

What is required to submit an orthotics claim?

If you've been prescribed orthotics, this information sheet will help you understand what is required when submitting an orthotics claim.

To be considered eligible for payment, orthotic appliances must be:

1. medically necessary
2. prescribed by a licensed physician, podiatrist or chiroprapist
3. prescribed prior to purchase
4. custom-made, and
5. received and paid in full by the member.



Please note that any costs associated with obtaining this information are the responsibility of the member and that additional information may be required once the claim has been reviewed.

Orthotics Claim Submission Requirements

To make an orthotics claim, complete the standard *OTIP Extended Health Benefit Claim Form* and include the following supporting documents:

1. The recommendation or referral from the licensed physician, podiatrist or chiroprapist, which must include the medical condition requiring the use of orthotic appliances.
2. Copies of the biomechanical examination and gait analysis performed.
3. A description of the process used to create the orthotics, including the casting technique and raw materials used.
4. Confirmation that the orthotics have been paid in full (supporting receipt).

You must include the above documentation with the original claim submission to avoid delays in claim assessments and payments.

Please return this information along with a completed *OTIP Extended Health Benefit Claim Form* to:

OTIP Health Claims
125 Northfield Drive West
PO Box 218
Waterloo, ON N2J 3Z9

You will be notified in writing of OTIP's payment decision or, when necessary, a requirement for additional information.

Guidelines for purchasing good quality, custom-made orthotics

OTIP's carrier, Manulife Financial, has conducted a number of audits and discovered that many orthotic appliances are over-prescribed or improperly supplied. Incorrectly made orthotics can cause pain by overstressing muscles, tendons, bones and joints.

1. **Choose a reputable, licensed provider, such as a podiatrist or chiroprapist,** who is qualified to perform a medical examination using a biomechanical evaluation and gait analysis. *See the links at the end of this document sheet for the regulatory bodies for professionals in the field of orthotics.*
2. **Ensure that a biomechanical evaluation and gait analysis are performed.**
3. **Ensure the orthotic is custom-made.** A custom-made orthotic is made from scratch using a cast (mould) of your foot. Having a footprint taken on an inepad or using your shoe size to provide a prefabricated insole does not qualify as custom-made.

If the provider indicates that they can provide you with the orthotics the same day, or if they have not performed a biomechanical or gait analysis, this is a good indication that the orthotics are not custom-made.

Please note that some of the information in this sheet may not pertain to your benefit plan. To check your benefit plan information online, sign in to the OTIP Plan Member Secure Site at www.otipservices.com or call OTIP Benefits Services at 1-866-783-6847.

A few words about benefit fraud

What is benefit fraud?

Benefit fraud is the intentional act of deceiving, concealing or misrepresenting information that results in benefits being paid to an individual or group.

OTIP is committed to protecting members and groups from benefit fraud. Fraudulent claims put you and your group benefit plan at risk.

At OTIP, we work diligently with our partner, Manulife Financial, to investigate suspicious claims. Recently, there have been a number of concerns related to claims for orthotics, orthopaedic shoes and compression stockings. These claims are currently under investigation. It is important to be aware of what is considered to be a fraudulent claim to prevent benefit fraud and to ensure you are being provided with good quality products and service.

Don't be a victim of benefit fraud.

DOs and DON'Ts

Do use your benefits plan for its intended purpose – the medically necessary treatment of illness or injuries.

Do reduce your risk by checking the list of reputable providers in your area (see the links at the end of this information sheet for the regulatory bodies for professionals in the field of orthotics.).

Don't sign blank claim forms and then let the provider complete and submit them. Your signature makes you responsible for what is submitted.

Don't submit claims for free products offered as a reward for using a provider.

Don't submit a claim for reimbursement for products or services you have not received or before you receive and pay for them.

Don't allow the provider to bill you and then reverse the charges, exchange cheques (you pay the provider, he or she pays you back) or fake a cash transaction. This is considered falsifying evidence of "proof of payment".

Don't obtain products for family and friends not covered under your benefits plan.

Fraud impacts everyone as it can lead to increased benefit plan costs and higher premiums. OTIP and our partner, Manulife Financial, watch for and investigate inappropriate activity to protect you and your group benefit plan from fraud. You can do your part by educating yourself about the products and services you are claiming and by using credible suppliers. Working together will help us all prevent benefit fraud.

If you have any further questions, please contact OTIP Benefits Services online at www.otipservices.com or by phone at 1-866-783-6847.

Useful links:

www.cocoo.on.ca (College of Chiropodists of Ontario)

www.cpeds.ca (College of Pedorthics of Canada)

www.cbcpo.ca (Canadian Board for Certification of Prosthetists and Orthotists)

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