

**IMPORTANT INFORMATION FOR LABORATORY AND HOSPITAL
INTERIM FEDERAL HEALTH PROGRAM (IFHP) PROVIDERS**

NEW BENEFIT CODE FOR RADIOPHARMACEUTICALS

April 2013

Citizenship and Immigration Canada (CIC) wishes to advise providers of a new benefit code for “Radiopharmaceuticals” under the IFHP Health Care Coverage, Detainees Coverage, Expanded Health Care Coverage and Public Health & Public Safety Benefit Grids.

This new benefit code is effective 1 May, 2013.

IFH will reimburse for the cost of radiopharmaceuticals purchased/ordered in advance of the eligible procedure if the IFHP beneficiary ceases to be eligible for IFHP coverage after the product is purchased/ordered but before the scheduled procedure.

NEW BENEFIT CODE	DESCRIPTION	COMMENTS
420210	Specialized Products for Diagnostic Tests (Radiopharmaceuticals)	Must be purchased/ordered within 2 weeks of the scheduled procedure and the provider has proof that the client was eligible on the date the product was purchased/ordered. (Print-out of the eligibility query screen with time stamp, copy of a dated order confirmation or receipt.) Note, in situations where the client is still covered under the same IFHP coverage on the date of service, providers will be reimbursed as per respective IFHP Coverage/Benefit Grid

The cost of the radiopharmaceutical will be reimbursed as per the invoiced amount.

An ICD code or written diagnosis will have to accompany the new benefit code for the Public Health & Public Safety Benefit Grid. An ICD code or written diagnosis is not required on the Detainees, Health Care and Expanded Benefit Grids.

The new benefit code is limited to the following eligible procedures:

- Venography
- Cardioangiography
- Myocardial Perfusion Scintigraphy
- Myocardial Scintigraphy
- Myocardial Wall Motion
- Adrenal Scintigraphy

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- Thyroid Scintigraphy
- Thyroid Uptake and Repeat
- Parathyroid Scintigraphy
- Shilling Test
- Malabsorption Test
- Gastrointestinal (Protein/Blood Loss, Transit)
- Calcium Absorption
- Abdominal Scintigraphy
- Calcium Absorption / Excretion
- Gastro-Oesophageal Reflux and Absorption
- Biliary Scintigraphy
- Salivary Gland Scintigraphy
- Liver Scintigraphy
- Spleen Scintigraphy
- Renal Scintigraphy
- Bone Marrow Scintigraphy
- Bone Scintigraphy
- Gallium Scintigraphy
- CSF Circulation
- Brain Scintigraphy
- Perfusion Lung Scintigraphy
- Ventilation Lung Scintigraphy
- Lymphangiogram
- Scintimammography
- Testicular and Scrotal Scintigraphy
- Leukocyte Scintigraphy
- Positron Emission Tomography
- Single-Photon Emission Computed Tomography (SPECT)

The new benefit code **does not** apply to the following which are ineligible fees:

- Per-diem fees
- The IFHP main or secondary facility fees
- Physician professional and technical fees
- Technical (facility fees) payable in provinces/territories
- Laboratory fees

If you have any questions, please call the Medavie Blue Cross Customer Information Centre at 1-888-614-1880.