

PharmaCare Prosthetic & Orthotic Program

This PharmaCare program helps eligible patients achieve or maintain basic functionality by helping to pay for the costs of eligible prostheses and orthoses.

How does the program work?

The program covers:

Item	Cost limit
Designated, pre-approved¹ prostheses for eligible patients of any age	The lowest cost device that helps a patient maintain basic functionality
Designated, pre-approved¹ orthoses for eligible patients age 18 or younger	The lowest cost device that helps a patient maintain basic functionality and prevents further deformity

PharmaCare covers prostheses/orthoses valued at \$400 or more only if it has pre-approved the purchase. Since most claims are for items that cost \$400 or more, most patients require pre-approval² before purchasing an eligible prosthetic or orthotic device.

Reimbursement is subject to the rules of a patient's PharmaCare plan, including any deductible requirement.

How does a patient get pre-approval?

If a device costs \$400 or more, the prosthetic or orthotic supplier submits an **Application for Financial Assistance** to PharmaCare on the patient's behalf. Once pre-approval is given, the patient can buy the device and make a claim to PharmaCare for reimbursement.

Is your patient covered? PharmaCare coverage is automatic for patients who receive B.C. Income Assistance, who live permanently in a residential care facility, or who are in the At Home Program of the Ministry of Children and Family Development. **All other patients must register for the Fair PharmaCare plan.** PharmaCare can approve a product in advance, but if the patient needs PharmaCare coverage, they cannot purchase the product until they register for the plan.

Resources

Find more information about the **Prosthetic & Orthotic Program**, including **patient information sheets**. Visit www.health.gov.bc.ca/pharmacare/publications.html.

Need more information about **PharmaCare**? Visit www.health.gov.bc.ca/pharmacare/prescribe.html.

¹ For items under \$400, patients registered for Fair PharmaCare can send claims directly to PharmaCare. For patients on other PharmaCare plans, the prosthetic or orthotic suppliers will submit the claim.

² If a physician requests Immediate Post-Operative Prosthesis (IPOP) or supplies (e.g., shrinkers) and/or sockets needed to ensure the continued success of treatment for a patient in hospital, pre-approval is not required. Pre-approval is required if the patient is no longer hospitalized.