



# Home Oxygen Program (HOP) Criteria and Information

## 1. **TERMS:**

- By signing this form you are (A) Completing a prescription for oxygen, (B) Ensuring all information provided is accurate, (C) Acknowledging the terms and ongoing involvement of HOP with this client.
- Completing this form does not ensure that a subsidy will be granted.
- Successful applications will be granted an oxygen system consistent with the client's clinical needs. You do not need to choose oxygen equipment; it will be determined for you.
- The HOP Respiratory Therapists will provide periodic assessments, and oxygen titration. At-home testing may include arterial blood gas, resting, ambulatory and nocturnal oximetry.
- Extended Health Benefits, Veterans Affairs Canada (VAC), NIHB, ICBC, and WCB providers are the primary sources of funding for home oxygen, not the HOP.

## 2. **BC HOME OXYGEN MEDICAL CRITERIA REQUIRED FOR FUNDING:**

Provide as much recent and appropriate information as possible. Data submitted must be taken within 72 hours of application with acute discharges. Oximetry data shown as a single digit will not be accepted. All HOP subsidy applicants are expected to seek and be compliant with optimal medical treatment. The safe use of oxygen therapy is vital. Information to support the co-morbid disease is required (e.g. consultation note, discharge summary, spirometry, echocardiogram, etc.).

**Resting Oxygen:** Patients must be rested on room air for a minimum of 10 minutes prior to obtaining an **arterial blood gas (ABG)** sample.

- A. An ABG with a partial pressure of arterial oxygen (**PaO<sub>2</sub>**) **≤ 55 mmHg on room air**. Note: in exceptional circumstances an arterial oxygen saturation measured by pulse oximetry (**SpO<sub>2</sub>**) **< 88% sustained continuously for 6 minutes** may be accepted.
- OR**
- B. An ABG with a **PaO<sub>2</sub> of ≤ 60 mmHg on room air**, with evidence of one of the following conditions:  
**Clinically significant CHF and/or Pulmonary hypertension**

**Nocturnal Oxygen:** Obstructive sleep apnea (OSA) must be ruled out or maximally treated. A nocturnal overnight study on room air is required for approval of nocturnal oxygen therapy. Evidence of daytime hypoxemia, either at rest or with ambulation is required for approval, subject to HOP Medical Director review. **SpO<sub>2</sub> < 88% for > then 30% of a minimum 4-hour nocturnal oximetry study.**

**Ambulation-Only Oxygen:** As per the HOP Medical Director, **Hospital discharge is appropriate and safe (on room air) if the patient has a resting, room air SpO<sub>2</sub> greater than 88%** (despite desaturation with activity).

There will need to be documented evidence of co-morbidities such as restrictive lung disease, heart failure, PHTN, pre-transplant program, cystic fibrosis, and/or enrollment in an exercise rehab program in order to qualify for ambulation only O<sub>2</sub> or at the discretion of the HOP Medical Director (**Dr. Heather Clark 250-655-2037**) or Respiriologist.

To determine O<sub>2</sub> ambulation requirements for clients that have already qualified for resting O<sub>2</sub> please follow ambulation testing procedure. Ambulation testing procedure: Perform on a flat surface only. If the client is unable to walk for at least **one minute** or a **minimum of 33 meters**, ambulation oxygen therapy will not be useful and will not be funded. Clients should be tested with their usual mobility device such as canes, walkers, etc., and walk as far as possible within the **6 minute** test. Note: Any post ambulation saturation values submitted will not be accepted.

**Infants:** Separate qualifying criteria may exist for subsidies involving infants and children. In general, Neonatologists or Pediatricians determine the chronic needs for oxygen for infants or children.

**Palliative:** Palliative diagnosis does not ensure a home oxygen subsidy. Palliative clients must qualify with the above criteria.

## 3. **NON-MEDICAL CRITERIA:**

- Must be a BC citizen for more than 3 months.
- Must be eligible for and have valid BC Medical Services Plan coverage.
- Must spend ≥ 6 months of a calendar year and continue to maintain their home in BC to maintain BC MSP coverage.
- Must be a permanent resident of Island Health, and not reside in a facility governed by the Hospital Act.
- Must be capable of handling oxygen safely in the home.
- The referring physician must sign the application.
- Applications involving Veterans Affairs Canada (VAC) may be reviewed by HOP then submitted to VAC for further processing.

**HOP will not provide client funding:**

- If above eligibility criteria are not met
- For placebo effects.
- After the second reported safety offense.
- For misuse of oxygen or equipment.
- To operate nebulizers.
- For outpatient use from a hospital
- For travel outside of Canada
- For noncompliance with the prescription or terms of the HOP
- Workers Compensation and ICBC claimants

## 4. **PROCESS:**

Fax the completed form directly to the vendor. To establish a setup timeframe, contact the vendor by phone.

**Hospital starts:** Respiratory Homecare Solutions (RHS) Fax 1-877-701-0425 / PH: 1-877-701-0424

**Community starts:** MedPro Respiratory Care Fax 1-888-310-1441 / PH: 1-888-310-1444

Home Oxygen Program Contact Info PH: (250) 370-8840 / Fax: (250) 519-1567 / Toll Free: 1-866-370-8840