

March 1, 2009

TO: Registered NIHB Denturists in Prince Edward Island

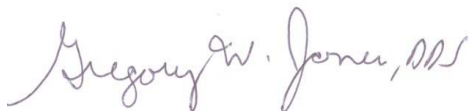
Dear Provider:

Attached please find your copy of the new NIHB Dental Benefit Grid for Denturists in Prince Edward Island.

The NIHB Regional Dental Benefit Grid for Prince Edward Island 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,



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

cc: Prince Edward Island Denturists Association

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

PRINCE EDWARD ISLAND
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.

**PRINCE EDWARD ISLAND
NIHB DENTURISTS DENTAL BENEFIT GRID**

Code	Service	Fee	L	PD	Eligibility
Examinations					
Standard					
10010	Oral Exam	\$90.00			1/arch/60months
10104	Emergency/Specific Nature	\$49.50			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	\$825.00		P	
31320	c. mandibular	\$825.00		P	
31330	c. maxillary and mandibular	\$1,506.00		P	
Complete Dentures - Immediate 1/arch/96 months					
Standard					
31311	c. maxillary	\$845.00		P	
31321	c. mandibular	\$845.00		P	
31331	c. maxillary and mandibular	\$1,690.00		P	
Complete and Partial Dentures Combined 1/arch/96 months					
34701	c. upper/p. lower	\$1,380.40	L	P	
43701	c. lower/p. upper	\$1,456.10	L	P	
Partial Dentures Cast Frame 1/arch/96 months					
Free end-standard					
41114	p. maxillary	\$765.00	L	P	
41124	p. mandibular	\$800.50	L	P	
41134	p. maxillary and mandibular	\$1,368.30	L	P	
Tooth borne-standard					
41254	p. maxillary	\$726.90	L	P	
41264	p. mandibular	\$771.40	L	P	
41274	p. maxillary and mandibular	\$1,317.80	L	P	
Partial Dentures Cast Frame - Immediate w/clasps 1/arch/96 months					
Free end-standard					
41115	p. maxillary	\$870.80	L	P	
41125	p. mandibular	\$910.90	L	P	
Tooth borne-standard					
41215	p. maxillary	\$842.70	L	P	
41225	p. mandibular	\$881.90	L	P	
Partial Dentures Acrylic Base - with clasps 1/arch/96 months					
Standard					
41610	p. maxillary	\$617.80		P	
41620	p. mandibular	\$701.80		P	
41630	p. maxillary and mandibular	\$1,143.00		P	
Partial Dentures Acrylic Base - w/o clasps 1/arch/96 months					
Standard					
41612	p. maxillary	\$524.70		P	
41622	p. mandibular	\$547.10		P	
41632	p. maxillary and mandibular	\$974.50		P	

Code	Service	Fee	L	PD	Eligibility
Partial Dentures Acrylic Base - Immediate w/clasps					1/arch/96 months
Standard					
41611	p. maxillary	\$657.20		P	
41621	p. mandibular	\$704.00		P	
Partial Dentures Acrylic Base - Immediate, w/o clasps					1/arch/96 months
Standard					
41613	p. maxillary	\$531.20		P	
41623	p. mandibular	\$553.70		P	
Relines					1/prosthesis/24 months
Lab Processed with functional impression					
32110	c. maxillary	\$283.70			
32120	c. mandibular	\$283.70			
32130	c. maxillary and mandibular	\$567.50			
42116	p. maxillary	\$245.10			
42126	p. mandibular	\$266.50			
42136	p. maxillary and mandibular	\$465.90			
Processed					
32215	c. maxillary	\$216.10			
32225	c. mandibular	\$233.00			
32235	c. maxillary and mandibular	\$430.40			
42210	p. maxillary	\$223.60			
42220	p. mandibular	\$243.20			
42230	p. maxillary and mandibular	\$448.20			
Rebases					1/prosthesis/24 months
Lab Processed with functional impression					
33117	c. maxillary	\$422.50			
33127	c. mandibular	\$422.50			
33137	c. maxillary and mandibular	\$870.00			
43116	p. maxillary	\$260.30			
43126	p. mandibular	\$295.80			
43136	p. maxillary and mandibular	\$500.10			
Repairs and Additions					1/prosthesis/12 months
w/o impression					
36110	c. maxillary	\$54.00	L		
36120	c. mandibular	\$54.00	L		
46110	p. maxillary	\$54.00	L		
46120	p. mandibular	\$54.00	L		
w/ impression					
36210	c. maxillary	\$81.00	L		
36220	c. mandibular	\$81.00	L		
46210	p. maxillary	\$81.00	L		
46220	p. mandibular	\$81.00	L		
add.teeth/clasp					
46310	p. maxillary	\$90.00	L		
46320	p. mandibular	\$90.00	L		
Tissue Conditioning					1/prosthesis/24 months
37110	c. maxillary	\$54.00			
37120	c. mandibular	\$54.00			
47110	p. maxillary	\$54.00			

Code	Service	Fee	L	PD	Eligibility
47120	p. mandibular	\$54.00			
Adjustments (more than three months after insertion)					
38110	c. maxillary	\$40.50			
38120	c. mandibular	\$40.50			
48110	p. maxillary	\$40.50			
48120	p. mandibular	\$40.50			
Adjunctive Service					
70040	Out of Office (house or institution)	\$45.00			
Laboratory Procedures					
98888	In Office	I.C.			
98889	Commercial	I.C.			