

# **Limb Protheses Policy and Administration Manual**

**Assistive Devices Program  
Ministry of Health**

[ontario.ca/page/assistive-devices-program](https://ontario.ca/page/assistive-devices-program)

# Table of Amendments

This page will list all substantive changes to policies and procedures listed in the Manual.

<b>Section</b>	<b>Change</b>	<b>Date</b>
115.02	Updated to align with the new Authorizer Agreement.	October 1, 2014
200	Added manufacturer warranty requirements for components.	October 1, 2014
Various Sections	Updated definitions and references for Authorizer and Certified Prosthetist.	August 1, 2015
900	Added policy regarding Manufacturers as Vendors.	September 22, 2015

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# Introduction

# 1

# Part 1: Introduction

## 100 Purpose of the Manual

The purpose of this Manual is to present the policies and procedures for Funding of Limb Prostheses in one document. This Manual is intended to complement the Policy and Administration Manual for the Assistive Devices Program Manual (ADP Manual).

This Manual forms part of the agreement between the Ministry of Health and the Vendor, and the agreement between the Ministry of Health and the Authorizer. The Ministry reserves the right to revise this Manual.

### 100.01 Intended Target Audience

This Manual is intended to be used by Authorizers and Vendors who have an agreement with the Assistive Devices Program (ADP) to provide Limb Prostheses.

## 105 Overview Of The Assistive Devices Program

Authorizers and Vendors must comply with all applicable privacy laws governing information regarding their Clients.

**See the ADP Manual, Policy 700, Protection of Personal Information and Personal Health Information.**

## 110 Definitions

Capitalized terms used in this Manual shall have the meaning associated with them as set out in the ADP Manual or such meanings as described below:

- 110.01 **Amputee Team** means a team of health professionals who are responsible for assessing the Applicant's prosthetic needs, prescribing and authorizing conventional limb prostheses, approving the final product, suggesting modifications or replacements, and providing education and functional use training.
- 110.02 **Application Form** means the Application for Funding Limb Prostheses form provided by the Program and used by an Applicant to request ADP funding assistance for a Listed Device.
- 110.03 **Authorizer** means a person who has met all registration requirements with the Program and holds an executed Authorizer Agreement with the Program.
- 110.04 **Certified Prosthetist** means a person who has successfully completed the certification exams for Certified Prosthetist through the Canadian Board for Certification of Prosthetists and Orthotists (CBCPO) and who is registered as a "Certified Prosthetist" who is a member in good standing with Orthotics Prosthetics Canada (OPC).
- 110.05 **Child** means a person whose age is from 2 to 18 years.
- 110.06 **Externally Powered Upper Limb Prostheses (EPULP)** means externally powered Devices, which includes electric and myoelectric prostheses.



- 110.07 **Externally Powered Upper Limb Prostheses (EPULP) Clinic (also referred to as Myoelectric Clinic)** means a team of health care professionals who are responsible for assessing the Client's needs, for prescribing and authorizing Externally Powered Upper Limb Prostheses, socket replacements and major component replacements, as well as for approving the final product. They are also responsible for coordinating and/or providing associated rehabilitation services.
- 110.08 **Infant** means a person from 3 months to 2 years of age. Infants 3 months to 10 months of age, requiring a primary paediatric passive prosthesis are covered under the Conventional Limb Prostheses program. Infants 10 months to 2 years of age, fitted with an externally powered device, are covered under the Externally Powered Upper Limb Prostheses program. ADP does **not** fund externally powered upper limb prosthesis for infants 3 months to 10 months of age
- 110.09 **Listed Device** means specific devices, sockets, additions, supplements, suspension systems, modifications, adjustments and components that are approved for listing in the Product Manual.
- 110.10 **Manual** means this Limb Prostheses Policy and Administration Manual.
- 110.11 **Maximum Contribution** means the maximum amount payable by the Program to the Vendor for a particular group of components specified in the Product Manual, for which ADP will fund 75% of any retail price up to that amount.
- 110.12 **Occupational Therapist** means a regulated health care professional registered as a practicing member in good standing with the College of Occupational Therapists of Ontario.

- 110.13 **Personal Health Information** means the personal information as defined in Section 4 of the *Personal Health Information Protection Act, 2004*. See the ADP Manual, Part 7, Personal Health Information and Part 3, Section 320, Release of Information About Previous Funding for more details
- 110.14 **Physiotherapist (Physical Therapist)** means a regulated health care professional registered as a practising member in good standing with the College of Physiotherapists of Ontario.
- 110.15 **Prescriber** means a licensed physiatrist, orthopaedic surgeon or other physician recognized as specializing in the field of amputee rehabilitation, who is a member of an ADP registered Amputee Team or Externally Powered Upper Limb Prosthesis Clinic.
- 110.16 **Primary Paediatric Active Prosthesis (PPAP)** means an active Infant prosthesis fitted from 10 months of age or older and funded by the ADP through the Externally Powered Upper Limb Prosthesis Category. The activation components include a one-muscle, single-site voluntary opening control system and an electro-mechanical hand.
- 110.17 **Primary Paediatric Passive Prosthesis (PPPP)** means a passive Infant prosthesis fitted from 3 months of age or older and funded by the ADP through the Conventional Limb Prosthesis Category. The PPPP generally consists of a thin walled socket, a cosmetic foam cover and a soft passive hand.
- 110.18 **Product Manual** means the Listing and Approved Prices for Limb Prostheses.
- 110.19 **Prosthesis** means a removable appliance (fastened externally to the body) intended to substitute for a partially or totally absent body part to restore its function.

**Preparatory Prosthesis:** A device that allows for extensive gait training for lower limb amputees and extensive functional training for upper limb amputees. A person with a preparatory prosthesis is still undergoing wound healing and rapid and extensive changes to the residual limb that will preclude fitting of the definitive prosthesis. Endo-skeletal or exo-skeletal finishings are not usually part of the preparatory device.

**Definitive Prosthesis:** A device that is provided following gait and functional training, wound healing and the period of rapid physiological change in the residual limb and is thus intended for a longer wear period than the preparatory device. Physiological changes must still be anticipated as a result of rapid weight fluctuations, medical complications and additional residual limb atrophy/growth caused by the dynamics of using the prosthesis. When severe physiological change occurs, a new socket or prosthesis must be considered. Endo-skeletal and exo-skeletal finishings are usually a part of a definitive device.

110.20 **Regulated Health Professional** means a health care professional holding a valid certificate with a regulatory college specified by the Regulated Health Professions Act.

110.21 **Rehabilitation** means any goal-oriented and time-limited process aimed at enabling an impaired person to reach an optimum mental, physical and/or social functional level for the individual. Rehabilitation seeks to compensate for a loss of function or functional limitation and aims to facilitate social readjustment.

110.22 **Rehabilitation Assessor** means a regulated health care professional who is a registered occupational therapist (OT) or physiotherapist (PT) registered with the Program as a Rehabilitation Assessor, and is an active member of an ADP Amputee Team or EPULP Clinic. The Rehabilitation

Assessor has met all registration requirements with the Program and holds an executed Authorizer Agreement with the Program.

**See Section 110 of the ADP Manual for more definitions.**

## **115 Roles and Responsibilities**

In the process of confirming eligibility for Funding, the Applicant/Client, the Authorizer and the Vendor have specific roles and certain rights and responsibilities. Additional information may be found in the ADP Manual, the Authorizer Agreement, and the Vendor Agreement.

### **115.01 Roles and Responsibilities of the ADP Applicant/Client**

- Has the right to choose from the list of ADP Registered Authorizers, any Authorizer in their community working in the private or public sectors.
- Provides the necessary and accurate information to the Authorizer.
- Makes an informed decision based on the accurate and complete information provided by the Authorizer and the Vendor during the Limb Prosthesis assessment and the ADP application process.
- Determines whether or not to proceed with an application for ADP Funding and choice of Vendor.
- Provides the necessary and accurate information on the Application Form, Section1, "Applicant's Biographical Information".

- Carefully reviews all of the information in the Application Form, Section 3, "Applicant's Consent and Signature", prior to signing the form.
- Has the right to seek a second opinion if the individual disagrees with the Authorizer's assessment of their needs.
- Is responsible for paying the Client portion of the cost for the Limb Prosthesis directly to the Vendor.

## **115.02 Roles and Responsibilities of the Authorizer**

- Is the gatekeeper to the Program and assumes the leadership role in the assessment process, confirmation of the Applicant's eligibility, and completion of the Application Form in a timely fashion.
- Ensures that the prescribed prosthetic limb is properly fabricated, fitted and dispensed to the Client.
- Is responsible for all direct Client care activities including the assessment, measuring, casting, fitting, dispensing, adjustments, Client instructions and follow-up care.
- Is responsible for explaining the warranty conditions and care of the limb.
- Will provide the Applicant with the Approved Prices for the prosthesis and explains any additional costs not covered by the ADP that the Applicant may expect to incur.
- Must follow-up with the Client once the Limb Prosthesis has been provided to ensure that the prosthesis continues to fit the Client appropriately and meets the Client's needs.

- Must not submit an Application Form to the Program for an individual who does not meet the ADP eligibility criteria.
- Must provide appropriate supervision for prosthetic residents, prosthetic technicians and interns.
- Must be an active member of an Amputee Team and/or EPULP Clinic.
- Must continue to meet all conditions specified in the executed Authorizer Agreement and all applicable Manuals.

### **115.03 Roles and Responsibilities of the Rehabilitation Assessor**

- Must be an active member of the Amputee Team and/or EPULP Clinic.
- Completes a rehabilitation assessment of the Applicant.
- Confirms that the Applicant should be able to use the prosthesis for a range of activities for daily living.
- Communicates any concerns or recommendations to the Prescriber and Authorizer at the time of the clinic visit or at any time during treatment.
- Develops an OT or PT treatment plan, if appropriate.
- Is responsible for training for functional integration of the limb into the Client's activities of daily living. The Rehabilitation program may be provided by the team's therapist(s) or a referral may be made to other hospital or community rehabilitation services.

- May coordinate referral to other community or hospital programs, if required.
- Must continue to meet all conditions specified in the executed Authorizer Agreement and all applicable Manuals.

#### **115.04 Roles and Responsibilities of the Prescriber**

- Must be an active member of an Amputee Team and/or EPULP Clinic.
- Provides diagnostic information about the Applicant.
- Provides and incorporates into the team assessment, information about the Client's medical condition(s) that may impact the use of a Limb Prosthesis.
- Responsible for prescribing Limb Prostheses.

#### **115.05 Roles and Responsibilities of the Amputee Team or EPULP Clinic Members**

- Assesses the Applicant's prosthetic needs.
- Prescribes and authorizes Limb Prostheses, approving the final product and suggesting modifications or replacements.
- Provides education and functional use training.
- Coordinates and/or provides associated Rehabilitation services.
- Evaluates the fit and function of the prosthesis at least once during the 3-month period following the receipt of an initial device.

- Arranges regular follow-up visits with the Client to confirm fit and effectiveness of the prosthesis.
- Completes any required adjustments.
- Provides any additional physical treatment and/or training in functional use, as required.
- Ensures that any Client with a suspected change in medical condition is referred to the team Physician for medical review.
- Ensures that the ADP has up to date information about team/clinic membership to ensure that Application Forms can be processed.

#### **115.06 Roles and Responsibilities of the Vendor**

- The Vendor must employ an Authorizer who is registered with the ADP in the Limb Protheses category.
- Must provide quotes to the Client and/or their Agent and the ADP, as required.
- Must honour Manufacturer and Vendor warranties and ensure that follow-up is provided as needed.
- Must be an active member of an ADP registered Amputee Team and/or EPULP Clinic.
- Must continue to meet all conditions specified in their executed Vendor Agreement and the Manuals.



# Devices Covered



# Part 2: Devices Covered

## 200 Devices Covered

Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses that are required as a substitute for a partially or totally absent arm or leg are funded by the ADP.

Limb Prostheses, including sockets, additions, supplements, suspension systems and components, as well as modifications and adjustments approved for Funding are listed in the Product Manual.

Two (2) types of Limb Prostheses are funded by the ADP:

1. Conventional Limb Prostheses; and
2. Externally Powered Upper Limb Prostheses (EPULP)

For all components funded by the Program, the Vendor may only provide components for which the manufacturer provides a warranty that is typical in the prosthetic industry.

The following minimum warranty periods must be in place:

- Feet – 12 months
- Knees – 12 months
- Silicone liners – 6 months
- Other components – 12 months

The procedure for Manufacturers or Authorizers to apply for ADP approval of a new and/or updated socket, suspension system, addition, supplement or componentry is available on the ADP website at:

<https://www.ontario.ca/document/assistive-devices-program-health-care-professionals>

### **200.01 Conventional Limb Prosthesis**

- Conventional Upper and Lower Extremity Prostheses
- Preparatory Sockets and additions
- Definitive sockets, additions and supplements
- Modifications and adjustments costing \$100 and over
- Preparatory and definitive socket replacements
- Component replacements

### **200.02 Externally Powered Upper Limb Prostheses**

- Eligible electric and myoelectric prostheses
- Definitive socket replacements
- Some component replacements

### **200.03 Upper Extremity Prosthesis Funding**

An Applicant is eligible to receive Funding for either an upper extremity Conventional Limb Prosthesis or an Externally Powered Upper Limb Prosthesis at one time.

## 205 Options

Funding is available for sockets, additions, supplements, suspension systems, modifications, adjustments and components listed in the Product Manual.

**Note:** The Applicant must pay the Vendor directly for any non-ADP funded items the individual may choose to purchase.

## 210 Repairs/Batteries

The ADP does not provide funding towards the cost of repairs, maintenance and/or batteries for any Device.

## 215 Modifications to Limb Prostheses Not Funded by the ADP

Individuals may request Funding for modifications for a Limb Prosthesis that was not funded by the ADP.

**The Authorizer must confirm and document during the assessment that:**

- The Limb Prosthesis is on the approved list of Devices;
- The Limb Prosthesis is in good condition; and
- With the modifications requested, the Limb Prosthesis will continue to meet the Applicant's needs.

# Applicant Eligibility Criteria for Limb Prostheses

3

# Part 3: Applicant Eligibility Criteria for Limb Prostheses

## 300 Applicant Eligibility Criteria for Limb Prostheses

The Applicant must require the Limb Prosthesis as a substitute for a partially or totally absent arm or leg.

## 305 Non-Eligible Items

Under the Limb Prostheses Category, the Program does not provide Funding for the following:

- A second prosthesis for the same amputation site;
- An ancillary prosthesis (e.g. for sports or recreation);
- Purely cosmetic prostheses;
- Repairs to prostheses and accessories;
- Modifications and adjustments to Externally Powered Upper Limb Prostheses;
- Batteries;
- Interface products;
- Claims under \$100.

## **310 Individual Identified as Ineligible by Authorizer**

An Application for Funding Limb Protheses form, requesting ADP funding, must not be submitted to the ADP if, after assessing the prosthetic requirements of the Client, the Authorizer confirms that the individual does not meet the ADP eligibility criteria.

## **315 Applicant Identified as Ineligible by ADP**

An Applicant may be deemed ineligible if the criteria for their access to the Program are not met or where information supplied in connection with an Application Form is insufficient, incomplete and/or inaccurate.

In cases of denial, the Vendor will be advised of the reason.

# Confirmation of Eligibility for Device(s) Required

# 4



# Part 4: Confirmation of Eligibility for Device(s) Required

## 400 First Access

A person seeking ADP funding of a Limb Prosthesis, for the first time, must make an appointment with the Amputee Team or EPULP Clinic and be assessed by the interdisciplinary team.

Once the assessment has been completed and the Amputee Team or EPULP Clinic confirms eligibility for ADP funding, the Application for Funding Limb Prostheses form may be completed.

## 405 Clinic Delivery Model

The Clinic Delivery Model is used for:

- **Initial preparatory Limb Prostheses** upon first-time entry into ADP funding or following a change in amputation level;
- **Initial definitive Limb Prostheses** upon first-time entry into ADP funding or following a change in amputation level;
- **All replacement definitive sockets and definitive prostheses** up to one year after authorization of the first ADP definitive prosthesis.

The Amputee Team or EPULP Clinic members meet together in the same location to assess the Client, discuss the Client's needs and preferences, determine whether the Client requires a preparatory prosthesis, definitive limb prosthesis or socket replacement, determine the type of prosthesis

required and establish the Client's eligibility for ADP funding. The prescription for the Limb Prosthesis is based upon discussion and recommendations of all Amputee Team or EPULP Clinic members, including the Client.

## 410 Two-Tier Consultation Delivery Model

The two-tier consultation model is designed for people who require replacement or major adjustment of an existing prosthesis, but not necessarily a meeting or assessment by all members of the Amputee Team or EPULP Clinic. This involves either the Physician or Rehabilitation Assessor, plus the Certified Prosthetist.

- The team **PHYSICIAN** must assess the Applicant and sign the Application Form for:
- **Replacement preparatory sockets** due to physiological change, growth, change in medical condition or minor surgery;
- Replacement definitive Limb Prostheses and definitive sockets due to a change in medical condition or minor surgery;
- **Replacement components** due to a change in medical condition or minor surgery; or
- **Modifications and adjustments \$100 or more** to preparatory or definitive Limb Prostheses when the Applicant undergoes a change in medical condition or minor surgical intervention.

**Note:** For a change in level of amputation, refer to the Clinic Delivery Model in Policy 405.

The team **PHYSICIAN** or the **REHABILITATION ASSESSOR** may assess the Client and sign the Application for Funding Limb Protheses form for:

- **Replacement definitive prostheses and sockets** due to physiological change or growth, after the first year following authorization of the previous definitive limb prosthesis; and
- **Replacement definitive Limb Protheses and sockets** worn out due to heavy use, not applicant negligence.

The Amputee Team or EPULP Clinic members may see the Client independently and then communicate their findings by telephone, letter or informal meeting. It is assumed that the Client will be referred to other appropriate health care professionals such as an Occupational Therapist, Physiotherapist, social worker or psychologist, if professional assessment and/or intervention is/are indicated.

## **415 One-Tier Delivery Model – Conventional Limb Protheses ONLY**

Under the one-tier delivery model, the team Certified Prosthetist assesses the Client and authorizes the Application for Funding form for:

- **Modifications, lengthening and adjustments costing \$100 or more** to preparatory Limb Protheses and definitive Limb Protheses when the Client experiences physiological change or growth;
- **Replacement components costing \$100 or more** and listed in the Limb Protheses Product Manual (Conventional Limb Protheses), worn out because of heavy use, not Client negligence. (A pro-rated contribution may apply during the designated funding period in this latter situation.)

**Note:** This manual specifies the minimum required delivery models for access to ADP funding. Each Amputee Team or EPULP Clinic is free to use more involved delivery models, if they so choose.

## 420 Funding for Both a Wheelchair and a Lower Extremity Prosthesis

An Authorizer registered in the Mobility Devices category will assess the Client's eligibility for a wheelchair, if requested. If this Authorizer is not also a member of the Amputee Team, it would be beneficial for the Occupational Therapist or Physiotherapist, who is a member of the Amputee Team, to consult with the Mobility Devices Authorizer to provide input about the Client's status. This will help ensure that prescription of the mobility device is not contradictory to the goals which the prosthetic team has established with the Client.

It is stated in the Mobility Devices Policy and Procedures Manual:

*"A wheelchair should not be authorized until both the individual's ambulatory status using the prosthesis and their permanent residence has been established.*

*As part of the assessment process, the Authorizer must ensure and document that the authorization of the wheelchair is not contradictory to any goals the Amputee Team may have established with the individual."*

# Device Eligibility

# 5

# Part 5: Device Eligibility

## 500 Number of Devices Funded & Funding Periods

Based on the Authorizer's clinical assessment findings, the Applicant may require more than one device. Only one prosthetic per amputation site is eligible to be funded.

These are the minimum periods of time that these Devices are expected to remain useful.

### **Designated Funding Periods:**

- Conventional Limb Prosthesis Preparatory Sockets (except laminated) and Additions – 3 allowable in one year;
- Conventional Limb Prosthesis Laminated Preparatory Sockets – 1 year;
- Conventional Limb Prosthesis, Sockets, Suspensions, Supplements and Components – 3 years;
- Externally Powered Upper Limb Prosthesis, Suspensions, Additions and Components – 3 years.

The designated funding period is calculated from the date the Authorizer signed the previous Application Form.

## 505 Requests for Replacements

Limb Prostheses are only eligible for replacement funding under the ADP when the Client's current Device is no longer usable or safe. Prostheses are not automatically replaced when the designated funding period has been reached. There must be a proven need to replace the prosthesis, such as a Client's growth or atrophy, a change in medical condition or deterioration of the Device, which would jeopardize the Client's safety or ability to function.

For all replacement requests, a new Application Form must be submitted. Refer to Policy 400 for details regarding assessment requirements.

### 1. Socket Replacements – Conventional Limb Prostheses

Socket replacements will be funded when the affected limb undergoes **physiological change, growth** or a **change in medical condition** sufficiently severe in nature to require a socket replacement. In these cases, socket replacements will be funded at 75% of any amount that does not exceed the Approved Price.

- **Preparatory Sockets**

A maximum of 1 initial and 2 pre-fabricated, plaster, thermoplastic or casting tape socket replacements will be funded **within a 12-month period**. Laminated preparatory socket replacements will not be considered for replacement with another laminated preparatory socket during a 12-month period, unless the Client undergoes a change in medical condition or minor surgery.

- **Definitive Socket Replacements**

Definitive socket replacements will be funded at **any time** when the affected limb undergoes **physiological change, growth/atrophy** or a **change in medical condition** sufficiently severe in nature to require a socket replacement.

## 2. **Component Replacements – Conventional Limb Prostheses**

Within the designated funding period, the ADP will provide funding for replacement components, costing \$100 or more, **worn out because of heavy use rather than Applicant negligence**. This funding will be pro-rated by month from authorization of the previous identical or similar component.

Within the designated funding period, the ADP will provide funding for components such as feet, terminal devices, shanks and forearms, which must be replaced due to **physiological growth changes**. These components will be funded at 75% of any amount negotiated between the

Client and Vendor, not exceeding the ADP Maximum Contribution

## 3. **Replacement of Additions and Components – Conventional Limb Prostheses**

Within the designated funding period, the ADP will provide full funding for replacement additions and suspensions required in conjunction with replacement sockets or worn out due to normal wear, not due to Client negligence.



#### 4. Socket Replacements – EPULP

Within the designated funding period, the ADP will fund a socket replacement at **any time**, if required because of a Client's relevant **physiological growth/atrophy** or **relevant change in medical condition**.

#### 5. Electric Hand and Elbow Replacements – EPULP

Within the designated funding period, the ADP will fund the replacement of an electric hand or electric elbow at **any time**, if required because of a Client's relevant **physiological growth** or **relevant change in medical condition**.

#### 6. Replacement of Other Items – EPULP

The ADP will fund replacements for only the following major components within the designated funding period:

- Replacement sockets;
- Electric hands; and
- Electric elbows.

All other replacement equipment must be funded by either the Client or other third party payment agencies.

#### 7. Loss or Damage

The Program does not provide replacements in cases where the Limb Prosthesis is lost or damaged beyond repair during the designated funding period.

#### **8. Damage Beyond Repair – After Replacement Period**

If, **following the designated funding period**, the Limb Prosthesis, or any part of it previously funded, is irreparably damaged due to normal use or where past and current costs of repairs are excessive, the Program will fund a new Limb Prosthesis, additions and/or components.

## **510 Warranty**

There are three types of warranties: (i) Warranty for Breakage, (ii) Warranty for Fit and (iii) Repeated Technical Failure.

### **1. Warranty for Breakage**

The Vendor warrants that under normal use, the authorized Device is GUARANTEED AGAINST BREAKAGE for six (6) months from the date the completed Device was delivered to the Client. The Vendor must provide a written warranty statement to the Applicant. During the warranty period, the Vendor must provide, or cause to be provided, any service (including repairs or replacement of the Device or any parts) free of charge.

### **2. Warranty for Fit**

The Vendor must warrant, in writing, to the Client that the FIT of the Limb Prosthesis will remain satisfactory for **three (3) months** after

the **final fitting** of the Device, unless there has been a significant change in the medical condition or physiological growth/atrophy of the Client's residual limb.

### **3. Repeated Technical Failure**

When there is repeated technical failure, the Device must be replaced by the issuer of the warranty. Repair and service of Devices, because of technical failure, are the responsibility of the Vendor, Manufacturer or their service designate. The Device should be inspected by the Vendor and the Vendor should contact the Manufacturer/Distributor for replacement of faulty components.

Funding is not available when the Manufacturer's or Vendor's warranty is in effect.

## **515 Modifications to Conventional Limb Prostheses**

Funding is available for modifications/adjustments costing \$100 or more when required due to a relevant change in the Client's medical condition, growth or atrophy.

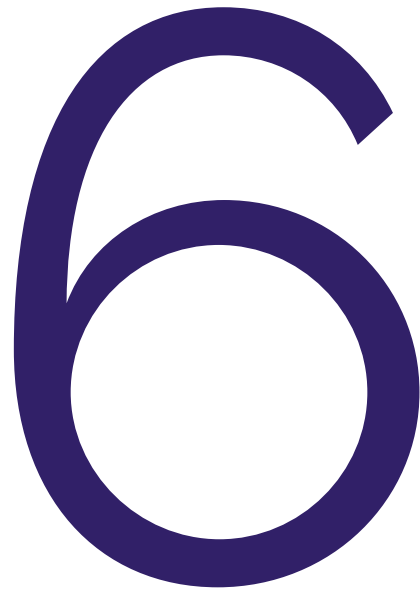
Modifications must provide a more cost-effective solution to meeting a Client's changing needs than replacement of the equipment. This means that the modifications must substantially extend the Device's life and make imminent replacement unnecessary.

Examples of modifications/adjustments include, but are not limited to:

- Use of a socket insert to build up a socket to accommodate for residual limb shrinkage or change in shape, thereby eliminating the need for socket replacement;
- Expansion of a socket to accommodate an increase in residual limb volume; and
- Lengthening a prosthesis to accommodate for physiological growth.

**Refer to Policy 400 for required assessments.**

# Funding and Payment



# Part 6: Funding and Payment

## 600 Policies

No payment of an approved Device shall be made by the Ministry to anyone other than a Vendor in respect of Limb Prostheses.

Vendors are registered with the ADP separately as Conventional Limb Prostheses Vendors and Externally Powered Upper Limb Prostheses Vendors.

Lists of Vendors in specific geographic areas can be obtained from the ADP website at:

<https://www.ontario.ca/page/assistive-devices-program>

Additional information about funding amounts and payments are found in the ADP Manual, Part 3, Clients and Part 9, Invoice Submission, Processing and Payment.

## 605 Funding Amount for ADP Clients

### 605.01 Conventional Limb Prostheses

The Program will pay 75 percent (75%) of the Approved Price for the custom made parts of the conventional Limb Prostheses listed in the Product Manual.

Vendors may **not** bill the Client more than the Approved Prices listed in the Product Manual.

The Program will pay 75 percent (75%) up to a maximum Approved Price for components for Conventional Limb Prostheses listed in the Product Manual.

Vendors **may** charge the Client less than the Approved Prices.

The Vendor **must** charge the Client 25 percent (25%) of the Approved Price and invoice the Ministry for 75 percent (75%) of the Approved Price.

For components, the Vendor will invoice the ADP for 75 percent (75%) of the maximum Approved Price and charge the Client the remaining balance for the cost. The Client must be charged a minimum of 25 percent (25%) of the cost of the components.

**Note:** Should the Vendor charge the Client less than the maximum Approved Price or provide a rebate or discount to the Client for their Devices, both the Client portion (25%) and the ADP portion (75%) must be adjusted accordingly.

## **605.02 Externally Powered Upper Limb Prostheses**

Externally Powered Upper Limb Prostheses are funded at 100% up to the listed Maximum Contribution amount for prostheses, socket replacements, electric hand replacements and electric elbow replacements.

# **610 Funding for Ministry of Children, Community and Social Services (MCCSS) Benefits Recipients**

## **610.01 Co-payment for Clients receiving Social Assistance Benefits**

- Ontario Works (OW)
- Ontario Disability Support Program (ODSP)
- Assistance for Children with Severe Disabilities (ACSD)

## **610.02 Conventional Limb Prostheses**

For Clients receiving social assistance benefits through OW, ODSP or ACSD as of the date reviewed and approved by an Authorizer, the ADP will pay 100 percent (100%) of the Approved Price for all custom made parts of the prosthesis.

For Clients receiving social assistance benefits through OW, ODSP or ACSD as of the date reviewed and approved by an Authorizer, the ADP will pay 100 percent (100%) of the Maximum Contribution for all approved components.

## **610.03 Externally Powered Upper Limb Prostheses**

For Clients receiving social assistance benefits through OW, ODSP or ACSD as of the date reviewed and approved by an Authorizer, the ADP will pay 100 percent (100%) of the Maximum Contribution for all approved Device codes.



## 615 Delivery of Prosthesis

The Vendor will deliver/provide the Limb Prosthesis, socket, supplements, suspension system, additions, components and/or modifications and adjustments together with a fully itemized invoice to the Client. The Vendor will also advise the Client regarding the warranty and follow-up services offered and provide a copy of the Vendor's and manufacturer's warranty, as well as instructions and information regarding care and maintenance of the Device.

## 620 Expiry Date of the Application for Funding Limb Prostheses Form

The Application Form is considered current and valid for one (1) year from the Authorizer assessment date.

**Note:** The expiry date will **NOT** be extended. After the expiry date, a new assessment must be completed and a new Application Form must be submitted to the Program.

**Note:** The Authorizer assessment date must precede the delivery of the Limb Prosthesis, additions, supplements, and/or components to the Client and/or the date of provision of the modifications.

# Invoicing Procedures

# 7

# Part 7: Invoicing Procedures

## 700 Guide to Completing the Invoice

Refer to the ADP Manual, Part 9, Invoice Processing and Payment for details.

## 705 ADP Processing Errors

In the event of an ADP processing error being identified following funding approval, the ADP will co-operate with the Authorizer and Client to make any necessary corrections.

The Authorizer must notify the ADP in writing of the error(s) along with a request for the approval to be amended.

## 710 Authorizer Prescription Errors & Omissions

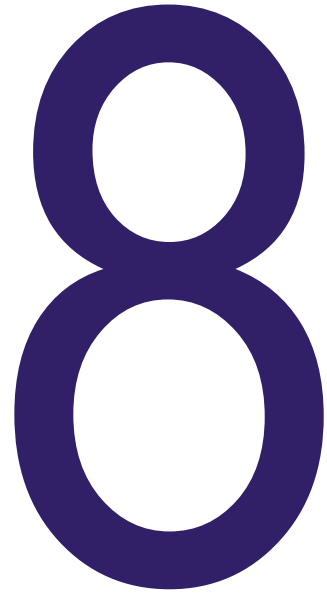
In the event of an Authorizer prescription error and/or omission being identified following funding approval, the ADP will co-operate with the Authorizer to make any necessary corrections.

The Authorizer must return a copy of the page of the Application Form to the ADP with the errors highlighted along with a request for the approval to be amended.

## **715 Client Refusal of Delivered Prostheses**

In the event of Client refusal either at the time of delivery or immediately thereafter, the ADP will work co-operatively with the Client, Authorizer and Vendor to resolve the situation.

# Authorizers



# Part 8: Authorizers

## 800 Authorizer Status

Certified Prosthetists wishing to be registered with the Program for Limb Prostheses must be registered as Authorizers in the respective Device category. Registration must be completed separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

Occupational Therapists and Physiotherapists wishing to be registered with the Program as Rehabilitation Assessors in the Limb Prostheses category must be registered as Authorizers in the respective Device category.

Registration must be completed separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

## 805 Requirements for Authorizer Status

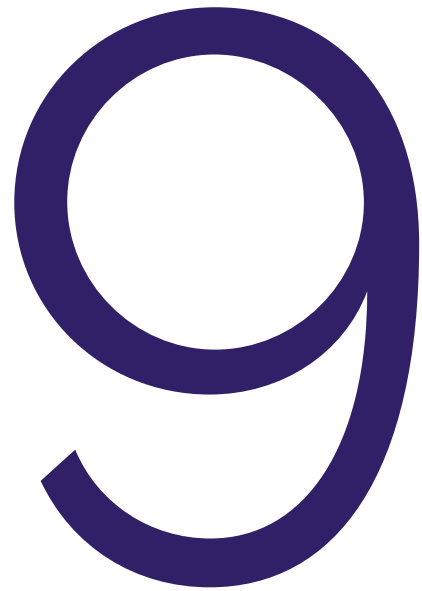
An Authorizer for Limb Prostheses must be a Certified Prosthetist who has met all registration requirements with the Program.

A Rehabilitation Assessor must be an Occupational Therapist who holds a valid certificate of registration from the College of Occupational Therapists of Ontario or a Physiotherapist who holds a valid certificate of registration from the College of Physiotherapists of Ontario and who is licensed to practise in Ontario.

## 810 General Authorizer Policies

Detailed information about authorizer registration and policies and procedures are found in the **ADP Manual, Part 4, General Authorizer and Vendor Policies and Part 5, Authorizers**.

# Vendors





# Part 9: Vendors

## 900 ADP Registered Vendor Status

Vendors wishing to submit a request for Funding to the Ministry for Limb Prostheses must be registered as Vendors in the Device category.

Vendors must register separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

Vendors applying for registration status must submit the names of staff members who have **professional qualifications to fabricate and/or fit Limb Prostheses** and proof of such qualifications.

### 900.01 Manufacturers As Vendors

Despite policy 605 in the ADP Manual, Manufacturers and Distributors as Vendors, manufacturers of custom made Limb Prostheses may apply to become ADP registered Vendors.

The ADP will not register as a Vendor a manufacturer or distributor of components.

An ADP registered Vendor must meet, on an ongoing basis, the device specific requirements to become registered with the ADP. See policy 600, Becoming Registered and Maintaining Vendor Status with the Program, in the ADP Manual and the Vendor Registration section on the ADP website.

## 905 Staffing Requirements for Vendors

The Vendor must employ at least one Authorizer who is registered with the ADP in the Limb Prostheses Category. Therefore, the Vendor must have one full time employee who is a Certified Prosthetist.

The Authorizer must be registered separately for Conventional Limb Prostheses and Externally Powered Upper Limb Prostheses.

## 910 General Vendor Policies

Detailed information about Vendor registration and policies and procedures is found in the ADP Manual in the following areas:

- Part 4, General Authorizer and Vendor Policies;
- Part 6, Vendors;
- Part 7, Personal Health Information, and
- Part 9, Invoice Processing and Payment.

### **Note in Particular:**

- i. Policy 405, Conflict of Interest
- ii. Policy 415, Advertising
- iii. Policy 420, Referrals
- iv. Policy 600, Applying for Registration – New Vendor

- v. Policy 601, Applying for Registration – Additional Vendor Location or Additional Category of Devices
- vi. Policy 602, Maintaining Registration as a Vendor
- vii. Policy 615, Relationships of Hospitals and Vendors
- viii. Policy 620, Vendors Sharing Proceeds with Long-Term Care Homes
- ix. Policy 640, Informing Persons of the Program
- x. Policy 660, Refusal to Supply for Safety Reasons
- xi. Policy 665, Warranties of Purchased Devices
- xii. Policy 670, Repairs of Purchased Devices
- xiii. Policy 700, Protection of Personal and Personal Health information
- xiv. Policy 905, Rebates

The ADP Manual is available at:

<https://www.ontario.ca/document/assistive-devices-program-health-care-professionals/policies-procedures-administration-and>

# Registering an ADP Amputee Team or EPULP Clinic

# 10

# Part 10: Registering an ADP Amputee Team or EPULP Clinic

## 1000 Registering an ADP Amputee Team or EPULP Clinic

All ADP funded Limb Prostheses and socket replacements require prescription and authorization by members of an ADP registered Amputee Team/EPULP Clinic.

There are two (2) types of Amputee Teams:

- Conventional Limb Prostheses; and
- Externally Powered Upper Limb Prostheses.

Membership of an Amputee Team must include:

- A physician who is a physiatrist, orthopedic surgeon or other physician recognized as a specialist in the field of Amputee Rehabilitation;
- A Certified Prosthetist who is registered with the ADP in the applicable Device category;
- An Occupational Therapist or Physiotherapist who is registered with the ADP in the applicable Device category;
- A Vendor that is registered with the ADP in the applicable Device category.

The members must register separately for the two types of teams.

An application to register an Amputee Team must be completed. The application can be requested from the Program.

The Amputee Team is issued a clinic registration number that must be used on Application for Funding for Limb Protheses forms, when applicable.

**Refer to Policy 400 and Policy 405 for assessment situations specifically requiring the clinic model.**

All physicians, Authorizers and Rehabilitation Assessors must be active members of the ADP Amputee Team or an EPULP Clinic.

# Contact Information

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# Part 11: Contact Information

## 1100 Program Addresses

### 1100.01 Assistive Devices Program

Assistive Devices Program  
Ministry of Health  
5700 Yonge Street, 7th Floor  
Toronto, Ontario M2M 4K5

Email: [adp@ontario.ca](mailto:adp@ontario.ca)

Telephone: Toronto area (416) 327-8804

Toll free: 1-800-268-6021

TTY: 1-800-387-5559

Fax: (416) 327-8192

Public Website:

<https://www.ontario.ca/page/assistive-devices-program>

Health Professionals Website:

<https://www.ontario.ca/document/assistive-devices-program-health-care-professionals>



## **1100.02 Financial Management Branch**

Ministry of Health

Financial Management Branch, Program Payments Unit

P.O. Box 48

49 Place d'Armes, 3<sup>rd</sup> Floor

Kingston Ontario K7L 5J3

Telephone: In Kingston (613) 548-6477

Toll free: 1-800-267-9458

Fax: (613) 547-1963