

# Sleep Services - British Columbia

## Home Sleep Test (HST) – Level 3

1. No coverage available through the British Columbia's Medical Services Plan (MSP) or private medical healthcare insurance
2. Most CPAP providers offer HST at no charge with a physician's referral, otherwise a fee is applied

## In-lab Polysomnogram (PSG) – Level 1

1. Government sleep labs: PSG funded through BC's MSP however waiting lists are long (months-years)
2. Privately owned sleep labs: Some of these labs may be publicly funded. If so, PSG is covered by BC's MSP; if not, patient pays out-of-pocket
3. No coverage available through private medical healthcare insurance

## CPAP Therapy (CPAP)

1. No coverage available through BC's MSP
2. Coverage for CPAP available through private medical healthcare insurance: CPAP providers perform pre-authorizations for patients however, in some cases the patient is asked to pay upfront and submit the claim to their insurance provider

*Note: Percentage of CPAP coverage is dependant on policyholder's plan.*

## Oral Appliance Therapy (OAT)

1. No coverage available through BC's MSP
2. Coverage for OAT available through private medical healthcare insurance
  - a. Patient pays out-of-pocket then submits claim to insurance provider
  - b. Coverage will be considered under the following conditions:
    - i. A request has been submitted for pre-determination
    - ii. Patient trialed CPAP for a minimum of 3 months and was deemed non-compliant (based on Non-Insured Health Benefits criteria)
    - iii. Current 12 month prescription for OAT is available
    - iv. OAT has been requested within 24 months of the CPAP trial

Insurance Provider	Market Share	OAT Coverage
Blue Cross	10%	60-80%
Great West Life	21%	80-100%
Green Shield Canada	4%	60-80%
Manulife	22%	80-100%
Sunlife	23%	80-100%

Mercon Benefit Services (Great West Life Branch) covers \$1500 of the oral appliance cost every 24 months.

**Note:** Percentage of OAT coverage is dependant on the policyholder’s plan.

3. Coverage for OAT is also available through British Columbia’s Employee Assistance Program as follows:
  - a. The item is the least expensive, appropriate breathing device
  - b. Must be prescribed by a medical practitioner or nurse practitioner
  - c. Must be confirmed by the assessment of a relevant therapist (respiratory, occupational, or physical)
  - d. Request must be pre-approved by the ministry prior to purchase
  - e. The treatment is only eligible for moderate to severe sleep apnea

Dental procedures, related to the provision of OAT, have been successfully billed under the following dental codes:

Dental Code	Dental Procedure
14311	Appliance (intraoral) for treatment of obstructive airway disorders

**Documents Required by the Patient to Support OAT Claim**

- Physician’s referral for the HST
- Sleep physician’s interpretation of the HST
- Physician’s prescription for OAT

*Disclaimer: This information is intended to provide general background only. Coverage varies from province-to-province and payer-to-payer. Payer policy, billing, and coding guidelines change on a regular basis and it is the provider’s responsibility to seek specific directions and guidelines from their third party payers. Use of the information in these documents does not guarantee coverage or prior-authorization approval. Zephyr Sleep Technologies, Inc. will not be held liable for any denials, unpaid claims or loss of income that may result from a provider referencing this information.*