

### NEW INFORMATION

#### Non-Insured Health Benefits Program (NIHB) Dental Predetermination Centre

The NIHB Program remains committed to adopting efficiencies in an effort to provide excellence in service delivery. Although we recognize that there were some delays in processing of predetermination (PD) requests, the Dental Predetermination Centre continues to move toward improving PD turnaround times (TAT). Current TAT is getting closer to the ten (10) business days standard, and improvements are noted every week.

The NIHB Program would like to thank dental providers for their patience, collaboration, and continued interest to provide oral health services to First Nations and Inuit clients.

#### Predetermination Confirmation Letters

Dental providers are advised that the predetermination (PD) confirmation letters they receive by mail/fax as a result of a PD submission contain critical information for their payment business process. This letter outlines the adjudication results for every procedure code considered and all the necessary data elements that are required when claiming. **Therefore it is important that all the information and data elements on the claim match those on the predetermination letter.** The "predetermination line level comments" section on the PD confirmation letter provides important details of the review outcome such as: approval, denial with appropriate rationale, on hold requiring additional information for review etc.

#### Note: Incomplete Predetermination Submissions

The NIHB Dental Predetermination Centre (DPC) will not process incomplete PD submissions. Incomplete PD's will be returned to the provider with an indication that there is missing information/documentation that prevents the review process. Dental providers must resubmit their request which must include the previously enclosed documentation as well as the missing information.

#### Predetermination Supporting Documentation

In order for the NIHB Program to review a PD submission for coverage, dental providers must submit all necessary documentation applicable to the dental service in question, as outlined in the Dental Benefits Guide: [www.hc-sc.gc.ca/fniah-spnia/pubs/nihb-ssna/dent/2014-guide/index-eng.php](http://www.hc-sc.gc.ca/fniah-spnia/pubs/nihb-ssna/dent/2014-guide/index-eng.php). The NIHB Program requires and expects that current appropriate supporting documentation be sent for review with any PD submission.

#### Restorative Services

For restorative services (e.g. fillings), a tooth is eligible once (1) in any 12-month period, by the same provider, or different provider in the same office. A second restoration claimed on the same tooth within 12 months of the initial, by the same provider or different provider in the same office will be rejected.

### Updated Dental Benefits Guide Now Available

The NIHB Program has updated its Dental Benefits Guide and it is now available on Health Canada's website at: [www.hc-sc.gc.ca/fniah-spnia/pubs/nihb-ssna/dent/2014-guide/index-eng.php](http://www.hc-sc.gc.ca/fniah-spnia/pubs/nihb-ssna/dent/2014-guide/index-eng.php)

### Modifications to NIHB Provider Claim Statements

Effective June 13, 2014, the "Amt Claimed" field will be updated to "Total Claimed" on the NIHB dental provider and client statements. This field will continue to represent the total dollar amount claimed by the provider.

### REMINDERS

#### Where to send Predetermination Submissions

Providers are reminded that, with the exception of PDs for clients eligible to receive health benefits from the First Nations Health Authority (FNHA) in British Columbia, all PD and appeal submissions pertaining to dental services must be sent to the NIHB Dental Predetermination Centre (DPC) for adjudication. PD and appeal submissions for orthodontic services for all regions must continue to be submitted to the NIHB DPC (orthodontic services).

#### Removal of Predetermination Requirement for Replacement of Standard Complete Dentures

Dental providers are reminded that predetermination (PD) is no longer required for replacements for standard complete dentures, provided that the existing complete denture is at least eight (8) years old. Dental providers are encouraged to confirm client eligibility prior to providing the service. For information concerning client eligibility, please contact the Express Scripts Canada Provider Claims Processing Call Centre at 1-888-511-4666.

#### 2014 NIHB Dental Fee Updates

The NIHB Regional Dental Benefit Grids for General Practitioners (GP), Specialists (SP), and Denturists (DN) contain eligible NIHB procedure codes and fees used for the submission of dental claims. The procedure codes listed in the grids are based on the Canadian Dental Association (CDA) Uniform System of Coding and List of Services, Association des Chirurgiens Dentistes du Québec (ACDQ) and Fédération des Dentistes Spécialistes du Québec (FDSQ) Fee Guide, and Denturists Association of Canada (DAC) Guide.

The 2014 NIHB dental fee updates are planned for the following dates:

**NIHB Program and Express Scripts Canada  
Contact Information can be found on the last page of this  
NIHB Newsletter**

NIHB Dental Fee Updates	Province/Territory
March 1, 2014 Completed	New Brunswick Newfoundland & Labrador Nova Scotia Prince Edward Island
April 1, 2014 Completed	Northwest Territories Nunavut Saskatchewan Yukon
May 1, 2014 Completed	Alberta Ontario
June 1, 2014 Completed	British Columbia Quebec
July 1, 2014	Manitoba

NIHB Regional Dental Benefit Grids are located on Express Scripts Canada's NIHB Claims Services Provider Website at [www.provider.express-scripts.ca](http://www.provider.express-scripts.ca) along with the latest updates, errata and amendments. Upon entering your username and password, within the Dental section click **Dental Benefit Grids** and choose the current year and corresponding province/territory. For providers without access to the internet, please contact the Express Scripts Canada Provider Claims Processing Centre at 1-888-511-4666 to request a copy.

### Process for Coordination of Benefits/Explanation of Benefits

NIHB clients who have alternate dental coverage are required to submit their claim to their other dental plan first. The NIHB Program will then coordinate the payment with the other payor on eligible benefits. The primary payor will provide a detailed statement of coverage called an "Explanation of Benefits" (EOB).

Claims that are submitted to NIHB with coordination of benefits (COB) must be accompanied with an EOB in order for the claim to be processed. Express Scripts Canada will reject COB claims where there is no EOB attached.

Claims involving COB may be returned to the provider for the following reasons:

1. Date of Service (DOS) on the claim form, and EOB from the primary payor do not match.
2. Procedure codes on claim form and EOB from primary payor do not match.
3. Client has two (2) different carriers and only one (1) EOB was submitted.
4. EOB does not include the reason why the claim was rejected by the primary payor.
5. EOB from the primary payor was not submitted. Express Scripts Canada does not accept the Reconciliation Summary report (the itemized list of services the client has received which does *not* include the cost) as an EOB.
6. EOB from the primary payor was not submitted and the coverage from the primary payor was recorded on the claim form.

### GO GREEN - Move to E-mail Communications!

**Make e-mail your first choice of communication delivery for general communications (e.g. NIHB Newsletters)!**

...Receive same-day e-mail delivery from Express Scripts Canada to stay informed of Health Canada's NIHB Program.

...Only print as needed to reduce costs associated with business supplies (e.g., paper, printer ink, etc.) and office space (e.g., filing cabinets).

...Save and share your communications within your office network at the click of your mouse.

**It's EASY to make the change... Either:**

- Place a verbal request to the Express Scripts Canada Provider Claims Processing Call Centre at 1-888-511-4666; **OR**
- Complete the attached Modification to Dental Provider Information Form.

**Note** – The above is not applicable to Predetermination (PD) letters. These will continue to be sent via fax or mail (depending on your specified mode of communication).

### Enrolling Additional Dental Offices

Providers practicing at more than one office must enroll each office 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 it to Express Scripts Canada's Provider Relations Department at 1-855-622-0669**. The enrolment form can be downloaded from the NIHB Claims Services Provider Website or contact the Express Scripts Canada Provider Claims Processing Call Centre to request a copy.

### NIHB Dental Claims Submission Kit

Please visit Express Scripts Canada's NIHB Claims Services Provider Website at [www.provider.express-scripts.ca/dentists.html](http://www.provider.express-scripts.ca/dentists.html) to download a copy of the most current NIHB Dental Claims Submission Kit. For providers without access to the internet, please contact the Express Scripts Canada Provider Claims Processing Centre at 1-888-511-4666 to request a copy.

## NIHB PROGRAM AND EXPRESS SCRIPTS CANADA CONTACT INFORMATION

### EXPRESS SCRIPTS CANADA

#### Provider Claims Processing Call Centre

*Please have your Provider Number readily available*

#### 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 Relations Department & Provider Enrolments

*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:

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

#### Other Correspondence

#### Mail to:

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

#### 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)

### NIHB PROGRAM DENTAL BENEFITS

#### NIHB Dental Predetermination Centre (DPC)

#### Dental Services

#### Non-Insured Health Benefits

#### First Nations and Inuit Health Branch

#### Health Canada

#### Address Locator 1902C

2<sup>nd</sup> 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

#### British Columbia

As of October 1, 2013, all PD, client reimbursement and appeal requests for clients eligible to receive health benefits from the First Nations Health Authority (FNHA) in British Columbia are handled by the FNHA.

#### British Columbia First Nations Health Authority

757 West Hastings Street

Suite 540

Vancouver, British Columbia V6C 3E6

Telephone: 1-888-321-5003

Fax: 1-604-666-5815

#### Orthodontic Services

#### Non-Insured Health Benefits

#### First Nations and Inuit Health Branch

#### Health Canada

#### Address Locator 1902C

2<sup>nd</sup> Floor, Jeanne Mance Building

200 Eglantine Driveway

Ottawa, ON K1A 0K9

Toll Free Phone No.: 1 866 227 0943

Toll Free Fax No.: 1 866 227 0957

