

Alberta Health

**Alberta Aids to Daily Living
Custom Compression Garments Benefits**

Policy & Procedures Manual

November 15, 2015



Revision History

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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 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: <http://www.health.alberta.ca/documents/AADL-Policy-Procedures.pdf>

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 <http://www.health.alberta.ca/documents/AADL-Manual-N-Compression.pdf>.

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.

AADL will provide postage for rural clients requiring subsequent compression garments shipped to their home.

Procedure

Clients:

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

Authorizers:

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

Vendors:

1. Check clients' previous benefit consumption:

1. Refer to E-business for client's benefit consumption history.
2. 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;
- renew the certification every five 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 available at: <http://www.health.alberta.ca/services/AADL-forms-docs.html>
2. Complete compression on-line module available at: <http://www.health.alberta.ca/services/AADL-authorizer-resources.html>
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 the basic need 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.

All 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).

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

Authorizations for custom lymphedema garments require a prescription.

A certified lymphedema therapist or an authorizer with a designation of S.A. (specialty authorizer) is not required to submit a prescription with an authorization for lymphedema garments.

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/or ropey torturous veins above the knee. If pantyhose

are being requested, there must be indication on the lower leg assessment form of hemosiderin staining and/or ropery torturous veins into the groin.

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. Please indicate this 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.

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 at <http://www.health.alberta.ca/services/AADL-forms-docs.html>.
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 it relates to the assessment as needed.

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.

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: <http://www.health.alberta.ca/documents/AADL-Policy-Procedures.pdf>.

Procedure

Authorizers:

1. Follow the QFR process as outlined in the general AADL Policy and Procedure Manual at: <http://www.health.alberta.ca/documents/AADL-Policy-Procedures.pdf>.

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: <http://www.health.alberta.ca/documents/AADL-Policy-Procedures.pdf>.

AADL:

1. Reviews quantity maximums annually.

Policy T – 05

Client Responsibilities/Insurance Coverage

Policy Statement

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.

Policy T – 06

Authorizer Responsibilities

Policy Statement

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

In addition authorizers for compression garments must:

1. 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;
- is aware that AADL does NOT pay for any brokerage fees and/or "rush" deliveries that may be requested by the authorizer and/or the client;
- is aware that AADL provides postage for rural clients requiring subsequent garments shipped to their home.

2. Assessments

Authorizers:

- Must clinically provide 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.

3. 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.
- Only authorize postage only when needed
- Please include J491 – postage, on the authorization form for rural clients only.
- AADL includes postage so that clients in a rural setting are not at a disadvantage in receiving subsequent garments.
- The invoice cost of mailing the garment to the client is cost-shared with AADL.

Policy T – 07

Vendor Responsibilities

Policy Statement

AADL Vendors must adhere to the general policies and procedures for vendors providing AADL benefits.

In addition vendors for compression garments must:

- 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.
- Provide a minimum of two different manufacturer’s brands that clients can chose from.
- Document the client’s fitting and garment provided.
- Follow the authorizer’s directions on the authorization form.
- Inform the client and the authorizer if the vendor cannot provide a garment that is recommended by the authorizer.
 - Vendors cannot substitute garments without the authorizer’s approval.
- Provide custom compression garments based on the client’s 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.
- 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.
- Conduct a follow-up three to four weeks after initial fitting.
- Invoice for garments that have been provided to the client NOT for the quantity that has been authorized.
- Only invoice for postage when it is NOT provided under the manufacturing pricing for custom vascular garments.

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.

It is recommended that only one custom compression garment is provided initially.

Please be aware that AADL does not pay or any possible brokerage fee that the vendor may incur.

AADL does not pay for “RUSH” deliveries.