

ODSP

ODSP Applications: Information for Health Professionals

This pamphlet provides information to help health professionals complete the forms in the Ontario Disability Support Program's disability determination package. OHIP will pay you for completing these forms.

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CLEO

Community Legal Education Ontario
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About the Ontario Disability Support Program

The Ontario Disability Support Program (ODSP) provides financial and other benefits to people with serious health problems who have low incomes. It is run by Ontario's Ministry of Community and Social Services.

To be eligible for benefits all applicants must show that they qualify financially. Most applicants must also meet ODSP's definition of disability. Some people can qualify without meeting the definition—for instance, those who get Canada Pension Plan disability benefits, and those over 65 who are not eligible for Old Age Security.

This pamphlet refers to applicants who must prove that they meet the ODSP definition of disability.



Qualifying for disability benefits

The application form and any information submitted to support it must show that the applicant is a person with a disability as defined by the *Ontario Disability Support Program Act*.

According to the *ODSP Act*, an applicant who is financially eligible can get disability benefits if:

- he or she has a “physical or mental impairment”,
- the impairment is “substantial”,
- the impairment will last for at least one year, either continuously or recurrently,

and

- the impairment has a direct effect on, **and** will substantially restrict, **at least one** of the following activities of daily living:
 1. attending to personal care,
 2. functioning in the community, or
 3. functioning in the workplace.

The impairment, how long it is likely to last, and how it restricts the applicant’s activities must be verified by an approved health professional.

On page 4, we list the health professionals who are approved to complete the required forms for an applicant.

Applying for disability benefits

A person who wants to apply for ODSP can do so directly at offices of the Ministry of Community and Social Services or through a municipal Ontario Works (social services) office.

The first step in the process is proving financial eligibility. An applicant who is found financially ineligible has a right to appeal that decision.

A **disability determination package** is provided to applicants who are found financially eligible, as well as to those who are appealing a decision that they are not financially eligible.

The disability determination package is available in English or French and contains the following forms:

- **HEALTH STATUS REPORT** and **ACTIVITIES OF DAILY LIVING INDEX**,
- an optional **SELF REPORT** (which the applicant must sign even if he or she chooses not to complete it),
- **CONSENT TO RELEASE OF MEDICAL INFORMATION** which the applicant signs to show his or her consent.

The completed forms must be submitted to the Ministry's **Disability Adjudication Unit (DAU)** within **90 days** from the date the applicant receives the package. It is important to meet the deadline. Otherwise, the applicant may have to begin again with a new application.

If any test results or other medical reports are not available within the 90 days, the health professional who is completing the form should note this and send in the information later.

Approved health professionals

The **HEALTH STATUS REPORT** must be completed by a physician, psychologist or psychological associate, optometrist, or nurse practitioner who is a registered nurse in the extended class.

The **ACTIVITIES OF DAILY LIVING INDEX** must be completed by a physician, psychologist or psychological associate, optometrist, audiologist, occupational therapist, physiotherapist, chiropractor, speech language pathologist, registered social worker, registered nurse, or nurse practitioner who is a registered nurse in the extended class.

How the Disability Adjudication Unit decides

The DAU, which is based in Toronto, reviews all applications. If the DAU approves an application, the applicant should begin to receive financial benefits within a few months.

The DAU states that it applies the “whole person” approach to its decisions. Therefore, the applicant could be entitled to benefits if:

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- many minor impairments, taken together, create a “substantial impairment”, and
 - that overall impairment substantially restricts the applicant’s activities of daily living.

For this reason, make sure to describe all impairments and how different conditions and symptoms interact.

Essential information to include

The applicant will not be interviewed or examined by the DAU. Therefore, it is important that the **HEALTH STATUS REPORT**:

- clearly describe the applicant’s physical or mental impairments, and
- include details of the restrictions experienced by the applicant.

The Intellectual and Emotional Wellness Scale should be completed for an applicant with any mental health condition, even if it is not the applicant’s principal condition.

The **ACTIVITIES OF DAILY LIVING INDEX** is intended to show the restrictions the applicant experiences as a result of his or her condition(s). For example, family members may have had to take on household tasks previously done by the applicant. It is important to indicate how an applicant’s ability to work is affected by his or her condition(s).

Interviewing the applicant before completing the Index will help you to obtain sufficient information about his or her restrictions.

Try to fully describe the applicant's situation on the forms. You are not limited to the "grading systems". You can add your own comments to describe the applicant's condition and its effect on his or her ability to function. For example, if pain limits the applicant's activities, either directly or indirectly, explain how it does so as well as the impact of pain on the applicant.

It is very helpful to add further comments on the form and attach any written reports and "objective information" such as x-ray reports and test results. Explain how the objective data supports your medical opinion.

Make sure to note any medications or treatments, as well as their side effects if the applicant experiences them regularly and they affect his or her ability to function. It can be useful to also include treatments that have been tried without success.

Mental health conditions

Documenting mental health conditions on the forms can be difficult. Your comments can be crucial in presenting a full picture of the applicant's condition and its impact upon his or her daily life. Make sure to provide details of both:

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- the applicant’s symptoms, and
 - the effects of these symptoms.

For example, a reference to “depression” will be more effective if you also describe how the depression affects the applicant’s ability to function on a daily basis.

The most important questions

The forms do not ask the most important questions:

- Does the applicant have a substantial impairment?
- If so, does the impairment substantially restrict the applicant’s ability to care for himself or herself, or to function in the workplace or community?

If the answer to these questions is yes, make sure to clearly state that opinion in the forms or attachments as well as why you have formed this opinion.

You may be contacted by the DAU if they have questions or want additional information.

If an applicant is refused by the DAU

An applicant who is refused benefits can ask the DAU for an internal review of the decision. The applicant must request the internal review within 30 days of receiving

the decision. Applicants who miss the deadline can ask for an extension of time.

If the internal review does not result in a decision to grant benefits, the applicant can appeal to the Social Benefits Tribunal (SBT).

The applicant can submit additional medical evidence for an internal review or an appeal.

*New medical evidence for an appeal must be filed with both the SBT and the DAU at least **30 days** before the SBT hearing. The additional evidence may result in a decision to grant benefits.*

An applicant who has been refused by the DAU can contact a community legal clinic for help with requesting an internal review or an appeal.

Periodic medical reviews of successful applicants

Even if an applicant is granted ODSP benefits, he or she is likely to be given a medical review date. At that time, the DAU will check the applicant's disability or health status again to make sure that he or she still qualifies for ODSP benefits. The applicant will be asked to have the forms in the disability determination package completed again.

For further information

If you would like more information about the disability application process and advice on filling out the forms, contact a community legal clinic.

To find the community legal clinic nearest you, see the CLEO directory **Getting legal help: Community Legal Clinics in Ontario**, which is available to view and to print on CLEO's web site at **www.cleo.on.ca**.

You can also check for clinic contact information on Legal Aid Ontario's web site at **www.legalaid.on.ca** or by phoning them:

Toll-free **1-800-668-8258**

Toll-free TTY **1-866-641-8867**

In Toronto. **416-979-2352**

TTY in Toronto **416-598-8867**

The Disability Adjudication Unit can be reached by telephone at:

Toll-free **1-888-256-6758**

In Toronto. **416-326-5079**

TTY in Toronto **416-326-3372**

TTY users in all other area codes, call collect using Bell Canada Relay.

The law can change, and policies and practices can also change or vary. This pamphlet contains general information. It is not a substitute for getting legal advice about your particular situation.

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