

## For our Medical Supplies and Equipment Providers

Winter 2005-2006

### NEWS AND VIEWS

Welcome to the Winter 2005-2006 edition of the Non-Insured Health Benefits (NIHB) quarterly newsletter. First Canadian Health (FCH) is now in its seventh year of operations as the claims processor for the NIHB Program of the First Nations and Inuit Health Branch (FNIHB) of Health Canada.

Again, FCH would like to thank you for your support as you continue to provide quality health services to First Nations and Inuit clients of the NIHB Program.

As always, your comments and questions are welcome. Please contact the FCH NIHB Toll-Free Inquiry Centre at **1-888-471-1111**, or send your correspondence to:

FCH Provider Relations  
3080 Yonge Street, Suite 3002  
Toronto, ON M4N 3N1

### ITEM COST FIELD

The amount entered in the "Item Cost" field on the *NIHB MS&E Claim Form* must be the total acquisition cost of all units of the item dispensed for the claim. In other words, the amount in the "Item Cost" field represents the quantity dispensed multiplied by the unit cost of the item. Failure to enter the correct amount in this field will result in claims being returned unprocessed to providers.

For additional information, please refer to Section 7.5 of the *NIHB Medical Supplies and Equipment (MS&E) Provider Information Kit*.

### AMOUNT CLAIMED FIELD

The total amount entered in the "Amount Claimed" field on the *NIHB MS&E Claim Form* must be the sum of the item cost, dispensing fee and the mark-up for the item, less any third party share. Failure to enter the correct amount will result in claims being returned unprocessed to providers.

For additional information, please refer to Section 7.5 of the *NIHB MS&E Provider Information Kit*.

### APPEAL PROCESS

When a client is denied a benefit, there are three levels of appeal available under the NIHB Program. Providers are reminded that appeals can only be initiated by the client, or with written confirmation that the client is aware that the appeal is being submitted on his/her behalf. Appeals submitted by providers without client confirmation, will not be subject to review.

### NIHB MS&E PROVIDER AUDIT PROGRAM

The Non-Insured Health Benefits (NIHB) Audit Program has recently conducted on-site provider audits. The NIHB Audit Program has determined that the most frequent reason for recovery is the prescription not being found on site.

As per provincial regulations and NIHB Program requirements, providers are expected to retain original or faxed prescriptions for review during an on-site audit. Faxed prescription must include the mandatory transmission information (which includes the date sent and the sender's information) in order to be valid. The prescriptions therefore, should not be cut to fit the Rx cases.

In conclusion, the absence of the original or faxed prescription in the client's file during an on-site audit will result in the recovery of claim(s) associated with the prescription.

The NIHB Program's billing requirements are detailed in the *NIHB MS&E Provider Information Kit*, First Canadian Health/NIHB Program Newsletters, and NIHB Program MS&E Bulletins. These documents can be accessed at the following NIHB website:

[www.hc-sc.gc.ca/fnih-spni/nihb-ssna/benefit-prestation/medequip/index\\_e.html](http://www.hc-sc.gc.ca/fnih-spni/nihb-ssna/benefit-prestation/medequip/index_e.html)

Failure to comply with the requirements of the NIHB Program may result in the recovery of affected paid claims. Providers are advised to review the key documentation in order to be aware of NIHB Program requirements.

Providers can download a current version of the *NIHB Medical Supplies and Equipment Provider Information Kit* at the following NIHB website:

[www.hc-sc.gc.ca/fnih-spni/pubs/medequip/2005\\_kit-trousse\\_info/index\\_e.html](http://www.hc-sc.gc.ca/fnih-spni/pubs/medequip/2005_kit-trousse_info/index_e.html)

Providers without Internet access can contact the FCH NIHB Toll-Free Inquiry Centre at **1-888-471-1111**.