



**FIRST NATIONS AND INUIT HEALTH  
NON-INSURED HEALTH BENEFITS PROGRAM**

**EYE PROSTHESIS – FEE GUIDE  
MANITOBA REGION**

Revised October 26, 2018

Effective Date: May 28th, 2018

<b>Item Description</b>	<b>Item Code</b>	<b>Prior Approval</b>	<b>Recommended Replacement Guidelines</b>	<b>Price</b>
<b>Eye Prosthesis, Left</b>	99400005	Yes	3 years	\$2,211.00
<b>Eye Prosthesis, Right</b>	99400006	Yes	3 years	\$2,211.00
<b>Scleral Shell, Left</b>	99400802	Yes	3 years	\$2,427.00
<b>Scleral Shell, Right</b>	99400803	Yes	3 years	\$2,427.00
<b>Adjustment for Eye Prosthesis, Left</b>	99401185	Yes	1 year	\$482.40
<b>Adjustment for Eye Prosthesis, Right</b>	99401205	Yes	1 year	\$482.40
<b>Eye Prosthesis-Polishing Left</b>	99401184	No	1 year	\$61.70
<b>Eye Prosthesis-Polishing Right</b>	99401204	No	1 year	\$61.70



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<b>Eye Prosthesis, Left</b>	99400005	Yes	3 years	\$1,800.00
<b>Eye Prosthesis, Right</b>	99400006	Yes	3 years	\$1,800.00
<b>Scleral Shell, Left</b>	99400802	Yes	3 years	\$1,900.00
<b>Scleral Shell, Right</b>	99400803	Yes	3 years	\$1,900.00
<b>Adjustment for Eye Prosthesis, Left</b>	99401185	Yes	1 year	\$400.00
<b>Adjustment for Eye Prosthesis, Right</b>	99401205	Yes	1 year	\$400.00
<b>Eye Prosthesis-Polishing Left</b>	99401184	No	1 year	\$50.00
<b>Eye Prosthesis-Polishing Right</b>	99401204	No	1 year	\$50.00