



**12-111 FOURTH AVE BOX 347
ST. CATHARINES, ON L2S 3P5
1-855-857-8500 | Info@LymphedemaDepot.com**

November 2014

Re: Non-coverage of Solaris TributeNight™ Garments by ADP

Patients living with lymphedema and other chronic swelling conditions in Ontario may be fortunate enough to qualify for funding assistance to cover a portion of costs for some of their compression garments from the Ontario Assistive Devices Program, also known as the “ADP.” This provincial government program operates through a network of prescribers, authorizers, clinics and vendors throughout Ontario and provides partial coverage for selected garments which have been specified by the Program as approved for funding.

(For more information: <http://www.health.gov.on.ca/english/public/pub/adp/overview.html>)

There is an administrative process to have each brand and type of garment approved for the program, and as many of our Ontario friends and colleagues in the lymphedema care community are aware, Solaris and Lymphedema Depot have been engaged in the related application process with the ADP for several years. Should Solaris TributeNight™ garments be added to the program, we will contact all customers who have inquired and who have asked to be placed on our notification list.

In the meantime, we continue to work with customers who do happen to have an alternate source of funding or private health insurance benefits that includes coverage for medical equipment and/or compression garments, but whose insurer has denied a pre-approval claim for a Solaris TributeNight™ garment, stating that the insured must first exhaust the available funding provided by the “government,” referring to the ADP.

Because Solaris Tribute garments are thus far not eligible for ADP funding, all that is generally required to satisfy your insurer that this option has been exhausted is the provision of a simple “Letter of Denial” from the ADP. We have asked the ADP to help our customers to streamline the process of obtaining such a denial letter, and are happy to provide you with a template to simplify this step. **[A Fax Form for requesting your ADP Letter of Denial follows this page.](#)**

We are interested in hearing from you if you have claimed coverage for your Solaris garment with your healthcare insurance plan or another source. If your claim was denied, we may be able to help. Look for helpful tools and info here: www.LymphedemaDepot.com/funding

Lymphedema Depot Ltd. – Chronic Edema & Wound Care Products

URGENT: REQUEST FOR LETTER OF DENIAL FOR COVERAGE

Fax to : ADP - PRESSURE MODIFICATION DEVICES
Fax No. : 416 - 327 - 8192
Attn : INSURANCE / DENIAL LETTERS

Patient: _____ Date: _____

Mailing address:

Telephone #: _____ Ontario Health Card #: _____

I hereby request a Letter of Denial stating that the Assistive Devices Program does not currently cover any portion of the cost of the Solaris compression device (distributed in Canada by Lymphedema Depot Ltd.) indicated below:

Diagnosis:

Lymphedema (chronic)
Swelling (acute)
Chronic Venous Insufficiency
Combined Lymphedema
Lipedema

Area Affected:

Right Arm Left Arm
Right Leg Left Leg
Right Foot Left Foot
Other _____

Treatment:

Solaris Tribute → *Tribute Options* → + Tribute Outer Jacket (+10mmHg)
 Solaris Caresia + Tribute Variable Compression Jacket
 Solaris TheraFit + Custom modifications as necessary

I understand that ADP will issue the requested letter of denial and send it to me by postal mail and that this process should not take longer than approximately 5-10 business days.

Thank you,

Signature: _____ Date: _____