CPC Virtual Q&A February 4th 2024
Questions and Answers

1. **What are the specific obstacles that are preventing/delaying 3rd party insurance providers from recognizing and paying for Pedorthic Assessments?**

   Currently, Canadian Certified Pedorthists are recognized only as product providers as opposed to service providers. The specific obstacles include educating the appropriate people within insurers to have this changed. Greater recognition of our profession within the general public and employers would also create pressure for insurers to cover our services.

2. **The College of Pedorthics of Canada has modified their scope some time ago to allow C. Ped (C)s to increase their scope through additional qualifications, experience or training. Does this only apply to lower limb or does upper extremity and spinal fall under this?**

   The Scope of Practice applies only to the lower limb*, defined as from the hip down.*

3. **Virtual care policy - what's the science behind the position taken?**

   To view a detailed description of the CPC Virtual Care Task Force process and list of referenced materials, click here: Virtual-Care-Task-Force-Process.pdf (cpedcs.ca)

4. **Where specifically does it state that Pedorthists can provide custom foot orthoses without a prescription from a medical doctor? What are the tax categories re providing a prescription/orthoses vs. a doctors prescription for foot orthoses?**

   For a detailed answer to both those questions, please review our FAQ's under the 'General' heading here: https://cpedcs.ca/about-the-college/faqs/

5. **Do the CPC Standards state " standards to be followed as much as possible when appropriate", or anything similar?**

   Yes. It is expected that all standards of the College of Pedorthics of Canada are followed by Certified Pedorthic Professionals. As stated in the Standards of Clinical Practice, it is recognized that deviations from the standards may occur from time to time. In such occasions, the Certified Pedorthic Professional is expected to document the rationale for the deviation and the revised treatment. For deviations to the other standards, the CPC should be notified in writing.

6. **If an insurance company audits a chart, there could be an issue with them not seeing us following the CPC Standards. I have heard them doing this with other colleges…**

   It is an expectation of the CPC that all Certified Pedorthic Professionals follow the CPC Standards and operate within their respective Scope of Practice.

7. **Can you clarify C. Ped (C) competencies i.e. when scope indicates "C. Ped (C)s may extend scope via additional qualifications, experience or training providing the area of practice is within the professional competence"…**

   A C. Ped (C) must always be able to give rationale and prove competency for any treatment they provide. If a C. Ped (C) has received education and/or training in an area outside or adjacent to our scope they are permitted to provide those treatments. Additional qualifications may be achieved through continuing education, workshops, product knowledge and/or additional training.

8. **Is Direct Supervision in training restricted to a single Certified Pedorthist overseeing a Pedorthist in training? Or can multiple C. Ped (C)s be involved? Especially when the trainee is in a different city.**

   The Standards of Supervision apply to any person working under a C. Ped (C) and is to be followed by the C. Ped (C). Multiple C. Ped (C)s may supervise the same people whether in the same facility or multiple facilities.

9. **Has the college discussed a minimal fee for service so that insurance companies see the value of the pedorthic assessment?**

   Through our Strategic Planning, the CPC has acknowledged this and the board is currently discussing possibilities.

10. **With pedorthists needing a degree now, will there ever be a distinction made between pedorthists with a degree and those who were grandfathered in?**

    No. All Canadian Certified Pedorthists have passed their exams and therefore share the same certification status.

11. **Will there ever be a point where the program designation becomes a masters certification with the new Western program?**

    This concept has been discussed at great lengths for many years. At this time there are no plans to create a masters program.

12. **How does CPC differentiate between "education" (CPC) vs. "advocacy" (PAC)? Does the messaging overlap or have the potential to be opposed?**

    The CPC and PAC have many similar goals for communication with insurers. The purpose for the creation of the CPC's Insurance Committee is to educate insurers on our competencies, certification process, continued education and regulation to protect the public. The CPC recognizes the need to grow our profession and considers this in our discussions moving forward.

    The CPC main 'pillars', our 'essence', can be found on the CPC main webpage: https://cpedcs.ca/

13. **I wanted to follow up on the "needing/not needing a referral from a physician for orthotics." It was always my understanding we needed a physician's referral for a client to be seen and if they did not have one, we were obligated by CRA to charge tax as it was not deemed a medical device. Please clarify.**

    For a detailed answer to both those questions, please review our FAQ's under the 'General' heading here: https://cpedcs.ca/about-the-college/faqs/

14. **What are the limitations or expectations for us as pedorthists regarding prosthetics?**

    Click HERE to view our current Scope of Practice. We have not listed products in this section but this may be explored further in the FAQ section moving forward.