

Information for Pharmacists

Claims Submission Procedure – Uncomplicated Cystitis Assessment Effective March 7, 2022

Please include this Procedure in your Drug Programs Information Network (DPIN) Manual under Section 4: Claims Submission.

- This Claims Submission Procedure applies to community pharmacist assessment of patients for uncomplicated, recurrent cystitis in non-pregnant individuals.
- This non-insured benefit is available to all Manitoba residents with a valid Manitoba Health Registration
 Card, and is limited to a maximum of three (3) pharmacist assessments per client per benefit year (April 1
 to March 31) whether an assessment results in a prescription for treatment or not.
- A client who has had fewer than three (3) pharmacist assessments for uncomplicated cystitis in the current benefit year, should not be charged any out-of-pocket costs for a pharmacist assessment for uncomplicated cystitis. There is no requirement to meet a deductible or co-pay.

Submission Procedure:

- PRIOR TO COMPLETING AN ASSESSMENT, submit a claim to DPIN as per below:
 - Submit claim to DPIN for fiscal adjudication using Pseudo Identification Number (PIN) 00999884
 - Use Pharmacist 'X' license number in Prescriber ID field
 - Indicate the quantity of the assessment as one (1);
 - Indicate the total days' supply as one (1);
 - Enter an ingredient cost of \$20.00; and
 - Enter a Professional Fee of \$0.01
- If DPIN returns a 'D6, Maximum Cost is exceeded' message, the maximum of three (3) pharmacist assessments per client per year has already been reached.
 Client is NOT eligible for pharmacist assessment coverage.
 - Reverse claim.
- If DPIN does NOT return a 'D6, Maximum Cost is exceeded' message, then less than three
 (3) pharmacist assessments per client per year have been claimed.
 Client IS eligible for pharmacist assessment coverage.
- Pharmacy will NOT see \$20.00 paid to them at time of on-line claim submission. Claims for PIN 00999884 will be tracked and reimbursed via electronic funds transfer once a month.
 Reimbursement will appear on corresponding pharmacy statement as positive adjustments for each accepted assessment (one adjustment per assessment).

- Pharmacy operators will be reimbursed an amount equal to the professional fee of \$20.00 regardless of usual & customary fees identified in Schedule A/B of their Pharmacy Agreement.
- Failure to submit the claim according to procedure above will result in no reimbursement to the pharmacy for the allowable professional fee.
- If a claim is submitted and assessment is <u>not</u> completed, the pharmacy must reverse the claim on-line within 28 days of claim date.
- If a claim is submitted, assessment is <u>not</u> completed, and <u>not</u> reversed within 28 days, the pharmacy must submit a reversal/adjustment form to Manitoba.
- Pharmacy can submit an adjustment for claim not submitted on-line within seven (7) days of assessment date. DPIN team will review for possible reimbursement.

If your questions are not answered by reviewing the Claims Submission Procedures and FAQs posted at: https://www.gov.mb.ca/health/pharmacare/healthprofessionals.html

Please send an e-mail to PDPInfoAudit@gov.mb.ca.