

March 1, 2009

TO: Registered NIHB Denturists in New Brunswick

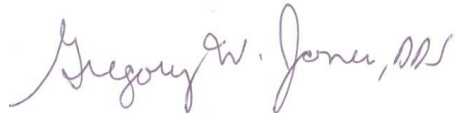
Dear Provider:

Attached please find your copy of the new NIHB Dental Benefit Grid for Denturists in New Brunswick.

The NIHB Regional Dental Benefit Grid for New Brunswick is effective March 1, 2009. The Health Information and Claims Processing System (HICPS) has been changed to reflect the new rates indicated in your copy of the grid.

Should you have any questions, please contact the First Canadian Health NIHB Toll-Free Inquiry Centre at **1-888-471-1111**.

Sincerely,

A handwritten signature in cursive script that reads "Gregory W. Jones, DDS".

Dr. Gregory W. Jones DDS
Regional Dental Officer, Atlantic Region
Non-Insured Health Benefits

cc: New Brunswick Dental Association

Aussi disponible en français au numéro 1-888-471-1111

NEW BRUNSWICK

NIHB REGIONAL DENTAL BENEFIT GRID Denturists

EFFECTIVE DATE

March 1, 2009

- Dental services provided through the NIHB Dental Program will be reimbursed in accordance with the terms and conditions outlined herein.
- Predetermination is required for specific procedures identified in this document with a “P”, or procedures that are I.C. Please review carefully before treatment.
- Post treatment approval will be considered, except in those cases specified in the NIHB Dental Practitioner Information Kit.

**NEW BRUNSWICK
NIHB DENTURISTS DENTAL BENEFIT GRID**

Code	Service	Fee	L	PD	Eligibility
Examinations					
Standard					
10010	Oral Exam	\$84.14			1/arch/60 months
10104	Emergency/Specific Nature	\$51.02			1/12 month period
Prosthodontics Removable					
The fee paid for dentures includes 3 months post-insertion care including adjustments and modifications. FNIHB does not cover any other denture procedures (e.g. adjustments) during this period. For immediate dentures, an additional reline is permitted.					
Complete Dentures 1/arch/96 months					
Standard					
31310	c. maxillary	\$737.39		P	
31320	c. mandibular	\$907.29		P	
31330	c. maxillary and mandibular	\$1,480.15		P	
Overdenture					
31610	c. maxillary	\$801.48		P	
31620	c. mandibular	\$985.86		P	
31630	c. maxillary and mandibular	\$1,608.60		P	
Complete Dentures - Immediate 1/arch/96 months					
Standard					
31311	c. maxillary	\$929.73		P	
31321	c. mandibular	\$1,050.35		P	
31331	c. maxillary and mandibular	\$1,634.52		P	
Overdenture					
31611	c. maxillary	\$929.73		P	
31621	c. mandibular	\$1,143.74		P	
31631	c. maxillary and mandibular	\$1,903.44		P	
Complete and Partial Dentures Combined 1/arch/96 months					
34702	c. upper/p. lower	\$1,940.74	L	P	
43702	c. lower/p. upper	\$2,072.55	L	P	
Partial Dentures Cast Frame 1/arch/96 months					
Free end-standard					
41114	p. maxillary	\$1,092.41	L	P	
41124	p. mandibular	\$1,134.15	L	P	
41134	p. maxillary and mandibular	\$2,022.30	L	P	
Tooth borne-standard					
41254	p. maxillary	\$1,054.79	L	P	
41264	p. mandibular	\$1,101.48	L	P	
41274	p. maxillary and mandibular	\$1,964.87	L	P	
Overdenture					
41510	p. maxillary	\$1,101.67	L	P	
41520	p. mandibular	\$1,150.68	L	P	
41530	p. maxillary and mandibular	\$1,845.15	L	P	
41540	alt. cast impression	\$140.06		P	
Partial Dentures Cast Frame - Immediate w/clasps 1/arch/96 months					
Free end-standard					
41115	p. maxillary	\$1,241.26	L	P	
41125	p. mandibular	\$1,297.90	L	P	

Code	Service	Fee	L	PD	Eligibility
41135	p. maxillary and mandibular	\$2,284.68	L	P	
Tooth borne-standard					
41215	p. maxillary	\$1,171.53	L	P	
41225	p. mandibular	\$1,223.78	L	P	
41235	p. maxillary and mandibular	\$2,155.54	L	P	
Overdenture					
41511	p. maxillary	\$1,089.41	L	P	
41521	p. mandibular	\$1,143.89	L	P	
41531	p. maxillary and mandibular	\$2,009.96	L	P	
Partial Dentures Acrylic Base - with clasps					1/arch/96 months
Standard					
41610	p. maxillary	\$577.07		P	
41620	p. mandibular	\$605.94		P	
41630	p. maxillary and mandibular	\$1,064.69		P	
Transitional					
41710	p. maxillary	\$376.70		P	
41720	p. mandibular	\$395.53		P	
41730	p. maxillary and mandibular	\$695.02		P	
Overdenture					
41810	p. maxillary	\$689.31		P	
41820	p. mandibular	\$723.72		P	
41830	p. maxillary and mandibular	\$1,271.74		P	
Partial Dentures Acrylic Base - w/o clasps					1/arch/96 months
Standard					
41612	p. maxillary	\$486.08		P	
41622	p. mandibular	\$510.00		P	
41632	p. maxillary and mandibular	\$896.17		P	
Transitional					
41712	p. maxillary	\$290.14		P	
41722	p. mandibular	\$304.66		P	
41732	p. maxillary and mandibular	\$535.30		P	
Overdenture					
41812	p. maxillary	\$601.11		P	
41822	p. mandibular	\$631.21		P	
41832	p. maxillary and mandibular	\$1,109.07		P	
Partial Dentures Acrylic Base - Immediate w/clasps					1/arch/96 months
Standard					
41611	p. maxillary	\$652.42		P	
41621	p. mandibular	\$685.04		P	
41631	p. maxillary and mandibular	\$1,215.73		P	
Transitional					
41711	p. maxillary	\$456.87		P	
41721	p. mandibular	\$483.55		P	
41731	p. maxillary and mandibular	\$851.33		P	
Overdenture					
41811	p. maxillary	\$729.38		P	
41821	p. mandibular	\$765.80		P	
Partial Dentures Acrylic Base - Immediate, w/o clasps					1/arch/96 months
Standard					

Code	Service	Fee	L	PD	Eligibility
41613	p. maxillary	\$537.01		P	
41623	p. mandibular	\$563.87		P	
41633	p. maxillary and mandibular	\$1,002.01		P	
Transitional					
41713	p. maxillary	\$387.92		P	
41723	p. mandibular	\$407.34		P	
41733	p. maxillary and mandibular	\$722.85		P	
Overdenture					
41813	p. maxillary	\$625.17		P	
41823	p. mandibular	\$656.43		P	
41833	p. maxillary and mandibular	\$1,164.98		P	
Relines					1/prosthesis/24 months
Lab Processed with functional impression					
32110	c. maxillary	\$201.90			
32120	c. mandibular	\$217.67			
32130	c. maxillary and mandibular	\$398.07			
42116	p. maxillary	\$217.67			
42126	p. mandibular	\$234.87			
42136	p. maxillary and mandibular	\$429.88			
Processed					
32215	c. maxillary	\$181.63			
32225	c. mandibular	\$195.89			
32235	c. maxillary and mandibular	\$358.62			
42210	p. maxillary	\$191.46			
42220	p. mandibular	\$207.01			
42230	p. maxillary and mandibular	\$378.75			
Rebases					1/prosthesis/24 months
Lab Processed with functional impression					
33117	c. maxillary	\$251.25			
33127	c. mandibular	\$270.31			
33137	c. maxillary and mandibular	\$495.48			
43116	p. maxillary	\$276.52			
43126	p. mandibular	\$297.50			
43136	p. maxillary and mandibular	\$545.31			
Repairs and Additions					1/prosthesis/12 months
w/o impression					
36110	c. maxillary	\$57.78	L		
36120	c. mandibular	\$57.78	L		
46110	p. maxillary	\$64.99	L		
46120	p. mandibular	\$64.99	L		
w/ impression					
36210	c. maxillary	\$91.59	L		
36220	c. mandibular	\$91.59	L		
46210	p. maxillary	\$98.92	L		
46220	p. mandibular	\$98.92	L		
add./teeth/clasp					
46310	p. maxillary	\$108.30	L		
46320	p. mandibular	\$108.30	L		
Tissue Conditioning					1/prosthesis/24 months

Code	Service	Fee	L	PD	Eligibility
37110	c. maxillary	\$48.10			
37120	c. mandibular	\$52.89			
47110	p. maxillary	\$52.89			
47120	p. mandibular	\$57.73			
Adjustments (more than 3 months after insertion)					
38111	c. maxillary	\$44.10			
38121	c. mandibular	\$47.88			
48111	p. maxillary	\$47.25			
48121	p. mandibular	\$51.29			
Adjunctive Service					
70040	Office visit after hours	I.C.			
Laboratory Procedures					
98888	In Office	I.C.			
98889	Commercial	I.C.			