

April 1, 2009

TO: Registered NIHB Denturists in Yukon

Dear Provider:

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

The NIHB Regional Dental Benefit Grid for Yukon is effective April 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. Ronald Kelly
Regional Dental Officer, Northern Region
Non-Insured Health Benefits

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

YUKON REGION

NIHB REGIONAL DENTAL BENEFIT GRID Denturists

EFFECTIVE DATE

April 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.

**YUKON
NIHB DENTURISTS DENTAL BENEFIT GRID**

Code	Service	Fee	L	PD	Eligibility
Examinations					
Standard					
10010	Oral Exam	\$65.00			1/60 months
10104	Emergency/Specific Nature	\$38.00			1/12 month period
Prostodontics 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	\$791.70		P	
31320	c. mandibular	\$791.70		P	
31330	c. maxillary and mandibular	\$1,359.75		P	
Partial Dentures Cast Frame					1/arch/96 months
Free end-standard					
41114	p. maxillary	\$791.70	L	P	
41124	p. mandibular	\$791.70	L	P	
41134	p. maxillary and mandibular	\$1,569.75	L	P	
Partial Dentures Acrylic Base - w/o clasps					1/arch/96 months
Standard					
41612	p. maxillary	\$428.40		P	
41622	p. mandibular	\$428.40		P	
41632	p. maxillary and mandibular	\$856.80		P	
Relines					1/prosthesis/24 months
Processed					
32110	c. maxillary	\$197.40			
32120	c. mandibular	\$197.40			
32130	c. maxillary and mandibular	\$394.80			
42110	p. maxillary	\$197.40			
42120	p. mandibular	\$197.40			
42130	p. maxillary and mandibular	\$394.80			
Rebases					1/prosthesis/24 months
Lab Processed					
33110	c. maxillary	\$449.40			
33120	c. mandibular	\$449.40			
33130	c. maxillary and mandibular	\$898.80			
43110	p. mandibular	\$449.40			
43120	p. maxillary and mandibular	\$449.40			
43130	p. maxillary and mandibular	\$898.80			
Repairs and Additions					1/prosthesis/12 months
w/o impression					
36110	c. maxillary	\$58.80			
36120	c. mandibular	\$58.80			
46110	p. maxillary	\$58.80			
46120	p. mandibular	\$58.80			
w/ impression					
36210	c. maxillary	\$115.50	L		

Code	Service	Fee	L	PD	Eligibility
36220	c. mandibular	\$115.50	L		
add./teeth/clasp					
46310	p. maxillary	\$115.50			
46320	p. mandibular	\$115.50			
Tissue Conditioning					1/prosthesis/24 months
37110	c. maxillary	\$101.85			
37120	c. mandibular	\$101.85			
47110	p. maxillary	\$101.85			
47120	p. mandibular	\$101.85			
Adjustments (more than 3 months after insertion)					
38110	c. maxillary	\$21.00			
38120	c. mandibular	\$21.00			
48110	p. maxillary	\$21.00			
48120	p. mandibular	\$21.00			
Miscellaneous					
56200	Additional Teeth (each)	\$25.20			
Laboratory Procedures					
98888	In Office	I.C.			
98889	Commercial	I.C.			