ALBERTA HEALTH

AADL approved product list: medical surgical supplies

Effective June 21, 2021



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Briefs, Diapers, and Liners

AADL provides funding for clients with moderate to severe incontinence requiring the use of medical grade diapers at a minimum of three products per 24 hour period (minimal of 180 products per two months). Refer to the AADL Incontinence Product List. Incontinence briefs/diapers/liners must: Meet minimal absorbency criteria · Have re-usable fasteners where applicable Consist of soft woven material that promotes skin integrity · Have a wetness indicator on the package to identify absorption levels. AADL vendors: Must provide a diaper/brief that has a minimum absorbency of 600 mls (exception is the M215 diaper). • Must provide a liner that meets minimal absorbency criteria as per description under catalogue number. Must provide products approved by AADL only; refer to AADL incontinence product list. Offer clients a choice of products that meets AADL generic description and product standards at or below AADL's price. · Provide a maximum of 2 months' supply at a time May not submit claims for over quantities or frequencies listed. Pricing: · Based on a tab style diaper however, the client and authorizer has the choice of a button, Velcro or pull-up garment provided the product meets AADL's standards. Prices reflect the maximum contribution by the Alberta Aids to Daily Living (AADL) program and are subject to cost share. Quantities: • Quantity and frequency limits are maximums and not to be considered automatically. Quantity must be based on assessed needs; authorizers must adhere to quantity and frequency maximums. • Clients with bowel incontinence and require diapers may be eligible for up to 200 diapers/liners every 2 months. • Only one diapers size per client is permitted (exception is the M215 and M205 children's diapers). Authorization Notes: Nurses Specialized in Wound Ostomy and Continence (NSWOCC) and Nurse Continence Advisor's (NCA) may submit requests for quantities over the listed maximums, by calling Alberta Blue Cross for prior approval. • NSWOCC / NCA authorizers may authorize combined quantities of Briefs, diapers and liners and Catheter supplies, under the 'Briefs, Diapers, Liners and Catheters' authorization stream. Authorizers without these designations may request combined quantities through the Quantity and Frequency Review process.

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Briefs/Diapers

Minimal absorbency capacity of 600 mls for all diapers with the exception of the M215 children's diaper which has a minimal absorbency capacity of 350 mls.

Authorization Type: Briefs, Diapers, Liners

Group:	Disposable Diapers, Liners	Shared Qua	antity Frequency Limit: 400 / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M200	Disposable Adult Briefs/Diapers – Small or Youth	Fits hips/waist 20" to 31"	1.02
M203	Disposable Adult Briefs/Diapers – Medium	Fits hips/waist 32" to 44"	1.18
M205	Disposable Child Briefs/Diapers – 600 mL	Includes all pediatric sizes	1.30
M207	Disposable Adult Briefs/Diapers: Large to XXLarge	Fits hips/waist 45" to 65"	1.40
M214	Disposable Adult Briefs/Diapers – Bariatric	Fits hips/waist 65" and up (document on clients file	3.50
M215	Disposable Child Briefs/Diapers – 350 mL	Sizes 4 and larger Size 3T – 4T included	0.75

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Liners

Authorization Type: Briefs, Diapers, Liners

Group: Disposable Diapers, Liners		Disposable Diapers, Liners	Shared Quantity Frequency Limi	t: 400 / 2 months
	Catalog No	Product description	Additional Details	Price Maximum
	M242	Disposable Incontinence Liners	An alternative product to a full brief or diaper; not to be used inside a brief or diaper. Absorbs a minimal 400 mL at the target area. With self-adhesive plastic back.	0.68
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Catheter Supplies

AADL vendors:

- Offer clients a choice of products that meets AADL generic description and product standards at or below AADL's price.
- Provide maximum 2 months' supply at a time and may not submit claims for over quantity.

Quantities:

- Based on client's basic need, not quantity maximum.
- Clients authorized for M328 catheters MUST use a minimum of one catheter per day to qualify for AADL funding.
- Catheters may not be combined, with the exception of intermittent catheters and condom catheters combined total cannot exceed 70 every 2 months.
 - · Clients authorized for Foley catheters must use a minimum of one per month to qualify.
 - · Quantities of catheter secures, trays and bags must match corresponding catheter quantities.
 - Example: Number of trays authorized must match number of indwelling catheters authorized per 2 month period up to maximum limit.
 - When a client chooses an upgraded product, the product must meet the following criteria:
 - meet the basic description under "Additional Details".
 - the product has extra features beyond those listed under "Additional Details".
 - · Note: Clients are responsible for all costs resulting from an upgraded product choice

Cost:

• Prices reflect the maximum contribution by the Alberta Aids to Daily Living (AADL) program and are subject to cost share.

Note: Nurses Specialized in Wound Ostomy and Continence (NSWOCC) and Nurse Continence Advisor's (NCA) may submit requests for additional supplies and above quantity and frequency limitations, pending clinical rationale, by calling Alberta Blue Cross for prior approval

Authorization Type: Catheter Supplies

Group:	External / Intermittent Catheters	Shared Quantity Frequency Li	mit: 70 / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M301	External Catheter – Latex, non-latex	Has internal adhesive. Includes both latex and non-latex products.	2.61
M328	Intermittent Catheter – Plastic	Clean intermittent catheterization. Provided with cleaning instructions.	1.75

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Authorization Type: Catheter Supplies

Group:	External / Intermittent Catheters		Shared Quantity Frequency Limit: 70 / 2 month
Catalog No	Product description	Additional Details	Price Maximun
M381	Intermittent Catheter – Plastic/ Coudé Tip	Indicated for difficulty inserting with regular Document on the clients file.	tip 4.09
Group:	Catheter Secures Strap		Shared Quantity Frequency Limit: 1 / 2 months
Catalog No	Product description	Additional Details	Price Maximun
M324	Catheter Secures Strap		15.00
Group:	Foley Catheters		Shared Quantity Frequency Limit: 4 / 2 months
Catalog No	Product description	Additional Details	Price Maximun
M341	Foley Catheter – Latex or Latex with Silicone Coating	Indwelling catheter	10.92
M345	Foley Catheter – 100% Silicone: may also include latex-free catheters	May also include latex-free catheters Indicated for: Unresolved bypassing, or Frequent blockages (more than once a weel Diagnosed latex allergy. Document rationale on client's file.	12.78 (), or
M347	Foley Catheter – 100% Silicone/Coudé Tip	Indicated for difficulty inserting with regular t Document rationale on the clients file	p. 25.00
Group:	Catheter Trays		Shared Quantity Frequency Limit: 4 / 2 months
•		Additional Dataila	
•		Additional Details	Price Maximun
M348	Foley Catheter Tray without catheter	For inserting indwelling catheter Includes pre-filled syringe Quantities ordered must match quantity of fo	5.90 ley catheters ordered.

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Authorization Type: Catheter Supplies

-	Reusable Drainage Bags		Shared Quantity Frequen	cy Limit: 8 / 2 months
Catalog No	Product description	Additional Details		Price Maximum
M352	Bedside Urinary Drainage	Includes drainage tube, adapter, bottom	drain clamp and hanger.	10.80
Group:	Disposable Leg Bags		Shared Quantity Frequency	y Limit: 20 / 2 months
Catalog No	Product description	Additional Details	0	Price Maximum
M354	Urinary Leg Bag – Vinyl	Includes extension tubing and leg straps Comes in a variety of sizes. May have anti-reflux or flip-flow valves. Can be washed and reused several time		13.36
Group:	Urinary Irrigation Kits		Shared Quantity Frequen	cy Limit: 8 / 2 months
Catalog No	Product description	Additional Details		Price Maximum
M370	Urinary Irrigation Tray	Used with indwelling catheters		7.59

Injection Supplies

Group:	Disposable Syringes, Needles		Shared Quantity Frequency Limi	it: 500 / 2 months
Catalog No	Product description	Additional Details		Price Maximum
M403	Syringe with Needle Attached: ½ cc or 1 cc	For intramuscular or subcutaneous inje	ections	0.50
Group:	3Cc Syringe		Shared Quantity Frequency Limi	it: 500 / 2 months
Catalog No	Product description	Additional Details		Price Maximum
M415	Syringe with Needle Attached: 3 cc	For intramuscular or subcutaneous inje	ections	0.67

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Ostomy

- Offer clients a choice of products that meets AADL generic description and product standards at or below AADL's price.
- · Only provide 2 months' supply at a time and may not submit claims for over quantity.

Quantities:

- Are determined on client's basic need, not quantity maximum.
- Different types of pouches may be authorized for same client total quantity must not exceed maximum limit of single type.
- · Quantities of pouches cannot be added together to increase quantity limit.
- · Quantities of paste and strips cannot be added together to increase quantity limit.
- If a client requires a combination of paste and strips, the client may have proportional quantities.
 Pricing:
 - $\, \circ \,$ Pricing for all pouches is based on products with filters.
 - $\, \circ \,$ Open end pouch prices are based on self-closure products.
 - Prices reflect the maximum contribution by the Alberta Aids to Daily Living (AADL) program and are subject to cost share.

Authorization Notes:

• Maximum quantities are set based on a client with one ostomy/fistula site. Please contact Alberta Blue Cross to approve quantities over the listed maximums, if client has more than one ostomy/fistula sites.

• Nurses Specialized in Wound Ostomy and Continence (NSWOCC) and Nurse Continence Advisor's (NCA) may authorize quantities higher than listed maximums; please call Alberta Blue Cross Provider Support to approve the exceptional quantity.

Manufacturers: Hollister, Convatec, Coloplast, Salts, Safe and Simple, Marlen, B.Braun Medical,CUI/Fulcionel

Ostomy Pouches

Authorization Type: Ostomy Supplies

Group:	Closed End Ostomy Pouches	Shared Quantity Frequency Limit: 210 per ostomy or fistula site / 2 months	
Catalog No	Product description	Additional Details	Price Maximum
M001	One Piece Colostomy/Ileostomy Pouch	Closed end with seal	5.63
M003	Two-Piece Colostomy/Ileostomy Pouch	Closed end	3.14
M037	One Piece closed end pouch	Closed end with seal With convexity	9.24

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Authorization Type: Ostomy Supplies

Group:	Open End Ostomy Pouches	Shared Quantity Frequency Limit: 30 per ostomy or f	istula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M005	One-Piece Colostomy/Ileostomy Pouch	Drainable Self-closure	8.83
M006	Two-Piece Colostomy/Ileostomy Pouch	Drainable Self-closure	6.91
M008	Two-Piece Urostomy Pouch	Regular Wear	6.47
M035	Pediatric Colostomy/ Urostomy/ Ileostomy Two Piece Pouch	Drainable Clipless NSWOCC may order for non-pedia <mark>tr</mark> ic clients	4.90
M039	One Piece ileostomy Pouch high output (convex)	For output not managed with use of regular pouch	14.00
M170	One Piece Colostomy/Ileostomy Pouch	Drainable Extended wear	9.45
M171	One Piece Colostomy/Ileostomy Pouch	Drainable Extended wear with convexity	16.96
Group:	Specialized Pouches	Shared Quantity Frequency Limit: 30 per ostomy or f	istula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M009	One-Piece Urostomy Pouch	Regular Wear	13.42
M011	One Piece Colostomy/Ileostomy Pouch	Drainable Regular wear with convexity	15.26
M012	One Piece Urostomy Pouch	Regular wear with convexity	16.95
M013	One Piece Urostomy Pouch	Extended wear without convexity	14.13
M014	One Piece Urostomy Pouch	Extended wear with convexity	14.72

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Authorization Type: Ostomy Supplies

Group:	High Output Pouches	Shared Quantity Frequency Limit: 30 per o	stomy or fistula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M024	High Output Pouch (Flat)	For output not managed with use of regular pouch	14.00
Group:	Pediatric Ostomy Appliances	Shared Quantity Frequency Limit: 50 per o	-
Catalog No	Product description	Additional Details	Price Maximum
M172	Pediatric One piece drainable Pouch	Colostomy/ Urostomy/ Ileostomy Pouch NSWOCC may order for non-pediatric clients	8.20
Group:	Pediatric Closed End Ostomy Pouches	Shared Quantity Frequency Limit: 300 per o	stomy or fistula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M174	Pediatric One-Piece Colostomy Pouch	Closed end with seal NSWOCC may order for non-pediatric clients.	4.60
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Inserts, Faceplates, Skin Barrier Wafers/Flanges

Authorization Type: Ostomy Supplies

Group:	Convex Inserts	Shared Quantity Frequency Limit: 30 per ostomy	or fistula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M018	Convex Inserts	Improves seal around a problem stoma Increases wafer wearing time Authorization by NSWOCC required	4.80
Group:	Stoma Collars	Shared Quantity Frequency Limit: 20 per ostomy	or fistula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M036	Stoma Collar	Improves wear time to minimum 3-5 days Authorization by NSWOCC required	6.89
Group:	Flange Extenders	Shared Quantity Frequency Limit: 40 per ostomy	or fistula site / 2 months
Catalog No	Product description	Additional Details	Price Maximum
M048	Flange Extenders	Authorization by NSWOCC required Increases wear time Protect skin against shearing	1.45
0			
Group:	Skin Barrier Wafers	Shared Quantity Frequency Limit: 30 per ostomy	
Catalog No	Product description	Additional Details	Price Maximum
M073	Skin Barrier Wafer	Regular Wear with Flange	9.58
M078	Skin Barrier Wafer: Convexity	Regular Wear with Flange	13.40
M079	Skin Barrier Wafer – Extended wear	With or without flange	11.32
M180	Skin Barrier Wafer	Extended wear with Convexity	18.55

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Authorization Type: Ostomy Supplies

Group:	Pediatric Skin Barrier Wafers	Shared Quantity Frequency Limit	Shared Quantity Frequency Limit: 50 per ostomy or fistula site / 2 mor		
Catalog No	Product description	Additional Details		Price Maximum	
M175	Pediatric Skin Barrier Wafer – extended wear	For pediatric clients NSWOCC may order for non-pediatric clients	X	11.30	
M176	Pediatric Skin Barrier Wafer – regular wear	For pediatric clients NSWOCC may order for non-pediatric clients		9.60	

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Skin Barrier Accessories

Authorization Type: Ostomy Supplies

Group:	Ostomy Powder		Shared Quantity Frequency Limit: 1 per ostomy or fist	tula site / 4 months
Catalog No	Product description	Additional Details		Price Maximum
M038	Ostomy Powder	Authorization by NS For open peri-stom wear time	SWOCC required al skin and to absorb moisture and ensure adequate	15.61
Group:	Barrier-Skin Without Flange		Shared Quantity Frequency Limit: 20 per ostomy or fis	tula site / 2 months
•	Product description	Additional Details		Price Maximum
M069	Skin Barrier Seals/Rings/Sheets	Protects area arou Includes Eakin Sea Without flange	nd stoma ls, Karaya washers, rings and wafers	7.76
0				
Group:	Skin Barrier Paste/Strips		Shared Quantity Frequency Limit: 1 per ostomy or fish	tula site / 2 months
Catalog No	Product description	Additional Details		Price Maximum
M080	Skin Barrier Paste	57 gram tube or lar	ger	23.68
M181	Ostomy Barrier Strips	Box of 10 strips		36.97
Group:	Tape Rolls (Ostomy)		Shared Quantity Frequency Limit: 5 per ostomy or fist	tula site / 2 months
Catalog No	Product description	Additional Details		Price Maximum
M121	Ostomy Tape – 1 or 2"	Price based on 2" t	аре	5.89

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Ostomy Odor Control

Authorization Type: Ostomy Supplies

Group:	Odor Control Products		Shared Quantity Frequency Limit:	1 per ostomy or fistul	la site / 4 months
Catalog No	Product description	Additional Details			Price Maximum
M049	Appliance Odor Control – liquid	Based on 8 oz. bot Does not include ro	tle oom deodorants		39.93
		Does not include ro	oom deodorants		
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Ostomy Supplies For Irrigation/Diversion

Authorization Type: Ostomy Supplies

Irrigation Kits	rigation Kits Shared Quantity Frequency Limit: 1 per ostomy or fistula site / 2 month			
Product description	Additional Details	Price Maximum		
Ostomy Irrigation Kits	Includes reusable bag, irrigator tip (cone or catheter), and tubing.	62.82		
Irrigation Sleeves	Shared Quantity Frequency Limit: 30 per ostomy or	fistula site / 2 months		
Product description	Additional Details	Price Maximum		
Reusable Ostomy Irrigation Sleeves	Used in conjunction with M030 irrigation kit	13.00		
1				
Continent Diversion Dressings	Shared Quantity Frequency Limit: 300 per ostomy or	fistula site / 2 months		
Product description	Additional Details	Price Maximum		
Continent Diversion Dressings – adhesive pad	Adhesive dressings with a built-in absorbent pad Approximately 5 cm x 7.5 cm (2" x 3") For client with a functioning stoma (document on clients file). Alternative to pouch	1.09		
	Product description Ostomy Irrigation Kits Irrigation Sleeves Product description Reusable Ostomy Irrigation Sleeves Continent Diversion Dressings Product description Continent Diversion Dressings –	Product description Additional Details Ostomy Irrigation Kits Includes reusable bag, irrigator tip (cone or catheter), and tubing. Irrigation Sleeves Shared Quantity Frequency Limit: 30 per ostomy or Product description Additional Details Reusable Ostomy Irrigation Sleeves Used in conjunction with M030 irrigation kit Continent Diversion Dressings Shared Quantity Frequency Limit: 300 per ostomy or Product description Additional Details Continent Diversion Dressings Shared Quantity Frequency Limit: 300 per ostomy or Product description Additional Details Continent Diversion Dressings – adhesive pad Adhesive dressings with a built-in absorbent pad Approximately 5 cm x 7.5 cm (2" x 3") For client with a functioning stoma (document on clients file).		

Ostomy Hernia Belts

Authorization Type: Ostomy Supplies

Group:	Periostomal Belts	Shared Quantity Frequency Limit: 2 per ostomy or fistu	Shared Quantity Frequency Limit: 2 per ostomy or fistula site / 12 months	
Catalog No	Product description	Additional Details	Price Maximum	
M041	Ostomy Hernia Belt: Custom	For difficult to fit clients when ready-made option does not meet the client's basic need Prescription required if not an NSWOCC For client with abdominal girth greater than 52"(document on clients file.	277.95	
M115	Ostomy Hernia Belt: Customized ready- made	For client with inoperable peristomal or incisional hernias. (Document on clients file). Prescription required if not an NSWOCCFits clients with abdominal girth less than 52"	189.10	
M117	Ostomy Belt – extended wear	Extends pouch wear time to a minimum 3-5 days prescription required if not an NSWOCC	16.13	