

RESPIRATORY DEVICES CATEGORY

ADMINISTRATION MANUAL

Assistive Devices Program

Ministry of Health and Long Term Care

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RESPIRATORY DEVICES

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1 INTRODUCTION

1.1 The Policies and Procedures Administration Manual

Goal

The goal of the Respiratory Devices Category is to provide funding to individuals for the purchase of appropriate respiratory equipment and supplies resulting in improved health and increased participation in daily activities.

Intended Target Audience

The purpose of this manual is to describe the policies and procedures of the Respiratory Devices Category section of the Medical Supplies category of the Assistive Devices Program (ADP).

The manual is intended for use by:

1. Physicians who prescribe respiratory equipment and supplies;
2. Health professionals involved in the assessment of applicant's requiring respiratory equipment and supplies,
3. Registered respiratory vendors.

This Manual is intended to complement the Assistive Devices Program Policy and Procedures Manual (**Program Manual**).

1.2 Format of the Manual

The manual is divided into several sections. Each section covers the related issues and topics. When there is a change in the Policies and Procedures of the Respiratory Devices Category, only the updated pages will be provided, rather than a complete reprint of the manual.

1.3 **The Assistive Devices Program (ADP)**

The Ministry of Health and Long-Term Care's Operational Support Branch administers the Assistive Devices Program (ADP).

Legislation Governing the Program

The Minister has authority pursuant to paragraph 6(1)4 of the Ministry of Health Act, R.S.O. 1990, c.M.26 to enter into agreements for the provision of devices.

Vision

To enable people with physical disabilities to increase their independence through access to assistive devices responsive to their individual needs.

Mandate

To provide consumer centered support and funding to Ontario residents who have long-term physical disabilities to provide access to personalized assistive devices appropriate for the individual's basic needs.

To provide Ontario residents with fair and affordable access to a range of devices and to provide vendors with a fair and predictable return on their investment.

1.4 **Definitions**

For the purposes of this Manual, these are the meanings of the following terms:

1.4.1 **Agent:** A person who is legally authorized to act on the applicant's behalf.

- (1) The following persons can sign an application on behalf of an individual to verify information and to consent to the collection, use and/or disclosure of information:
 - (a) where the applicant is less than sixteen (16) years of age, a person who has lawful custody of the individual;
 - (b) the applicant's attorney under a continuing power of attorney;
 - (c) the applicant's guardian of property;
 - (d) the applicant's attorney under a power of attorney for personal care;
and
 - (e) the applicant's guardian of the person,

as evidenced by supporting documents.

- (2) Only the following persons can sign on behalf of the individual to indicate that payment is to be made out to someone other than the applicant:
- (a) where the applicant is less than sixteen (16) years of age, a person who has lawful custody of the individual;
 - (b) the applicant's attorney under a continuing power of attorney;
and
 - (c) the applicant's guardian of property,
- as evidenced by supporting documents.

1.4.2 Applicant: An individual who applies for ADP funding assistance for a respiratory device.

1.4.3 Application Form: The Equipment/Supply Authorization (ESA) Form provided by the Program and used to request ADP funding assistance for a listed respiratory device.

1.4.4 Approved Amount/Price: The dollar amount specified in the Respiratory Devices Catalogue. The amount represents the ADP price for one unit of the listed device.

1.4.5 Authorized Device: A listed device which the authorizer, having assessed the applicant, has specified as appropriate for the applicant.

1.4.6 Client: A person, who applied to the Program, was eligible, and who received funding assistance from the Program for a device.

1.4.7 Equipment/Supply Authorization (ESA) Form: The form provided by the Program and submitted to the ADP to request funding assistance for respiratory devices.

1.4.8 Health Professionals: A registered nurse, registered respiratory care practitioner, or respiratory therapist with knowledge about respiratory equipment and supplies.

1.4.9 Infant: A child under the age of one year.

1.4.10 Long Term Care Home: Formerly Nursing Homes and Homes for the Aged, these facilities provide extended and residential care for people. May be registered with the Ministry of Health and Long Term Care.

1.4.11 Nurse Practitioner: A health professional holding a valid certificate with the College of Nurses of Ontario in the Extended Class.

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- 1.1.12 Personal Information:** The personal information as defined in section 2 of the Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31 or any successor legislation thereto.
- 1.4.13 Prescriber (Physician):** A member of the College of Physicians and Surgeons of Ontario who is qualified to practice medicine in Ontario under The Medicine Act, S.O. 1991 C.30 or any successor legislation thereto.
- 1.4.14 Program:** The Respiratory Devices Category administered by the Ministry's Assistive Devices Program (ADP).
- 1.4.15 Registered Respiratory Vendor:** A business or non-profit organization that has met all registration requirements for the Respiratory Devices Category and holds an executed vendor agreement with the Program.
- 1.4.16 Registered Sleep Laboratory:** A facility registered with the ADP as a centre at which individuals are assessed for Obstructive Sleep Apnea Syndrome (OSAS).
- 1.4.17 Regulated Health Professional:** A health professional holding a valid certificate with a regulatory college specified by the Regulated Health Professions Act.

2 ELIGIBILITY CRITERIA FOR RESPIRATORY DEVICES

2.1 Applicant Eligibility: General

Applicants must meet all the following basic criteria to be considered by the Respiratory Devices Category for funding assistance.

- 2.1.1 Must be an Ontario resident with valid Health Card Number.
- 2.1.2 Must have a chronic respiratory illness or dysfunction that requires the long-term use of a respiratory device for six months or longer.
- 2.1.3 Must reside in either -
 - a) The community, or
 - b) A group home facility where:
 - i) The facility is their long-term residence, and
 - ii) The products are for their personal use.
- 2.1.4 An individual is not eligible if they reside in one of the following:
 - a) an acute or chronic care facility,
 - b) a Long-Term Care home,
 - c) a Schedule I Ministry of Community and Social Services residential facility.
- 2.1.5 Must not be receiving or be eligible to receive the same benefits from the Workplace Safety & Insurance Board (WSIB) or from Veterans Affairs Canada (VAC), Group A.
- 2.1.6 Applicants receiving social assistance benefits under Ontario Works (OW), the Ontario Disability Support Program (ODSP), or Assistance to Children with Severe Disabilities (ACSD) they are eligible to receive funding assistance for 100% of the ADP approved price.
- 2.1.7 Individuals must also meet the device specific medical eligibility criteria.

NOTE: All respiratory devices funded by the ADP must be prescribed by a physician licensed to practice medicine in Ontario and must be supplied by an ADP registered respiratory vendor.

2.2 Medical Eligibility Criteria and Assessment

2.2.1 A physician, as described under 'Prescriber' in the definitions contained in the Introduction Section 1 of this manual, must assess an individual who wishes to have respiratory devices funded by the ADP.

The physician must certify that the individual has a chronic respiratory illness or dysfunction that requires the long-term use of a respiratory device for six months or longer.

2.2.2 An exception to this requirement is the short-term rental of apnea/cardiorespiratory monitors for infants at risk of Sudden Infant Death Syndrome (SIDS). See Section 3.

2.2.3 There are specific medical eligibility criteria for the following:

- Apnea/Cardiorespiratory Monitors, Section 3;
- Medication Compressors, Section 4;
- High Output Air Compressors, Section 5;
- Postural Drainage Boards and Percussors, Section 6,
- Positive Airway Pressure Systems, Section 7.

For devices that have specific medical eligibility criteria, the prescribing physician must provide information to indicate that the criteria have been met.

3 APNEA/CARDIORESPIRATORY MONITORS

3.1 Medical Eligibility Criteria

The ADP utilizes guidelines developed by pediatric experts to determine funding eligibility for the rental of apnea/cardiorespiratory monitors. The following describes who is eligible:

- Siblings of Sudden Infant Death Syndrome (SIDS) Infants
- Infants experiencing an Apparent Life-Threatening Episode (ALTE). An ALTE is characterized by an episode of lifelessness requiring stimulation or resuscitation. There may be an absence of breathing for at least 20 seconds, a skin colour change of cyanosis or extreme paleness, and/or generalized hypotonia or limpness.
- Premature infants in whom apnea persists beyond 37 weeks corrected gestational age.

See Section 2 for general eligibility criteria required to access the ADP and the Respiratory Devices Category.

3.2 Acceptable Evidence of Medical Eligibility

Physicians must provide documentation to support the funding request for infants who have experienced an ALTE, or premature infants with apnea after 37 weeks corrected gestational age.

NOTE: Infants with a pre-existing condition that has been determined as the cause of an apparent life-threatening episode are not eligible for funding for a monitor.

3.3 Infants with a Tracheostomy

If a monitor is required for long-term use (9 months or longer) for an infant with a permanent or long term tracheostomy, the prescribing physician should write to the ADP Program Co-ordinator, Medical Supplies, indicating the reasons for the need. ADP will consider funding towards the purchase of a monitor. See Section 3.5.

3.4 Funding for Apnea/Cardiorespiratory Monitors: Rental of Equipment

The ADP will pay 75% of the approved monthly rental charge listed in the Respiratory Devices Catalogue. The client will pay the remaining 25%.

Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved monthly rental charge.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more than the ADP approved price.

The monthly rental charge does not include funding for supplies or accessories (e.g. electrodes, leads, and alarms) that are used with the monitor, and the program does not pay for replacement monitors.

All approved applications for apnea/cardiorespiratory monitors rental will receive funding for a maximum of six (6) months. Extensions beyond six months will not be considered or granted.

3.5 Funding for Apnea/Cardiorespiratory Monitors: Purchase of Equipment

Special ADP authorization is required when requesting funding assistance for the purchase of an apnea/cardiorespiratory monitor. See Section 9.

Upon approval for the purchase of an apnea/cardiorespiratory monitor, the ADP will pay 75% of the approved price listed in the Respiratory Devices Catalogue.

The client will pay the remaining 25%. Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved price.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more than the ADP approved price.

The ADP purchase price does not include funding for supplies or accessories (e.g. electrodes, leads, and alarms) that are used with the monitor, and the program does not pay for replacement monitors. ADP will consider funding after the warranty expires under special request.

4 MEDICATION COMPRESSORS

4.1 Medical Eligibility Criteria

The ADP provides funding assistance for medication compressors for individuals with a chronic respiratory illness or dysfunction that requires regular, long-term treatment (for six months or longer) with inhaled aerosolized medications, and who are unable to use a powdered delivery or metered-dose form of medication. The medical eligibility criteria for medication compressors were developed by physicians with expertise in respiratory medicine.

The following individuals are eligible:

- (i) individuals with cystic fibrosis;
- (ii) individuals receiving inhaled antibiotics;
- (iii) individuals with a permanent tracheostomy who require inhaled aerosolized medications,
- (iv) individuals who have a physical disability (e.g. arthritis in the hands, quadriplegia) that prevents them from using a powdered delivery or metered-dose form of medication, or individuals who have not yet developed the co-ordination required to operate powdered delivery or metered-dose devices.

See Section 2 for general eligibility criteria required to access the ADP and the Respiratory Devices Category.

4.2 Acceptable Evidence of Medical Eligibility

A physician must assess each individual. The physician must indicate a diagnosis, surgical procedure and/or information that confirms the individual meets the medical eligibility criteria, as outlined above.

4.3 Funding for Medication Compressors

The ADP will pay 75% of the approved price listed in the Respiratory Devices Catalogue. The client will pay the remaining 25%.

Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved price.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more than the ADP approved price.

5 HIGH OUTPUT AIR COMPRESSORS

5.1 Medical Eligibility Criteria

The ADP provides funding assistance for high output or heavy-duty compressors for individuals with a chronic respiratory illness or dysfunction that requires regular, long-term treatment (for six months or longer).

The following individuals are eligible:

- (i) individuals who have a permanent or long-term tracheostomy and require high humidification of inspired air,
- (ii) individuals who require the delivery of certain aerosolized antibiotics.

NOTE: The ADP does not fund room humidifiers, air filtration units and air conditioning systems.

See Section 2 for general eligibility criteria required to access the ADP and the Respiratory Devices Category.

5.2 Acceptable Evidence of Medical Eligibility

A physician must assess each individual. The physician must indicate a diagnosis, surgical procedure and/or information that confirms the individual meets the medical eligibility criteria.

5.3 Funding for High Output Air Compressors

The ADP will pay 75% of the approved price listed in the Respiratory Devices Catalogue. The client will pay the remaining 25%.

Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved price.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more than the ADP approved price.

6 POSTURAL DRAINAGE BOARDS & PERCUSSORS

6.1 Medical Eligibility Criteria

The ADP funds postural drainage boards and percussors only for individuals with a diagnosis of cystic fibrosis.

See Section 2 for general eligibility criteria required to access the ADP and the Respiratory Devices Category.

6.2 Acceptable Evidence of Medical Eligibility

A physician must assess each individual. The physician must indicate a diagnosis that confirms the individual meets the criteria, as outline above.

6.3 Funding for Postural Drainage Boards and Percussors

The ADP will pay 75% of the approved price listed in the Respiratory Devices Catalogue. The client will pay the remaining 25%.

Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved price.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more that the ADP approved price.

7 POSITIVE AIRWAY PRESSURE SYSTEMS

Auto-Titrating Positive Airway Pressure	(APAP)
Bi-Level Positive Airway Pressure	(BPAP)
Continuous Positive Airway Pressure	(CPAP)

7.1 Medical Eligibility Criteria

Only individuals with a diagnosis of Obstructive Sleep Apnea Syndrome (OSAS) are eligible to apply.

See Section 2 for general eligibility criteria required to access the ADP and the Respiratory Devices Category.

7.2 Acceptable Evidence of Medical Eligibility

To receive funding assistance for Positive Airway Pressure Systems, an individual must be assessed at an ADP-registered Sleep Laboratory. The assessment must include a Level 1 Polysomnography, showing evidence of OSAS during sleep and the presence of significant symptoms or medical risks without treatment, and the absence of symptoms or risks with treatment. The prescriber may be required to provide a written copy of the Level 1 Polysomnography.

7.3 Bi-Level Positive Airway Pressure (BPAP) Systems

Individuals requiring BPAP systems **without** timers must meet the eligibility criteria outline in Sections 7.1 and 7.2 above and the medical eligibility criteria outlined in Section 7.3.1 below. Special ADP authorization is required when requesting funding assistance for BPAP Systems. See Section 9.

7.3.1 Medical Eligibility Criteria for BPAP**The following individuals are eligible:**

- (i) Individuals with polysomnographically documented sleep apnea who, despite Continuous Positive Airway Pressure (CPAP) of 15 cmH₂O or greater, exhibit one of the following:
 - 1. Nocturnal hypoxemia (O₂ saturation <88%)
 - 2. Nocturnal hypercapnia (PaCO₂ >50mmHg) despite three or more months of sustained CPAP therapy, and in the absence of significant underlying COPD which could account for the persistent hypercapnia
 - 3. Apnea/hypopnea index >10

- (ii) Individuals with polysomnographically documented sleep apnea in whom CPAP \geq 15 cmH₂O resolves the physiological abnormalities listed under (i) but who are unable to tolerate this pressure.

- (iii) Individuals with polysomnographically documented sleep apnea who
 - 1. Are unable to tolerate any level of CPAP

or

 - 2. Continue to complain of excessive daytime sleepiness despite resolution of physiological abnormalities when treated with CPAP, and the exclusion of other conditions that could cause daytime sleepiness (e.g. narcolepsy); will be considered on an individual basis.

7.3.2 **Acceptable Evidence of Medical Eligibility**

The assessment of an individual for a BPAP system must be completed by a physician with an expertise in respiratory physiology and experience in mechanical ventilation.

The prescriber must include in the request for special authorization, Section 9, evidence that the medical criteria for a BPAP system has been met.

When requesting authorization for funding for an individual who meets medical criterion 7.3.1(i) above, the prescriber is required to give detailed information, including the duration of the trial with CPAP and the pressures required.

NOTE: Where remoteness and lack of access to a sleep laboratory is a factor, assessment using transcutaneous PaCO₂ under the direction of a respirologist will be considered. However, there must be documentation of a previous assessment through a registered sleep laboratory.

7.4 **Auto-Titrating Positive Airway Pressure (APAP) Systems**

Individuals requiring APAP systems must meet the eligibility criteria outline in Sections 7.1 and 7.2 above and the medical eligibility criteria outlined in Section 7.4.1 below. Special ADP authorization is required when requesting funding assistance for APAP Systems. See Section 9.

7.4.1 **Medical Eligibility Criteria for APAP**

The following individuals are eligible:

Individuals with polysomnographically documented OSAS where there is a change in pressure of a minimum of 4 cmH₂O on a prescribed fixed CPAP level of 10 cmH₂O or more.

The change must occur between REM vs. NREM sleep or supine vs. sleeping on their side.

7.4.2 Acceptable Evidence of Medical Eligibility

Special ADP authorization is required when requesting funding assistance for APAP Systems. See Section 9.

The prescriber must include in the request for special authorization, Section 9, evidence that the medical criteria for a APAP system has been met.

When requesting authorization for funding for an individual who meets medical criterion 7.4 above, the prescriber is required to give detailed information.

7.5 Funding for Positive Airway Pressure Systems

A Positive Airway Pressure System (CPAP, APAP, BPAP) includes all the following items:

- (i) a positive airway pressure device;
- (ii) a heated humidifier;
- (iii) a basic mask and headgear;
- (iv) carrying case;
- (v) 6 ft. tubing;
- (vi) all necessary caps and filters,
- (vii) user instruction manual.

Registered respiratory vendors may bill the client 100% of the cost for items not included in the Positive Airway Pressure System as listed above.

Registered respiratory vendors may provide additional services to the client, such as service packages. The vendor may offer these services to the client at a cost separate from the funding assistance provided by the ADP.

Registered respiratory vendors who offer clients additional services must provide the client with the option to purchase the additional services separately and not as a mandatory service when purchasing a system.

7.5.1 Continuous and Autotitrating Positive Airway Pressure Systems

The ADP will pay 75% of the approved price listed in the Respiratory Devices Catalogue. The client will pay the remaining 25%.

Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved price.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more than the ADP approved price.

7.5.2 Bi-Level Positive Airway Pressure System

The ADP will pay 75% of the amount the vendor charges the client up to a specified maximum contribution as listed in the Respiratory Devices Catalogue.

ADP will pay 100% of the amount the registered respiratory vendor charges the client up to a specified maximum contribution as listed in the Respiratory Devices Catalogue.

7.6 Fact Sheet for Positive Airway Pressure Systems

Prior to the purchase of a Continuous or Autotitrating Positive Airway Pressure System, the registered respiratory vendor must provide the applicant with an ADP Fact Sheet for Continuous/Autotitrating Positive Airway Pressure Systems.

Fact sheets can be ordered by calling (416) 314-5518 or toll-free 1-800-268-1154. They can also be downloaded from the ADP website at www.health.gov.on.ca/english/providers/program/adp/adp_mn.html

8 GENERAL RESPIRATORY DEVICES

The following respiratory devices are included in the general respiratory devices category:

- suction machines and supplies
- tracheostomy tubes and supplies
- ventilator supplies [only for Ventilator Equipment Pool (VEP) clients]

8.1 Medical Eligibility Criteria

The applicant must have a chronic respiratory illness or disability requiring the long-term use of the prescribed device.

See Section 2 for general eligibility criteria required to access the ADP and the Respiratory Devices Category.

8.2 Acceptable Evidence of Medical Eligibility

A physician must assess each individual. The physician must indicate a diagnosis and/or surgical procedure that is relevant to the particular (product/s) required. A surgical procedure such as “tracheostomy” is not acceptable as a primary diagnosis.

8.3 Product Specific Prescription

The physician must indicate in Section 2 of the ESA form under “Instructions, Special Needs” the specific type of respiratory devices required. For example:

Instructions, special needs:

Suction machine and supplies, tracheostomy tubes and supplies

On receipt of the ESA form completed by the physician, the registered respiratory vendor must indicate the ADP catalogue number in Section 3.

8.1 Funding for General Respiratory Devices

The ADP will pay 75% of the approved price listed in the Respiratory Devices Catalogue. The client will pay the remaining 25%.

Clients receiving social assistance under Ontario Works (OW), the Ontario Disability Support Program (ODSP) or Assistance to Children with Severe Disabilities (ACSD) will receive 100% of the approved price.

ADP registered respiratory vendors may charge the client less than the ADP approved price, but the vendor may not charge the client more than the ADP approved price.

9 PROCEDURE FOR SPECIAL AUTHORIZATION

Special ADP authorization is required when requesting funding assistance for:

- Bi-Level Positive Airway Pressure Systems (BPAP);
- Auto-Titrating Positive Airway Pressure Systems (APAP);
- Metal tracheostomy tubes,
- Purchase of an Apnea/CardioRespiratory Monitor.

All requests are considered on an individual basis.

After receiving the individual's consent to pursue ADP funding assistance, the prescriber must:

1. Submit a letter to the ADP, providing detailed documentation confirming that the individual meets the ADP's medical eligibility criteria.
2. Complete and sign an ESA form and give to the applicant to take to an ADP registered respiratory vendor of their choice.

The vendor completes the relevant sections of the application and submits a photocopy directly to the ADP "Attention Program Co-ordinator, Medical Supplies".

Upon receipt of the copy of the ESA form and supporting documentation, the Program Co-ordinator will review the information.

If the request is approved, the vendor will be contacted and given a special authorization number to enter on the original ESA form before sending it to the ADP.

If the request is denied, no further requests for funding will be considered unless the prescribing physician did not provide crucial information to support the request.

10 RE-APPLICATION FOR ADP FUNDING ASSISTANCE

Individuals who have applied to the ADP previously for:

- medication compressor;
- high humidity compressor;
- positive airway pressure system;
- Bi-Level pressure device;
- drainage board;
- metal tracheostomy tube,

and who meet the medical eligibility criteria, are eligible to re-apply for funding assistance every five years, if their device is no longer in good working condition.

Individuals who have previously been funded for a percussor may re-apply in two years and individuals who have had a suction machine previously funded may re-apply in three years.

For percussors and suction machines, a repair estimate documenting the cost of repairs for the previously funded device is required to be submitted with the new application form. ADP does not consider replacement batteries or chargers as part of repair costs.

10.1 Warranty

During the life of the manufacturers' warranty, where there is repeated equipment failure, the issuer of the warranty should replace the device.

All Positive Airway Pressure Systems must carry a minimum 3-year manufacturer's warranty.

NOTE: Registered respiratory vendors may not sell previously used or rebuilt equipment to ADP clients.

11 THE APPLICATION FORM

The Equipment/Supply Authorization (ESA) Form must be completed in order to access the ADP for funding assistance. Only original applications can be submitted to the program. Photocopies and facsimile copies will not be accepted.

Applications or ESA forms can be obtained by calling the following telephone number:

From the Toronto area:	416-314-5518
Toll Free:	1-800-268-1154
TDD/TTY from the Toronto area:	416-327-4282
TDD/TTY Toll Free:	1-800-387-5559

The ESA form consists of 5 sections and 4 parts. All sections must be accurately completed, signed, and dated to avoid delays in processing.

If information is recorded incorrectly on the ESA form, a line must be drawn through the incorrect information and the correct information recorded above the line. All changes must be initialed by the appropriate individual. White out will not be accepted as a means of correcting information recorded on the application.

11.1 Section 1 - Biographical Information

This section of the ESA form identifies the applicant and must be completed by the applicant or their legal agent.

The following information must be provided:

- applicant's last name, first name and middle initial if applicable;
- date of birth;
- gender;
- home address, including postal code and apartment number;
- home telephone number including area code;
- Ontario Health Card Number (and version code if applicable),
- social assistance benefits received through OW, ODSP, ACSD.

11.2 Section 2 - Diagnosis and Equipment Type

This section of the ESA form identifies the applicant's diagnosis. A physician (prescriber) must complete this section. The physician certifies that the applicant has a long-term disability or illness and requires the use of a respiratory device(s) for a period of six months or longer.

The following information must be provided:

- Diagnosis;
- surgical procedure, including date of surgery (if applicable);
- special requirements that may influence the type and/or quantity of supplies required;
- type of equipment required by the applicant in generic terms, under "Instructions, Special Needs;
- the prescriber's name, printed and signed ;
NOTE: signature and date stamps are not accepted;
- prescriber's Ontario Health Insurance Billing number;
- prescriber's telephone number'
- prescriber's authorization date.

11.3 Section 3 - Equipment/Supplies Required

This section of the ESA form lists the respiratory devices required. It must be completed by the prescribing physician, a health care professional with expertise in respiratory devices or the registered respiratory vendor.

The following information must be provided:

- description of each device (See Device Catalogue);
- ADP catalogue number (See Device Catalogue);
- quantity of supplies provided at the time of initial purchase;
- total cost of the supplies provided, not to exceed ADP approved prices;
- total cost of supplies provided to the client less the amount paid by the applicant/agent (25%),
- amount to be billed to ADP (75%) or for clients receiving social assistance, 100% of the ADP Price.

NOTE: The ADP Registered Vendor does not need to sign Section 3.

11.4 Section 4 - Applicant's Declaration

This section of the ESA form contains the applicant's declaration statement. The applicant or their legal agent must sign and date the declaration statement. By signing this section of the form, the applicant or their agent:

- a. authorizes the release of the applicant's personal information to the Ministry of Health and Long-Term Care, its agents, and the ADP Registered Vendor;
- b. certifies that the device is required and the applicant does not have a similar device in good working condition that was previously funded by ADP;
- c. certifies understanding of the ADP eligibility criteria for funding assistance,
- d. certifies that the information given is true and correct.

11.5 Section 5 - Vendor's Declaration

This section of the ESA form identifies the ADP registered respiratory vendor who is providing the prescribed device(s). It is to be completed and signed by the vendor.

The following information must be provided:

- vendor's name and business address;
- vendor's ADP registration number;
- vendor's signature, certifying that the information on the ESA form is true, complete, and correct;
- confirmation that the vendor has supplied the items specified in Section 3,
- vendor's signature date.

11.6 Submitting the ESA Form to ADP and Distribution of Copies

- Part 1 (yellow) of the form is mailed by the vendor to:

Assistive Devices Program
Ministry of Health and Long-Term Care
5700 Yonge Street, 7th Floor
Toronto ON M2M 4K5

NOTE: Incomplete ESA forms will be returned.

- Part 2 (blue) of the ESA form is retained by the physician.
- Part 3 (pink) of the ESA form is retained by the vendor.
- Part 4 (green) of the ESA form must be given to the applicant or their legal agent by the vendor for the applicant's records or for third party payment purposes.

12 PURCHASING EQUIPMENT

When the physician has completed section 2 of the ESA form, they should remove Part 2 (blue) of the form and retain this document for their own records.

The physician may refer the client to a registered respiratory vendor. The registered respiratory vendor will assist the client with determining what devices they may need. Only devices listed in the Respiratory Devices Catalogue are eligible for funding assistance.

Prior to the purchase of a respiratory device listed in the Respiratory Devices Catalogue, the registered respiratory vendor must inform the applicant of the existence of the ADP and the process for accessing funding assistance.

Upon receipt of the application, the registered respiratory vendor will complete section 3 of the ESA form.

Clients requiring respiratory devices must purchase them directly from a vendor registered with the Respiratory Devices Category at the ADP.

Once the ESA form is fully complete, it can be returned to:

Assistive Devices Program
Ministry of Health and Long-Term Care
5700 Yonge Street, 7th Floor
Toronto ON M2M 4K5

Incomplete ESA forms will be returned.

13 INVOICE PROCESSING AND PAYMENT

When a client has been approved to receive funding assistance for respiratory devices, a registered respiratory vendor can invoice the Ministry of Health and Long-Term Care (MOHLTC).

Registered respiratory vendors can submit their invoices to the Supply and Financial Services Branch (SFSB) of the MOHLTC.

Registered respiratory vendors can only invoice the MOHLTC for devices listed on the ESA form and only for devices listed in the Respiratory Devices Catalogue.

A client must receive their respiratory devices before the registered respiratory vendor submits an invoice to the SFSB.

The Respiratory Devices Category requires a client signature on or included with all invoices as proof of delivery of respiratory devices to the client. This will confirm that the client has received the items invoiced.

Invoices submitted to the SFSB must contain the following information:

- ◆ registered respiratory vendor name and address;
- ◆ vendor registration number;
- ◆ invoice date;
- ◆ delivery date (if applicable);
- ◆ client's (applicant's) name and address;
- ◆ ADP Equipment Supply authorization (ESA) form number (located in the upper right hand corner of the ADP ESA form, in red);
- ◆ description of supplies provided and quantity;
- ◆ ADP catalogue number;
- ◆ vendor's selling price;
- ◆ the cost to the client(applicant) or agent,
- ◆ amount to be paid by ADP.

Submitted invoices that are fully completed and accurate and match a fully completed and accurate application form will be paid according to the ADP's payment policy. This payment is usually made on an approved application within (30) days of receipt of the completed and accurate invoice.

When a registered respiratory vendor submits an invoice with invalid, illegible or missing data the invoice will not be paid. The entire invoice will be placed "on hold"

A "Hold Report" which accompanies the registered respiratory vendor's payment remittance advice will list the invoices that are "on hold" and describe the error conditions for each invoice. Registered respiratory vendors must review the "Hold Report" and make the appropriate corrections. The invoice data must be corrected and recorded in the space provided on the "Hold Report" and returned to the SFSB. Telephone calls to make corrections will not be accepted.

If a registered respiratory vendor has concerns regarding the processing of invoices and payments they should direct their questions to the ADP Payment Unit in Kingston (see Section 5.5.1 of the Administration Manual for the telephone number and address).

If a registered respiratory vendor has concerns regarding the processing of ESA forms they should direct their questions to the Claims Assessment Unit of the ADP (see Section 5.5.1 of the Administration Manual for the telephone number and address).

The registered respiratory vendor submits the original invoice to:

Ministry of Health and Long-Term Care
Supply and Financial Services Branch
Health Care and Related Payment Unit
3rd Floor
49 Place d'Armes, P.O. BOX 48
Kingston ON K7L 5J3
FAX 613-548-6514

A valid and payable invoice is considered stale-dated if the SFSB receives the invoice greater than one (1) year after the delivery date of the item. An invoice that is stale-dated will not be processed for payment.

14 GENERAL VENDOR POLICIES FOR RESPIRATORY DEVICES**14.1 Equipment Care and Maintenance/Repairs**

14.1.1 It is expected that the registered respiratory vendor will have employees trained in the use of respiratory devices, and will provide instructions for the effective use, care, and maintenance of all respiratory devices.

14.1.2 The ADP does not pay or contribute towards the cost of repairs or maintenance for respiratory devices. The cost of repairs during the warranty period will depend on the terms of the warranty. The cost of repairs after the warranty period expires is the liability of the client.

14.1.3 The registered respiratory vendor will provide or arrange for the provision of repair and maintenance services for all respiratory devices it supplies.

14.2 Stale-dated Policies

14.2.1 The application form is stale-dated when the Program receives the application form more than one (1) year after the physician's authorization date.

14.2.2 A valid and payable invoice is considered stale-dated if the SFSB receives the invoice greater than one (1) year after the delivery date of the item. An invoice that is stale-dated will not be processed for payment.

14.3 Respiratory Devices Obtained Outside Ontario

14.3.1 Clients must purchase their ADP-approved devices from a registered respiratory vendor only. Clients planning out-of-province trips should purchase their devices prior to leaving the province.

14.3.2 Respiratory devices purchased from non-registered vendors are not eligible for ADP funding. When traveling outside Ontario or Canada, health travel insurance may pay for emergency services.

14.4 Conflict of Interest

- 14.4.1** The ADP considers there to be a clear conflict of interest where the registered respiratory vendor pays any fee or amount, or gives any benefit directly or indirectly, to a person who determines client eligibility or refers clients to that vendor.

Where a physician has any financial interest in the registered respiratory vendor, the Program also considers this to be a conflict of interest.

Violation of this policy will result in termination of the vendor agreement.

15 DIRECTORY INFORMATION

Please direct questions or requests regarding the subjects below to the appropriate person listed on the right side of the chart:

<u>TYPE OF REQUEST</u>	<u>PERSON TO CONSULT</u>
Policy & Procedures:	Program Co-ordinator - Medical Supplies Toronto: 416-327-8804 (Toll Free) 1-800-268-6021
Vendor Registration:	Vendor Registration Clerk Toronto: 416-327-8804 (Toll Free) 1-800-268-6021
Request for ESA forms and ADP Information Brochures:	InfoLine Toronto: 416-314-5518 (Toll Free) 1-800-268-1154
Claims Approval Enquiries: Claims Denial Enquiries: Client Eligibility: Client ADP Numbers:	Claims Assessment Clerk, Respiratory Devices Toronto: 416-327-8804 (Toll Free) 1-800-387-4670
Invoice Enquiries:	Health Care and Related Payments Clerk Kingston: 613-548-6477 (Toll Free) 1-800-267-9458

Written enquiries may be directed to:

Policies and Procedures	Ministry of Health and Long-Term Care Operational Support Branch Assistive Devices Program 5700 Yonge Street, 7th floor Toronto ON M2M 4K5
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OR

Invoice Enquiries	Ministry of Health and Long-Term Care Supply and Financial Services Branch Health Care and Related Payment Unit, 3rd Floor 49 Place d'Armes, P.O. Box #48 Kingston ON K7L 5J3 FAX 613-548-6514
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RESPIRATORY DEVICES CATEGORY

Device Catalogue

Assistive Devices Program

Ministry of Health and Long Term Care

July 2007