
Alberta Health

Alberta Aids to Daily Living Custom Compression Garments Benefits Policy & Procedures Manual

July 1, 2020



Classification: Public

Revision History

| Description | Date |
|--|-------------------|
| Incorporated T-05 Insurance coverage into T-04 Removal of references to postage paid throughout T-02 Certification for fitter updated every three years T- 03 AADL will not accept lower leg assessments more than six months old | July 1, 2020 |
| Updated links | April 1, 2019 |
| Updated T-01 Eligibility Criteria – removed statement regarding postage | July 1, 2018 |
| Updated T-07 Vendor and Trained Provider Qualifications | July 1, 2017 |
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Policy T – 01

Eligibility Criteria – Custom Compression Garments

Policy Statement

AADL assists with the cost of custom compression stockings for individuals who meet Clinical Etiology Anatomy Pathophysiology (CEAP) criteria C4 or C5, or who have Chronic Lymphedema (as assessed by a qualified authorizer). Clients with C6 (active ulceration) do not meet the criteria.

Client's eligibility for compression benefits is determined by an AADL Authorizer prior to authorization.

Clients must meet general eligibility requirements found in the AADL General Policies and Procedures on-line at: <https://open.alberta.ca/publications/aadl-program-manual-gn>

For detailed information on Chronic Venous Insufficiency, please refer to Policy N-03, 04, 05 and 06 in Manual N- Compression Stockings and Lymphedema Sleeves online at: <https://open.alberta.ca/publications/aadl-program-manual-n>.

Clients must access all third party benefit plans prior to applying for the funding of compression garments by the Alberta Aids to Daily Living (AADL) program.

Note: Clients presenting with chronic lymphedema must be assessed by a qualified Certified Lymphedema Therapist (CLT) or Specialty Assessor (SA). If a CLT/SA is not accessible to the client, clients will be required to provide a prescription from a physician or nurse practitioner.

Procedure

Authorizers:

1. Confirm client meets AADL eligibility requirements.
2. Inform clients of their eligibility status.

Clients:

1. Confirm eligibility with Authorizer.
2. Sign client declaration form.

Vendors:

1. Check clients' previous benefit consumption:
 - a) Refer to E-business for client's benefit consumption history.
 - b) Refer to Policy T-04 Quantity and Frequency Limits for clients who are over the quantity/frequency limit.

AADL:

1. Receives authorizations and ensures clients meet eligibility requirements.
2. Confirms general eligibility through Client Services.
3. Confirms benefit specific eligibility through AADL benefit clerks.
4. Returns authorization forms to Authorizers when eligibility cannot be established due to unclear or incomplete information.
5. Responds to telephone or email requests for information on compression benefits eligibility.

Policy T-02

Authorizer Qualifications

Policy Statement

Existing AADL Authorizers who are PT, OT or RN's may apply to have compression garments added to their product range.

Authorizers must complete the Authorizer Application for Product Range: Compression Garments and submit to AADL.

Assessors and authorizers doing the actual fitting must:

- be a certified fitter by completing a manufacturer fitter course that is recognized by AADL; and
- renew the certification every three years; and
- provide certification to the AADL program manager.

Procedure

AADL Authorizer applying for secondary product range:

1. Complete compression garment product range request form under Authorizer Application forms at: <https://www.alberta.ca/aadl-authorizer-information-and-training.aspx>
2. Complete compression on-line module under Videos at: <https://www.alberta.ca/aadl-authorizer-information-and-training.aspx>
3. Forward completed application with supporting documentation to AADL.

AADL:

1. Reviews application.
2. Adds product range to eligible authorizers.
3. Monitors authorizer activities and determine compliance with policies and procedures.

Policy T – 03

Assessment and Authorization

Policy Statement

The clinical assessment is the first step in the process to obtain compression garments.

The assessment determines eligibility, the benefit required to meet basic needs and the appropriate quantities.

Assessments must be completed and documented by a healthcare professional with the necessary competence and regulatory license to practice in Alberta.

All authorizations and/or change forms for custom compression garments must have:

- clinical rationale clearly stated for the client requiring custom compression garments. If the garments are for the legs, leg measurements and shape of leg must be included.

Authorizations for Chronic Venous Insufficiency must have a copy of the AADL lower leg assessment form attached.

- Ankle Brachial Pressure Index (ABPI)s must be within the 0.8 to 1.3 range.
- TBPIs must be 0.7 mmHg or greater;
- PPGs must be 50 mmHg or greater and are only accepted if the authorizer has done an advanced assessment (e.g., visual assessment, client history, troubleshooting, consulting with another assessor if warranted).
- **AADL will not accept lower leg assessments that are older than six months.**

Note: If the client's ranges are not within the values stated above, a prescription from a vascular surgeon, physician or nurse practitioner with expertise in lower leg assessment must accompany the Lower Leg Assessment form.

Note: Clients with diabetes require a TBPI or PPG when the ABPI is below 1.0 or above 1.3.

A prescription is required:

- from a vascular surgeon for clients who have had recent surgery, including bypass surgery.
- for custom lymphedema garments unless it is authorized by a certified lymphedema therapist or an authorizer with a designation of S.A. (specialty authorizer).

Completion of the Lower Leg Assessment form may not be required based on the origin of the lymphedema.

Prescriptions are not required for clients receiving active treatment from Alberta Health Services cancer rehabilitation oncology departments.

Authorizations for thigh-high stockings must include on the Lower Leg Assessment form:

- indication of hemosiderin staining and/ropey torturous veins above the knee.
- indication of hemosiderin staining and/ropey torturous veins into the groin if pantyhose are being requested.

Clients with a history of Deep Vein Thrombosis at or below the knee or who have tortuous veins in the area where a knee high would lie, may be eligible for thigh high stockings if knee high stockings present a clinical risk or are deemed ineffective. Clinical rationale must accompany the request.

If a client wants thigh-high or pantyhose but only qualifies for below knee, the client may pay the up-charge to the longer length. This must be indicated on the authorization form.

- The authorizer is required to advise the client that they will be responsible to pay the upcharge for the thigh high stockings or pantyhose.

If a client requires two different styles and/or compression of stockings, the authorizer is required to provide rationale on the Lower Leg Assessment form.

- The total quantity of combined styles cannot exceed the maximum quantity of one type of stocking.

Incomplete authorization forms and/or lower leg assessments will be sent back to the authorizer unprocessed.

Vendors do not require a copy of the lower leg assessment form.

Procedure

Clients:

1. Fully participate in the assessment.
2. Sign declaration form.

Authorizers:

1. Assess client or review assessment if authorizer is not the assessor.
2. Document assessment details and clinical rationale to support the provision of benefits.
3. Complete any specific AADL assessment forms as required. These can be found on the AADL website under Medical-surgical forms and assessment tools at <https://www.alberta.ca/aadl-forms-and-documents.aspx>.
4. Determine benefit and quantity needed based on the client's final clinical assessment results.
5. Provide any additional documentation completed for submission with authorization form. (e.g., assessment forms, medical letters and prescriptions).

AADL:

1. Provides competency requirements for assessors and authorizers.
2. Provides direction to authorizers regarding eligibility criteria as needed.

Superseded

Policy T – 04

Quantity and Frequency Limits for Custom Compression Garments

Policy Statement

The quantity and frequency of custom compression garments is a maximum of two garments per affected limb per 12-month period.

The AADL Program does not replace lost, stolen, or broken/damaged benefits. Clients should purchase homeowners'/tenants' insurance to cover the cost of replacements in these instances.

CLT's and SA's ONLY may authorize for over the maximum quantity pending the provision of adequate clinical rationale to support the quantity increase without submitting a QFR.

All other AADL Authorizers must submit a Quantity and Frequency Request (QFR) for benefit requests over the limit. See the QFR policy and process in the general AADL Policy and Procedure Manual at: <https://open.alberta.ca/publications/aadl-program-manual-gn>.

Procedure

Authorizers:

1. Follow the QFR process as outlined in the general AADL Policy and Procedure Manual at: <https://open.alberta.ca/publications/aadl-program-manual-gn>.

Clients:

1. Pursue alternate funding sources prior to requesting additional benefits from AADL.
2. Follow the QFR process as outlined in the general AADL Policy and Procedure Manual at: <https://open.alberta.ca/publications/aadl-program-manual-gn>.

Policy T – 05

Authorizer Responsibilities

Policy Statement

Authorizers must adhere to the general policies and procedures for authorizing AADL benefits.

In addition authorizers for compression garments must ensure the client:

- meets the specific eligibility criteria outlined and authorized quantities based on the clinical assessment of the client's needs;
- wounds are healed prior to authorization;
- is aware that they may receive reduced quantities if their clinical needs change; when this occurs, vendors must supply the reduced quantity;
- is aware that products authorized are only for the client that was assessed and authorized;
- is aware that quantities authorizers are based on their assessed clinical need;
- is aware that the authorizer may complete a change form changing products or changing quantities based on their re-assessment.

Authorizers:

- must provide clinical details as to the type of custom vascular garments that are required for the client on the authorization form (for example, requires open toe stockings).
- must 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.
- are accountable to ensure that the lower leg assessment meets AADL's eligibility criteria for completing and submitting the AADL authorization form.
- must ensure that clients are authorized based on the lower leg assessment (may not be applicable for clients with lymphedema) that verifies that the client has signs and symptoms of CEAP 4.0, 5.0 or lymphedema and that the ABPI, TBPI or toe pressures is within therapeutic range as per AADL policy.

- must ensure that edema is investigated and reduced prior to authorization.

Clinicians can only authorize clients who have an ankle brachial index of 0.8 to 1.3, Toe brachial index of 0.7 or greater or a toe pressure of 50mmHG or greater. A prescription from a physician or nurse practitioner with clinical expertise in assessment and management of lower extremity complications or a vascular surgeon is required and must include the amount of compression that is safe to apply according to the lower leg assessment. .

Clients with a diagnosis of diabetes or those that have an ankle brachial index below 1.0 or above 1.3 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.

A prescription from a vascular surgeon is required for clients who have had recent surgery, including bypass surgery.

It is recommended that clients receive one compression garment initially to ensure compliance and/or that length or degree of support is clinically appropriate.

Authorizers must ensure that a compression is safe and appropriate for a client and must not order compression stockings until clients wounds are completely healed.

Authorizations

- It is the authorizer's clinical discretion to determine the period of time for an authorization; however authorizations cannot exceed four years (the authorizer must indicate on the 1250 form the length of the authorization period.)
- Authorizations for custom garments must have clear clinical rationale on the authorization form and/or change form.

Policy T – 06

Vendor and Trained Provider Qualifications Policy

Policy Statement

AADL Approved Custom Compression Garments vendors must meet the following criteria:

- Meet AADL’s general vendor criteria as outlined in the General Policy and Procedures Manual
- Adhere to benchmark pricing as outlined in the General Policy and Procedures Manual.
- Employ at least one full- time certified fitter that is located on site.
- Ensure fitters have certification from each manufacturer brand sold by the vendor.
- Ensure certification is updated every three years and that a copy is provided to AADL.

Product

- Provide a minimum of two different manufacturer’s brands

Procedure

1. Document the client’s fitting and garment provided.
2. Follow the authorizer’s directions on the authorization form
3. Inform the client and the authorizer if the vendor cannot provide a garment recommended by the authorizer.
 - Vendors cannot substitute garments without the authorizer’s approval.
4. Provide custom compression garments based on the clients measurements.
 - Vendors cannot provide larger sizes. If the client wants a “bigger” size due to tightness, the vendor must NOT provide the garments and notify the authorizer.
5. Have clients demonstrate to the vendor that they can don and doff the garments independently.
 - If there are concerns regarding the client’s ability to don and doff the garments the authorizer is to be contacted..
6. The vendor will provide one garment or pair of compression garments initially. The vendor must conduct a follow-up three to four weeks after the initial fitting to ensure the product is suitable for the client.

7. Invoice for garments that have been provided to the client NOT for the quantity that has been authorized.
8. 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.

Please be aware that AADL does not pay for brokerage fees incurred by the vendor.

AADL does not pay for “RUSH” deliveries.

Superseded