

For our Pharmacy Providers

Summer 2000

NEWS AND VIEWS

Welcome to the Summer 2000 edition of our quarterly newsletter for registered pharmacy providers to the Non-Insured Health Benefits (NIHB) Program through First Canadian Health.

Again, First Canadian Health would like to thank you for your support as you continue to provide quality health services to Registered Indians, Eligible Inuit and Eligible Innu clients of the NIHB Program.

As always, your comments and questions are welcome. Please call our First Canadian Health (FCH) NIHB Toll-Free Inquiry Centre's Customer Service Representatives at **1-888-511-4666**, or send your correspondence to our mailing address.

SPOTLIGHT ON... PROVIDER RELATIONS DEPARTMENT

First Canadian Health's Provider Relations Department is responsible for all First Canadian Health communications to providers, including NIHB Newsletters and Provider Information Kits. This Department is also responsible for all pharmacy provider registration activities and for delivering the provider audit program to ensure compliance with NIHB program guidelines.

Attached is a revised page for Sub-Section 6.2 of the Pharmacy Provider Information Kit (PPIK). Please remove the existing page from the PPIK and insert the revised page.

NIHB DRUG BENEFIT LIST/UPDATE

Please find attached the Summer 2000 Update to the NIHB Drug Benefit List. This is a summary of changes to the NIHB Drug Benefit List which have occurred since the annual reprint dated April 1, 2000. It includes lists of additions, replacement DINs, limited use benefits and discontinued drugs.

Should you have any questions, please contact the First Canadian Health (FCH) NIHB Toll-Free Inquiry Centre at **1-888-511-4666**.

PRIOR APPROVALS

When calling Medical Services Branch to obtain a prior approval for any item, please ensure that the precise date of

service (for one time item) or date of service period (for multiple dispenses) is given to the benefit analyst. In addition, please use these dates for claiming purposes. These dates are important as they are used on the prior approval and will determine if your claim will be paid in the following ways:

1. On a prior approval with no start and end date (for one time item), the date of service on the claim must be the same or after the date of the prior approval or the claim will be rejected.
2. On a prior approval with a start and end date (for multiple dispenses or if a prior approval is granted after the date of dispense with justification), the date of service on the claim must be within the start and end date on the prior approval or the claim will be rejected.

The applicable dates will appear on the confirmation letter.

This prevents claims from being rejected due to message R26: "PRIOR APPROVAL SERVICE DATE VIOLATION."

Attached is a revised page for Section 3 of the Pharmacy Provider Information Kit (PPIK). Please remove the existing page from the PPIK and insert the revised page.

MAXIMUM DAYS SUPPLY

The maximum days supply in section 2.1.3 of the Pharmacy Provider Information Kit (PPIK) has been revised to reflect the current NIHB policy whereby reimbursement will only be made up to a maximum of 100 days supply for long-term maintenance therapy. The NIHB System administered by First Canadian Health (FCH) reflects this policy.

Attached is a revised page for Sub-Section 2.1.3 of the Pharmacy Provider Information Kit (PPIK). Please remove the existing page from the PPIK and insert the revised page.

FIRST CANADIAN HEALTH ADDRESS

Please note that First Canadian Health has an updated mailing address. Please direct any written communication to the following address:

**First Canadian Health (FCH)
NIHB Claims Processing Department
5770 Hurontario Street, 10th Floor
Mississauga, Ontario
L5R 3G5**