HSA and insurance reimbursement guide

For your Dolphin Neurostim Professional purchase in Canada. Confirm your coverage, obtain any required prescription before purchasing, and submit your own claim.

Important: DolphinMPS does not deal with insurers directly. You must submit your own HSA or insurance claim. **Do not send us your prescription.** Keep it for your records and submit it directly to your insurer or plan administrator.

Before you buy: check your plan

Dolphin Neurostim Professional is a Class II TENS medical device. It may be eligible under your Health Spending Account (HSA) or Extended Health Care plan. Coverage is not automatic: your provider decides eligibility, reimbursement limits and required documents.

Ask your insurer or HSA administrator whether your specific device is covered, whether pre-approval is required, and whether a prescription from a medical doctor (MD) or nurse practitioner (NP) is accepted. Confirm any diagnosis, invoice and serial-number requirements.

Get the prescription first. Ask for it to be dated on or before your purchase invoice, and confirm your plan's timing rules before ordering. Provincial coverage for a consultation is separate from coverage for the device.

Step 1 Book an appropriate appointment

You can consult your own clinician or explore virtual care. Have your provincial health card ready and explain that you need an assessment and, if clinically appropriate, a device prescription for a reimbursement claim.

Alberta: Rocket Doctor Alberta advertises covered physician consultations for eligible Alberta residents with AHCIP.

British Columbia: Rocket Doctor BC advertises physician visits covered with an eligible BC health card (MSP). Check availability; a waitlist may apply.

Ontario: Visit Tia Health, choose Book Now and select Ontario. Eligible OHIP consultations may be covered. Tia advises that a new muscle or joint problem may require an in-person assessment.

Confirm eligibility, appointment availability and any uninsured note or form fees when booking. A prescription is issued only if the clinician considers it appropriate. DolphinMPS is not affiliated with Rocket Doctor or Tia Health.

Step 2 Discuss your symptoms honestly

Describe where you have pain, how long you have had it and its effect on daily life. Ask whether the device is appropriate for you. Share your plan's document requirements and the prescription details on page 2. Your clinician decides the diagnosis and treatment.

What to request and submit

Box A Prescription details for your clinician

If the clinician recommends this device, ask for a signed, dated prescription note containing the details your plan requires.

1. Device name

Class II TENS Medical Device Dolphin Neurostim Professional

2. Medical reason or diagnosis

Ask the clinician to record your actual diagnosis or medical reason, based on their assessment. Examples might include chronic lower back pain, sciatica, osteoarthritis, neck or shoulder pain, myofascial pain, or neuropathy. Use only the diagnosis the clinician determines applies to you.

3. Signed note delivered to you

Request a signed and dated PDF through your email or patient portal. This device is purchased directly from DolphinMPS: ask for the note to be released to you rather than sent to a pharmacy or to DolphinMPS. Keep the original file for your own claim.

Step 3 Purchase and submit your claim

Save your prescription. Download the signed PDF from your clinician's email or patient portal before purchasing.

Purchase your device. Order from the Canadian DolphinMPS store and save the official invoice emailed to you. Check that your invoice and device details meet your plan's requirements, including serial numbers where requested. Contact us if you need an invoice copy or device details.

Submit your documents. Upload or mail the prescription and paid invoice through your insurer's or HSA administrator's approved claim process. Complete any additional plan forms, keep copies, and retain your submission confirmation.

Before you press submit

- Your plan has confirmed device eligibility, limits and any pre-approval requirements.
- Your prescription is signed, dated and includes the medical details your plan requests.
- Your prescription date meets your plan's purchase-timing rules.
- You have the paid invoice, device details and any required additional forms.
- You are submitting directly to your insurer or HSA administrator, not to DolphinMPS.

Reimbursement is subject to your individual plan. Having a prescription or a Health Canada-licensed device does not guarantee payment.

Useful links and support

Device information | Sun Life: checking coverage | Frontier HSA: electrotherapy devices | Tia Health FAQ

Invoice or device questions: 1-800-567-7246. For claim decisions and coverage questions, contact your insurer or HSA administrator directly.

Full guide: dolphinmps.ca/education/hsa-insurance-reimbursement-canada/

Reviewed November 3, 2026. General preparation guidance; follow your clinician's advice and your own plan's current terms.