

For our Pharmacy Providers

Winter 2003-2004

NEWS AND VIEWS

Welcome to the winter 2003 edition of the Non-Insured Health Benefits (NIHB) quarterly newsletter. First Canadian Health (FCH) is now in its fifth 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 Representatives at **1-888-511-4666**, or send your correspondence to:

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

WINTER 2003-2004 NIHB DRUG BENEFIT LIST (DBL) UPDATE AND APRIL 1, 2004 REPRINT

Please find attached the winter 2003-2004 updates, which list all changes to the April 1, 2003 NIHB Drug Benefit List (DBL). These updates include the addition/replacement of DINs, limited use benefits, drugs removed from the Canadian market and drugs discontinued by the manufacturer effective December 1, 2003.

These updates are reflected in the most recent electronic version of the NIHB DBL. Please refer to the website at the following URL address:

www.hc-sc.gc.ca/fnihb/nihb/pharmacy

To be added to the distribution list for a hard copy of the April 1, 2004 reprint of the NIHB DBL, a request must be submitted using the form below. Please fax the entire page to **(613) 941-6249** no later than June 1, 2004. After that time, hard copies of the April 1, 2004 reprint of the NIHB DBL will not be provided.

Name: _____

Provider Number: _____

Street Address: _____

City: _____

Prov. / Postal Code: _____

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

METHADONE FOR OPIOID DEPENDENCY, PSEUDO-DIN 00908835

Effective October 1, 2003, a new policy was implemented for the submission and the reimbursement of methadone used for the treatment of addictions for all provinces and territories, **excluding Quebec**.

Methadone claims must be submitted by using the pseudo-DIN 00908835. Claims submitted with another pseudo-DIN will be subject to reclaim.

The provider **no longer has to contact the National Drug Exception Centre to obtain a special authorization** before submitting claims for methadone.

Cost of the Drug: The drug cost submitted must be the actual acquisition cost (AAC). The drug cost submitted must reflect the **number of milligrams dispensed** as opposed to the volume dispensed. Where applicable, the mark-up (MU) submitted must be in accordance with the NIHB Program Pharmacy Pricing Guidelines defined by region.

Dispensing Fee (DF): The DF, submitted at the end of the week, must be a **weekly** fee calculated as follows: Day one: 1.5 times the current DF + an **"interaction fee"** of \$3.50. From day 2 to day 7, only the \$3.50 interaction fee is reimbursed.

The interaction fee is reimbursed for each dose that the pharmacist witnesses. For doses that the patient carries home, the interaction fee should not be claimed.

In summary, the total claim submitted weekly (every seven days) is the total of the drug cost + the MU (where applicable) + DF.

Note: For treatment using methadone for other indications, please refer to the NIHB Drug Bulletin dated January 2002.

QUANTITY LIMITATIONS FOR MS&E ITEMS

MS&E items that have a prior approval and an annual quantity limitation may only be provided and claimed for no more than a three-month period. For example, if an item has a limitation of 12 per year, then a maximum of 3 may be provided and claimed for during a three-month period. Any quantities in excess of the amount allowed during the three-month period will be subject to reversal or reclaim through the audit process.

For further information on prior approvals, please refer to Sections 3.3.2 and 10A.2 of your NIHB Pharmacy/MS&E Provider Information Kit (PIK).

COORDINATION OF BENEFITS WITH ONTARIO DRUG BENEFIT LIMITED USE DRUG PRODUCTS (FOR ONTARIO PHARMACIES ONLY)

Ontario pharmacists must pursue payment through ODB prior to billing the NIHB Program for drugs listed on the Ontario Drug Benefit (ODB) Limited Use (LU) Drug Products list. Results of the ODB limited use request must be documented and kept on file in the NIHB client's profile for review during on-site audit. Failure to maintain proper documentation will result in reclaim.

When submitting claims electronically, providers must submit first to ODB, and then submit to NIHB for the coordination of benefits. If the software does not allow proper submission and payment for the drug, submit the claim manually to FCH and contact your software vendor to update your software.

Claims for items on the ODB list (including the limited use section) not coordinated with ODB prior to billing the NIHB Program will now be rejected with the message **R08 (PATIENT OVER 65 – SUBMIT CLAIM TO ONT DRUG BENEFIT)**.

BAND #458 – BIGSTONE CREE NATION

The Bigstone Health Commission has assumed complete management of pharmacy benefits on behalf of the members of Bigstone Cree Nation (Band #458). This means that in the near future claims for members of Bigstone Cree Nation will become ineligible for payment through First Canadian Health (FCH), which administers the Health Information and Claims Processing System (HICPS) on behalf of the NIHB Program. Bigstone Cree Nation will communicate to providers a specific date when claim payments will be discontinued by FCH. At that time, prior approvals and claims for services provided to the members of Bigstone Cree Nation should be submitted to:

Bigstone Health Commission
Attn: Mabel Gladue
P.O. Box 1590
Wabasca, AB T0G 2K0
Phone: **(780) 891-4161**
Fax: **(780) 891-3222**
Toll Free: **1-866-891-9719**
