

CPAP/BiPAP Funding Options for Saskatchewan Residents

The goal of any treatment for sleep apnea is to improve air flow to the lungs during sleep. There are several devices that can help do this, each having its own medical and financial criteria for funding. Treatment devices include Continuous Positive Airway Pressure (CPAP), Automatic Positive Airway Pressure (APAP) and Bilevel Positive Airway Pressure (BiPAP). [Learn more about how these devices work.](#)

CPAP funding can be different for Saskatchewan residents. It is important to start a conversation about treatment by asking clients about types of funding they might have. First, determine if the client has Provincial or Federal Health Benefits.

This document will discuss funding options for treatment funding for all Saskatchewan Residents.



Provincial Funding

Saskatchewan Health Benefits

Saskatchewan Aids to Independent Living (SAIL) Benefits

If the client has a Saskatchewan Health Card, they may be entitled to receive a CPAP machine from SAIL.

SAIL will not fund equipment if a client has Saskatchewan Government Insurance (SGI) or Worker's Compensation Board (WCB) coverage.

Funding is based on how many episodes someone had per hour on their diagnostic test using the Apnea-Hypopnea Index (AHI).



Follow the appropriate steps noted on pages 2 and 3 to learn more.



Federal Funding

Federal Health Benefits

Non-Insured Health Benefits (NIHB Treaty People) or Veteran Affairs Health Benefits

If the client has NIHB or Veteran's Affairs Benefits, they may receive funding for CPAP equipment with an appropriate diagnosis.

The CPAP company will communicate with the benefit plans to see what coverage a client may have.



Follow the appropriate steps noted on page 4 to learn more.

 **PROVINCIAL FUNDING**
Saskatchewan Health Benefits and Mild Sleep Apnea
(AHI 5-10)

If diagnosed with mild sleep apnea, clients do not have access to the Saskatchewan Aids to Independent Living (SAIL) CPAP program unless they have been seen by a Certified Sleep Physician and are deemed to be in a high risk occupation.

Individuals are responsible for a CPAP device and related supplies, such as mask, headgear, tubing, filters, water chambers, and distilled water. Read further details on the SAIL Program including other benefits covered (e.g., BiPAP, APAP, ASV, replacement devices, etc.) in the SAIL General Policies or the SAIL Respiratory Equipment Program Overview.

Mild Sleep Apnea (AHI 5-15)

CPAP machines are most often not funded by SAIL.
Follow the steps below to obtain financial assistance.

PRIVATE HEALTH INSURANCE

Ask insurance company for a written statement of funding.
If not fully insured, may apply for assistance for remaining amounts.

NO INSURANCE OR OTHER FUNDING

If no insurance, next options include:

- Purchase CPAP & mask privately
- Finance with vendor
- Check with Lung Saskatchewan for equipment donations
- Apply for financial assistance options below

KINSMEN TELEMIRACLE FUNDING

May cover a CPAP, mask, and tubing for those newly diagnosed with sleep apnea whether SAIL-funded or not.

[Apply](#)

CARING BREATHS FINANCIAL ASSISTANCE PROGRAM

May reimburse up to \$500 per year for sleep apnea equipment not covered by Kinsmen Telemiracle or health insurance benefits.

[Apply](#)

MILD SLEEP APNEA & HIGH RISK OCCUPATION:

May qualify for SAIL-funded CPAP machine with approval from Certified Sleep Physician. Review document for Clients with SK Health Benefits & Moderate/Severe Sleep Apnea if meet this criteria.



PROVINCIAL FUNDING

Saskatchewan Health Benefits and Moderate/Severe Sleep Apnea (AHI 15+)

If diagnosed with moderate or severe sleep apnea by a Saskatchewan Certified Sleep Physician, clients have access to a Continuous Positive Airway Pressure (CPAP) machine for a \$275 program fee through the Saskatchewan Aids to Independent Living (SAIL) program, which covers the loan of a CPAP and repairs as needed for the useful life of the machine.

Individuals are responsible for the program fee and full cost of related supplies, such as mask, headgear, tubing, filters, water chambers, and distilled water.

Read further details on the SAIL Program including other benefits covered (e.g., BiPAP, APAP, ASV replacement devices, etc.) in the SAIL General Policies or the SAIL Respiratory Equipment Program Overview.

Moderate/Severe Sleep Apnea (AHI 15+)

For clients with SK Health Benefits & Moderate/Severe Sleep Apnea to obtain coverage for the SAIL CPAP machine and other CPAP equipment Follow the steps below to obtain financial assistance.

SK SOCIAL ASSISTANCE & SUPPLEMENTARY HEALTH BENEFITS

Confirm client has Supplementary Health Benefits and is diagnosed with Moderate/Severe Sleep Apnea by a Certified Sleep Physician. SAIL CPAP machine, mask, tubing, & filters are funded. Contact the client's social worker to confirm funding coverage.

PRIVATE HEALTH INSURANCE

If no social assistance, check if client has private insurance. Client should ask the insurance company for a written statement of funding. If not fully insured, may apply for other financial assistance options below.

NO INSURANCE OR OTHER FUNDING

If no insurance, next options include:

- Purchase CPAP & Mask privately
- Finance with vendor
- Check with Lung Saskatchewan for equipment donations
- Apply for financial assistance options below

KINSMEN TELEMIRACLE FUNDING

Kinsmen may cover a CPAP, mask, and tubing for those newly diagnosed with sleep apnea whether SAIL funded or not.

[Apply](#)

CARING BREATHS FINANCIAL ASSISTANCE PROGRAM

May reimburse up to \$500 per year for sleep apnea equipment not covered by Kinsmen Telemiracle or health insurance benefits.

[Apply](#)

 **FEDERAL FUNDING**
Non-Insured Health Benefits (NIHB/Treaty Funding)

The purchase of a CPAP or an APAP may be covered if all of the criteria listed in the [Respiratory equipment and supplies benefits list](#) are met, including:

- diagnosis of obstructive sleep apnea (OSA)
- prescription including pressures
- clinical information including age, height and weight, epworth sleepiness scale, symptoms of sleep-disordered breathing, and associated risk factors
- sleep study diagnostic with interpretation by a physician with expertise in sleep medicine
- treatment testing while using the CPAP or APAP demonstrates an improvement in the client's sleep condition

If the client does not meet all the criteria for a purchase, a CPAP or APAP rental may be covered for one (1) month period (for up to three [3] months) to confirm the eligibility criteria for the purchase of a CPAP or APAP system (e.g., to complete titration at home or to demonstrate an improvement in the client's condition).

More details on sleep testing, prescription, and prior approval requirements, as well as client eligibility and other benefits covered (e.g., BPAP S, BPAP ST, rentals, etc.), can be found in the [Medical Supplies and Equipment \(MS&E\) Guide and Benefit Lists > 8.0 Respiratory equipment and supplies benefits list](#).

 **FEDERAL FUNDING**
Veteran's Affairs Health Benefits

Use of a CPAP may be approved when supported by the following documentation:

1. Polysomnography diagnostic of obstructive, central or complex sleep apnea or Upper Airways Resistance Syndrome, interpreted by a specialist.
2. Level 3 home study diagnostic of obstructive sleep apnea interpreted by a specialist.

A specialist with specialized knowledge in sleep should be involved and make the recommendation for the use of BiPAP. The requirement for BiPAP would indicate increased disease severity or in particular a type of problem that requires specialized investigations and therapy.

Use of a removable, custom-fit, titratable oral appliance may be approved by the delegated decision-maker with specific criteria.

More details on Veteran's Affairs Health Benefits available in the [Oxygen Therapy and Respiratory Equipment Policy](#).