

Alberta Health

Alberta Aids to Daily Living Compression Stockings and Lymphedema Sleeves – Ready Made Benefits

Policy & Procedures Manual

May 6, 2015



Revision History

Description	Date
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Superseded

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Policy N – 01

Authorizer Qualifications

Policy Statement

OT, PT, or RN.

Please note: If the authorizer is doing the actual fitting, he or she must be a certified fitter through completion of a manufacturer's fitter course that is recognized by AADL and renew this certificate every five years. A copy of the certificate must be submitted to AADL's Medical/Surgical Program Manager.

Policy N – 02

Prescription/Lower Leg Assessment Tool

Policy Statement

1. All authorizations for Chronic Venous Insufficiency Class 2 or Class 3 must have a copy of the lower leg assessment form attached. Please note if the client's ankle brachial index is not within therapeutic range, only a physician with clinical expertise in this area and/or a vascular surgeon can approve compression. Please attach documentation that approval has been obtained to apply compression stockings.
2. Incomplete authorization forms and/or lower leg assessments will not be considered and will be sent back to the authorizer.
3. All authorizations for lymphedema garments require a prescription, and the lower leg assessment may not be applicable based on the origin of the lymph edema.
4. If thigh-high stockings or pantyhose are requested there must be clinical rationale of CVI 2 above the knee or into the groin clearly indicated on the lower leg assessment form.
5. If a client wants thigh-high stockings or pantyhose but only qualifies for below-knee stockings, the client may pay the up-charge for the longer length. Please indicate this on the authorization form.
6. A client cannot have two different styles and/or compressions of stockings.
7. Vendors do NOT require a copy of the lower leg assessment form.

Policy N – 03

Eligibility Criteria

Policy Statement

AADL assists with the cost of pressure gradient stockings for individuals who have documented **Chronic Venous Insufficiency (CVI) Class 2 or Class 3**, or documented **Chronic Lymphedema**.

AADL has adopted the following classification of Chronic Venous Insufficiency (CVI) from: *“Reporting Standards in Venous Disease”. Prepared by the Subcommittee on Reporting Standards in Venous Disease, Ad Hoc Committee on Reporting Standards, Society of Vascular Surgery/North American Chapter, International Society of Cardiovascular Surgery.*

Chronic Venous Insufficiency (CVI) Clinical Signs:

1. Class 1 – Mild CVI, with signs and symptoms including:
 - a) **mild to moderate edema, mild discomfort (sensation of leg heaviness or painful varicosity)**
 - b) **local or generalized dilatation of subcutaneous veins (telangiectasis or reticular veins up to 4 mm which are not palpable)**

In this clinical class, CVI is usually limited to involvement of the superficial veins only.

AADL does NOT provide compression stockings for clients presenting with CVI 1.

2. Class 2 – Moderate CVI, including:
 - a) **hyperpigmentation of the skin in the gaiter area**
 - b) **moderate brawny edema**
 - c) **subcutaneous fibrosis which may be either limited in extent or involve the entire malleolar and pretibial area but without ulceration**

There is usually prominent local or regional dilatation of the subcutaneous veins.

3. Class 3 – Severe CVI, including:
 - a) **chronic distal leg pain associated with ulcerative or pre-ulcerative skin changes**
 - b) **eczematoid changes and/or severe edema**

This category is usually associated with extensive involvement of the deep venous system with widespread loss of venous valvular function and/or chronic deep vein obstruction.

Policy N – 04

Eligibility Restrictions

Policy Statement

AADL does NOT provide compression stockings or lymphedema garments for:

- use in acute care facilities
- use in sub-acute facilities
- short-term interventions
- pre- or post-operative use
- for application or intervention in a physician's office
- for active treatment (i.e. edema reduction and/or wound intervention)
- clients requiring pressures less than 25 mm Hg at the ankle

Policy N – 05

Contraindications for Eligibility for Compression Stockings

Policy Statement

AADL does **NOT** provide compression stockings for:

- CVI Class 1
- simple varices
- pregnancy
- feelings of heaviness in the legs
- DVTs (deep vein thrombosis)
- blood clots
- cellulitis
- thrombophlebitis
- phlebitis
- post-phlebitis syndromes
- prevention (i.e. family history)
- edema reduction
- edema management
- systemic edema
- pre or post-surgical
- arterial insufficiency
- hypotension
- short-term intervention
- nighttime use
- osteoarthritis

Policy N – 06

Contraindications for Compression Garments

Policy Statement

- hypodermatitis in acute phase (sedation of pain and softening of infiltrates are only obtained with stronger pressures than those provided by compression hose)
- malignant tumor of the leg
- acute microbial infection of any part of the leg, abscess, furuncle, erysipelas
- scleroderma
- arterial insufficiency
- neuropathy
- acute cellulitis

Policy N – 07

Authorizer Responsibilities

Procedure

1. Authorizers ensure the client:
 - a) meets AADL's eligibility criteria as outlined in the Client Eligibility Criteria section of the general Policies & Procedures;
 - b) meets the specific eligibility criteria outlined and authorized quantities based on the clinical assessment of the client's needs;
 - c) signs the Client Declaration Form;
 - d) is aware that they have a choice of three (3) vendors and that a full list of all AADL approved vendors is available;
 - e) is provided with follow-up assessments.
2. Assessments:
 - a) Authorizers may only sign authorizations by an assessor that is an RN, PT, or OT and who is trained in lower leg assessment that includes an ankle brachial index.
 - b) Authorizers signing for assessors are accountable to ensure that the lower leg assessment meets AADL's eligibility criteria for completing and submitting the AADL authorization form.
 - c) Clients are authorized based on the lower leg assessment that verifies that the client has signs and symptoms of CVI 2 or CVI 3 and that the ankle brachial index is within therapeutic range (0.8 to 1.2).
 - d) Edema must be investigated and reduced prior to authorization.
 - e) Clinicians can only authorize clients who have an ankle brachial index of 0.8 to 1.2. Only vascular surgeons or physicians specializing in this area can determine if a client is appropriate to wear compression if the ankle brachial index is lower than 0.8 (script must be attached to the authorization form).
 - f) Clients with a diagnosis of diabetes or those that have an ankle brachial index above 1.2 must have a toe pressure completed to ensure that it is safe to compress the limb, unless the authorizer has documentation from the client's physician that he or she is taking responsibility for applying compression without obtaining a toe pressure.

3. Authorizations:

- a) Authorizations are for a period of two years; however, it is the authorizer's clinical discretion to authorize for a shorter period of time (i.e. one year).
- b) Best practice recommends that clients wear a 30-40 mm Hg of pressure, and that below-knee stockings are the most effective and have the highest rate of client compliance.
- c) Wounds must be healed prior to authorization.
- d) Authorizers may clinically provide directions as to the type of stockings that are required for the client on the authorization form (for example, requires open-toe stockings).
- e) Authorizations for custom garments must have clear clinical rationale on the authorization form.
- f) It is recommended that clients receive one compression garment initially to ensure compliance and/or that length or degree of support is clinically appropriate.

4. Authorizer's Accountability:

It is the authorizer's responsibility to ensure prior to completing the authorization form that the client meets all of AADL's eligibility criteria.

5. Authorizer Role in the Client Fitting by the Vendor:

- a) Educate your clients that vendor fittings must occur early in the morning when the edema is reduced.
- b) If the authorizer is doing the actual fitting, then the authorizer must be a certified fitter with one of AADL's recognized manufacturer training courses.

6. If a client cannot put on a heavy graduated pressure stocking, two lesser pressure stockings (e.g. two 15 mm), one worn on top of the other, may be manageable. However, AADL does not provide or fund these two lesser weight stockings.

7. NOTE: If the ankle circumference is less than 18 cm, ready-made stockings should not be authorized, as they will not fit properly.

Policy N – 08

Quantity Limits

Policy Statement

1. Initial clients are eligible for three pairs every twelve months effective August 1, 2006.
2. Existing clients will be eligible for three pairs as per their re-assessment date provided they continue to meet AADL's eligibility criteria for compression stockings.
3. Please note that eligibility renewal for subsequent pairs is based on when the vendor claimed for the compression garment, not based on the date of the authorization.

Policy N – 09

Insurance Coverage

Policy Statement

The AADL Program does not replace lost, stolen, or broken/damaged benefits. It is recommended that clients be advised that they are financially responsible to replace compression stockings with damage related to tears, rips and/or runs that can occur from misuse, such as not wearing stocking gloves.

Policy N – 10

AADL Pricing

Policy Statement

The vendor **MUST OFFER** the client several brands of compression garments that:

- meet the generic description;
- comply with AADL's product standards;
- are at or below AADL's price.

For detailed information, vendors please refer to your individual AADL contract.

Policy N – 11

Vendor Responsibilities: Summary for Authorizers

Policy Statement

Authorizers please be aware that the following are vendor requirements as per their individual AADL contract for compression garments:

1. A private wheelchair accessible fitting room.
2. Vendor's are to employ at least one certified fitter that renews their education at least once every five years training through a manufacturer's fitting course which is recognized by AADL.
3. Vendors are to have at least two different manufacturer's brands. Vendors may order in pantyhose, chap style or garments of compression greater than 40 mmHg on an as needed basis.
4. Vendors are to perform fittings between 8:00 a.m. to 11:00 a.m. only when the edema is reduced. Exceptions may apply, for example the client wrapped.
5. Vendors document the client's fitting and garment provided as per AADL's fitters form.
6. Vendors are to follow the authorizer's directions on the authorization form, for example open toe stockings, and if the vendor is not able to provide this type of garment as per the authorizer's clinical instructions, the authorizer is to be contacted for further directions. Vendors cannot substitute without the authorizer's approval.
7. If there is evidence of edema or any other concerns during the fitting, the vendor is NOT to proceed and will contact the authorizer immediately.
8. Vendors are to provide stockings based on the client's measurements and are not to provide larger sizes. If the client wants a "bigger" size due to tightness, the vendor must not provide the stockings and notify the authorizer.
9. Clients are to demonstrate to the vendor that they can don and doff the garments independently. The vendor is to ensure that the client can put the stockings on independently (or has a helper) especially if there is:
 - a) awkwardness due to old age;
 - b) amputation of fingers or hand;
 - c) malformation of the fingers/hand;
 - d) paralysis;

e) rheumatic disease.

If there are concerns, regarding the client's ability to don & doff the garments the authorizer is to be contacted.

10. It is recommended that only one garment or pair of compression is provided initially and to conduct a follow-up three to four weeks after initial fitting

Superseded