts the complainant by telephone within 10 business days from the receipt of the complaint to review the information provided on the complaint form, the process followed to investigate a complaint and provides advice and options if possible.
4. Contacts the complainant throughout the investigation process. The complainant will be given an opportunity to explain additional details concerning the complaint.
5. Contacts the subject of the complaint by telephone to obtain the facts of the situation from their perspective along with any necessary documentation.
6. Endeavours to resolve the issue during the initial call. If a resolution is reached, it will be verbally confirmed with the complainant and documented internally. The Program Manager will be provided with verbal details of the complaint and resolution. No correspondence will be sent to the complainant or other parties.
7. Reviews issues with the appropriate and responsible AADL staff dependent upon the type, nature and importance of the issue(s) under review.
8. Informs the responsible Unit Supervisor/Manager about the progress of the investigation and the outcome.
9. May remove documents or other records from any person, business or organization during an investigation. The Complaints Investigator:
 - a) Provides a receipt for the items to the person, business or organization from whom the items were taken.

- b) Makes a copy of items removed from the person, business or organization from whom they were taken.
 - c) Returns the items to the person, business or organization from whom they were taken when they have served the purpose for which they were taken.
10. Conducts the investigation in a positive, open and non-threatening environment and in a manner considered most suitable in the circumstances, and uses collaborative processes that promote resolution.
 11. Renders decisions considered reasonable according to fairness guidelines. Adequate reasons are provided for both verbal and written decisions.
 12. Provides recommendations for disciplinary action which conform to the applicable AADL Policies and Procedures and contract terms.
 13. Sends correspondence to relevant parties outlining the investigation and conclusions in at least 50% of complaints.
 14. Exercises discretion in sending correspondence so that confidentiality is respected. The correspondence is expected to achieve closure of the complaint.

Complainants and Subjects of the Complaint:

1. The complainant and the subject of the complaint are encouraged to conduct themselves in an honest and professional manner during the investigation and focus on cooperation and resolution of the complaint.
2. The complainant and the subject of the complaint have the right to review with the Director of AADL any recommendations/decisions made by the Complaints Investigator.

Authorizers/Specialty Assessors/Specialty Suppliers:

1. Provide documents as specified in a verbal or written request from the Complaints Investigator within 30 days of receiving the request, relating to the provision of AADL benefits to a client.
2. Allow AADL staff or other agents as designated by the Director to access documentation in client files related to the authorization of AADL benefits and services or to make copies of this documentation.

Vendors:

1. Provide documents as specified in a **verbal or written** request from the Complaints Investigator within 30 days of receiving the request, relating to the provision of AADL benefits to a client. This includes information regarding AADL clients and the provision of benefits and services.
2. Provide current business information as required under the terms of the AADL vendor contract/agreement as specified in a **verbal or written** request from the Complaints Investigator within 30 days of receiving the request.
3. Allows AADL staff, or other agents authorized by the AADL Director, to inspect any properties associated with the provision of benefits and services to AADL clients.
4. Allows AADL staff, or other agents authorized by the AADL Director, access to documentation associated with the provision of benefits and services, to make copies of the documentation, or to temporarily remove the documentation for the purpose of making copies.

Policy GN - 36

Action Requests

Policy Statement

Action requests will be documented in the Complaint Registry database so that complaints received directly by the Minister's office are included for Program quality improvement purposes.

Procedure

AADL:

1. The Information and Training Coordinator and the Strategic Directions Consultant are responsible for the data entry of action requests into the Complaint Registry Database.
2. All Action Requests must be logged into the Complaint Registry Database within 10 business days of the date of receipt by AADL.
3. Data entry must conform to the Complaint Registry Database Data Input Instructions.
4. The Information and Training Coordinator and the Strategic Directions Consultant should use the Complaint Registry Database to cross-reference any related complaints to action requests to avoid duplication.
5. Upon the completion of the action request, the Strategic Directions Consultant or Unit Supervisor/Manager may request the Complaints Investigator to file a formal complaint if further investigation is required.

Policy GN - 37

Complaint Registry Database and Compiling Results

Policy Statement

All formal complaints are documented in the Complaint Registry database, compiled and analyzed and reported on an annual basis.

Procedure

AADL:

1. Only designated staff members have access to the Complaint Registry Database and are able to input data. Staff must ensure that all data entry is completed prior to the time when the reports are compiled.
2. The complaint must be logged into the Complaint Registry Database within 10 business days of the date of receipt by AADL.
3. Data entry must conform to the Complaint Registry Database Data Input Instructions.

Complaints Investigator:

1. Generates the required reports from the Complaint Registry Database.
2. Analyzes the reports and provides suitable summaries for use by different sources and for different purposes.

Policy GN - 38

Sharing/Communicating and Using Complaint Registry Database Results

Policy Statement

The Complaint Registry Database summaries will be shared and communicated with the AADL Management Team, Alberta Health Services Advisory Committee and Stakeholder Committees. These summaries will be used to support continuous quality improvement.

Procedure

AADL Complaints Investigator:

1. Compiles and combines the database results with other performance measure reports wherever possible for continuous quality improvement.
2. Presents a summary to the Management Team and individual benefit group summaries to the Program Managers on an annual basis for review and recommendations.
3. Presents a summary to the Alberta Health Services Advisory Committee on an annual basis for review and recommendations.
4. Presents a summary to the Stakeholders Advisory Group on an annual basis for review and recommendations.

Policy GN - 39

Privacy

Policy Statement

Information provided on the AADL Complaint Form may be released to necessary individuals during a complaint investigation and is not considered confidential. Investigation records and results are considered private and are disclosed only under the Freedom of Information and Protection of Privacy or *Health Information Act* process.

Procedure

Complaints Investigator:

1. Maintains the privacy of all stakeholders involved in a complaint while disclosing sufficient information to establish grounds for conclusions and recommendations.
2. Considers if a request is reasonable and then may provide a copy of the complaint form to the individual, business or organization that is the subject of the complaint.
3. Conducts investigations in private and does not routinely disclose the investigation report.
4. Discloses results of investigations when required through the Freedom of Information and Protection of Privacy *Health Information Act* process.

Policy GN - 40

Complaints Filed by AADL

Policy Statement

As a result of a complaint investigation, AADL may determine that it is appropriate to file a complaint with the governing professional organization/regulatory body for the health professional or vendor. In cases requiring a more thorough investigation outside the scope of AADL, AADL will notify the Office of the Auditor General or other applicable parties.

Procedure

Complaints Investigator:

1. Reviews the results of the investigation and the recommendations with the appropriate parties, including Program Management.

AADL:

1. Program Management reviews and either approves or denies the request to file a complaint with the governing professional organization/regulatory body.

Complaints Investigator:

1. If approved, the AADL Complaints Investigator files the complaint with the governing professional organization/regulatory body according to the organization/body's complaint process.
2. Informs Program Management of the results of the complaint to the governing professional organization/regulatory body.
3. Implements any actions required with the health professional or vendor as a result of the governing professional organization/regulatory body's complaint results.

Policy GN - 41

Compliance Monitoring

Policy Statement

AADL may review Authorizers'/Specialty Assessors' compliance with AADL policies and procedures on an ongoing basis and may either temporarily or permanently suspend an Authorizer/Specialty Assessor due to:

- Non-compliance with Authorizer responsibilities as per Policy GN-06 through Policy GN-11 inclusive.
- A request from Alberta Health Services or other professional body to suspend an Authorizer/Specialty Assessor.

Procedure

1. AADL employs compliance monitoring to ensure the Policies and Procedures are applied accurately and all parties are supported in their interactions with AADL.
2. **Monitoring Compliance** is a review of Authorizer/Specialty Assessor understanding of and accurate application of AADL's policies and procedures. Errors and/or concerns are addressed, corrective actions determined and follow-up provided.
3. **Ongoing Non-Compliance** occurs when the above noted corrective actions are not put into effect and the non-compliance continues. Corrective actions at this stage may include temporary suspension of the Authorizer.
4. **Immediate Suspension** is used when significant non-compliance has occurred and immediate action is necessary to stop or prevent harm. This would not require the preceding two steps being enacted.

Monitoring Compliance

AADL:

1. Monitors Authorizer/Specialty Assessor activities on an ad hoc or ongoing basis to determine compliance with policies and procedures.
2. Informs Authorizer/Specialty Assessor of ongoing compliance and any instances of non-compliance.

3. In the event of suspected non-compliance, will confirm with Authorizer/Specialty Assessor whether non-compliance has occurred and if confirmed will request an explanation from the Authorizer.
4. Explains the related policies and procedures and AADL expectations to the Authorizer/Specialty Assessor.
5. Identifies, in consultation with the Authorizer/Specialty Assessor, corrective action to be taken.
6. Informs the Authorizer's/Specialty Assessor's Supervisor, when appropriate and applicable.
7. Documents and files a record of the non-compliance, the Authorizer's/Specialty Assessor's explanation, and the identified corrective action to be taken.
8. Provides copies of the above-mentioned documents to the Authorizer/Specialty Assessor and if applicable, the Authorizer's/Specialty Assessor's Supervisor.
9. Informs Authorizer/Specialty Assessor and if applicable, the Authorizer's/Specialty Assessor's Supervisor when corrective action has been completed.

Authorizers/Alberta Health Services:

1. Provide AADL with an accurate account of the situation in question.
2. Cooperate with AADL to address non-compliance.
3. Implement corrective action identified.

Ongoing Non-compliance

AADL:

1. Determines, in its sole discretion, that the Authorizer/Specialty Assessor has not taken corrective action to address non-compliance or the corrective action taken is not satisfactory.
2. Contacts the Authorizer/Specialty Assessor and Supervisor to obtain an explanation about continued non-compliance.
3. Schedules a meeting that includes AADL, the Authorizer/Specialty Assessor and the Authorizer's/Specialty Assessor's Supervisor to determine further possible actions to address the non-compliance.
4. Advises the Authorizer/Specialty Assessor and Supervisor in writing of the continued non-compliance, the status of corrective action, the lack of resolution to date, and further corrective action required.
5. Documents and files all copies of communications and correspondence.
6. Provides copies of the correspondence to the Authorizer/Specialty Assessor and Supervisor.
7. May inform Alberta Health Services (AHS) representative of the continued non-compliance and further action required if applicable.
8. May inform the Authorizer's/Specialty Assessor's professional association if non-compliance is within the scope of the professional association's jurisdiction. (Refer to Policy G-04).

9. May temporarily suspend the Authorizer/Specialty Assessor until required corrective action is taken.

AADL Director:

Approves reinstatement of the Authorizer/Specialty Assessor when corrective action is taken and compliance is satisfactory.

In the event corrective action has not been taken, the Director, in their sole discretion, may terminate the Authorizer's status.

Authorizers/Specialty Assessors/Supervisors/Alberta Health Services:

Provide AADL with an accurate account of the situation in question.

Cooperate with AADL to address non-compliance.

Attend meeting(s) to address the non-compliance and determine further possible remedies.

Comply with the required corrective action to address the non-compliance.

Immediate Suspension:

AADL:

1. Determines in its sole discretion that significant non-compliance has occurred.
2. Contacts the Authorizer/Specialty Assessor to obtain an explanation, and confirm that non-compliance has occurred.
3. Suspends the Authorizer/Specialty Assessor immediately, either temporarily or permanently.
4. Notifies the Authorizer/Specialty Assessor, Supervisor and AHS representative of the suspension and the rationale in writing.
5. May inform the Authorizer's/Specialty Assessor's professional association if non-compliance is within the scope of the professional association's jurisdiction.
6. Initiates a follow-up investigation.
7. Advises Authorizer/Specialty Assessor, Supervisor and AHS representative of results of the investigation and required corrective action.

AADL Director:

1. Decides, in Director's sole discretion, whether temporary or permanent suspension is required.
2. May approve, in Director's sole discretion, reinstatement of the Authorizer's/Specialty Assessor's status when corrective action is taken.

Authorizers/Specialty Assessor/Supervisors/Alberta Health Services:

1. Provide AADL with an accurate account of the situation in question.
2. Cooperate with AADL to address non-compliance.
3. Attend a meeting to address the non-compliance and determine further possible actions, if applicable.
4. Comply with the required corrective action to address the non-compliance.