



**FIRST NATIONS AND INUIT HEALTH
NON-INSURED HEALTH BENEFITS PROGRAM**

**CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) – FEE GUIDE
ATLANTIC REGION
NEW BRUNSWICK**

Effective Date: May 28th, 2018

Breathing Apparatus

Item Description	Item Code	Prior Approval	Recommended Replacement Guidelines	Price (Up to)
PURCHASE CPAP CIRCUIT, INTEGRATED HUMIDIFIER	99400175	Yes	5 years	\$1,500.00

Breathing Apparatus Supplies

Item Description	Item Code	Prior Approval	Recommended Replacement Guidelines	Price (Up to)
INLET FILTERS	99400176	No	12 per year	\$5.00
INTERFACE WITH HEADGEAR, NASAL	99401220	Yes	2 per year	\$180.00
INTERFACE WITH HEADGEAR, NASAL PILLOWS SYSTEM	99401222	Yes	2 per year	\$228.00
INTERFACE WITH HEADGEAR, FULL FACE	99401202	Yes	2 per year	\$350.00
NASAL PILLOW	99400848	Yes	2 per year	\$99.00
CPAP/BI-LEVEL TUBING, STANDARD	99401221	Yes	2 per year	\$25.00
CPAP-CHIN STRAP	99401152	Yes	2 per year	\$40.00
CPAP RENTAL	99400174	Yes	Up to 3 months	\$200.00 per month