

Alberta Health

Alberta Aids to Daily Living Medical-Surgical Benefits

Policy & Procedures Manual

June 21, 2021

Classification: Public



Revision History

Description	Date
Updated throughout to reflect transition to Alberta Blue Cross	June 21, 2021
M-02- Clarified eligibility requirements for incontinence supplies M-08- Certain health care providers can authorize over quantity with appropriate rationale	July 1, 2020
Updated links	April 1, 2019
Policy M-05, 06, 09 and 10 updated to remove reference to reassessment letter. Updating name of form to Authorization, Correction, Change or Extension.	October 24, 2018
Policy M-02 and Policy M-07 clarification regarding shipping of products	May 7, 2018
Removal of reference to dressing supplies	September 1, 2017
Policy M-04 Vendor and Trained Provider qualifications updated Additional information added to provide policy clarification throughout.	July 1, 2017
Policy M-05 and Policy M-09 revised to detail changed requirements for the reassessment form.	January 17, 2017

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Policy M – 01

Medical-Surgical Benefits Description

Policy Statement

AADL provides funding for Medical-Surgical benefits for AADL clients with diagnosed chronic conditions to help these individuals maintain independence in their home and community.

Best practice supports the provision of Medical-Surgical supplies within the context of other clinically recommended strategies to achieve optimal functional outcomes.

Medical-Surgical benefit authorizations are processed through the Alberta Blue Cross Online Health Portal (OHP). AADL Medical-Surgical benefits include incontinence briefs, diapers and liners; catheter supplies, injection supplies and ostomy supplies. Details regarding specific benefits are found in the Approved Products List (APL) at:
<https://open.alberta.ca/publications/aadl-program-manual-m>

Policy M – 02

Eligibility Criteria – Medical-Surgical Benefits Policy Statement

The Eligibility Criteria Policy assists clients, guardians, authorizers, and vendors in determining access to Medical-Surgical benefits through the Alberta Aids to Daily Living (AADL) Program.

Client's eligibility for Medical-Surgical 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>.

AADL provides funding for Medical-Surgical benefits for clients who meet **benefit specific eligibility criteria, outlined in the table below.**

AADL provides an annual and bi-monthly quantity limit on Medical Surgical benefits that clients may be eligible for based on current best practice and expected wear. See the Medical Surgical Benefit Approved Product List (APL) for benefit specific limits.

AADL Authorizers must confirm client's eligibility for the benefit and the quantity of the benefit must be based on the assessed need of the client.

AADL does **not** provide funding for medical-surgical benefits for:

- Use in acute or sub-acute care facilities except as part of a discharge plan;
- Use in long term care facilities; refer to policy GN-17
- Short-term interventions;
- Clients who are non-compliant;
- Benefits chosen for personal preference and not considered basic need according to clinical assessment.

Nurses Specialized in Wound Ostomy and Continence (NSWOCC) may contact Alberta Blue Cross for prior approval to request supplies considered duplicate (e.g., catheters and diapers) and/or above quantity and frequency limitations pending clinical rationale.

Benefit-Specific Criteria

Benefit	Criteria
<p>Diapers, pads and liners, catheter supplies</p>	<p>1. Clients, age four and older, with moderate to severe*, unresolvable daily urinary and/or bowel incontinence (the client’s incontinence must be medically recognized by the appropriate clinician as being unresolvable). Interventions and strategies may include but are not limited to:</p> <p><u>Physician/specialist assessment-</u> clients should have an incontinence condition not amenable to improvement by surgery or application of any device, or be unfit for such a procedure. They must be assessed and certified as such by a specialist continence practitioner (e.g., urologist, gynecologist, geriatrician, gastroenterologist, proctologist, pediatrician, nurse continence advisor or nurse practitioner).</p> <p><u>Note:</u> Prescriptions/letters from General Practitioners without diagnosis and indication of completion of further investigation of the incontinence do not adequately verify the client as experiencing “unresolvable incontinence “and will not be accepted by AADL. <u>Modification and conservative strategies must be</u> tried for a minimum of three months and are not limited to: bladder training, pelvic muscle exercises (with or without biofeedback), diet and exercise, weight loss and ensuring appropriate and timely fluid intake. Where appropriate, medications for urinary incontinence should also have been tried, and failed to significantly improve the client’s incontinence.</p> <p><u>Note:</u> Clients who choose not to follow medical advice to address incontinence issues will not be eligible for funding for incontinence products through AADL.</p> <p><u>Note:</u> Authorizers are required to assess a client when product/quantity changes are requested prior to adjusting quantities and/or products.t</p> <p><u>Note:</u> Children who are projected to achieve continence past age four are required to meet criteria following point 1 prior to submission of an AADL authorization.</p> <p>2. Individuals with a diagnosed congenital anomaly, or physiological abnormalities, including lack of bladder innervation that prevents the ability to achieve continence are exempt from the requirements following point 1.</p>

Note: Adult clients with diagnosed Dementia or any cognitive impairment for whom it has been determined by the appropriate medical professional, that interventions and strategies would be ineffective or inappropriate are exempt from the requirements outlined following point 1.

3. Clients with an end of life diagnosis (life expectancy of no longer than six months) will be authorized for a period of six months and are exempt from the interventions following point 1.

All clients, including palliative clients, must experience moderate to severe incontinence*

* AADL defines moderate to severe as a client requiring a medical grade product (refer to the AADL Incontinence Product List) a minimum of three times per 24 hour period.

AADL Incontinence Product list can be found at:
<https://open.alberta.ca/publications/aadl-program-manual-m>

Note: Authorizers/ assessors must consider that clients managing their incontinence with products with less absorbency than those listed on the AADL Approved Product List (APL) may not be experiencing moderate to severe incontinence and may not qualify for funding.

Note: Clients receiving funding for catheters who manage with a lesser absorbent product to address leakage between catheterizations and/or stool staining or light stool incontinence may not qualify for funding for diapers/liners.

Exclusions:

AADL does not provide funding for diapers, pads, liners, catheters and their accessories for menstruation, pregnancy induced incontinence or incontinence existing and/or lasting less than six months, wound drainage, bowel routines, enemas, active treatment and irrigation, or for clients who only experience night time incontinence.

Ostomy supplies	<p>Funding for ostomy supplies may be provided for clients:</p> <ol style="list-style-type: none">a) with a chronic functioning colostomy, urostomy or ileostomy; andb) who have a permanent ostomy and are not expected to have a reversal within six months of the initial ostomy surgery.c) who are pediatric clients and clients with a esophagectomy, cecostomy or fistula. Note: These clients must be assessed and authorized by a registered nurse who is a Nurse Specialized in Wound, Ostomy and Continence (Canada) (NSWOCC). <p>Exclusions:</p> <p>AADL does not provide funding for ostomy supplies for: wound care, enteral feedings, drainage tubes, and enema or for client with temporary ostomy's (less than six months).</p>
Injection Supplies	<p>Funding for injection supplies may be provided for clients who:</p> <ol style="list-style-type: none">a) cannot tolerate oral medication.b) requires the medication on a daily basis to relieve pain or symptoms caused by a chronic or terminal condition. <p>Note: Beginning June 1, 2021, the government-sponsored Palliative Coverage program will cover the costs associated with pre-filling syringes for palliative clients.</p> <ul style="list-style-type: none">• The medication requires a prescription from a physician or Nurse practitioner and must be prefilled by an approved AADL vendor. <p>Exclusions:</p> <ul style="list-style-type: none">• Mixing or measuring medications, irrigation, trachea/central line care, insulin administration, blood withdrawal/transfusion and intravenous use.

Procedure

Clients:

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

Authorizers:

1. Confirm client meets AADL eligibility requirements.
2. Confirm client's benefit consumption limit:
 - Refer to the Medical Surgical Benefits APL to determine quantity limits for each benefit at <https://open.alberta.ca/publications/aadl-program-manual-m>
 - Refer to the patient inquiry screen on the Alberta Blue Cross Online Health Portal (OHP) and check product consumption.
 - Complete authorization on OHP with any relevant documentation including the client declaration form.
3. Inform clients of their eligibility status.

Vendors:

1. Check clients' previous benefit consumption:
 - Refer to the Medical Surgical Benefits APL to confirm quantity limits for each benefit at <https://open.alberta.ca/publications/aadl-program-manual-m>
 - Refer to the patient inquiry screen on the Alberta Blue Cross Online Health Portal (OHP) review client's benefit consumption history and confirm they are eligible for the benefit.
 - Refer to Policy M-08 Quantity and Frequency Limits for clients who are over the quantity/frequency limit.

Vendors must only invoice for a two month supply of products at one time and only invoice for up to the amount that the client has requested up to the maximum quantity that the client is authorized for. See policy M-07 for details.

Alberta Blue Cross:

1. Responds to telephone or email requests for information on medical/surgical benefits eligibility; and provides reference to the AADL website for further information at: <https://open.alberta.ca/publications/aadl-program-manual-m>
2. Adjudicates and audits authorizations submitted through the OHP for completeness and accuracy.

Policy M – 03

Authorizer Qualifications – Medical-Surgical Benefits

Policy Statement

The Authorizer Qualifications Policy facilitates accountability and transparency.

AADL accepts applications from Registered Nurses (RNs) who meet the general criteria set out in Policy GN-03 at <https://open.alberta.ca/publications/aadl-program-manual-gn>.

AADL accepts requests to add the product ranges including incontinence briefs, diapers and liners from Occupational Therapists (OTs) or Physiotherapists (PTs).

All OT and PT authorizers must review AADL online modules and provide information on training courses and prior clinical experience by completing the appropriate application(s) for product ranges as required prior to authorizing benefits.

AADL accepts prescriptions from Authorizers who are Nurse Practitioners with the relevant specialty.

Only authorizers who have the additional qualification of NSWOCC may authorize ostomy benefits in the following situations:

- Clients with a fistula, esophagectomy or high output ostomy.
- Pediatric ostomy supplies.

Procedure

AADL Authorizer Applicants:

1. Confirm eligibility.
 - Refer to Policy GN-03 Application to be an Authorizer for **general** eligibility criteria found on-line at <https://open.alberta.ca/publications/aadl-program-manual-gn>
2. Complete appropriate application form available at <https://www.alberta.ca/aadl-authorizer-information-and-training.aspx>

3. Complete appropriate on-line module available at
<https://www.alberta.ca/aadl-authorizer-information-and-training.aspx>
4. Forward completed application with supporting documentation to AADL.

AADL:

1. Provides authorizer training.
2. Provides training for primary product ranges.
3. Advises Alberta Blue Cross when the authorizer has completed the training requirement so they can be registered on the Online Health portal as a provider.
4. Monitors authorizer activities and determines compliance with policies and procedures.

Policy M – 04

Vendor and Trained Provider Qualifications

Policy Statement

The Trained Provider Qualification Policy facilitates accountability and transparency.

AADL approved Medical Surgical Vendors for Ostomy Supplies and Incontinence supplies 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.
- Maintain a minimum of one (1) staff member who is employed full-time and has attended product knowledge and/or educational sessions from each AADL approved manufacturer brand of products that the vendor is selling.
- **Ensure product knowledge/education is updated every three years.**
Vendors must keep proof of this on file and provide to AADL upon request.

Note: AADL may request proof of product knowledge training/education from time to time.

Note: AADL may suspend product ranges from vendors whose employees do not have active certification.

Approved manufacturers are listed on the Approved Product List (APL) for applicable supplies.

Policy M – 05

Assessment for Medical-Surgical Benefits

Policy Statement

The clinical assessment is the first step in the process to obtain “M” benefits.

The assessment determines eligibility, the benefit(s) required to meet basic need and the appropriate quantities.

Assessments for Medical Surgical benefits must be completed and documented by a healthcare professional with the required competence and regulatory license to practice in Alberta.

Assessments for ostomy benefits must be completed by an NSWOCC in the following situations:

- Clients with a fistula, esophagectomy or high output ostomy.
- Clients requiring an ostomy hernia belt or irrigation supplies.

Reassessments are required when the authorization expires to confirm ongoing eligibility and ensure the client is using the benefits.

Note: When authorizing incontinence products, authorizers are required to complete and sign the Assessment Summary for Incontinence Products and keep on the client’s file.

Note: Assessment results must be documented on the client’s file and may be audited by AADL/Alberta Blue Cross.

Procedure

Clients:

1. Fully participate in assessment.
2. Ensure understanding and engage in strategies recommended.
3. Sign the declaration form

Authorizers:

1. Assess client or review assessment if authorizer is not the assessor.
2. Implement treatment strategies (clients experiencing incontinence) prior to final assessment.
3. Determine benefit and quantity needed based on the client’s clinical assessment results.
4. Refer to the patient inquiry screen on the Alberta Blue Cross Online Portal (OHP) and check product consumption.
5. Complete authorization on OHP and submit with any required documentation, including the client declaration form.

Vendors:

1. Refer client to authorizer if client requires assessment.

AADL:

1. Provides direction to authorizers regarding eligibility criteria as it relates to the assessment as needed.

Policy M – 06

Authorization Process – Medical Surgical Benefits

Policy Statement

The Authorization Process policy promotes effective and efficient authorization of benefits. Medical Surgical benefit authorizations includes the assessment and the submission of a valid authorization on the Alberta Blue Cross Online Health Portal (OHP)

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

The following are the timeframes for authorizations:

Incontinence (including catheters) and ostomy supplies

Up to two years, (clients who have low utilization may be subject to a re-review of need and assessment by an AADL authorizer).

Note: Clients with a palliative diagnosis are authorized for a maximum period of six months for all Medical Surgical benefits.

Expiry dates for authorizations cannot be extended. If a re-assessment is required, authorizers need to enter a new authorization in the Alberta Blue Cross Online Health Portal. If the authorization is active and a change is required the active authorization must be terminated and a new one entered.

Procedure

Authorizers:

1. Confirm client eligibility for benefit(s). Refer to Policy M-02 Eligibility Criteria – Medical Surgical Benefits.
2. Assess client or review assessment if authorizer is not the assessor. See Policy M-05 Assessment for Medical Surgical benefits.
3. Refer to the patient inquiry screen on the Alberta Blue Cross Online Health Portal and check product consumption.
4. Complete Authorization on OHP and submit with required documentation.

5. If there is a current active authorization on file and client has a change in their product needs, terminate the existing authorization and enter a new one.

Clients:

1. Fully participate in benefit determination.
2. Sign the client declaration form.

Vendors:

1. Refer to the patient inquiry screen on the Alberta Blue Cross Online Health Portal (OHP) and check product consumption.

Note: vendors must not dispense product to clients prior to having access to the authorization on the Alberta Blue Cross OHP.

2. Refer client to authorizer if there are issues related to authorization.
3. Submit claim same day as products are dispensed to ensure client cost share status is accurate.

Alberta Blue Cross:

1. Processes and audits authorizations for completeness and accuracy.

Policy M – 07

Providing Medical-Surgical Benefits

Policy Statement

This policy promotes effective and efficient provision of benefits and includes: client education, providing the product, documenting, client billing and claims, and advising clients of pending expirations.

AADL vendors must have an agreement with AADL and Alberta Blue Cross to provide Medical-Surgical benefits and meet all of the criteria outlined in M-04.

Products must meet the generic description and standards specified in the Approved Product List (**including meeting minimal absorbency criteria for diapers and liners**).

Requests for vendors to provide a specific brand of product must be clinically supported and documented on the authorization form.

Vendors must only provide the quantity of consumable products allowed within the frequency limit (e.g., 70 catheters for a two-month period) unless otherwise authorized.

Vendors must not claim for quantities over the AADL authorized two-month quantity and frequency limit.

Vendors must not implement automatic deliveries. See general Policy and Procedures, policy GN-11 for information regarding vendor accountability.

Requests for quantities to be provided in advance of the next two-month period require prior approval from AADL. See Policy M-10 Requests for Advance Quantities of Medical Surgical Supplies. **Vendors are not permitted to ship products to AADL clients outside of Alberta.**

Procedure

Vendors:

1. Check for authorization on the OHP and confirm eligibility by referring to client's consumption history.
2. Collect cost-share and any upgrade costs on the day the products are provided and submit the claim on the OHP.
3. Educate client on product.

4. Provide benefit within the quantity and frequency limits.

Note: Vendors must ensure that products provided must abide by AADL approved manufacturers (i.e., vendors must only provide incontinence products that are listed on the AADL Incontinence Product list referenced in policy M-02.)

Clients:

1. Pay cost share or upgrade as needed.

Alberta Blue Cross:

1. Adjudicates and pays claims.
2. Audits charges on claims submitted by vendors.

Policy M – 08

Quantity and Frequency Limits for Medical-Surgical Benefits

Policy Statement

The Quantity and Frequency Limits for Medical-Surgical Benefits Policy ensures transparency, consistency and accountability.

This process pertains to ONLY clients who experience a condition change from that of the original assessment.

AADL sets bi-monthly and annual limits on the number of Medical-Surgical benefits funded per eligible client based on current best practice and expected wear. See the Approved Product List – Medical-Surgical Benefits for specific limits at <https://open.alberta.ca/publications/aadl-program-manual-m>.

Two-month quantity and frequency limits always follow a two month pattern as follows:

- January/February
- March/April
- May/June
- July/August
- September/October
- November/December

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

NSWOCC's and NCA's ONLY may submit authorizations on the OHP for quantities above quantity limitations without submission of a QFR with prior approval from Alberta Blue Cross.

Increased quantity limits approved through a QFR are effective for the period of time the corresponding authorization is valid and are not automatically extended.

Procedure

Authorizers:

1. Explain policy and process to client, ensuring client and/or caregiver understands.
2. Submit QFR authorization on the OHP and include the following documentation:
 - QFR Request Form.
 - Other supporting documentation.
 - Client declaration.
3. NSWOCs and NCAs can contact the Alberta Blue Cross provider contact center to request products over quantity without completing the QFR authorization.

Clients:

1. Consult with AADL authorizer when authorization for products is close to expiration.
2. Seek alternate funding for products needs that fall outside the quantity and frequency limits.

Alberta Blue Cross:

1. Receives and log QFR requests.
2. Forwards QFR requests to AADL for adjudication.
3. Updates QFR status on the OHP which can then be viewed on the provider portal.
4. Notification of the decision will be sent to the client and authorizer.

AADL:

1. Receives the QFR and supporting documentation from Alberta Blue Cross.
2. Adjudicates and provides decision to Alberta Blue Cross.

Policy M – 09

Request for Advance Quantities of Medical-Surgical Supplies

Policy Statement

The Request for Advance Quantities of Medical Surgical-Supplies Policy ensures consistency and accountability.

AADL may provide advance quantities of Medical-Surgical supplies for client requiring catheters or ostomy supplies when traveling out of the province.

Note: Requests from client traveling out of province must submit a Request for Advance Quantities of Medical Surgical Supplies for approval by AADL at least one month prior to departure. AADL cannot guarantee the processing of the forms when the form has been sent in under the one-month time frame.

Note: Clients must pick up the advance quantity prior to leaving the province.

Note: Vendor must not deliver benefits to an out-of-province address.

Requests for Advance Quantities of Medical Surgical Supplies are accepted from July 1st – May 31st – requests are not accepted during the month of June.

Clients may request a maximum six months advance for out-of-province travel and must maintain their Alberta Health Care for the entire period.

Procedure

Clients:

1. Complete “Request for Advance Quantities of Medical Surgical Supplies” form and submit to AADL one month prior to travelling out of the province at <https://www.alberta.ca/assets/documents/aadl/aadl-request-advanced-supplies.pdf>.

Vendors:

1. Provide client with advance quantities of Medical-Surgical supplies according to the approved quantity on the Alberta Blue Cross Online Health Portal (OHP), authorization history report.

Vendors are not to provide clients with advance quantities unless the request for advance quantities has been approved by AADL and a note has been entered on the Alberta Blue Cross Online Health portal on the authorization.

2. Vendors can submit a claim for the additional approved amount for a period of 30 days from the AADL approval date; this is based on the date of service of the claim and not the submission date of the claim. For example if the advanced quantity request was approved on June 1 of that year, the vendor has until June 30th to submit the claim for the amount of product they provided. The amount will be allowed to exceed the normal allotment to match the advanced quantity request for 30 days only. The vendor must note in their records which months they have claimed for to ensure duplicate claims are not submitted.

AADL:

1. Receives Requests for Advance Quantities of Medical-Surgical Supplies from clients.
2. Processes approved requests.
3. Notify Alberta Blue Cross Provider Contact Center by email and provide the following:
 - The reference number of existing authorizations
 - The number of months' supply which has been approved.
 - Any products in the authorization that are being excluded from the approval.

Alberta Blue Cross

1. Creates a note to advise vendors and authorizers of the approval of the request for the time specified.