



EXPRESS SCRIPTS®

# NIHB NEWSLETTER

NEWS AND INFORMATION FOR NIHB PROVIDERS

NIHB CLAIMS SERVICES PROVIDER WEBSITE

Non Insured Health Benefits (NIHB)

[www.provider.express-scripts.ca](http://www.provider.express-scripts.ca)

Dental Providers



Fall 2012

## NIHB Forms

**Download** from the

NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre

[www.provider.express-scripts.ca](http://www.provider.express-scripts.ca)

## EXPRESS SCRIPTS CANADA

### Provider Claims Processing Call Centre

#### Inquiries and Password Resets

1-888-511-4666

#### Extended Hours

Monday to Friday:

6:30 a.m. to 8:30 p.m. Eastern Time

Excluding Statutory Holidays

#### Dental Claims

##### Mail Dental claims to:

Express Scripts Canada  
NIHB Dental Claims  
3080 Yonge Street, Suite 3002,  
Toronto, ON M4N 3N1

#### Dental Provider Enrolment

*Each additional Dental office must be enrolled with the NIHB Program with its own Office ID prior to services being rendered*

#### Fax Completed

##### Dental Provider Enrolment Form to:

**NEW** Toll Free Fax No.: 1-855-622-0669

#### Other Correspondence

##### Mail to:

Express Scripts Canada  
5770 Hurontario Street, 10<sup>th</sup> Floor  
Mississauga, ON L5R 3G5

## NIHB PROGRAM DENTAL BENEFITS

### Health Canada Regional Offices

#### PREDETERMINATIONS

Alberta	1-888-495-2516, Ext 3 Fax No.: 1-780-420-1219
Atlantic	1-800-565-3294
British Columbia	1-888-321-5003
Manitoba	1-877-505-0835
Ontario	1-888-283-8885
Québec	1-877-483-5501
Saskatchewan	1-877-780-5458

### Health Canada Orthodontic Review Centre (ORC)

Phone No.: 1-866-227-0943

Fax No.: 1-866-227-0957

#### NEW

### National Dental Predetermination Centre

All Dental Predeterminations, Client Reimbursements, and Appeals must be sent to the new NIHB National Dental Predetermination Centre (DPC) located in Ottawa for the below three (3) regions:

Region	Effective Date
Northern Region (Northwest Territories/Nunavut/Yukon)	September 1, 2012
Saskatchewan	October 1, 2012
Atlantic Region	November 1, 2012

#### NIHB National Dental Predetermination Centre

Non-Insured Health Benefits  
First Nations and Inuit Health Branch  
Health Canada

Address Locator 1902D  
2nd Floor, Jeanne Mance Building  
200 Eglantine Driveway  
Ottawa, ON K1A 0K9

Toll Free Phone No.: 1-855-618-6291

Toll Free Fax No.: 1-855-618-6290

## NEW INFORMATION

### Centralization of NIHB Dental Predetermination Services in Ottawa

As part of the Government of Canada's Economic Action Plan 2012, the NIHB Program will be centralizing the processing of dental Predetermination (PD) services at NIHB Headquarters in Ottawa. The goal of centralization is to gain efficiencies through consolidation. Processing of Dental PD and related services will be transferred from the Health Canada Regional Offices to Ottawa in a phased approach starting in September 2012. NIHB is confident that this transition will be as smooth as possible for both providers and clients.

Effective **September 1, 2012**, all **Northern Region** (Northwest Territories, Nunavut, Yukon) Dental PD, Client Reimbursements, and Appeals must be sent to the new NIHB National Dental Predetermination Centre (DPC) located in Ottawa.

Effective **October 1, 2012**, all **Saskatchewan Region** Dental PD, Client Reimbursements, and Appeals must be sent to the new National DPC located in Ottawa.

Effective **November 1, 2012**, all **Atlantic Region** Dental PD, Client Reimbursements, and Appeals must be sent to the new National DPC located in Ottawa.

Additional information of the new National DPC will be sent directly to providers.

Please note that all electronic and manual claims not requiring predetermination, as well as inquiries related to client eligibility, frequency, and compliance with NIHB coverage criteria, guidelines and policies, should continue to be directed to Express Scripts Canada.

## REMINDERS

### GO Paperless!

**ONE EASY STEP ...Place a verbal request to the Provider Claims Processing Call Centre at 1-888-511-4666.**

Health Canada and Express Scripts Canada receive a fair amount of error messages when faxing out important information to the NIHB Program providers because of an incorrect fax number, fax machine turned off, phone number not a fax number, etc. The most **current** office information should be provided to Express Scripts Canada, otherwise providers may NOT receive **new and important information** from Health Canada's NIHB Program and Express Scripts Canada as intended.

**GO GREEN! ...go paperless! Make e-mail your first choice of communication delivery!**

Stay informed with same day e-mail delivery of Health Canada's NIHB Program.

...No more tying up the fax machine's day to day activity.

...e-Save your communications within your office network.

...Share the communications within the office at the click of your mouse.

A verbal request is accepted at the Provider Claims Processing Call Centre to change the following important provider information:

- E-mail address;
- Fax number;
- Phone number; and/or
- *Correction* to your current address.

All other changes to provider information must be completed on the *Modification to Dental Provider Information Form*, signed by the dental provider, and submitted by fax or mail as indicated on the form.

These types of changes include:

- New complete address (e.g., moved);
- Name of clinic/office;
- Banking information (e.g., change or setup);
- Becoming an incorporated dental provider; and/or
- No longer working at a specific clinic/office.

The *Modification to Dental Provider Information Form* can be downloaded from the NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre to request a copy.

### Password Expiration for the NIHB Claims Services Provider Website

Provider passwords for the NIHB Claims Services Provider Website **expire every 180 days**. Please be sure to change your password prior to expiration by logging in with your username and password and by following the password criteria.

**Tip** Once logged onto the NIHB Claims Services Provider Website, click on the link "Welcome *Username*" located in the upper right-hand corner of the screen, and select "Change Password". The number of days before your password expires is displayed at the bottom of the page.

### NIHB Dental Benefits

Dental providers are reminded to:

- Verify the eligibility of the client;
- Ensure that no limitations will be exceeded; and
- Ensure compliance with NIHB coverage criteria, guidelines and policies.

### Claim Corrections and Adjustments

Please note adjustments to previously paid claims must be submitted to Express Scripts Canada as corrections noted on your NIHB Dental Claim Statement.

### Provider Payment (Orthodontic Treatments)

The Orthodontic Review Centre (ORC) is responsible for assessing predetermination submissions for orthodontic treatment under the NIHB Program. Once coverage for an orthodontic treatment has been approved and the service has been rendered, dental providers are required to submit their payment requests via standard mail directly to:

Express Scripts Canada  
NIHB Dental Claims  
3080 Yonge Street, Suite 3002  
Toronto, ON M4N 3N1

In order to avoid delays in processing your payment request(s), **one of the following claim forms** must be **completed and signed** and submitted directly to Express Scripts Canada:

- *NIHB Dental Claim Form* (Dent-29);
- Standard Dental Claim Form; or
- Computer generated form.

Payments can only be processed if they have all the following information. Please ensure that the following data elements are completed for payment requests:

- Predetermination number;
- Payment code (s) or specific wording;
- Provider requested fee(s);
- Third party coverage confirmation;
- Client name, registration number, address, and date of birth;
- Provider name, address, registration number; and
- Client/parent/guardian and provider signatures.

All payment inquiries must be directed to the Provider Claims Processing Call Centre. The ORC cannot respond to inquiries regarding payment. To ensure timely payment, please forward your payment requests directly to Express Scripts Canada.

## Submission of Orthodontic Diagnostic Records

The amount of incomplete cases submitted to the Orthodontic Review Centre (ORC) has increased resulting in significant delays in processing. Predetermination (PD) submissions for orthodontic cases must include the following documentation:

- For comprehensive orthodontic cases:
  - A complete narrative explaining the diagnosis and prognosis, client's oral hygiene status and motivation;
  - A detailed treatment plan including estimated duration of active and retention phases and costs;
  - Diagnostic orthodontic models (trimmed);
  - Cephalometric radiograph and tracing;
  - Three (3) intraoral and three (3) extraoral photographs; and
  - A panoramic radiograph or full-mouth series.
- For interceptive orthodontic cases:
  - A complete narrative explaining the diagnosis and prognosis, client's oral hygiene status and motivation;
  - A detailed treatment plan including estimated duration of active and retention phases and costs;
  - Diagnostic orthodontic models (trimmed); and
  - A panoramic radiograph or full-mouth series.

**Reminder** Send orthodontic models with the other diagnostic records in the **same** packaging in order to accelerate the process and avoid unnecessary delays in reviewing orthodontic requests. Your cooperation in this matter is greatly appreciated as incomplete submissions may result in requests being returned unprocessed.

## Predetermination Documentation Requirements

In order for the NIHB Program to review a request for coverage, dental providers must submit all necessary documentation applicable to the dental service in question, as outlined in the respective NIHB policy.

## Incomplete Predetermination Submissions

In situations where dental providers are in receipt of their Predetermination (PD) submission from the NIHB Program with an indication that there are missing items that prevent the review process to take place, dental providers must resubmit their request along with complete supporting documentation, and not only the missing items.

## Current NIHB Dental Forms

All current NIHB Dental Forms can be downloaded from the NIHB Claims Services Provider Website or by contacting the Provider Claims Processing Call Centre to request a copy.

The chart below shows all the NIHB Dental forms along with the address of where the forms are to be sent following completion:

NIHB Form	Send Completed Form to
<b>NIHB Dental Claim Form (NIHB Dent- 29 Form)</b>	<p><u>Predeterminations (PD), Post-Determinations, and Client Reimbursement Claims, submit to:</u></p> <ul style="list-style-type: none"> <li>• <b>Health Canada Regional Offices;</b></li> <li>• <b>National Dental Predetermination Centre; or</b></li> <li>• <b>Orthodontic Review Centre.</b></li> </ul> <p><u>Claims for Schedule A Services or Claims with a valid Predetermination, submit to:</u></p> <p><b>Express Scripts Canada NIHB Dental Claims 3080 Yonge St., Suite 3002 Toronto, ON M4N 3N1</b></p>
<p><b>NIHB Completion of Active Orthodontic Treatment Form</b></p> <p><b>And</b></p> <p><b>NIHB Orthodontic Summary Sheet</b></p>	<p>Orthodontic Review Centre Non-Insured Health Benefits Program First Nations and Inuit Health Branch Health Canada AL 1902C 2nd Floor, Jeanne Mance Building 200 Eglantine Avenue Ottawa, ON K1A 0K9 Telephone: 1-866-227-0943 Fax No.: 1-866-227-0957</p>
<b>Modification to Dental Provider Information Form</b>	<p>Express Scripts Canada Attention: Provider Relations 5770 Hurontario St., 10th Floor Mississauga, ON L5R 3G5 Fax No.: 1-855-622-0669</p>

**Please refer to the *front page* of this NIHB Dental Newsletter for additional contact information.**

Express Scripts Canada is receiving PD and Post-Determination requests from dental providers. Please be informed that Express Scripts Canada does not process these requests. *All PD and Post-determination requests must be sent to the respective Health Canada Regional Office or NIHB National Dental Predetermination Centre for adjudication.*

**Note** PD, Post-Determination and Client Reimbursement requests/inquiries must be sent to the respective Health Canada Regional Office corresponding to the

region where the service will be or has been rendered, and not to the Health Canada Regional Office of the client's place of residence\*. Orthodontic treatment requests must be submitted to the ORC.

\*Not applicable to Northern Region (Northern Territories/Nunavut/Yukon), Atlantic Region and Saskatchewan, as stated on the front page of this NIHB Dental Newsletter (see effective date for your respective region).

## Submitting Dental Manual Claims

Express Scripts Canada is receiving a high volume of manual dental claims that are being returned due to incorrect or missing information supplied on the form (i.e., missing or incomplete payee address, missing verification/signature of provider, provider number/name and office verification do not match, etc.).

In order to ensure swift claims processing, the following information must be completed by the provider and included on the designated claim form:

### Client Information

- Client surname, given name, address, and payee address (if different from the Client address).

### Provider Information

- Provider number, dental provider's name, provider's address where work was completed (**must correspond with the current address in the NIHB Program's adjudication system**), and office verification/signature of provider.

### Claim Information

- Date of service (YYYY-MM-DD), procedure code, international tooth code, tooth surfaces, professional fee, laboratory fee, total fee and total fee submitted, and Predetermination number (if applicable).

### Client Identification

- Client identification number, band number and family number and date of birth.

**Note** Providers **must** attach the applicable Explanation of Benefits (EOB) to reflect the third party payment.

One of the following designated claim forms must be completed, signed, and submitted with the request:

- Standard Dental Claim Form, Computer generated form, and/or *NIHB Dental Claim Form* (Dent-29).

## Enrolling Additional Dental Offices

If a dental provider practices at *more than one dental office* each office must be enrolled with Express Scripts Canada in order to avoid disruption of service for claims processing and/or payment.

If you have not already enrolled a new office, please complete and sign a *Dental Provider Enrolment Form* and **fax to Express Scripts Canada**. The enrolment form can be downloaded from the NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre to request a copy.

## NIHB Dental Claims Submission Kit

The Kit can be downloaded from the NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre to request a copy.