

**MEDICAL AIDS SUBSIDY SCHEME (MASS)  
STATEWIDE PRESCRIBER PROCEDURES MANUAL**

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**OXYGEN  
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**This section must be read in conjunction with the General Information Section.**

## **1. APPLICANT ELIGIBILITY**

### **1.1 Persons Eligible for Assistance**

Refer to the *MASS Statewide Prescriber Procedures Manual, General Information Section, Sub Section 'Eligibility'* for further information, which must be read in conjunction with this section.

MASS clinical criteria for eligibility for domiciliary oxygen are based on recommendations of the Thoracic Society of Australia and New Zealand (Queensland Branch) and the MASS Oxygen Clinical Advisory Committee (OCAC).

Refer to the relevant sub sections hereunder for eligibility criteria for specific clinical conditions.

An accurate current diagnosis is required and any reversible factors in the underlying condition appropriately managed with maximum therapy before long term domiciliary oxygen is considered for subsidy funding through MASS.

MASS does not subsidise oxygen in the following circumstances:

- Nebulising – when oxygen is required solely for the purpose of nebulising.
- Adult portable oxygen for community access – except in a limited capacity in high priority special circumstances for people on the 'active' cardio-thoracic transplantation list at The Prince Charles Hospital.
- Dyspnoea without hypoxaemia – when an applicant with dyspnoea is not hypoxaemic, oxygen is not provided unless there is another special indication. Oxygen therapy may have a placebo effect in relieving dyspnoea in an applicant but the expense of this form of therapy mandates objective measurements of need and benefit.

### **1.2 Terminal Illness**

Availability of Palliative Care Program funding for terminally ill applicants must be explored before applying to MASS for domiciliary oxygen. Terminally ill applicants must meet the MASS administrative and clinical criteria to receive assistance through MASS.

## **2. PRESCRIBER ROLE**

Refer to the *MASS Statewide Prescriber Procedures Manual, General Information Section* for generic prescriber role, which must be read in conjunction with this section.

Refer to the Oxygen – Designated Prescriber Chart at the conclusion of this document for a list of MASS designated prescriber groups.

### **2.1 Assessment and Application Advice**

If there are clinical concerns in relation to required tests for a particular applicant, the prescriber should contact the MASS Clinical Advisor prior to arranging or conducting the tests.

### **2.1.1 Adults**

- For ongoing oxygen subsidised by MASS, reassessment and reapplication are required. The completed MASS 45 application form must be received by MASS two weeks prior to the cessation date of the initial MASS four month funding period, unless the applicant is otherwise advised by MASS in writing. Therefore, the applicant will need an appointment with the prescribing medical specialist within the approved four month period. If the completed MASS 45 application form is not received, MASS subsidy for oxygen will not continue beyond the initial four month period.
- For subsequent ongoing subsidised oxygen, annual reassessment is required. MASS must receive the completed MASS 46 annual reapplication form two weeks prior to the expiry date of each subsequent twelve month funding period. If the completed MASS 46 application form is not received for reapplication, MASS subsidy for oxygen will not continue beyond the approved twelve month period.

**Note:** If appropriate application forms are not received, payment for ongoing oxygen beyond the MASS approved funding periods will become the responsibility of the applicant.

### **2.1.2 Children**

- For children under six years of age, for ongoing oxygen subsidised by MASS, reassessment and reapplication are required. The completed MASS 47 application form must be received by MASS two weeks prior to the cessation date of the initial MASS six month funding period, unless the applicant is otherwise advised by MASS in writing. Therefore, the applicant will need an appointment with the prescribing medical specialist within the approved six month period. If the completed MASS 47 application form is not received, MASS subsidy for oxygen will not continue beyond the initial six month period. After the initial six month period, six monthly reapplications are required until the child turns six years of age when annual reassessments only are required for ongoing subsidy for oxygen.
- For children between six and fifteen years of age, annual reassessments only are required for ongoing subsidised oxygen after the initial six month funding period. MASS must receive the completed MASS 47 application form two weeks prior to the expiry date of each subsequent twelve month funding period. If the completed MASS 47 application form is not received for reapplication, MASS subsidy for oxygen will not continue beyond the approved twelve month period.

**Note:** If appropriate application forms are not received, payment for ongoing oxygen beyond the MASS approved funding periods will become the responsibility of the applicant.

## **2.2 Safety**

The prescriber or the prescribing agency must ensure, in consultation with the oxygen supplier and visiting domiciliary nursing or community health service, that the applicant/carer is adequately instructed in the safe handling and use of oxygen and oxygen equipment.

As a minimum, the prescriber or prescribing agency must provide the applicant/carer with the MASS Oxygen Information and Safety Form (appendix to MASS 45 and MASS 47 application forms) and advise them as follows:

- to follow the prescription (flow rate and duration of use)
- to use only equipment prescribed
- to observe safety precautions when using oxygen and equipment, including the tubing and nasal cannula, not to smoke or allow others to smoke near the oxygen equipment
- not to have any source of heat or flames (e.g. matches, open fires, gas stoves, vacuum cleaners) near the oxygen equipment
- not to use oil or grease on or near the oxygen equipment
- not to attempt to repair or modify or use any sealants on the oxygen equipment
- to secure cylinders to prevent them falling, to avoid damage to the equipment or injury to a person
- to promptly report any problems with the oxygen equipment to the supplier
- before transporting large oxygen cylinders or concentrators outside the home environment, to obtain verbal and written instructions from the supplier for the safe transport of the oxygen equipment
- before powering a concentrator with a generator, obtain instructions and advice from the oxygen supplier (concentrator users)
- to develop emergency plans for use in the event of an electricity power failure (concentrator users).

### **2.2.1 Oxygen and Smoking**

Smoking near an oxygen supply presents an extreme safety risk. For the safety of our clients and others, MASS will not subsidise oxygen to applicants who are current smokers. MASS expects prescribers to encourage applicants to quit smoking prior to making application to MASS.

### **2.3 Community or Domiciliary Nursing Service Referral**

For further management and safety advice, the prescriber must ensure that the applicant is referred to appropriate domiciliary nursing services such as local community health centres for ongoing management/monitoring. This includes a post delivery check to ensure the equipment provided and its usage meet the prescription and the applicant/carer is able to operate, care and use the oxygen equipment appropriately and safely in the home.

It is expected that the attending community health or domiciliary nursing agency will visit applicants' homes at least annually to assess their oxygen management, confirm that they are complying with their oxygen prescription and refresh their knowledge regarding safety aspects.

### **2.4 Oxygen Compliance**

MASS will identify any applicant who is not complying with the prescribed hourly usage. On notification from MASS, the prescriber or community health/domiciliary nursing agency should follow up with the applicant/carer to ensure the applicant is receiving the optimum benefit from home oxygen therapy by complying with the oxygen prescription.

### 3. CLINICAL INDICATORS – ADULTS

#### 3.1 Respiratory Conditions

##### 3.1.1 Chronic Hypoxaemia Category

- All measurements are to be taken on room air and at rest, if safe for the applicant.
- Domiciliary oxygen may be prescribed when the arterial oxygen tension (PaO<sub>2</sub>) is 55mmHg or less (or 59mmHg or less when conditions such as cor pulmonale, pulmonary hypertension or polycythaemia are present).
- In remote areas, when arterial blood gas estimations are unavailable, hypoxaemia must be demonstrated by oximetry indicating an oxygen saturation of 85% or less (or 90% or less when conditions such as cor pulmonale, pulmonary hypertension or polycythaemia are present).
- In all cases, applicants should be on maximum medical treatment. Arterial blood gas estimations (or oximetry measurements in remote areas only), should be obtained after the condition is considered to be stable.
- The above measurements are required for both the initial application and the first (four month) reapplication. Clinical assessment only (without measurements) is required for subsequent annual reapplications.

##### 3.1.2 Hypoxaemia with Exercise Category

This category is for the rare circumstance when hypoxaemia on exercise limits a person's ability to mobilise within the home environment.

- For the initial application only, applicants applying under the exercise hypoxaemia category must provide arterial blood gas measurements on room air at rest (if safe for the applicant), in order to identify clients with hypercapnoea.
- For the initial application, applicants must undertake an appropriate exercise study (six-minute walk test) by oximetry to objectively demonstrate oxygen desaturation during exercise and improvement in oxygen saturation on exercise with oxygen administration. A placebo controlled study using medical air and oxygen is preferred. For the first (four month) reapplication only oximetry on room air (six-minute walk test) will be required.
- In remote areas, when arterial blood gas estimations are unavailable, oximetry on exercise only is required for the initial application and for the first (four month) reapplication.
- Oximetry tests required for applications under the exercise hypoxaemia category are:
  - On room air and on oxygen, oxygen saturation should be recorded at rest and after exercise (six minute walk test).
  - The lowest oxygen saturation should be 88% or less, and:
    - applicants must show at least a 4% improvement in oxygen saturation with oxygen or;
    - an improvement of 20% in distance walked with oxygen.
  - Details of the exercise test should be recorded on the application form.
- Oximetry measurements are not required for subsequent annual reapplications.

- Special circumstances or high risk applicants should be discussed with the MASS Clinical Advisor.

### **3.1.3 Nocturnal Hypoxaemia Category**

- All measurements are to be taken on room air and at rest, if safe for the applicant.
- For the initial application only, applicants applying under the nocturnal hypoxaemia category must provide arterial blood gas measurements on room air at rest, in order to identify clients with hypercapnia.
- For the initial application only, applicants should also undertake the following clinical procedures to demonstrate nocturnal hypoxaemia by oximetry:
  - Demonstrated oxygen desaturation during sleep of SaO<sub>2</sub> 88% or less for greater than one third of the sleep period OR desaturation to 88% or less in the presence of hypoxia related sequelae.
- In remote areas, when arterial blood gas estimations are unavailable, nocturnal oximetry measurements only, as above, are required for the initial application.
- Measurements are not required for subsequent annual reapplications.
- A statement regarding the percentage of the sleep period with desaturation to 88% or less is required.

### **3.1.4 Life Threatening Asthma Category**

Oxygen and equipment may be provided for transfer of the applicant to a hospital in emergency situations (e.g. 'C' or 'D' size filled cylinder). MASS will provide up to four filled cylinders per twelve month period.

- Arterial blood gas estimations or oximetry measurements are not required for the supply of domiciliary oxygen for adults with a history of episodes of life threatening asthma associated with rapid deterioration.
- Details of the condition requiring oxygen must be provided on the application form for the initial application, the first (four month) reapplication and subsequent annual reapplications.
- A letter from the prescribing thoracic Physician must be provided with application

## **3.2 Cardiac Conditions**

Domiciliary oxygen and equipment may be provided for adults with pulmonary arterial hypertension. Demonstrated oxygen desaturation on oximetry or arterial blood gases (at rest, on exercise or nocturnal) with SaO<sub>2</sub> less than 90% or PaO<sub>2</sub> less than 60mmHg is required.

Domiciliary oxygen and equipment may be provided for adults without the need for blood gas estimations or oximetry measurements in the following circumstances:

- Severe intractable angina - when nothing further can be offered in the way of drug therapy, angioplasty, stenting or coronary artery surgery.
- Recurrent episodic acute pulmonary oedema or severe chronic cardiac failure when no further drug treatment or surgical interventions are possible or while waiting for heart transplant.

Other cardiac conditions (e.g. congenital heart disease) should be discussed with the MASS Clinical Advisor regarding eligibility.

### **3.3 Neurological Conditions**

MASS will consider subsidising domiciliary oxygen in rare circumstances for neurological conditions. These conditions must be discussed with the MASS Clinical Advisor before completing the application form.

- Generally, measurements are not required for the supply of domiciliary oxygen for adults with neurological conditions.
- Applicants with neurological conditions associated with hypoxaemia must apply under one of the hypoxaemia categories above.
- Details of the condition requiring oxygen must be provided on the application form for the initial application, the first (four month) reapplication and subsequent annual reapplications.

### **3.4 Other Conditions or Co-morbidities**

MASS may consider, on an individual basis, subsidising domiciliary oxygen for other conditions. These conditions must be discussed with the MASS Clinical Advisor before completing the application form.

MASS will only accept applications when prescribed by relevant specialist physicians.

Details of the condition requiring oxygen must be provided on the application form for the initial application, the first (four month) reapplication and subsequent annual reapplications.

## **4. APPLICATION FORMS - ADULTS**

### **4.1 Initial Application**

- MASS 45 application form.

### **4.2 First Reapplication (four month)**

- MASS 45 application form.

### **4.3 Subsequent Annual Reapplications**

- MASS 46 application form.

## **5. CLINICAL INDICATORS - CHILDREN**

### **5.1 Respiratory Conditions**

#### **5.1.1 Hypoxaemia Category**

- Babies/infants who require continuous or nocturnal oxygen should have serial oximetry assessments with oxygen baseline saturation less than 95%, OR repeated desaturations less than 90%.
- If possible, all measurements should be on room air. However, for some infants/children with severe disease who are already on oxygen, this may not be possible. This must be indicated on the application form.

### **5.1.2 Life Threatening Asthma/Croup Category**

Oxygen and equipment may be provided for transfer of the applicant to a hospital in emergency situations (e.g. 'C' or 'D' size filled cylinder). MASS will provide a limit of four filled cylinders per twelve month period.

- If intermittent oxygen therapy is required for recurrent life threatening asthma or croup associated with rapid deterioration, oximetry measurements are not required.
- Details of the condition requiring oxygen must be provided on the application form for the initial application and subsequent reapplications.

### **5.2 Cardiac Conditions**

Oxygen and equipment may be provided for children with cardiac conditions.

- Details of the condition requiring oxygen must be provided on the application form for the initial application and subsequent reapplications.
- For applicants with cyanotic congenital heart disease, in addition to details of the condition (as above), documentation of a positive response to oxygen therapy is required either by saturation on oximetry or arterial blood gas estimation, on the initial application only.

### **5.3 Neurological Conditions**

MASS will consider subsidising oxygen in rare circumstances for neurological conditions.

- Generally, measurements are not required for the supply of oxygen for children with neurological conditions.
- Details of the condition requiring oxygen must be provided on the application form for the initial application and subsequent reapplications.

### **5.4 Other Conditions or Co-morbidities**

MASS may consider, on an individual basis, subsidising oxygen and equipment for other conditions. These conditions must be discussed with the MASS Clinical Advisor before completing the application form. MASS will only accept applications and reapplications when prescribed by relevant specialist physicians.

- Details of the condition requiring oxygen must be provided on the application form for the initial application and subsequent reapplications.

## **6. APPLICATION FORMS - CHILDREN**

### **6.1 Initial Application and Subsequent Reapplications**

- MASS 47 application form.

## **7. TYPE OF OXYGEN EQUIPMENT PROVIDED**

MASS has Standing Offer Arrangements and other commercial arrangements to supply oxygen to its clients.

MASS funds standard oxygen packages in the form of cylinders and/or concentrators, with supplementary packages of portable and backup cylinders provided for eligible applicants.

Refer to the MASS Oxygen Product Package List for details on particular oxygen packages subsidy funded through MASS.

## **7.1 Oxygen Equipment**

### **7.1.1 Oxygen - Adults**

An oxygen concentrator is generally supplied as the primary mode of oxygen delivery within the home environment.

If 240 volt power is not available, provision of up to eight 'E' size cylinders per month will be considered. The prescriber should discuss oxygen requirements with the MASS Clinical Advisor.

When flow rates over five litres per minute are prescribed, two concentrators or a high flow concentrator can be provided.

### **7.1.2 Oxygen - Children**

MASS provides either large 'E' size cylinders with low flow meter and small filled portable cylinders

OR

a paediatric concentrator with low flow meter and small filled portable cylinders.

### **7.1.3 Accessories**

The provision of all accessories is part of the Standing Offer Arrangement between MASS and oxygen suppliers.

#### **Nasal Cannulae/Masks**

MASS will fund one nasal cannula and/or mask per calendar month for adult applicants, and two nasal cannulae per calendar month for paediatric applicants.

#### **Tubing and Swivel Connectors**

To improve access within the home, applicants who are supplied with a concentrator will receive two supplies of standard length tubing and two swivel connectors.

#### **Trolleys/Carry Bags/Restraints/Crates**

To assist with safe mobility within the home environment, MASS will fund a cylinder trolley for applicants who require 'E' or 'CL' size cylinders, and a carry bag for applicants who require 'C' size cylinders.

To reduce risk of damage or injury to persons and property, MASS will fund a cylinder restraint for applicants who are supplied with multiple 'E' or 'CL' size cylinders, and a crate for applicants who are supplied with multiple 'C' size cylinders.

## **7.2 Emergency Backup Cylinder/s - Adults and Children**

MASS will fund one filled 'E' or three filled 'CL' or 'C' size oxygen cylinders per six months for use in the event of a power failure for applicants using an oxygen concentrator, if deemed eligible by MASS in the following circumstances:

- life threatening situation in the event of a power failure  
OR
- dependence on oxygen twenty-four hours per day.

Other reasons should be discussed with the MASS Clinical Advisor before completing the application form.

Please note that MASS will not ordinarily approve backup cylinders for clients applying to MASS under the Hypoxaemia with Exercise or Nocturnal Hypoxaemia categories, unless client has a resting oximetry reading on room air of 85% or less.

## **7.3 Portable Oxygen**

### **7.3.1 Portable Oxygen Cylinders - Adults**

Portable oxygen is only provided in a limited capacity to applicants:

- On the cardio-thoracic transplantation program of The Prince Charles Hospital, subject to a separate agreement between the two agencies, or
- With a concentrator who require backup oxygen for use in the event of a power failure (refer to 7.2 above), or
- Who require oxygen only during exercise or have life threatening asthma.

Eligible applicants will require endorsement from a prescribing medical specialist to apply for portable oxygen cylinders through MASS.

**MASS does not subsidise adult portable oxygen when its use is primarily for community access.**

### **7.3.2 Portable Oxygen Cylinders - Children**

Portable oxygen is provided to eligible children.

## **7.4 Repairs/Maintenance to Oxygen Equipment**

The provision of repairs and maintenance to oxygen equipment is part of the Standing Offer Arrangement between MASS and oxygen suppliers.

All MASS subsidised oxygen equipment should be serviced at least annually.

If applicants have any concerns regarding their oxygen equipment they must contact the supplier for assistance in the first instance.

## **8. TRAVELLING WITH OXYGEN**

If planning to transport oxygen concentrators or cylinders outside the home environment, the applicant must ensure that they are stored appropriately and safely.

Clients must contact their MASS oxygen supplier and transport/flight companies prior to travelling with oxygen for verbal and written instructions on safe transport of oxygen equipment.

Oxygen concentrators are transportable and can be taken in the car. They should be appropriately secured in the vehicle and remain upright. Concentrators can also be stowed in a bus, train or aircraft.

MASS generally does not provide assistance with oxygen to clients while travelling away from their normal place of residence. MASS oxygen clients should pre-plan with local suppliers at their travel destination and/or make arrangements to appropriately and safely travel with their MASS subsidised oxygen equipment.

### **8.1 Oxygen Medical Travel Program Ongoing Trial**

MASS is currently trialling an initiative to assist eligible clients with oxygen who are required to travel away from the normal place of residence for medical reasons. The program is not intended to assist clients who may travel for recreational or any other purposes.

The following conditions will apply:

- Reason for travel must be for medical purposes only (to be confirmed in writing by the treating medical specialist)
- Travel must be within Australia
- Client must be required to be away from normal place of residence for a minimum of two days
- Approved assistance is for a maximum of one week. An extension may be granted with a specific request in writing from the treating medical specialist
- Oxygen will only be delivered to temporary travel address
- Request must be received at MASS at least five working days prior to travel (MASS will not reimburse clients for retrospective travel).

Permanent inclusion of this initiative in the MASS Statewide Prescriber Procedures Manual will be determined by the MASS Oxygen Clinical Advisory Committee (OCAC) at the conclusion of the trial.

Contact the MASS service centres in Brisbane or Mackay for further information on the Oxygen Medical Travel Program Trial.

## **9. SPECIAL CONSIDERATION**

MASS understands that there may be some circumstances where the criteria outlined in this section may not apply to some applicants who require domiciliary oxygen. MASS has in place a process whereby special consideration of the applicant's needs may be considered.

Applicants requesting special consideration for MASS subsidised oxygen must meet the following criteria:

- The request falls outside the eligibility criteria as outlined in this Section of the MASS Statewide Prescriber Procedures Manual
- Situation must be rare/unique
- There must be high clinical need
- There must be exceptional circumstances e.g. socio-economic and/or geographic.

Lifestyle justification would not be considered an exceptional circumstance.

Additional criteria for adult applicants requesting special consideration for supply of MASS subsidised portable oxygen are:

- Applicant must already be receiving MASS subsidised oxygen
- Portable oxygen must be needed for medical reasons only (e.g. visiting a medical officer, hospital, etc.)
- Applicant must reside in a location from which transportation to medical appointments (etc.) by ambulance is not available.

Process for Special Consideration requests:

- Prescriber submits a written request to the MASS Clinical Advisor outlining clinical justification and any other details relevant to the request
- The MASS Clinical Advisor will present the case to at least two thoracic physicians who are members of the MASS Oxygen Clinical Advisory Committee (OCAC)
- There must be a consensus decision from at least two OCAC thoracic physicians that the request meets relevant special consideration criteria and is clinically justified
- The MASS Executive Officer will make the final decision based on OCAC thoracic physicians' recommendation and financial/business impact
- Prescriber and applicant/carer will be notified in writing of the outcome of the request.

## **10. RETURN OF AIDS AND EQUIPMENT**

When a person no longer requires their oxygen package, MASS must be advised in writing detailing the circumstance as to why the oxygen package is no longer required.

Following receipt of the written advice, MASS will coordinate with the commercial supplier the collection of the oxygen aids and equipment.

## **11. POWER FAILURE EMERGENCY PLAN**

MASS concentrator users are encouraged, with assistance from their medical practitioner and relatives/carers/neighbours, to develop a personalised emergency plan to use in the event of a power failure.

MASS has available on its website a MASS 48 Power Failure Emergency Plan which can assist oxygen concentrator users to develop their own plan. A copy of the MASS 48 form is sent to all new users of MASS subsidised oxygen concentrators.

The emergency plan should be attached to the oxygen concentrator at all times.

## **12. CONSUMER INFORMATION**

MASS provides applicants with helpful information/resources relevant to the service they receive. These include:

- Power Failure Emergency Plan
- The Department of Communities' Electricity Life Support Concession Scheme form
- Safety information for adult and child/paediatric applicants
- 'Handbook for Home Oxygen Therapy 2009' for all applicants
- A fridge magnet to remind applicants of the importance of complying with their oxygen prescription.
- Frequently Asked Questions
- Smoking Alert Brochure.

Many of these resources can be obtained from the MASS website at [www.health.qld.gov.au/mass](http://www.health.qld.gov.au/mass).

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**OXYGEN – DESIGNATED PRESCRIBER CHART**

ADULTS	INITIAL APPLICATION		FIRST REAPPLICATION (4 MONTH)		ANNUAL REAPPLICATION	
	Designated Medical Prescribers	Remote Prescribers	Designated Medical Prescribers	Remote Prescribers	Designated Medical Prescribers	Remote Prescribers
<b>Respiratory</b> Chronic Hypoxaemia or Hypoxaemia with exercise or Nocturnal Hypoxaemia	Thoracic Physician Specialist Physician Oncologist Palliative Care Physician	Thoracic Physician Specialist Physician Oncologist Palliative Care Physician OR General Practitioner (with designated specialist endorsement)	Thoracic Physician Specialist Physician Oncologist Palliative Care Physician	Thoracic Physician Specialist Physician Oncologist Palliative Care Physician OR General Practitioner (with designated specialist endorsement)	Thoracic Physician Specialist Physician Oncologist Palliative Care Physician OR General Practitioner	Thoracic Physician Specialist Physician Oncologist Palliative Care Physician OR General Practitioner
<b>Life Threatening Asthma</b>	Thoracic Physician	Thoracic Physician Specialist Physician	Thoracic Physician	Thoracic Physician Specialist Physician	Thoracic Physician	Thoracic Physician Specialist Physician OR General Practitioner (with endorsement of Thoracic Physician or Specialist Physician)
<b>Terminal Malignancy</b> Same as 'Respiratory' above.						

- For the Initial Application and First Reapplication use MASS 45 application form.
- For the Annual Reapplication use MASS 46 application form.

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**OXYGEN – DESIGNATED PRESCRIBER CHART**

<b>ADULTS</b>	<b>INITIAL APPLICATION</b>		<b>FIRST REAPPLICATION (4 MONTH)</b>		<b>ANNUAL REAPPLICATION</b>	
	<b>Designated Medical Prescribers</b>	<b>Remote Prescribers</b>	<b>Designated Medical Prescribers</b>	<b>Remote Prescribers</b>	<b>Designated Medical Prescribers</b>	<b>Remote Prescribers</b>
<b>Cardiac</b>	Cardiologist Specialist Physician	Cardiologist Specialist Physician OR General Practitioner (with endorsement of Cardiologist or Specialist Physician)	Cardiologist Specialist Physician	Cardiologist Specialist Physician OR General Practitioner (with endorsement of Cardiologist or Specialist Physician)	Cardiologist Specialist Physician OR General Practitioner	Cardiologist Specialist Physician OR General Practitioner
<b>Neurology</b>	Neurologist Specialist Physician	Neurologist Specialist Physician	Neurologist Specialist Physician	Neurologist Specialist Physician	Neurologist Specialist Physician	Neurologist Specialist Physician OR General Practitioner (with endorsement Neurologist or Specialist Physician)
<b>Other</b>	Thoracic Physician Specialist Physician	Thoracic Physician Specialist Physician	Thoracic Physician Specialist Physician	Thoracic Physician Specialist Physician	Thoracic Physician Specialist Physician OR General Practitioner (with endorsement of Thoracic Physician or Specialist Physician)	Thoracic Physician Specialist Physician OR General Practitioner (with endorsement of Thoracic Physician or Specialist Physician)

- For the Initial Application and First Reapplication use MASS 45 application form.
- For the Annual Reapplication use MASS 46 application form.

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**OXYGEN – DESIGNATED PRESCRIBER CHART**

CHILDREN	INITIAL APPLICATION		SUBSEQUENT REAPPLICATIONS (6 MONTHLY)	
	Designated Medical Prescribers	Remote Prescribers	Designated Medical Prescribers	Remote Prescribers
<b>Respiratory Hypoxaemia</b>	Paediatric Thoracic Physician Neonatologist OR Paediatrician (with endorsement of Paediatric Thoracic Physician)	Paediatric Thoracic Physician Neonatologist OR Paediatrician (with endorsement of Paediatric Thoracic Physician)	Paediatric Thoracic Physician Neonatologist Paediatrician	Paediatric Thoracic Physician Neonatologist Paediatrician
<b>Life Threatening Asthma/Croup</b>	Paediatric Thoracic Physician	Paediatric Thoracic Physician OR Paediatrician (with endorsement of Paediatric Thoracic Physician)	Paediatric Thoracic Physician OR Paediatrician (with endorsement of Paediatric Thoracic Physician)	Paediatric Thoracic Physician OR Paediatrician (with endorsement of Paediatric Thoracic Physician)
<b>Cardiac</b>	Cardiologist Paediatric Thoracic Physician OR Paediatrician (with endorsement of Cardiologist or Paediatric Thoracic Physician)	Cardiologist Paediatric Thoracic Physician OR Paediatrician (with endorsement of Cardiologist or Paediatric Thoracic Physician)	Cardiologist Paediatric Thoracic Physician Paediatrician	Cardiologist Paediatric Thoracic Physician Paediatrician OR General Practitioner (with endorsement of a Designated Specialist Physician as above)
<b>Neurology</b>	Neurologist	Neurologist OR Paediatrician (with endorsement of Neurologist)	Neurologist Paediatrician	Neurologist Paediatrician OR General Practitioner (with endorsement of a Designated Specialist Physician as above)
<b>Other</b>	Relevant Specialist Physician	Relevant Specialist Physician	Relevant Specialist Physician	Relevant Specialist Physician

- For all applications and reapplications use MASS 47 application form.