



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



**Winter 2011**

### 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

##### Fax Completed

##### Dental Provider Enrolment Form to:

Fax No.: 905-712-0669

#### Other Correspondence

##### Mail to:

Express Scripts Canada

5770 Hurontario Street, 10<sup>th</sup> Floor

Mississauga, ON L5R 3G5

## DENTAL BENEFITS NIHB PROGRAM

### Health Canada Regional Offices

#### PREDETERMINATIONS

|                                     |                |
|-------------------------------------|----------------|
| Alberta                             | 1-888-495-2516 |
| Atlantic                            | 1-800-565-3294 |
| British Columbia                    | 1-888-321-5003 |
| Manitoba                            | 1-877-505-0835 |
| Northwest Territories/Nunavut/Yukon | 1-888-332-9222 |
| Ontario                             | 1-888-283-8885 |
| Québec                              | 1-877-483-5501 |
| Saskatchewan                        | 1-877-780-5458 |

### Health Canada

#### Orthodontic Review Centre (ORC)

1-866-227-0943

Fax: 1-866-227-0957

#### Northern Region Address Change

##### Effective January 31, 2011, Northern Region relocated to:

Non- Insured Health Benefits

First Nations and Inuit Health

Health Canada

Qualicum Building

2936 Baseline Road, Tower A, 4th Floor

Ottawa, ON K1A 0K9

Toll-free: 1-888-332-9222

Dental Predetermination, Ext. 1;

Medical Supplies & Equipment, Ext. 2

Fax (toll-free): 1-800-949-2718

**Note** No change to Northern Region Yukon Office

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

## NEW INFORMATION

### NEW URL Address for the NIHB Claims Services Provider Website

The URL address for the NIHB Claims Services Provider Website has been changed from [www.provider.esicanada.ca](http://www.provider.esicanada.ca) to [www.provider.express-scripts.ca](http://www.provider.express-scripts.ca)

The old URL address will continue to automatically redirect to the new URL address.

### Updated Client Reimbursement Form

In order for a client to seek reimbursement for a dental and/ or an orthodontic service, the provider/client **must** submit the following:

- Original receipt(s) for proof of payment
- *Signed* and *completed* NIHB Client Reimbursement Request Form; and

**One** of the following:

- Association des Chirurgiens Dentistes du Québec Dental Claim and Treatment Plan Form
  - Standard Dental Claim Form
  - Canadian Association of Orthodontics Information Form.
- A detailed statement or Explanation of Benefits (EOB) for all other health plan(s)/program(s) if applicable. This form explains what has been covered/paid by client's other health plan(s)/program, **OR;**
  - A NIHB Dental Claim Form (Dent-29) completed and signed along with the original receipt, and the Explanation of Benefits (EOB) (if applicable).

**Note** Credit card/ debit (Interac) slips are not acceptable forms for proof of payment of original receipts. Original receipts are not required when they have been submitted first to the other health plan(s)/ program(s), and the detailed statement or EOB from them is attached along with a copy of the original receipt.

The updated Client Reimbursement Claim Form can be downloaded from Health Canada's website at [www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/benefit-prestation/form\\_reimburse-rembourse-eng.php](http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/benefit-prestation/form_reimburse-rembourse-eng.php)

The NIHB Dental Claim Form (Dent-29) can be downloaded from the NIHB Claims Services Provider Website at [www.provider.express-scripts.ca/dentists.html](http://www.provider.express-scripts.ca/dentists.html)

### Appeal Process for Orthodontic Services

In order for a client to be eligible for an appeal for orthodontic services, a Predetermination (PD) submission must have been received by NIHB's Orthodontic Review Centre (ORC) prior to client's 18<sup>th</sup> birthday.

If coverage for orthodontic treatment has been denied, the client, the parent or the legal guardian of the client has the right to appeal the decision. All three levels of appeal must be accompanied with the supporting documentation provided by the dental practitioner and be completed prior to the client's 19<sup>th</sup> birthday.

Please note that the review for all three levels of appeal will be based on the most current records obtained prior to the commencement of orthodontic treatment. If a client decides to start an orthodontic treatment after it was denied by the NIHB

Program, the client may still access the appeal process, as long as the treatment was predetermined before the age of 18, and all levels of appeal are completed before the age of 19. Please note that if a client chooses to start an orthodontic treatment following a denial for coverage of orthodontic services under the NIHB Program, all three (3) levels of appeal must be initiated within one year period from the date of service/ insertion date.

The following supporting documentation must be provided for consideration of an appeal:

- Trimmed Diagnostic Orthodontic Models. If photographs of models are submitted, the NIHB Program reserves the right to ask for the original stone models.
- Cephalometric radiograph(s) and tracing.
- Panoramic radiograph or Full-Mouth-Survey (FMS).
- Photographs: three (3) Intra Oral and three (3) Extra Oral.
- Treatment plan, estimated duration of active and retention phases of treatment and costs submitted either on a NIHB Orthodontic Summary Sheet, CAO Standard Orthodontic Information Form or letter with the Orthodontist's letterhead.
- Completed NIHB Dental Claim Form (Dent-29).
- Client/Parent/Guardian dated appeal letter with signature (must include client name, date of birth, band, and family number).

Updated diagnostic records must be predetermined and supported with a written rationale in order to be considered for coverage.

#### Level 1 Appeal:

The client/parent/guardian must initiate the appeal process and their request to the Director, Benefit Review Services Division, and forward their documentation to the ORC. The ORC address can be found at [www.hc-sc.gc.ca/contact/fniah-spnia/fnih-spni/nihbpa-ssnaap-eng.php#orc](http://www.hc-sc.gc.ca/contact/fniah-spnia/fnih-spni/nihbpa-ssnaap-eng.php#orc)

#### Level 2 Appeal:

If the client/parent/guardian does not agree with the Level 1 Appeal decision, they may initiate the second level of appeal. The submission should be addressed to the Director, Benefit Management Division, and forwarded to the ORC. The ORC address can be found at [www.hc-sc.gc.ca/contact/fniah-spnia/fnih-spni/nihbpa-ssnaap-eng.php#orc](http://www.hc-sc.gc.ca/contact/fniah-spnia/fnih-spni/nihbpa-ssnaap-eng.php#orc)

#### Level 3 Appeal:

If the client/parent/guardian does not agree with the Level 2 Appeal decision, they may initiate the third and final level of appeal. The submission should be addressed to the NIHB Director General, and forwarded to the ORC. The ORC address can be found at [www.hc-sc.gc.ca/contact/fniah-spnia/fnih-spni/nihbpa-ssnaap-eng.php#orc](http://www.hc-sc.gc.ca/contact/fniah-spnia/fnih-spni/nihbpa-ssnaap-eng.php#orc)

At each level of the appeal process, cases are reviewed by a different orthodontist and the client/parent/guardian will be provided with a written explanation of the decision taken.

### New Clients to the NIHB Program

The NIHB Program is now providing coverage to two new groups of First Nations clients.

The first group of clients is now eligible through the *Gender Equity in Indian Registration Act*, which came into effect in early 2011.

The second group is a result of the creation of a new band (034) named the Qalipu Mi'kmaq First Nations band in Newfoundland, created in the fall of 2011.

To be eligible for benefits through the NIHB Program, First Nations clients must first be registered with the Department of Aboriginal Affairs and Northern Development Canada (AANDC), formerly INAC. AANDC is issuing a temporary letter of confirmation of registration for these new clients until such time as they receive their official AANDC Certificate of Indian Status (CIS). Please accept these AANDC temporary letters as proof of registration and follow the same claim submission processes as for any other clients of the NIHB Program.

For additional information on client eligibility, please contact your respective Health Canada Regional Office or consult the following websites:

[www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/benefit-prestation/index-eng.php](http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/benefit-prestation/index-eng.php)

[www.aadnc-aandc.gc.ca/eng/1308148127861](http://www.aadnc-aandc.gc.ca/eng/1308148127861)

REMINDERS

**Important Message**

Inuit clients that have a Northwest Territories or Nunavut health card can use their territorial health card number, instead of using their 'N' number to access Health Canada's NIHB benefits anywhere in Canada.

**NIHB Forms are Available for Download**

All NIHB Forms are available in PDF for download from the NIHB Claims Services Provider Website at [www.provider.express-scripts.ca](http://www.provider.express-scripts.ca) or contact the Provider Claims Processing Call Centre to request a copy.

The chart below shows all the NIHB Dental forms located on the NIHB Claims Services Provider Website 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</b>                               | Predeterminations, Post Determination, Schedule B and Client Reimbursement Claims: <ul style="list-style-type: none"> <li>Submit to your respective Health Canada Regional Office or Orthodontic Review Centre</li> </ul> Claims for Schedule A Services or Claims with a valid Predetermination, submit to:<br>Express Scripts Canada<br>NIHB Dental Claims<br>3080 Yonge St., Suite 3002,<br>Toronto, ON<br>M4N 3N1 |
| <b>NIHB Completion of Active Orthodontic Treatment Form</b> | Orthodontic Review Centre<br>Non-Insured Health Benefits<br>First Nations and Inuit Health Branch<br>Health Canada<br>55 Metcalfe Street, 5th Floor<br>Postal Locator 4005A<br>Ottawa, ON K1A 0K9<br><br>Telephone: 1-866-227-0943<br>Facsimile: 1-866-227-0957   |

| NIHB Form   | Send Completed Form to  |
|---|---|
| <b>NIHB Orthodontic Summary Sheet</b>                   | Orthodontic Review Centre<br>Non-Insured Health Benefits<br>First Nations and Inuit Health Branch<br>Health Canada<br>55 Metcalfe Street, 5th Floor<br>Postal Locator 4005A<br>Ottawa, Ontario<br>K1A 0K9<br>Telephone: 1-866-227-0943<br>Facsimile: 1-866-227-0957 |
| <b>Modification to Dental Provider Information Form</b> | Express Scripts Canada<br>Attention: Provider Relations<br>5770 Hurontario St., 10th Floor,<br>Mississauga, ON L5R 3G5<br>Fax No.: 905-712-0669   |

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

Express Scripts Canada is receiving PDs and Post Determination requests from providers. Please be informed that Express Scripts Canada does not process these requests. All PDs and Post Determination requests must be sent to the respective Health Canada Regional Office for adjudication.

**Please note that PDs, Post Determinations 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. One of the following forms is to be completed and submitted with the claim request:

- Standard Dental Claim Form
- ACDQ Dental Claim and Treatment Plan Form
- Computer generated form
- NIHB Dental Claim Form (Dent-29)
- Canadian Association of Orthodontists (CAO) Certified Specialist in Orthodontics Standard Information Form.

**Restorations**

Any tooth is eligible for restoration only once (1) in any 12-month period by the same provider, same office. The adjudication system checks all submitted claims and PDs against history claims for restoration services performed by the same provider for the same tooth within 12 months of a paid restoration claim. If the submitted transaction matches a paid history restoration claim where the history claim and the submitted transaction have a different Date of Service (DOS) within 12 months of each other, the adjudication system will reject the submitted transaction with a Reject Error Code R52 (Restoration paid within 12 month period). The NIHB Program also reminds providers that repeat restoration/ extension completed within a 24 month period by the same provider/ same office are subject to audit.

**Root Canal Treatment**

Please be reminded that permanent second and third molar teeth (17, 27, 37, 47, 18, 28, 38, and 48) require a PD for root canal treatment procedure codes as per the NIHB Program Endodontic Policy.

## Radiographs

When sending claims to Express Scripts Canada for payment, please do not send radiographs with the claim – they are not required and will not impact the payment decision, paid or rejected. However, when sending a PD or Post Determination request to Health Canada Regional Office or ORC for consideration, radiographs are required in support to your request.

## 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.

## NIHB Regional Dental Benefit Grids

All dental benefit grids (General Practitioners and Specialists, Denturists) for each province/territory can be located on the 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 province/territory of choice.