



### NEW INFORMATION

#### New Lancet Reimbursement Policy

Effective October 9, 2018, the quantity limit for lancets will depend on the client's diabetes medications, as detailed in Table 1. This will better align lancet reimbursement with that of blood glucose test strips for each client.

**Table 1: NIHB quantity limits on lancets**

Diabetes Treatment History	Number of lancets reimbursed
Clients managing diabetes with insulin	600 / 100 days †
Clients managing diabetes with diabetes medication with high risk of causing low blood sugar*	400 / 365 days
Clients managing diabetes with diabetes medication with low risk of causing low blood sugar†	200 / 365 days
Clients managing diabetes with diet/lifestyle therapy only (no insulin or diabetes medications)	200 / 365 days

\* Examples include sulfonylureas (e.g. gliclazide) and meglitinides (e.g. nateglinide)

† Examples include metformin, acarbose, thiazolidinediones (e.g. pioglitazone), DPP-4 inhibitors (e.g. saxagliptin), SGLT-2 inhibitors (e.g. empagliflozin) GLP-1 agonists (e.g. exenatide)

‡ Please note that the test strip limit is 500/100 days. Due to lancet pack sizes, 600 per 100 days will be reimbursed.

NIHB recognizes there may be circumstances that warrant more frequent testing. If clients require more lancets, pharmacies can contact the NIHB Drug Exception Center for prior approval. Approvals for additional lancets will follow the same criteria as for additional test strips, and approvals for each will be aligned.

#### Special Provision for Children Up to 18 Months of Age

In order to allow time for parents to register their infants, NIHB provides coverage for unregistered infants up to 18 months of age. The process to submit claims in HICPS for children under the age of 12 months is described in of the claims submission kit (section 4.4). However, if a child has reached the age of 1 and does not have a status or N number, providers can call the NIHB Drug Exception Centre in order to request a temporary NIHB client number which will be valid until the child reaches 18 months of age.

#### Updated Extemporaneous Mixture Policy – List of Eligible Bases for Compounds

Urisec lotions and creams with a maximum of 22% urea have been added as an eligible base for topical compounds only. See the following for a complete list of eligible non-medicinal bases:

- Aquaphor
- CeraVe cream/lotion
- Cetaphil
- Cliniderm
- Cocoa Butter
- Cold cream
- Compound tincture of benzoin (Friar's balsam)
- Dermabase
- DilusolEucerin
- Glaxal Base
- Ihle's paste
- Lanolin
- Lassar's paste
- Lubriderm
- Mineral oil
- Petrolatum (Vaseline)
- Uremol cream/lotion
- Urisec lotion/cream containing a maximum of 22% urea
- Zinc oxide creams/ointments

The complete extemporaneous policy can be found in the [Guide for Pharmacy Benefits: Non-insured Health Benefits](#).

#### Benzodiazepine Dose Limit Policy

For client safety, the NIHB Program limits the maximum quantity of benzodiazepines that may be reimbursed per month for a client. This dose limit has been gradually lowered since March 2013. The current dose limit is 40 mg diazepam equivalents (DEQ) per day. Additionally, the NIHB Program has a 30-day maximum dispense policy for all benzodiazepines.

The benzodiazepine dose limit will be further reduced to 30 mg DEQ per day. The new limit will be implemented region-by-region, starting with the following regions. Implementation dates for other regions will be announced in future newsletters.

- September 17, 2018: Saskatchewan and Quebec
- November 13, 2018: Atlantic Region

Providers with clients who exceed the limit will need to call the Drug Exception Centre for prior approval. Abrupt discontinuation of benzodiazepines is not advised.

For guidance on tapering and a chart of dose equivalencies, please see Appendix B-6 of the [2010 Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain](#).

For pharmacy providers that dispense MS&E, please refer to the MS&E NIHB Newsletter for most recent changes. Visit [provider.express-scripts.ca/medical-supplies-and-equipment/newsletters](http://provider.express-scripts.ca/medical-supplies-and-equipment/newsletters) and select the newsletter for your region.

## Revised 2018 Claims Submission Kit

The 2018 Kit has been revised and is available on the NIHB Claims Services Provider website at [provider.express-scripts.ca/pharmacy/claims-submission-kit](http://provider.express-scripts.ca/pharmacy/claims-submission-kit). Providers who do not have Internet access or email are invited to contact the Provider Claims Processing Call Centre to request a copy.

### REMINDERS

#### Submitting Duplicate Claim Submissions May Cause Processing Delays

Providers should avoid submitting the same claim multiple times for processing. The typical processing time for claims at Express Scripts Canada is 3 days from the date the claim is received, and submitting the same claim multiple times (i.e. both faxing AND mailing it to Express Scripts Canada) may result in slower processing times. Please check your bi-monthly statements to verify claims. Statements are available on the 1st and 16th of each month.

#### Prescriptions and Client Records

Pharmacy providers must ensure that the name written on the prescription corresponds to the name noted on the client's record within the pharmacy's software. If the prescription indicates a first and/or last name that is different from the Indian Status card (or different than that stated on an Inuit client's documentation), then this information should be documented in the client's record for future reference including validation through claim verification processes. For more information, please refer to the *Guide for Pharmacy Benefits*, [Section 5.2 Client Eligibility](#).

To update their personal information, First Nations clients should contact their Band Office, or the Registrar's (Crown-Indigenous Relations and Northern Affairs) at 1-800-567-9604. Inuit clients should contact their [land claims organization](#).

## NIHB PROGRAM AND EXPRESS SCRIPTS CANADA CONTACT INFORMATION

### EXPRESS SCRIPTS CANADA

#### Provider Claims Processing Call Centre

Please have your Provider Number readily available

1 (888) 511-4666

#### Pharmacy Extended Hours

Monday to Friday:

6:30 a.m. to midnight Eastern Time

Saturday, Sunday and Statutory Holidays:

8 a.m. to midnight 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

##### Fax Pharmacy and MS&E claims to:

1 (888) 249-6098

#### Provider Relations Department

##### Fax completed provider agreements to:

1 (855) 622-0669

#### Other Correspondence

##### Mail to:

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

### NIHB PROGRAM

#### PHARMACY BENEFITS

#### Drug Exception Centre (DEC)

##### PRIOR APPROVALS

##### Pharmacy Benefits

1 (800) 580-0950 (English)

1 (800) 281-5027 (French)

Fax No.: 1 (877) 789-4379

#### First Nations and Inuit Health Branch Regional Offices

##### PRIOR APPROVALS

##### MS&E Benefits

Alberta	1 (800) 232-7301
Atlantic	1 (800) 565-3294
Manitoba	1 (800) 665-8507
Northwest Territories/Nunavut/Yukon	1 (888) 332-9222
Ontario	1 (800) 881-3921
Quebec	1 (877) 483-1575
Saskatchewan	1 (866) 885-3933

#### FIRST NATIONS HEALTH AUTHORITY

##### PRIOR APPROVALS

British Columbia\* (fax number) 1 (888) 299-9222

##### INQUIRIES

British Columbia\* 1 (800) 317-7878

*\*For First Nation residents in British Columbia only.  
For non-residents and Inuit, contact the Alberta region.*

### NIHB Forms

Download from the NIHB Claims Services Provider Website or contact the Provider Claims Processing Call Centre.