



# Custom compression garment benefits

Alberta Aids to Daily Living  
Program Manual Section T

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## **Policy T – 01**

### **Custom Compression Garments Benefits Background**

#### **Policy Statement**

Alberta Aids to Daily Living (AADL) provides funding for custom compression garments to eligible clients with specific levels of venous insufficiency and lymphedema. Authorized garments are intended to address client requirements for compression.

Products and pricing in Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments are reviewed annually and are subject to change by AADL at any time.

Custom compression garment authorizations are processed through the Alberta Blue Cross online health portal. AADL-approved manufacturers are listed in Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments. Manufacturers may apply to become an AADL-approved manufacturer at any time. AADL reserves the right to approve or deny the addition of new manufacturers and products to the approved product list based on criteria such as similarity to other approved products, cost and clinician feedback.

# Policy T – 02

## Eligibility Criteria

### Policy Statement

Alberta Aids to Daily Living (AADL) provide funding for custom compression garments for individuals who meet Clinical Etiology Anatomy Pathophysiology (CEAP) criteria C4 or C5, or who have chronic lymphedema (as assessed by a qualified authorizer or as diagnosed by a physician). Clients with C6 (active ulceration) do not meet the criteria.

A client's eligibility for compression benefits is determined by an AADL authorizer prior to authorization.

Clients must meet general eligibility requirements found in AADL Program Manual Section GN – General Policy and Procedures online at: <https://open.alberta.ca/publications/aadl-program-manual-gn>

Chronic venous insufficiency is defined as an advanced form of chronic venous dysfunction caused by increased ambulatory venous hypertension resulting in a series of changes in the subcutaneous tissue and skin. Limb swelling, pigmentation (hemosiderin staining), lipodermatosclerosis, venous eczema (stasis dermatitis) or venous ulceration can develop.<sup>1</sup>

Lymphedema is defined as an abnormal collection of high-protein fluid just beneath the skin due to reduced lymphatic drainage. This swelling occurs most commonly in the arm or leg, but it also may occur in other parts of the body including the breast or trunk, head and neck or genitals.<sup>2</sup>

**TABLE 1: CLINICAL ETIOLOGY ANATOMY PATHOPHYSIOLOGY CLASSIFICATION**

Note: Client does not meet criteria with C1-C3 alone

C0	No visible or palpable signs of venous disease
C1	Telangiectases, reticular veins or malleolar flare. Mild venous dilation
C2	Varicose veins. Dilated, tortuous veins
C3	Edema. Dependent ankle edema worsening by end of the day. May become persistent Note: Client meets criteria if they have all or some of findings in C1-C3 and have findings in C4a, C4b or C5
C4a	Pigmentation (hemosiderin staining) and/or venous eczema(stasis dermatitis)
C4b	Lipodermatosclerosis and/or atrophe blanche
C5	Skin changes as defined above with healed venous ulceration Note: Client with active ulceration do not meet AADL criteria
C6	Skin changes as defined above with active ulceration

Note: Clients presenting with chronic lymphedema should be assessed by a qualified certified lymphedema therapist or specialty assessor. If neither are accessible to the client, clients will be required to provide a prescription from a physician or nurse practitioner.

AADL does not provide compression garments for:

- use in acute care/sub-acute care facilities
- short-term interventions
- application or intervention in a physician's/nurse practitioner's/vascular surgeon's office
- acute treatment including deep vein thrombosis, emboli or arterial blood clots, cellulitis, thrombophlebitis, phlebitis, post phlebitis syndrome, arterial insufficiency, hypotension
- prevention
- predisposing conditions such as pregnancy

<sup>1</sup> *The care of patients with varicose veins and associated chronic venous diseases: Clinical practice guidelines of the Society for Vascular Surgery and the American Venous Forum*, Gloviczki et al., Journal of Vascular Surgery, May Supplement 2011.

<sup>2</sup> Best Practice for the Management of Lymphedema, International Lymphedema Framework, 2006.

- active treatment (initial edema reduction prior to achieving dry/stable state preceding garment fitting) edema management, and systemic edema
- short-term interventions
- nighttime use
- osteoarthritis, to the degree of mechanical restriction
- any acute presentation of the lower leg:
  - acute cellulitis/acute untreated cellulitis or erysipelas of the lower leg(s), including abscess or furuncle formations
  - acute lipodermatosclerosis (also called hypodermatitis sclerodermiformis) which presents as episodes of painful inflammation in the inner leg above the ankle, resembling cellulitis. The affected area is red, tender and warm, and may be scaly. Authorizations may be done once lipodermatosclerosis is in the chronic phase
- untreated malignant tumor of the leg
- scleroderma

Peripheral neuropathy (as in individuals with diabetes) is not a contraindication to compression if peripheral arterial perfusion is within acceptable AADL ranges (see Policy T – 04 Authorizer Responsibilities) or has been deemed acceptable by an authorized prescriber. However, the client must be provided education regarding proper application and careful monitoring of pressure gradient garments as sensation is impaired.

## Procedure

### Authorizers:

- Confirm client meets AADL general eligibility for benefits.
- Confirm clients' previous benefit consumption:
  - Refer to Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments for quantity limits at: <https://open.alberta.ca/publications/aadl-program-manual-t>
  - Refer to the Patient Inquiry screen on the Alberta Blue Cross online health portal and check product consumption.
- Submit authorization on the online health portal with any relevant documentation including the Client Consent form.
  - Refer to Policy T – 08 Quantity and Frequency Limits for clients who are over quantity/frequency limit.
- Inform clients of their eligibility status.

### Clients:

- Confirm eligibility with authorizer.
- Provide prescription to authorizer, if required.
- Sign Client Consent form.

### Vendors:

- Check client's previous benefit consumption:
  - Refer to Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments to determine quantity limits at: <https://open.alberta.ca/publications/aadl-program-manual-t>.
  - Refer to the Patient Inquiry screen on the Alberta Blue Cross online health portal, review client's benefit consumption history and confirm they are eligible for the benefit.
  - Refer to Policy T – 08 Quantity and Frequency Limits for clients who are over quantity/frequency limit.

### Alberta Blue Cross:

- Responds to telephone or email requests for information on bathing and toileting benefits eligibility and provides reference to the AADL website for further information at: <https://open.alberta.ca/publications/aadl-program-manual-t>
- Adjudicates and audits authorizations submitted through the online health portal for accuracy and completeness.

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## Policy T – 03

### Authorizer Qualifications

#### Policy Statement

Existing AADL authorizers who are occupational therapists, physiotherapists or registered nurses may apply to have compression garments added to their product range.

Authorizers must complete the Authorizer Application for Product Range: Compression Garments form and submit to AADL. The applications must include a description of education, mentorship and clinical experience related to assessing clients for compression garments.

Assessors and authorizers doing the actual fitting must:

- be a certified fitter by completing a manufacturer fitter course that is recognized by AADL
- renew the certification every three years, and
- provide certification to the AADL program manager or Alberta Blue Cross upon request

#### Procedure

##### AADL Authorizer applying for secondary product range:

- Complete AADL Training Module 2.2 – Compression Garments available under Videos at: <https://www.alberta.ca/aadl-authorizer-information-and-training.aspx>.
- Complete the Authorizer Application for Product Range: Compression Garments form under Authorizer forms at:
- <https://www.alberta.ca/assets/documents/aadl/aadl-authorizer-application-compression.pdf>
- Forward completed application with supporting documentation to AADL.

##### AADL:

- Reviews application.
- Advises Alberta Blue Cross to add the product range to eligible authorizers.
- Monitors authorizer activities and determine compliance with policies and procedures.

##### Alberta Blue Cross:

- Adds product range to eligible authorizers.

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## Policy T – 04

### 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 products authorized are only for the client that was assessed and authorized
- is aware that quantities are based on their assessed clinical need

#### Authorizers:

- must document and keep on clients file the clinical details as to the type of custom compression garments that are required for the client (for example, requires open toe stockings)
- are accountable to ensure that the lower leg assessment, when warranted, meets AADL's eligibility criteria prior to submitting the authorization
- must ensure that clients authorized based on the lower leg assessment (may not be applicable for clients with lymphedema) 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
- must follow up once the client has obtained the compression garment(s) to ensure effectiveness, proper donning/doffing, compliance and care of garments

Clinicians can only authorize clients who have an Ankle Brachial Index of 0.8 to 1.4 Toe Brachial Index of 0.7 or greater or a toe pressure of 50mmHG or greater. In situations where the pressures are outside of these values, 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. This documentation must be kept on the client's file.

Clients with a diagnosis of diabetes, or who have an Ankle Brachial Index below 1.0 or above 1.4, 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 and must be kept on the clients file.

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 up to the authorizer's clinical discretion to determine the period of time for an authorization; however authorizations cannot exceed four years.

Authorizations for custom garments must have clear clinical rationale kept on the client's file.



# Policy T – 05

## Authorization Process

### Policy Statement

Custom compression garment benefit authorizations are valid when all authorization process steps and requirements have been met. Authorizers must adhere to the general policies and procedures for authorizing AADL benefits.

Assessments for custom compression garments for clients with venous insufficiency must be done by a registered nurse, physiotherapist or occupational therapist who is trained in lower leg assessments that include an Ankle Brachial Pressure, Toe Brachial Pressure Index or photoplethsmography (Toe Pressures).

For clients with venous insufficiency, Authorizers may only authorize benefits for clients who have an Ankle Brachial Pressure Index of 0.8 – 1.4. Clients with a diagnosis of diabetes with values below 0.8 or above 1.4 must have a Toe Brachial Pressure Index completed to ensure that it is safe to compress the limb, or a prescription that includes the amount of compression.

Authorizers/assessors must include the clinical rationale for the benefit being requested and a copy of the lower leg assessment (if applicable) on the client's file. Lower leg assessments cannot be older than six months. If the garments are for the legs, leg measurement and shape of the leg must also be included.

One set of the following values are required in order to determine eligibility:

- Ankle Brachial Pressure Index values must be within the 0.8 – 1.4 range
- Toe Brachial Pressure Index values of 07.mmHG or greater
- Photoplethsmography Toe Pressures values must be 50mmHG or greater

It is up to the authorizer's clinical discretion to determine the period of time for an authorization; however authorizations cannot exceed four years.

Best practice recommends that clients wear a pressure garment that provides 30 – 40 mm Hg of pressure, and that below-knee pressure garments are the most effective and have the highest rate of client compliance.

Cellulitis, dermatitis and open wounds must be healed prior to authorization.

Clients should advise the authorizer of any concerns with the compression garment.

The vendor is responsible for contacting the client within the first two weeks of the client receiving one pair of compression garments to address any concerns and direct clients to contact their authorizers, if necessary.

Vendors are permitted to contact the client prior to the expiry of the authorization or to remind the client that they are eligible for new garments while their authorization is active.

A prescription from a vascular surgeon, physician or nurse practitioner with expertise in lower leg assessment must be submitted with the authorization on the online health portal in the following circumstances:

- when the clients ranges are not within the values as per AADL policy
- for clients who have had recent surgery, including bypass surgery
- when the garments are for lymphedema management, unless they have been authorized by a certified lymphedema therapist or an authorizer with a designation of specialty authorizer

Note: All clients with diabetes require a Toe Brachial Pressure Index or photoplethsmograph when the Ankle Brachial Pressure Index is below 1.0 or above 1.4.

Note: Clients presenting with chronic lymphedema should be assessed by a qualified certified lymphedema therapist or specialty assessor. If neither are accessible to the client, clients will be required to provide a prescription from a physician or nurse practitioner.

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

The requirement for above knee stockings must be documented on the clients file and include:

- for thigh-high stocking requests, indication of hemosiderin staining and/ropey torturous veins above the knee, or lymphedema above the knee
- for pantyhose requests, indication of hemosiderin staining and/ropey torturous veins into the groin, or lymphedema above the knee, hips and/or abdomen

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 be documented on the client's file.

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. The authorizer is required to advise the client of upgrade costs.

If a client requires two different styles and/or compression of stockings, the authorizer is required to document rationale on the clients file.

### **Authorizer role in client fitting**

Authorizers should inform clients that vendor fittings must occur early in the morning between 8 and 11 a.m. when the edema is minimized.

If the authorizer is doing the actual fitting, then the authorizer must be a certified fitter and have completed one of AADL's recognized manufacturer training courses.

If a client cannot put on heavy graduated pressure garments, two lesser garments (e.g., two 15mm), one worn on top of the other, may be manageable. AADL does not provide funding for these two lesser weight pressure garments.

Authorizers must follow up with the client once the client has obtained the compression garments to ensure effectiveness, proper donning/doffing, compliance and care of the garments.

## **Procedure**

### **Authorizers:**

- Confirm client eligibility for benefit. Refer to Policy T – 01 Eligibility Criteria.
  - Refer to the patient inquiry screen on the Alberta Blue Cross online health portal and check product consumption to confirm eligibility for the benefit
- Assess client or review assessment if authorizer is not the assessor. Determine benefit and quantity needed based on the client's final clinical assessment results.
- Document assessment details and clinical rationale to support the provision of benefits. File any supporting documentation to support the client's requirements for custom compression garments.
- Provide client with a list of AADL-approved vendors.
- Have client sign the Client Consent form.
- Complete authorization on online health portal and upload client declaration form and prescription if required.
- Inform client's preferred vendor that an approved authorization has been submitted and to expect the client.
- Follow up once the client has obtained the compression garment(s) to ensure effectiveness, proper donning/doffing, compliance and care of garments.

### **Clients:**

- Fully participate in the assessment.
- Sign Client Consent form
- Followup with the authorizer as needed.

**Vendors:**

- View authorization on Alberta Blue Cross online health portal to view client's eligibility and consumption.
- Contact the client within the first two weeks of the client receiving one pair of compression garments.

**Alberta Blue Cross:**

- Processes and audits authorizations for completeness and accuracy.

**AADL:**

- Provides direction to authorizers regarding eligibility criteria as needed.

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## **Policy T – 06**

### **Vendor and Trained Provider Qualifications**

#### **Policy Statement**

AADL-approved custom compression garments vendors must meet the following criteria:

- meet AADL's general vendor criteria as outlined in AADL Program Manual Section GN – General Policy and Procedures
- adhere to benchmark pricing as outlined in AADL Program Manual Section GN – General Policy and Procedures
- 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
- provide a minimum of two different manufacturer's brands

## Policy T – 07

### Providing Custom Compression Garments

#### Policy Statement

AADL vendors must have an agreement with AADL and Alberta Blue Cross to provide ready-made compression garment benefits.

The provision of custom compression garment benefits includes fitting the garment(s), documenting, client billing and claims.

Manufacturers listed in Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments have been reviewed and accepted by AADL.

Vendors must offer a minimum of two different manufacturers' brands of compression garments that:

- meet the generic description
- comply with AADL's product standards, and
- are at or below the maximum price for that benefit listed in Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments

The vendor is responsible for contacting the client within the first two weeks of the client receiving one pair of compression garments to address any client concerns and direct the client to the authorizer, if necessary. Vendors are permitted to contact the client prior to the expiry of the authorization or to remind the client that they are eligible for new garments when their authorization is active.

AADL does not pay for brokerage fees incurred by the vendor or for rush deliveries.

#### Garments with straps

AADL will permit funding for compression garments listed on Alberta Aids to Daily Living Approved Product List T – Custom Compression Garments to be used towards the purchase of garments with straps only if recommended by the authorizer who has determined that garments with straps are an effective and safe option for the client.

Vendors cannot recommend garments with straps to clients without a recommendation by an authorizer.

If the authorizer agrees that the garments with straps are an effective and safe option, the client is responsible for the upgrade cost associated with the purchase of garments with straps.

Authorizers are not permitted to add extra catalog codes to accommodate the upgrade costs of garments with straps.

AADL funding may not be used for the purchase of reduction kits.

#### Procedure

##### Vendors and Trained Fitters:

- Confirm client eligibility and authorization for the benefit by checking client consumption on the Alberta Blue Cross online health portal.
- Provide the appropriate product as per the online authorization.
  - Inform the client and the authorizer if the vendor cannot provide a garment recommended by the authorizer.
- Provide one garment or pair of compression garments initially. The vendor must conduct a follow up three to four weeks after initial fitting to ensure product is suitable for client.
- Cannot recommend a different type of garment than what has been ordered by the authorizer.

**Vendors:**

- Must notify the authorizer if there are any concerns regarding the garment ordered.
- Must not proceed with the fitting and contact the authorizer if there is evidence of edema or any other concern during the fitting to ensure the product authorized is still appropriate.
- Must provide compression garments based on the client's measurements and are not to provide larger sizes. If a client requests a larger size, the vendor is to stop the fitting, not provide any compression garments to the client and notify the authorizer.
- Have clients demonstrate to the vendor that they can don and doff the garments independently or confirm with the authorizer that the client has assistance to don/doff on a daily basis.
- Provide verbal and written instructions on compression garment wear and care.
- If there are concerns, regarding the client's ability to don and doff the garments, contact the authorizer.
- Document the client's fitting and garment provided and keep the information on the client's file.
- Collect any cost-share and upgrade costs on the day the equipment is provided and the claim is submitted.
- Submit claim through the online health portal once garment is provided (service date).
  - Invoice for garments that have been provided to the client, not for the quantity that has been authorized.

**Alberta Blue Cross:**

- Adjudicates and pays claim.
- Conducts audits on vendors' compliance with policy and procedures for quality assurance and accountability purposes.

## Policy T – 08

### Quantity and Frequency Limits

#### 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. It is recommended that authorizers advise clients that they are financially responsible for replacing damaged compression garments related to tears, rips and/or runs that can occur from misuse, such as not wearing compression garment donning gloves.

If an authorizer determines a client's condition has changed and the compression garment they are currently using no longer meets the clinically-assessed basic need, they may submit a quantity and frequency review request through the Alberta Blue Cross online health portal.

A certified lymphedema therapist or specialty assessor may authorize for over the maximum quantity (up to double) pending the provision of adequate clinical rationale to support the quantity increase without submitting a quantity and frequency review request. Any requests for more than the double the maximum quantity require a quantity and frequency review request.

All other AADL authorizers must submit a quantity and frequency review request for benefit requests over the maximum quantity specified in the approved product list. Quantity and frequency review requests are submitted on the Alberta Blue Cross online health portal.

Eligibility renewal for subsequent pairs is based on when the vendor submitted the claim to Alberta Blue Cross for the compression garment, not based on the date of the authorization.

#### Procedure

##### Authorizers:

- Advise clients of quantity and frequency limits.
- Explain policy and process to client, ensuring client understands.
- Follow up once the client has obtained the compression garments to ensure effectiveness, proper donning/doffing, compliance and care of garments.
- Enter quantity and frequency review authorization on the online health portal including the following documents:
  - Quantity and Frequency Review Request form
  - Client Consent form
  - other supporting documentation
- Receive notification of review decision from Alberta Blue Cross and inform the client.

##### Clients:

- Pursue alternate funding sources prior to requesting additional benefits from AADL or if request falls outside the quantity and frequency review process.

##### Alberta Blue Cross:

- Receive and log quantity and frequency review requests.
- Forwards quantity and frequency review requests to AADL for adjudication.
- Updates quantity and frequency review request status on the online health portal which can then be viewed on the provider portal.
- Sends notification of the decision to the authorizer, and client if necessary.

**AADL:**

- Receives the quantity and frequency review and supporting documentation from Alberta Blue Cross.
- Adjudicates and provides decision to Alberta Blue Cross.



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## Policy T – 09

### Patient Claim Statement

#### Policy Statement

Custom compression garment vendors must provide every client with a patient claim statement for each benefit invoiced to the AADL program. The statement can be printed from the Alberta Blue Cross online health portal, and must include general information such as statement details, Alberta Blue Cross contact information and client data.

The patient claim statement is comprised of three sections: statement information, claim summary and claim details.

The claim summary displays the overall breakdown of how much each client is responsible for against the total claimed amount for all claims submitted:

- Total amount claimed – The sum of claimed amounts for all claims submitted.
- AADL will pay – The total amount that AADL will cover for all claims submitted.
- Client will pay – The total amount the client is responsible to pay for all claims submitted. This amount is the sum of any cost-share amount the client owes and upgrade charges that are not covered by AADL.

Clients must be provided with a copy of their patient claim statement.

#### Procedure

##### Vendors:

- Provide clients with a patient claim statement for AADL benefits. The patient claim statement must be printed from the Alberta Blue Cross online health portal.
- For cost-share clients, identify the AADL contribution and the client's cost-share contribution for each benefit.
- For cost-share exempt clients, identify AADL's contribution for each benefit.
- Retain a copy of the patient claim statement on the client's file.

##### Alberta Blue Cross:

- Provide vendors with a patient claim statement through the online health portal as required.