NIHB CLAIMS SERVICES PROVIDER WEBSITE Non-Insured Health Benefits (NIHB)

www.provider.express-scripts.ca

News and Information for NIHB Providers

Pharmacy Providers



Fall 2012

NIHB Forms

Download from the

NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre

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 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 Agreements to: NEW Toll Free Fax No.: 1-855-622-0669

Other Correspondence

Mail to:

Express Scripts Canada 5770 Hurontario St.10th Floor, Mississauga, ON L5R 3G5

NIHB PROGRAM PHARMACY BENEFITS

Drug Exception Centre (DEC)

PRIOR APPROVALS Pharmacy Drug Benefits

1-800-580-0950 (English) 1-800-281-5027 (French) Fax No.: 1-877-789-4379

Health Canada Regional Offices

PRIOR APPROVALS

Medical Supplies & Equipment (MS&E) Benefits

Alberta	1-800-232-7301
Atlantic	1-800-565-3294
British Columbia	1-888-299-9222
Manitoba	1-877-505-0835
Northwest Territories/ Nunavut	1-888-332-9222
Ontario	1-800-881-3921
Quebec	1-877-483-1575
Saskatchewan	1-800-667-3515
Yukon	1-866-362-6717
	1-866-362-6718
	1-866-362-6719

INQUIRIES

Pharmacy/MS&E Benefits

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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		
Quebec	1-877-483-1575		
	1-514-283-1575		
Saskatchewan	1-800-667-3515		
Yukon	1-866-362-6717		
	1-866-362-6718		
	1-866-362-6719		

NEW INFORMATION

Recent Listing Decision - Drugs Used to Treat Hepatitis C

Effective July 3, 2012, Victrelis, Victrelis Triple* and Incivek became eligible benefits for NIHB clients for the treatment of hepatitis C, in combination with peginterferon alpha (PegIFN α) plus ribavirin (RBV) in treatment-naïve and treatment experienced patients who meet all the following criteria:

- HCV genotype 1;
- Detectable levels of hepatitis C virus HCV RNA in the last six months;
- No co-infection with HIV;
- Fibrosis stage F2 or greater (Metavir scale or equivalent); and
- No diagnosis of cirrhosis OR compensated liver disease (cirrhosis with a Child Pugh Score = A (5-6)).

Only one (1) course of treatment (up to 44 weeks for Victrelis and Victrelis Triple and up to 12 weeks for Incivek) will be covered.

*Note Victrelis triple already contains peginterferon alpha (PegIFNα) and ribavirin (RBV).

Addition to the Prescription Monitoring Program (PMP)

Due to potential problematic use of gabapentin, the NIHB Program has added the drug to the PMP review process. This is in addition to the review of opioid, benzodiazepine and stimulant use.

Updated 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 NIHB Newsletters and NIHB DBL Updates. Both the DBL and DBL Updates may be viewed on the NIHB Claims Services Provider Website (select Pharmacy link "Drug Benefit List" or "Benefit Updates").

The 2012 version of the DBL is available on the Health Canada website at www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/pharma-prod/med-list/index-eng.php

Price File for Incontinence Supplies

On September 1st, 2012, the NIHB Program implemented a price file and new benefit codes for the following incontinence items: Adult Diapers/Pull-Ups, Adult Diapers/Tabs and Incontinence Disposable Liners. The prices have been established based on a scan of manufacturers pricing, consultations with industry representatives, and an analysis of Program utilization and pricing data.

MS&E providers must use the new codes and follow the pricing structure set out by the price file.

Below is the list of new codes and pricing for selected incontinence items.

Item Name	Item Number	Price for Provinces	Price for Territories
Adult Diapers/Pull-Ups, Small or Medium	99401087	\$1.24	\$1.42
Adult Diapers/Pull-Ups, Large or Extra Large	99401088	\$1.33	\$1.52
Adult Diapers/Pull-Ups, XXX Large	99401089	\$1.51	\$1.73
Adult Diaper /Tabs, Small or Medium	99401090	\$0.99	\$1.13
Adult Diaper /Tabs, Large or Extra Large	99401091	\$1.21	\$1.39
Adult Diaper /Tabs, XXX Large	99401092	\$1.43	\$1.63
Incontinence Disposable Liners	99400438	\$0.55	\$0.63

This information is also available on the Health Canada website at www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/provide-fournir/med-equip/criter/index-eng.php

If you have any questions about this new process, please contact your respective Health Canada Regional Office.

REMINDERS

GO Paperless!

ONE EASY STEP ... Place a verbal request to the Provider Claims Processing Call Centre at 1-888-511-4666.

Health Canada and Express Scripts Canada receive a fair amount of error messages when faxing out important information to the NIHB Program providers because of an incorrect fax number, fax machine turned off, phone number not a fax number, etc. The most current Pharmacy information should be provided to Express Scripts Canada, otherwise providers may NOT receive *new and important information* from Health Canada's NIHB Program and Express Scripts Canada as intended.

GO GREEN! ...go paperless! Make e-mail your first choice of communication delivery!

Stay informed with same day e-mail delivery of Health Canada's NIHB Program.

- ...No more tying up the fax machine's day to day activity.
- ...e-Save your communications within your office network.
- ...Share the communications within the office at the click of your mouse.

A verbal request is accepted at the Provider Claims Processing Call Centre to change the following important provider information:

- E-mail address;
- Fax number;
- Phone number; and/or
- Correction to your current address.

All other changes to provider information must be completed on the *Modification to Pharmacy/Medical Supplies & Equipment Provider Information Form*, signed by the director or

owner of the business, and submitted by fax or mail as indicated on the form.

These types of changes include:

- New complete address (e.g., moved);
- Bank information; and/or
- Name and/or ownership of your business.

The Modification to Pharmacy/Medical Supplies & Equipment Provider Information Form can be downloaded from the NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre to request a copy.

Expansion of the Short Term Dispensing Policy

As per the Summer 2012 NIHB Newsletter, effective July 15, 2012, several medication classes were added to the short term dispensing (STD) policy under a new reimbursement model. This policy was expanded to include medications that have been identified as drugs of concern where it may be necessary to dispense more frequently than once every 28 days.

The Program will compensate up to a maximum of one (1) full dispensing fee every seven (7) days for antidepressant, anticonvulsant, antipsychotic, benzodiazepine and stimulant medications (treatment which comes in solid, oral pharmaceutical forms). Therefore if these medications are dispensed daily, the pharmacy will be entitled to 1/7 of their usual and customary dispensing fee, up to the regional maximum of the Program. Other medications under the STD policy will not be affected by this new reimbursement model.

Exceptions to this policy include dosage changes and medications being prescribed on an as needed or 'PRN' basis. In such cases, the Program will compensate one (1) full dispensing fee. For claims falling under these exceptions, the provider is required to submit the claim with Special Services Code = 2 (SSC = 2). This new policy is not intended to interfere with or question treatment approaches or judgements made by pharmacists or physicians on how patients receive their medications. Rather, it sets out guidelines on how NIHB will compensate pharmacists for dispensing these drugs of concern.

If a claim is submitted for a specific patient for a subsequent fill of a chronic-use medication and the days supply paid is less than seven (7) days, the provider is required to claim as per the following formula: usual and customary, dispensing fee/7x days supply, up to the maximum dispensing fee.

This policy has been subject to audit since July 15, 2012, and Express Scripts Canada will be adjudicating in accordance with the policy effective September 28, 2012.

Pharmacy Change of Ownership or New Registration

Important Message

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 (ten (10) business days) to make changes/updates within the adjudication system. Α new fully completed **Express** Scripts Canada Pharmacy Provider Agreement noting the effective date of the pharmacy is required.

Please include a cover letter with the Agreement including the effective date and the reason for the request for registration (e.g., new pharmacy opening or ownership change, etc.).

All pages of the Agreement with a cover letter should be **faxed** to **1-855-622-0669**:

- · 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.

Drug Utilization Review Documentation Requirements

All NIHB claims are subject to the Drug Utilization Review (DUR) process to ensure that pharmacy providers are advised of potential drug-related problems or interactions. For example, an 'ME' code will warn the pharmacy provider of potential drugdrug interaction. As per professional judgment, pharmacy providers may use an intervention code to override these messages. In these instances, the providers must document the nature of their intervention directly on the prescription hard copy or on the electronic patient profile, and retain the documented intervention as supporting documentation for audit purposes. Claims reviewed as part of the DUR process are subject to recovery if the nature of the intervention is not documented. DUR is a means of improving the quality of client care, enhancing therapeutic outcomes, and reducing inappropriate pharmaceutical expenditures.

Prescriptions Requiring Clarification

The NIHB Program requires that providers document the nature of their intervention directly on the prescription hard copy or on the electronic client profile, and that the documented intervention be retained for audit purposes as supporting documentation. NIHB claims reviewed as part of the DUR process are subject to audit and may be recovered if the nature of the pharmacy provider's intervention is not documented. Appropriate supporting documentation includes but is not limited to:

- Date of intervention;
- Pharmacist's summary of the intervention;
- Documented communication with the physician, caregiver, and/or client;
- Reason for early refill (medication lost, destroyed, stolen, physician changed dosage or client going out of town for a period greater than the days' supply remaining on the current refill).

Claim Corrections and Adjustments

Please note adjustments to previously paid claims must be submitted to Express Scripts Canada as corrections noted on your NIHB Pharmacy Claim Statement.

Valid Prescriber ID and Valid Prescriber ID Reference Code

A valid **Prescriber ID** (not a 99999 code) and valid **Prescriber ID Reference Code** are required when submitting claims. The Prescriber ID is mandatory for all claims and must either be the prescriber's license number or the provincial/territorial billing number. Nurse practitioners are authorized to prescribe certain

drug items, as well as a limited list of MS&E items. Claims that do not contain valid Prescriber ID information are subject to audit recovery.

Units of Measure for Claim Quantities

In general, claim quantities are the number of units dispensed wherever possible (e.g. number of tablets, capsules, millilitres, grams, etc.). For products that are dispensed in packages (e.g. oral contraceptives, inhalers), submit claim quantities according to your provincial public plan convention. For example, pharmacies in Saskatchewan and Ontario submit inhalers as a package of one (1).

Drug Prior Approval (PA) Requests

New PA requests and requests to amend an approved PA (e.g. item cost, quantity, effective date or number of repeats) are **obtained from the Drug Exception Centre (DEC)**.

Certain drug products listed as Limited Use Benefits on the Drug Benefit List (DBL) may be considered by the NIHB Program for PA.

To obtain a PA, the client's prescriber and provider information is required along with reference to the prescription. The DEC requires a completed Exception or Limited Use Drug Request Form from the prescriber stating the medical need for the drug.

PA requests may take a few days to review and may depend on the prescriber's compliance in providing the necessary information requested by DEC. When approval is granted, a confirmation letter is faxed or mailed to the provider.

A PA number starts with the letter E followed by seven (7) digits (e.g. E1234567). This number is entered electronically on the claims processing system. Providers are advised to retain the PA Confirmation Letter for billing purposes and/or to validate any discrepancies. When submitting the claim, please be sure to include the date of service (dispense date) with the claim.

Contact information for the DEC can be found on the front page of this newsletter.

How the Provider Claims Processing Call Centre Can Assist Providers

The customer service representatives can assist the provider in obtaining the status of their PA request (approved, on hold or declined); explain any claims adjudication against the PA or provide information on how to transfer the PA request to a new unique Provider Number when ownership of the pharmacy has changed; provide details of the PA process; explain how claims are paid against the PA, etc. The representatives do **not**, however, have the ability to create or edit a PA. For any updates to a drug PA, contact Health Canada's DEC at 1-800-580-0950.

Provider Guide for Medical Supplies and Equipment

The Provider Guide for MS&E will be revised to include updates to the NIHB Program's MS&E policies. The new version of the Guide will be posted to the Health Canada website in October 2012.

NIHB Pharmacy Claims Submission Kit/NIHB Medical Supplies and Equipment Claims Submission Kit

Both Kits can be downloaded from the NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre to request a copy.

Contact information for the NIHB Claims Services Provider Website and the Provider Claims Processing Call Centre can be found on the front page of this newsletter.