

Information Sheet for Interim Federal Health Program Beneficiaries



Citizenship and Immigration Canada

This document has important information about the Interim Federal Health Program for those who may be eligible to enrol in it.

What is the IFHP?

The IFHP provides limited, temporary health coverage for specific groups of people in Canada. The coverage is paid for by Citizenship and Immigration Canada (CIC). The IFHP is a payer of last resort when the beneficiary has no access to any provincial or territorial (PT) health-care coverage or private health coverage for that service or product.

What does the IFHP cover?

The IFHP offers several types of coverage:

1) **Health-Care Coverage** includes coverage for most services received from a doctor or nurse in a hospital or a private clinic that Canadian citizens are covered for under their provincial or territorial health insurance plans. This includes things like seeing a doctor when you feel sick, prenatal care, and visits to a doctor to be monitored for a health condition like heart disease or diabetes. The following services and products are covered, if provided in Canada:

- hospital services, services of a doctor or registered nurse who is licensed in Canada, laboratory, diagnostic and ambulance services, with some limitations.
- medications and vaccines *only* when needed to prevent or treat a disease posing a risk to public health or to treat a condition of public safety concern, such as HIV or tuberculosis (TB).

Health-Care Coverage does not cover other medications, dental care, walkers, hearing aids, home care, elective surgery or rehabilitation.

2) **Expanded Health-Care Coverage** includes coverage of the following services and products 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.

* “*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.



3) **Public Health or Public Safety Health-Care Coverage** includes coverage for the following services and products, if provided in Canada, but only if they are 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 (such as HIV or TB):

- hospital services, services of a doctor or registered nurse licensed in Canada, laboratory and diagnostic services, and medication and vaccines. This coverage is very limited.

4) **Coverage for Detainees** provides coverage for services and products where a medical professional finds those products or services are required and they are urgent and essential. This includes medication and other products.

5) **Immigration Medical Examinations** means a medical examination requested under paragraph 16(2)(b) of the *Immigration and Refugee Protection Act*. This examination is part of the process of applying to come to, or remain in, Canada.

IFHP benefit grids (<https://provider.medavie.bluecross.ca/>) provide more details on what health services and products are covered.

Who may be eligible for the different types of coverage?

IFHP Group	Coverage and Duration
<p>Protected persons (other than resettled refugees)</p> <p>This group includes people who receive a positive decision on their refugee claim from the Immigration and Refugee Board (IRB) and most people who receive a positive decision on their pre-removal risk assessment (PRRA).</p>	<p>Health-Care Coverage</p> <p>If you are a protected person, you should contact your PT health insurance plan immediately and find out if you are eligible and how to apply. Your IFHP coverage will end once you are eligible for PT coverage.</p>
<p>Victims of Human Trafficking who have been issued a temporary resident permit (TRP) under section 24 of the <i>Immigration and Refugee Protection Act</i> (IRPA).</p>	<p>Expanded Health-Care Coverage & Immigration Medical Examinations</p> <p>This coverage lasts as long as you have a valid TRP.</p>
<p>Persons for whom the Minister exercises discretion on his own initiative for humanitarian and compassionate considerations or for public policy considerations, who receive governmental resettlement assistance in the form of income support.</p>	<p>Expanded Health-Care Coverage & Immigration Medical Examinations done in Canada.</p> <p>This coverage lasts as long as you receive governmental resettlement assistance in the form of income support, up to a maximum of 12 months.</p>
<p>Resettled refugees who are or were receiving governmental resettlement assistance in the form of income support.</p> <p>This group consists of:</p> <ul style="list-style-type: none"> - government-assisted refugees; - other refugees who are receiving governmental resettlement assistance in the form of income support, including Visa-Office Referred refugees and refugees coming to Canada through the Joint Assistance Sponsorship Program. 	<p>Expanded Health-Care Coverage</p> <p>You should apply for PT health insurance immediately. Your IFHP coverage for doctor and hospital care will end once you are eligible for PT coverage.</p> <p>You will remain eligible for IFHP coverage other than doctor and hospital care as long as you receive income support from a governmental resettlement assistance program, or are under a private sponsorship.</p>



<p>Resettled refugees while under sponsorship who do not receive, and have not received, governmental resettlement assistance in the form of income support.</p>	<p>Health-Care Coverage</p> <p>You should apply for PT health insurance immediately. Your IFHP coverage for doctor and hospital care will end once you are eligible for PT coverage.</p> <p>You will remain eligible for covered medications and vaccines needed to prevent or treat a disease posing a risk to public health or to treat a condition of public safety concern, as long as you are under private sponsorship.</p>
<p>Refugee claimants who are not from a Designated Country of Origin (DCO) (this includes those where there is a judicial review or appeal of the IRB decision pending)</p>	<p>Health-Care Coverage & Immigration Medical Examinations</p> <p>This coverage lasts as long as you are a refugee claimant, unless your claim is suspended, or you become a rejected refugee claimant (see “rejected refugee claimant” below).</p>
<p>Refugee claimants who are from a DCO</p>	<p>Public Health or Public Safety Health-Care Coverage & Immigration Medical Examinations</p> <p>This coverage lasts as long as you are a refugee claimant, unless your claim is suspended, or you become a rejected refugee claimant (see “rejected refugee claimant” below).</p>
<p>People whose refugee claim has been suspended</p>	<p>Public Health or Public Safety Health-Care Coverage & Immigration Medical Examinations</p> <p>This coverage lasts as long as your claim is suspended.</p>
<p>Rejected refugee claimants</p> <p>This group includes people whose claim:</p> <ul style="list-style-type: none"> - is rejected and the decision is not appealed - is rejected and a leave application for judicial review is denied, or the judicial review of a rejected claim is denied, or any further appeal is denied. 	<p>Public Health or Public Safety Health-Care Coverage</p> <p>This coverage lasts until you leave Canada voluntarily or your removal order has been enforced.</p>
<p>Persons who are detained under the <i>Immigration and Refugee Protection Act</i> (IRPA).</p>	<p>Coverage for Detainees & Immigration Medical Examinations</p> <p>This coverage lasts as long as you are detained.</p>

The chart above includes most, but not all, groups who may receive coverage. Please visit www.cic.gc.ca/ifhp for more information.



Note: Your coverage may be cancelled or modified without notice if your immigration status changes. You may need to apply to continue or modify your IFHP coverage in some situations. Your coverage will be issued for no more than 12 months at a time. If you are still eligible, you must apply for an extension.

Please read the IFHP Application Guide for details on how to apply to CIC for an extension or change to your IFHP coverage.

What if I abandon or withdraw my refugee claim?

If your application is deemed abandoned or you withdraw your claim, you will no longer be eligible for any coverage under the IFHP.

Where do IFHP beneficiaries get health services or products?

Beneficiaries can get health-care services or products in Canada from health-care providers who are registered with Medavie Blue Cross. Medavie Blue Cross is the company that administers IFHP claims for health-care professionals and hospitals. If your health-care provider is not registered with Medavie Blue Cross, they can easily register. You may want to show them the “Information for health-care professionals” section of this document. For a list of registered health-care professionals in your area, visit the Medavie Blue Cross public website at <http://www.ifhp-pfsi.ca>.

What do I need to show a health-care provider to prove I am an IFHP beneficiary?

You must show your IFHP eligibility document to your health-care provider. There are two types of documents:

- Refugee Protection Claimant Document (for people whose claim for refugee protection was referred to the Immigration and Refugee Board)
- Interim Federal Health Program Certificate (for other beneficiaries).

CIC will give you one IFHP certificate that will be valid for the length of your coverage. It will not have an expiry date. If your coverage is extended, it will only be registered electronically in CIC’s system.

If your IFHP document, is lost, stolen, or destroyed, you should report the loss right away by calling the CIC Call Centre. Then you must complete an application form to request confirmation of coverage. CIC will provide you with a confirmation letter to show your health provider along with another piece of photo identification issued by CIC or some other government agency.

Once your coverage is issued by CIC, it takes at least two business days to become active in the Medavie Blue Cross’ system. Once active, your health-care provider will be able to verify your eligibility and coverage by contacting Medavie Blue Cross.

Do I pay for health-care services or products myself?

No, not if you are eligible for coverage for the service or product under IFHP. If you pay a provider for a service or product that is covered by IFHP, you **will not** be repaid through the IFHP. Registered health-care providers are reimbursed directly for covered services by Medavie Blue Cross. However, if you need a health-care service or product that is **not** covered by the IFHP you will have to pay for it.



What if I have private health insurance, or am eligible under another government health insurance plan or program?

If you have private health insurance the IFHP will not pay for any service or product for which you may make a claim under that plan. IFHP will pay for any products or services for which you cannot make a claim under your private insurance plan and for which you are covered under the IFHP.

If you are or were eligible for coverage under a PT health insurance plan or program, your coverage under the IFHP is ended. An exception is resettled refugees, who continue to receive IFHP coverage of some services and products, even while they are eligible for PT health insurance.

What must I do as an IFHP beneficiary

- You must sign your IFHP eligibility document as soon as you receive it and you must not lend or give your IFHP document to anyone.
- You must not use IFHP to pay for benefits that you are eligible to claim for under private health insurance.
- IFHP does not cover all health-care services or products. You should inform yourself as to whether or not you will have to pay for a service or product, *before* you request it.
- You must sign the provider's IFHP claim form to show that you received the service or product.
- You must report a lost, stolen, or destroyed certificate as soon as possible by calling the CIC Call Centre at **1-888-242-2100**.

- You may receive a letter from Medavie Blue Cross asking you to confirm if you received health services or products on a given date. This is not a bill. You are requested to respond to the question, sign the letter, and return it to Medavie Blue Cross. This will help to prevent fraud. Signing this letter will not have an effect on your eligibility for IFHP coverage or on your immigration status.
- To ensure continued coverage under the IFHP you must apply to extend your coverage at least four weeks before your current coverage expires. The application form can be downloaded from CIC's website. If you are unsure when your coverage expires, you can call the CIC Call Centre at 1-888-242-2100 to find out.

Where do I get more information on the IFHP?

- CIC's website at www.cic.gc.ca/ifhp.
- You can also call the CIC Call Centre toll-free at **1-888-242-2100**.



Information for health-care professionals

You must verify that a patient is eligible for IFHP with Medavie Blue Cross **before** providing a service or product each time you see that patient, as a person may cease to be eligible or have their coverage changed at any time. Note that it takes at least two business days for coverage to be activated in Medavie Blue Cross' system after it is issued by CIC.

You must ask patients if they are eligible for any other private health insurance program or plan that covers the service or product. If the patient has another plan or program, you cannot be reimbursed by the IFHP. You should discuss with the patient how to be reimbursed.

You must not charge beneficiaries for services or products covered under the IFHP. You must directly bill the IFHP through Medavie Blue Cross.

You must ask the beneficiary to sign the claim form before you submit it to Medavie Blue Cross. Across Canada, IFHP enforces the lowest cost alternative rule and reimburses at the cost of available equivalent generic preparations.

Claims must be sent directly to Medavie Blue Cross:

- electronically through the Secure Provider Web portal at <https://provider.medavie.bluecross.ca> or
- mail paper claims to:

Interim Federal Health Program
Medavie Blue Cross
644 Main St. PO Box 6000
Moncton, NB E1C 0P9
Or fax to #: 506-867-3824

For more information on covered services and products, including benefit grids for each coverage type, and access to the IFHP Provider Handbook, please visit the Medavie Blue Cross website at <https://provider.medavie.bluecross.ca>.