

ODSP MEDICAL REVIEWSTIP SHEET FOR CLINICIANS

What is a medical review?

Most individuals who are initially found eligible for benefits under the Ontario Disability Support Program (ODSP) are given a medical review date.

Medical reviews are undertaken periodically by the Disability Adjudication Unit of ODSP to determine whether individuals are still medically eligible for disability benefits in Ontario. ODSP recipients who have been receiving disability benefits for several years may lose their benefits through this process.

On a medical review, recipients are given a new application to take to their doctors for verification of their ongoing eligibility for disability benefits. At the moment, the medical review application looks identical to the original ODSP application.

What is the legal test on a medical review?

On a medical review, the Social Benefits Tribunal should apply the following legal test:

Has there been any IMPROVEMENT in the recipient's condition since the initial granting of ODSP benefits?

If not, the recipient should remain on ODSP.

If there has been some improvement, do the recipient's impairments and restrictions in activities of daily living nevertheless remain SUBSTANTIAL?

Tips for Completing the Medical Review Application

DO:

- ☑ Obtain a copy of the original application in order to have a basis for comparison when considering whether there has been any improvement since the initial ODSP grant. If your patient's medical condition has worsened or remained the same since the initial application, comment.
- ☑ Endorse "3"s and "4"s (moderate and severe) ratings on the Intellectual and Emotional Wellness Scale (IEWS)/Activities of Daily Living Index (ADLI) if you support your patient's ongoing eligibility for disability benefits.

- ☑ Complete all the answers on page 3 of the Health Status Report, including length of time you have known the patient and the frequency of visits.
- ☑ Include new specialist reports, test results (DON'T assume your updated Application Form is sufficient)
- ☑ Verify the existence of any <u>new</u> medical conditions (the Social Benefits Tribunal considers the cumulative effect of patient's various conditions and does not view them separately).
- ☑ For each new medical condition, be sure to indicate the corresponding impairments and restrictions AND indicate whether the impairments/restrictions are expected to last one year or more (anything less will render your patient ineligible for benefits).
- ☑ Indicate the condition is <u>permanent</u> if that is the case; do not assume it is obvious to the adjudicators.
- ☑ Indicate what treatment has been tried/has failed, and whether patient has been waitlisted for treatment/surgery.
- ☑ Try to link mental health conditions/symptoms to the ADLI (i.e. what is the impact of those symptoms?)

DON'T:

- ☑ Don't endorse lower ADLI/IEWS scores than on the original application if the patient remains disabled.
- ☑ Don't endorse only "1"s and "2"s on the IEWS/ADLI if in your opinion the patient is medically disabled from working for at least one year.
- ☑ Don't comment on anticipated or hoped-for improvements if possible remember that the test for disability is 1 year or more.
- Don't indicate the patient is obtaining some relief from medication/surgery if the patient continues to suffer substantial restrictions (ex. phrase it as "even with medication/surgery, the patient continues to suffer substantial restrictions...")
- Don't assume the Ministry adjudicators have any knowledge of medicine.

DO: Call Jeff Schlemmer or Stephanie Dickson at Neighbourhood Legal Services anytime with questions: 519-438-2890.