

Interim Federal Health Program (IFHP)
Effective April 1, 2016
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Overview – IFHP

Who?

- All individuals with an IFHP certificate are entitled to the same coverage of health services. This includes resettled refugees (GARs and PSRs); refugee claimants; refused claimants until their deportation date; people detained under immigration laws.
- Resettled refugees have IFHP coverage for the first 12 months after arrival. They are also entitled to provincial health insurance coverage for medical services (e.g., RAMQ, OHIP) upon arrival. For resettled refugees, IFHP coverage is primarily relevant for medications and ‘supplemental’ services.
- Refugee claimants: IFHP coverage continues until the refugee claim is accepted (+ 90 days) OR if the refugee claim is rejected, until the date set for deportation

What?

- Medical, diagnostic and hospital services: same coverage as provincial health insurance
- Medications: similar to coverage for social assistance beneficiaries.
- Supplemental services: similar to coverage for social assistance beneficiaries, including emergency dental care, eye exams, glasses, psychotherapy, rehabilitation, prosthetics, orthotics, home care, etc.

IFHP certificates

- IFHP certificates issued after April 10, 2016 will not have an expiry date. It is no longer necessary to renew the IFHP certificate.
 - If a person's IFHP certificate expires after April 1, they do not need to apply for a new certificate. Coverage will be automatically extended for as long as they continue to be eligible.
 - However, if a person's certificate expired before April 1, they do need to apply for a new certificate.
- There is only one IFHP certificate, the same for all (including detainees)
- Resettled refugees: IFHP coverage expires 12 months after arrival. However, provincial health insurance coverage remains in effect and they are entitled to the same benefits as any other permanent resident (e.g., provincial medication insurance programs)
- Refugee claimants: IFHP coverage continues until their refugee claim is accepted (+ 90 days) OR if their refugee claim is rejected, until the date set for deportation.

Information on the new IFHP is available on the Immigration, Refugees & Citizenship site:

<http://www.cic.gc.ca/english/refugees/outside/arriving-healthcare.asp>

And the Medavie Blue Cross site :

<https://provider.medavie.bluecross.ca/>

Click on : [Guides](#) Then: [IFHP Information Handbook for Health-care Professionals – April 1, 2016](#)

IFHP coverage for medical, diagnostic and hospital services

- ❖ Resettled refugees (GARs and PSRs) have provincial health insurance for medical, diagnostic and hospital services, so they generally do not need to rely on IFHP coverage for these services. IFHP medical coverage is relevant primarily for refugee claimants and failed claimants.

Medical, diagnostic and hospital services

- **IFHP medical coverage is generally identical to provincial health insurance plans (e.g., RAMQ)**
- **Doctors receive the same fees as under provincial health insurance plans. All they need to do is to register as providers with Medavie Blue Cross, then submit their claims for reimbursement.**

Additional details

Midwifery: Up to \$3075 in Ontario, \$3042 in other provinces

Home care by nurses (for social workers and home care workers, see 'Supplemental services')

- Covered for refugee claimants and refused claimants
- Resettled refugees: Not clear if home care by nurses is reimbursed because it comes under IFHP medical services, while resettled refugees access medical coverage through the provincial health insurance system.

Ambulance fees

- Refugee claimants, failed claimants: Max. \$350
- Resettled refugees: Not clear if ambulance services are reimbursed for resettled as they come under IFHP medical services.

Referral by a family doctor or nurse practitioner is required for

- All clinic visits, except paediatrics and ophthalmology
- Psychiatric care

Preauthorization: No pre-authorization required for medical services except for:

- Orthopaedic surgery: only for acute care or if delay will harm development
- Plastic surgery: burns or severe disfigurement only
- Immunizations: The healthcare provider must justify the need for immunization e.g., no records of previous immunizations are available
- Other medical interventions requiring pre-authorization: transplants, molecular genetics, sleep studies

Medical services that are not covered by the IFHP:

- Cosmetic surgery, except for burns or disfigurement
- Elective surgery, circumcision, transsexual surgery, laser eye surgery, warts removal, cosmetic dermatology treatments
- Reversal of sterilization, impotence and fertility treatments

Health facilities can claim certain fees from Medavie Blue Cross for care provided to IFHP patients

Prescription medications - IFHP

❖ All medications on the provincial public medications insurance list are covered under the IFHP

• In Québec, for example:

<http://www.ramq.gouv.qc.ca/fr/professionnels/pharmaciens/medicaments/Pages/liste-medicaments.aspx>

+ Additional medications : Antiprotozoal and antiparasitic medications, some vitamins and minerals

Details: <https://provider.medavie.bluecross.ca/>

Click on: [Benefit Grid / Drug Formulary](#), then [IFHP Benefit Grid - Prescription Drug Coverage](#)

Dental services

Resettled refugees (GARs and PSRs) - Children

- If provincial health insurance covers dental services for children or similar groups, this benefit extends to resettled refugees
- In Québec (for example): Children under 10 whose parents are resettled refugees are entitled to the same dental services as other Québec children, through RAMQ
 - Exams, X-rays, fillings, extractions, root canals, etc.

All refugee claimants (adults and children) and adult resettled refugees

➤ IFHP dental coverage

IFHP dental coverage is primarily intended for emergency relief of pain, infection or trauma.

Covered - Without prior authorization

- Emergency exams (max. 1 per 6 months)
- Uncomplicated extractions
- Caries, trauma, pain control
- Denture relines and repairs
- X-rays
- Medication for emergency conditions

With prior authorization by Medavie Blue Cross

- Complicated extractions
- Restorations (severely affected teeth only)
- General anesthetic
- Complete and partial dentures

Details: <https://provider.medavie.bluecross.ca/>

Click: [Benefit Grid / Drug Formulary](#), then [Bulletins](#) and [May - Dental Care Providers - Dental Benefit Grid](#)

Other supplemental services

- ❖ Prior authorization by Medavie Blue Cross is required for all supplemental services, unless otherwise specified. If not preauthorized, the provider cannot claim reimbursement. Also, in all cases the health professional must be registered with Medavie Blue Cross as an IFHP service provider in order to claim reimbursement, either personally or (if an employee) through the health institution.

Vision care

- Eye exam (optometrist)
 - No preauthorization nor medical referral required
 - 1 full exam per 12 months; 1 partial exam per 12 months
- Glasses: 1 pair/2yrs - no preauthorization
 - max. 123\$, unifocal; \$180 bifocal; \$300 low vision

Psychotherapy

- 2 hours for intake assessment and 10 one-hour psychotherapy sessions, with the possibility of renewing for up to 10 additional sessions. It would seem that only one renewal is possible (maximum of 20 hours of therapy in total) but this is not entirely clear.
- Psychotherapy is covered only if provided by a registered clinical psychologist or psychotherapist licensed by their provincial licensing body. In Québec, this means either a clinical psychologist or psychotherapist licensed by the Ordre des psychologues du Québec.
- Referral by a doctor is required at the outset and to request renewal
- After performing an intake assessment (no preauthorization required), the psychologist or psychotherapist must submit a brief report to Medavie including the diagnosis and a treatment plan, along with a copy of the doctor's referral, to obtain preauthorization for the therapy.
- Certain interventions, including expressive arts therapy, are not covered.
- Interpreter fees are reimbursed (max. \$28.95/h) for psychotherapy and psychiatric services

Hearing

- Hearing test (audiologist) – no preauthorization
- Hearing aids, cochlear implants

Physiotherapy, occupational therapy, speech therapy

- Hospital: no preauthorization required
 - Physiotherapy: max. 12 sessions
 - Occupational or speech therapy: max. 20 sessions
- Clinic: Must be prescribed by doctor; preauthorization required

Home care

- Prior assessment by social worker, nurse or other professional is required
- Covers social workers and home care workers

Prosthetics and orthotics: Artificial limbs, orthotics, etc.

Mobility devices: Wheelchair, cane, crutches, etc. (least expensive)

Varia: Diabetic supplies, surgical supplies, respiratory assistive devices, etc.

Long-term institutional care : Max 1736\$/month

Details: <https://provider.medavie.bluecross.ca/> Click: [Benefit Grid / Drug Formulary](#), then [IFHP Benefit Grid - Supplemental Coverage](#)

Registration as a service provider, verifying coverage and billing

List of registered IFHP service providers

www.ifhp-pfsi.ca then [Search IFHP Providers](#)

Register with Medavie Blue Cross as an IFHP service provider

- Health care professionals and institutions can register
- For professionals paid on a salary basis, the institution must register and bill on behalf of the professional; professionals who charge on a fee for service basis must register personally. Institutions may in any case wish to register as they may be able to bill for institutional costs.
- Register online at Medavie Blue Cross provider portal <https://provider.medavie.bluecross.ca/>
- Click 'Request Account' (top right corner), then follow instructions

Verify IFHP coverage of the patient

- IFHP certificates issued after April 10, 2016 will not have an expiry date, and there will be no need to renew them.
- Resettled refugees: IFHP coverage lasts 12 months from the date the certificate is issued.
- Refugee claimants: IFHP coverage continues until their refugee claim is accepted (+ 90 days) OR if their refugee claim is rejected, until the date set for deportation.
- Use the ID number on the certificate to verify through the Medavie Blue Cross providers' portal whether the service is covered
[Quick Reference Guide – Verify Patient Coverage \(PDF, 242 KB\)](#)

Request pre-authorization (if required)

- Medavie Blue Cross providers' portal or by phone 1-888-614-1880

Submit a claim for reimbursement of services

Medavie Blue Cross providers' portal <https://provider.medavie.bluecross.ca/>

- 6 months to bill
- Information required
 - Patient: Name, DOB, ID
 - Provider: name, specialty (if applicable), name of referring prescriber (if applicable), Provider Number, address, phone, fax
 - Claim: invoice number (if applicable), date of service, fee code or service provided, ICD-10 code (if applicable,) amount claimed, prior approval (if required)
- Client's signature on form is NOT required for services provided in hospitals, ambulance services and claims billed by third-party billing agencies

Further information

<http://www.cic.gc.ca/english/refugees/outside/arriving-healthcare/practitioners.asp>

<https://provider.medavie.bluecross.ca/> Click on [Guides](#) then [IFHP Information Handbook for Health-care Professionals – April 1, 2016](#)