



# NIHB NEWSLETTER

NEWS AND INFORMATION FOR NIHB PROVIDERS

[www.provider.express-scripts.ca](http://www.provider.express-scripts.ca)

## Pharmacy 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

**Pharmacy Extended Hours**  
Monday to Friday:  
6:30 a.m. to 12:00 a.m. Eastern Time  
Saturday, Sunday and Statutory Holidays:  
8 a.m. to 12 a.m. Eastern Time

**MS&E Extended Hours**  
Monday to Friday:  
6:30 a.m. to 8:30 p.m. Eastern Time  
Excluding Statutory Holidays

### Pharmacy and MS&E Claims

**Mail Pharmacy claims to:**  
Express Scripts Canada  
NIHB Pharmacy Claims  
P.O. Box 1353, Station K,  
Toronto, ON M4P 3J4

**Mail MS&E claims to:**  
Express Scripts Canada  
NIHB MS&E Claims  
P.O. Box 1365, Station K,  
Toronto, ON M4P 3J4

### Pharmacy/ MS&E Provider Agreements

**Fax Completed  
Pharmacy/ MS&E Provider Agreement to:**  
Fax No.: 905-712-0669

### Other Correspondence

**Mail to:**  
Express Scripts Canada  
5770 Hurontario St. 10<sup>th</sup> Floor,  
Mississauga, ON L5R 3G5

## NIHB PHARMACY PROGRAM

### Drug Exception Centre

#### PRIOR APPROVALS

#### Pharmacy Drug Benefits

1-800-580-0950 (English)/ 1-800-281-5027 (French)  
Fax: 1-877-789-4379

### Health Canada Regional Offices

#### MS&E PRIOR APPROVALS

Alberta	1-800-232-7301
Atlantic	1-800-565-3294
British Columbia	1-888-321-5003
Manitoba	1-877-505-0835
Northwest Territories/ Nunavut	1-888-332-9222
Ontario	1-888-283-8885
Québec	1-877-483-1575
Saskatchewan	1-877-780-5458
Yukon	1-866-362-6717/ 1-866-362-6718/ 1-866-362-6719

#### PHARMACY/ MS&E INQUIRIES

Alberta	1-780-495-2694/ 1-800-232-7301
Atlantic	1-902-426-2656/ 1-800-565-3294
British Columbia	1-604-666-3331/ 1-800-317-7878
Manitoba	1-800-665-8507
Northwest Territories/ Nunavut	1-888-332-9222
Ontario	1-800-640-0642
Québec	1-877-483-1575/ 1-514-283-1575
Saskatchewan	1-306-780-8294
Yukon	1-866-362-6717/ 1-866-362-6718/ 1-866-362-6719

### 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

INFORMATION

**NIHB Drug Benefit List and Drug Benefit List Updates**

Health Canada maintains an up-to-date Drug Benefit List (DBL) of NIHB eligible drugs that are to be used in a home or ambulatory setting. The DBL indicates to prescribers and pharmacy providers which drug products are eligible NIHB benefits.

The DBL encourages the most optimal and cost-effective drug therapy for NIHB clients. It is recommended that prescribers and pharmacy providers regularly review the list to ensure they are aware of the drugs eligible for NIHB coverage. The DBL is published annually, and changes made during the year will continue to be communicated via quarterly NIHB DBL Updates.

Both the DBL and DBL Updates may be downloaded from the Health Canada Website at [www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fourrir/pharma-prod/med-list/index-eng.php](http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fourrir/pharma-prod/med-list/index-eng.php) or you may contact the Express Scripts Canada Call Centre to obtain a copy.

**Coverage of Suboxone**

Effective December 7, 2011, Suboxone will be listed on the NIHB DBL as a Limited Use benefit with the following criteria.

- For the treatment of opioid dependence in patients who have a contraindication to methadone due to evidence of (or high risk for) QT interval prolongation; AND
- Prescribed by a physician with experience in substitution treatment in opioid drug dependence or completion of an accredited Suboxone Education Program.

Requests for Suboxone for use other than what is specified above will be reviewed on a case by case basis. NIHB clients who are approved for Suboxone coverage must agree to restrictions that prevent the use of methadone or opioids, and ensure that benzodiazepine and stimulants are prescribed by one prescriber.

**Thirty (30) Supply Limit for Hydromorph Contin and Fentanyl Patches**

Effective November 1, 2011, the NIHB Program introduced a day supply limit per dispense for Fentanyl Transdermal Patches, Controlled Release Codeine Tablets and Controlled Release Hydromorphone Capsules. The maximum day supply limit per dispense for items listed below will be 30 days.

12mcg/h Transdermal Patch	
DIN	Name
02341379	PMS-FENTANYL MTX PMS
02330105	RAN-FENTANYL MATRIX PATCH 12 RBY
02311925	RATIO-FENTANYL RPH
02327112	SANDOZ FENTANYL SDZ

25mcg/h Transdermal Patch	
DIN	Name
02275813	DURAGESIC MAT JNO
02314630	NOVO-FENTANYL NOP
02341387	PMS-FENTANYL MTX PMS
02249391	RAN-FENTANYL RBY
02330113	RAN-FENTANYL MATRIX RBY
02282941	RATIO-FENTANYL RPH
02327120	SANDOZ FENTANYL SDZ

50mcg/h Transdermal Patch	
DIN	Name
02275821	DURAGESIC MAT JNO
02314649	NOVO-FENTANYL NOP
02341395	PMS-FENTANYL MTX PMS
02249413	RAN-FENTANYL RBY
02330121	RATIO-FENTANYL RPH
02282968	RATIO-FENTANYL RPH
02327147	SANDOZ FENTANYL SDZ

75mcg/h Transdermal Patch	
DIN	Name
02275848	DURAGESIC MAT JNO
02314657	NOVO-FENTANYL NOP
02341409	PMS-FENTANYL MTX PMS
02249421	RAN-FENTANYL RBY
02330148	RAN-FENTANYL MATRIX RBY
02282976	RATIO-FENTANYL RPH
02327155	SANDOZ FENTANYL SDZ

100mcg/h Transdermal Patch	
DIN	Name
02275856	DURAGESIC MAT JNO
02314665	NOVO-FENTANYL NOP
02341417	PMS-FENTANYL MTX PMS
02249448	RAN-FENTANYL RBY
02330156	RAN-FENTANYL MATRIX RBY
02282984	RATIO-FENTANYL RPH
02327163	SANDOZ FENTANYL TRANSDERMAL SYSTEM SDZ

50mg Long Acting Tablet	
DIN	Name
02230302	CODEINE CONTIN CR PFR

100mg Long Acting Tablet	
DIN	Name
02163748	CODEINE CONTIN CR PFR

150mg Long Acting Tablet	
DIN	Name
02163780	CODEINE CONTIN CR PFR

200mg Long Acting Tablet	
DIN	Name
02163799	CODEINE CONTIN CR PFR

3mg Controlled Release Capsule	
DIN	Name
02125323	HYDROMORPH CONTIN PFR

6mg Controlled Release Capsule	
DIN	Name
02125331	HYDROMORPH CONTIN PFR

12mg Controlled Release Capsule	
DIN	Name
02125366	HYDROMORPH CONTIN PFR

18mg Controlled Release Capsule	
DIN	Name
02243562	HYDROMORPH CONTIN PFR

24mg Controlled Release Capsule	
DIN	Name
02125382	HYDROMORPH CONTIN PFR

30mg Controlled Release Capsule	
DIN	Name
02125390	HYDROMORPH CONTIN PFR

## New Blood Glucose Test Strip Pseudo DINs

The NIHB Program is working towards streamlining the list of Pseudo DINs (PDINs) for blood glucose test strips listed on the NIHB Drug Benefit List. Where possible, NIHB will reduce and standardise the PDINs per blood glucose test strip. Please keep an eye out for a fax broadcast with details on these changes and the date of implementation.

## New Clients to the NIHB Program

The Non-Insured Health Benefits (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)

## Changes to NIHB's Lowest Cost Equivalent Drug Policy

The NIHB Program covers the Lowest Cost Equivalent (LCE) drug, which is often a generic drug. Generic drugs are considered for inclusion on the NIHB formulary based on provincial interchangeability lists and other relevant factors. The policy of the NIHB Program is to reimburse only the best price (lowest cost) alternative product in a group of interchangeable drug products. Pharmacists must follow their provincial or territorial pharmacy legislation and policies to identify interchangeable products and to select the lowest-priced brand.

The NIHB policy to reimburse the best price alternative product also applies to generic products not deemed interchangeable by the province or generic products not listed on the provincial formulary. For these drugs, the NIHB

Program will only reimburse up to the best price (lowest cost) generic product available in the provincial formulary. If the pharmacist chooses a generic that is covered by the NIHB Program, but is not listed on the provincial formulary or interchangeability list, the claim will be reimbursed to the maximum of the provincially listed LCE price and the higher costs will not be reimbursed.

If the client cannot take the LCE drug as a result of an adverse reaction to it, the NIHB Program may consider coverage of other interchangeable products. In such circumstances, pharmacy providers must seek prior approval from the NIHB Program.

To do so, pharmacists should acquire from the prescriber a completed and signed Health Canada Report of suspected adverse reaction due to drug products marketed in Canada form, as well as the prescription with 'No Substitution' or 'No Sub' written on it by hand. A copy of the form and prescription should then be sent by the pharmacy provider to NIHB for review.

## Pharmacy Change of Ownership or New Registration

When changing ownership of a pharmacy or registering/ re-registering a new pharmacy, please advise Express Scripts Canada immediately, allowing Express Scripts Canada adequate time to make changes/ updates within the adjudication system. A new **Express Scripts Canada Pharmacy Agreement is required to be completed, including the effective date.**

Fax *all* pages of the Pharmacy Provider Agreement to fax number **905-712-0669** with a cover sheet advising the reason for the new agreement.

- Change of Ownership
- New opening/ registration
- NIHB re-registration to Express Scripts Canada

**Note** A provider **must** first register with Express Scripts Canada before submitting claims.

## REMINDERS

### Important Message

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

## Special Provision for First Nations and Inuit Infants under One Year of Age

Express Scripts Canada is receiving a high volume of infant claims that are being returned due to incorrect information supplied.

Special identification provisions for infants less than one year of age are in place to allow adequate time for NIHB clients to register their newborn children with the applicable Aboriginal organization.

If an *infant of less than one year of age* has not been registered, Clients (parents) should be referred to the appropriate office or organization to ensure ongoing Client eligibility, as well as for parents to obtain a Client Identification Number:

Clients	Office/ Organization
First Nations	Their Band Office or the Registration Services Unit of AANDC at 1-819-953-0960.
Inuit Residing in the Northwest Territories and Nunavut	<ol style="list-style-type: none"> <li>1. Their Land Claim Organization to be recognized; and,</li> <li>2. Their respective territorial Department of Health and Social Services to obtain a health care number.</li> </ol>
Inuit Residing Outside of the Northwest Territories and Nunavut	<ol style="list-style-type: none"> <li>1. Their Land Claim Organization to be recognized, and;</li> <li>2. Their nearest Health Canada Regional Office.</li> </ol>

**First Infant Claim**

The first Pharmacy Claim for infants must be manually submitted to Express Scripts Canada using the NIHB Pharmacy Claim Form.

**Subsequent Claims Submitted Electronic Claims Submission (EDI)**

Each subsequent Claim submitted on behalf of the infant may be submitted via EDI – however, the submission must include the *exact* Client Identification Number, Surname, Given Name and Date of Birth fields as the original claim or the claim will reject.

The required fields must be keyed correctly each time with the same information as the original claim:

Field	Mandatory Information Required
Client Identification Number	Child’s parent’s primary identifier (such as AANDC, Client or Band/ Family Number, FNIHB Client Identification Number, NWT or NU health plan number)
Surname	Last name (family name)
Given Name	First name
Date of Birth	Date the child was born

**NIHB Pharmacy 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.