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**IMPORTANT INFORMATION FOR HOSPITALS, PHYSICIANS,  
NURSES, PHARMACIES AND THOSE WHO PROVIDE LABORATORY,  
DIAGNOSTIC SERVICES AND AMBULANCE SERVICES TO  
BENEFICIARIES OF THE INTERIM FEDERAL HEALTH PROGRAM OF THE  
DEPARTMENT OF CITIZENSHIP AND IMMIGRATION CANADA**

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### **Interim Federal Health Program (IFHP)**

Citizenship and Immigration Canada (CIC) recently announced that, as of June 30, 2012, there will be significant changes to the Interim Federal Health Program (IFHP), which will affect the benefits provided to all beneficiaries. Changes have been made to the benefit programs available to all clients.

**Effective June 30, 2012**, the products and services covered through the IFHP will depend on the immigration status of the beneficiary.

Coverage under the new program fall under three categories:

- Health care coverage (the following services and products provided in Canada when of an urgent or essential nature)
  - Hospital services;
  - Physician and nurse services;
  - Laboratory and diagnostic services;
  - Ambulance services; and
  - Medication and immunizations will be covered only if required to prevent or treat a disease posing a risk to public health or to treat a condition of public safety concern.
  
- Expanded Health Care Coverage (the following services and products when provided in Canada):
  - hospital services;
  - services of physicians, registered nurses and other health care professionals licensed in Canada;
  - laboratory, diagnostic and ambulance services;
  - supplemental services\*;
  - supplemental products\*\*; and
  - translation services for health purposes.

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\* “*supplemental services*” includes audiology care, emergency dental care, home care, long-term care, services provided by a midwife, occupational therapy, physiotherapy, post-arrival health assessments, psychotherapy by a registered clinical psychologist, speech-language therapy, and vision care, to the extent that they are covered in the benefit grid.

\*\* “*Supplemental products*” includes immunizations, medications, and medical supplies to the extent that they are covered in the benefit grid.

- Public health or public health safety health care coverage (the following services and products, provided in Canada, only if required to diagnose, prevent or treat a disease posing a risk to public health or to diagnose or treat a condition of public safety concern.)
  - Hospital services;
  - Physician and nurse services;
  - Laboratory and diagnostic services;
  - Medication and immunizations will be covered only if required to prevent or treat a disease posing a risk to public health or to treat a condition of public safety concern.

**Disease posing a risk to public health** means a communicable disease that is on the list of national notifiable diseases of the Public Health Agency of Canada which is subject to human to human transmission and requires public health intervention or for which immunization has been recommended under Canadian medical standards or that is referred to in the Interim Federal Health Program Policy of the Department of Citizenship and Immigration.)

**Condition of public safety concern** means a mental health condition in a person who has been examined by a physician licensed in Canada and for which the physician is of the opinion that the person will likely cause harm to others.

## **ELIGIBILITY**

The new program is not universal which means clients can have differential access to services based on the type of coverage they have been granted. Effective June 30, 2012, providers will have to verify client eligibility before rendering services in order to ensure the client is covered for the intended services.

In the near future, providers will be able to verify client eligibility on the secure provider web portal. Until this functionality is available, providers are asked to call the Medavie Blue Cross Contact Centre at 1-888-614-1880 to ensure the client is covered for the service being provided. A bulletin will be posted on the web portal to advise you when you can begin checking client eligibility online.

**BENEFITS**

Although many services still do not require prior approval, the enclosed benefit grids should be consulted prior to rendering any service. New benefit codes have been created for the services offered. The new benefit grids are also available on the provider web portal at <https://provider.medavie.bluecross.ca>.

Medication and immunizations will be covered only if required to prevent or treat a disease posing a risk to public health or a condition of public safety concern. Prescribing physicians and nurse practitioners are asked to call the Medavie Blue Cross Call Centre at 1-888-614-1880 prior to prescribing medication to ensure the client will be covered for the product and in most cases to initiate the prior authorization request. The pharmacy benefit grid will also be posted on the portal.

You have six months from the date of service to bill for claims incurred up to June 29, 2012. The current codes must be used to bill for any services rendered before June 30, 2012.

Prior approvals received before June 29, 2012 will only be valid for services done until that date. A new authorization will be required for any benefits that are eligible with prior approval after June 30, 2012.

The Medical / General claim form has been updated and can be found on the provider web portal at <https://provider.medavie.bluecross.ca>. Providers can use either ICD9 or ICD10 codes or write the Medical Diagnosis on the form.

For additional information on the changes to the Interim Federal Health Program, please visit the CIC website at [www.cic.gc.ca/ifhp](http://www.cic.gc.ca/ifhp).

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