

For our Dental Practitioners

Winter 2003-2004

NEWS AND VIEWS

Welcome to the winter 2003 edition of the Non-Insured Health Benefits (NIHB) quarterly newsletter. First Canadian Health (FCH) is now in its fifth year of operations as the claims processor for the NIHB Program of the First Nations and Inuit Health Branch (FNIHB) of Health Canada.

Again, FCH would like to thank you for your support as you continue to provide quality health services to First Nations and Inuit clients of the NIHB Program.

As always, your comments and questions are welcome. Please contact the FCH NIHB Toll-Free Inquiry Centre Representatives at **1-888-471-1111**, or send your correspondence to:

FCH Provider Relations
3080 Yonge Street, Suite 3002
Toronto, ON M4N 3N1

CREDIT BALANCE FORWARD

A credit balance forward will appear on the NIHB Dental Claim Statement if a claim reversal was made on a previous statement which did not have enough funds to cover the adjustment. Reversals made to claims paid on a previous statement may be the result of a provider request or the Next Day Client Verification Program and can be traced by referring to previous statements.

Providers are reminded to retain copies of NIHB Dental Claim Statements. Providers may obtain copies of previous NIHB Dental Claim Statements by sending a request in writing along with a \$25.00 cheque to First Canadian Health.

The Provider Audit Department may also reclaim funds from the NIHB Dental Claim Statement due to findings through the On-Site Audit Program. Notification will be given prior to reclaiming funds from a provider's NIHB Dental Claim Statement; therefore, the provider will be aware of the reason for the credit balance forwarded.

Should you have any questions regarding a claim reversal, please contact the FCH NIHB Toll-Free Inquiry Centre at **1-888-471-1111**.

For further information on the NIHB Dental Claim Statement, please refer to Sections 5.8 and 7 of the NIHB Dental Practitioner Information Kit (DPIK).

ORTHODONTIC INQUIRIES

To ensure prompt response, all requests or concerns regarding orthodontics should be addressed to:

Orthodontic Review Centre
Non-Insured Health Benefits Program
First Nations and Inuit Health Branch
Address Locator 1919A
Tunney's Pasture
Ottawa, ON K1A 0L3
Phone: **1-866-227-0943**
Fax: **1-866-227-0957**

CLIENT INFORMATION

All NIHB clients receive coverage under their own client identification number independent from their spouse or parent.

Providers are reminded to complete the NIHB DENT-29 form with the client identification information of the client receiving dental treatment only. This is to ensure that claims are processed accurately and not rejected or returned due to incorrect information.

For further information on claim submission requirements, please refer to Section 6 of your NIHB Dental Practitioner Information Kit (DPIK).

ELECTRONIC FUNDS TRANSFER (EFT)

Providers may elect to have payments deposited directly into their bank account through electronic funds transfer (EFT). This method of payment ensures that the provider normally receives funds on the same day as cheques are issued by First Canadian Health. EFT also assures payment in the event of a postal disruption.

To initiate payments through EFT, please contact the FCH Toll-Free Inquiry Centre at **1-888-471-1111** to obtain a Provider Information Form.

For further information on methods of payment, please refer to Section 5.8 of your NIHB Dental Practitioner Information Kit (DPIK).

COMPLETE TREATMENT PLAN

A complete treatment plan is required when submitting a request for predetermination to First Nations and Inuit Health Branch. The treatment plan must outline all the needs of the client and must include a notation of treatment currently in progress.

For further information on the predetermination process, please refer to Section 2.9 of your NIHB Dental Practitioner Information Kit (DPIK).

PREDETERMINED SERVICES – SAME DATE OF SERVICE

Claims submitted with the same date of service, procedure code and predetermination number will result in the first claim line being paid and the remaining lines being rejected with message **R07 (THIS IS A DUPLICATE CLAIM)**.

Should you provide multiple units of the same procedure code with the same predetermination number on the same date of service, it is necessary to have the predetermination amended to reflect the correct procedure code (e.g., 11112 + 11112 = 11114) in order to receive payment for the full fees.

BAND #458 – BIGSTONE CREE NATION

The Bigstone Health Commission has assumed complete management of dental benefits on behalf of the members of Bigstone Cree Nation (Band #458). This means that in the near future claims for members of Bigstone Cree Nation will become ineligible for payment through First Canadian Health (FCH), which administers the Health Information and Claims Processing System (HICPS) on behalf of the NIHB Program. Bigstone Cree Nation will communicate to providers a specific date when claim payments will be discontinued by FCH. At that time, predeterminations and claims for services provided to the members of Bigstone Cree Nation should be submitted to:

Bigstone Health Commission
Attn: Mabel Gladue
P.O. Box 1590
Wabasca, AB T0G 2K0
Phone: **(780) 891-4161**
Fax: **(780) 891-3222**
Toll Free: **1-866-891-9719**
