

IFHP Benefit Grid - Basic Coverage

Benefit Description	Benefit Code	Effective Date	Prior Approval Required	ICD 9 / 10 Code or Written Dx Required	Provincial Health Code Required	Referring Prescriber	Frequency Limit	Maximum Dollar Amount	Comments
Per Diem									
In-patient (up to 45 days)	0164IPU	5-Nov-14		Yes				\$668.70 / day	See NOTES 1, 2, 32 & 42
In-patient (over 45 days)	0164IPO	5-Nov-14		Yes				\$200.65 / day	See NOTES 1, 2, 32 & 42
In-patient Rehabilitation facility (up to 45 days)	0164IPRU	5-Nov-14		Yes				\$668.70 / day	See NOTES 1, 2, 28, 32 & 42
In-patient Rehabilitation facility (over 45 days)	0164IPRO	5-Nov-14		Yes				\$200.65 / day	See NOTES 1, 2, 28, 32 & 42
Inpatient for Only 1 Day - Under 8 Hours	0164IPDU	5-Nov-14		Yes				\$93.70	See NOTE 32 & 42 Must include admission and discharge times. Only Emergency room fee is payable.
Inpatient for Only 1 Day - Over 8 Hours	0164IPDO	5-Nov-14		Yes				\$334.35	See NOTE 32 & 42 Must include admission and discharge times. Half the per-diem will be reimbursed.
Main Facility Fees									
Emergency Room	0155ER	1-Jan-21		Yes				\$359.00 / day	See NOTES 3, 4, 5, 12, 32 & 42
Standard Outpatient	0155OP	1-Jan-21		Yes				\$359.00 / day	See NOTES 3, 5, 12, 32, 33 & 42
Outpatient Lab/ Imaging	0155LAB	1-Jan-21						\$180.00 / day	See NOTES 3, 8, 10, 12 & 32

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Outpatient - Patient in a bed (kept for observation under 24 hours)	0155OPB	1-Jan-21		Yes				\$359.00 / day	See NOTES 3, 5, 12, 32 & 42
Overnight Emergency Room Stay	0155OER	1-Jan-21		Yes				\$359.00 / day	See NOTES 3, 4, 5, 12, 32 & 42
Urgent Care Centre Visits	0155UC	1-Jan-21		Yes				\$359.00 / day	See NOTES 3, 6, 12, 32 & 42
Secondary Facility Fees									
Dialysis	0155D	1-Jan-21		Yes				\$496.00 / day	See NOTES 3, 12, 32 & 42.
Chemotherapy (not including chemo drugs)	0155C	1-Jan-21		Yes				\$359.00 / day	See NOTES 3, 12, 30, 32 & 42
Cyclosporine/ Tacrolimus AZT/Activase/ Erythropoietin/ Growth Hormone Thrpy	0155AZT	1-Jan-21						\$251.00 / day	See NOTES 3, 12, 30, 32 & 42
Out-patient Day Surgery	0155OPS	1-Jan-21		Yes				\$1385.00 / day	See NOTES 3, 7, 9, 12, 21, 32 & 42
Radiotherapy	0155RT	1-Jan-21		Yes				\$435.00 / day	See NOTES 3, 12, 32 & 42
CT Scans	0155CT	1-Jan-21						\$786.00 / day	See NOTES 3, 11, 12, 32 & 42

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MRI	0155MRI	1-Jan-21						\$749.00 / day	See NOTES 3, 11, 12, 32 & 42
Abortion	0155A	5-Nov-14						\$573.05 / day	See NOTES 3, 12, 32 & 42
Lithotripsy	0155L	1-Jan-21		Yes				\$1399.00 / day	See NOTES 3, 12, 32 & 42
Professional Fees & Diagnostic and Therapeutic Procedures and Tests									
Pacemakers or defib/cochlear implants/PCI With stents/ endovascular coils	0155PAC	1-Jan-21		Yes				Payable at the invoiced price of the device (invoice required).	See NOTES 32, 42 & 43
Physician Services	see comment	5-Nov-14	Refer to the NOTES section for billing requirements	Yes	Yes				See NOTES 13, 14, 19, 20, 21, 22, 23, 24, 25, 32 & 42 Submit bill with provincial health codes. For a clinic visit - referral from a GP or NP is required.
Other Home Care Services - Visit by a Nurse	0211CI	5-Nov-14		Yes				\$53.30 / hour	See Note 32 & 42
Community Nursing Services-Vaccination	0212CI	5-Nov-14		Yes				\$26.75 / visit	See note 32 & 42
Midwifery Services	103246	5-Nov-14						see comments	See NOTE 32 & 42 Fee per Province: (ON = \$3,075 / Full Course of Care) all other (provinces and territories = \$3,042 / Full Course of Care)
Transplants	see comment	5-Nov-14	Yes	Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.

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Anaesthesia	see comment	5-Nov-14			Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
General Practice	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes
Cardiology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Clinical Immunology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Community Medicine	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Cardiovascular and Thoracic Surgery	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Emergency Medicine	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
General Surgery	see comments	5-Nov-14		Yes	Yes				See NOTE 21, 32 & 42 Submit bill with provincial health codes.
General Thoracic Surgery	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.

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Geriatrics	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Haematology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Immunology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Infectious Disease	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Internal Medicine	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Medical Oncology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Neurosurgery	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Nuclear Medicine	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Oral / Maxillofacial Surgeon	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.

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Paediatrics	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Respiratory Disease	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Rheumatology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Orthopaedic Surgery	see comments	5-Nov-14	Yes	Yes	Yes				See NOTE 24, 32 & 42 Submit bill with provincial health codes.
Plastic Surgery	see comments	5-Nov-14	Yes	Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Vascular Surgery	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Radiation Oncology	see comments	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Critical Care	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Dermatology	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes

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Endocrinology & Metabolism	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Gastroenterology	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Gynaecology & Obstetrics	see comment	5-Nov-14		Yes	Yes				See NOTES 29, 32 & 42 Submit bill with provincial health codes.
Laboratory Medicine	see comment	5-Nov-14			Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Nephrology	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes. Prior approval is required for transplant procedures.
Neurology	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Ophthalmology	see comment	5-Nov-14		Yes	Yes				See NOTES 15, 32 & 42 Submit bill with provincial health codes.
Otolaryngology	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Psychiatry	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.

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Urology	see comment	5-Nov-14		Yes	Yes				See NOTES 16, 32 & 42 Submit bill with provincial health codes.
Nerve Blocks	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Integrated Prenatal Screening Tests	420201	5-Nov-14						\$130.75 / day	See NOTES 31, 32 & 42
Maternal Serum Screening Tests	420202	5-Nov-14						\$130.75 / day	See NOTES 31, 32 & 42
Injections or Infusions or oral administration of substances	101729	5-Nov-14	Yes	Yes	Yes				See NOTES 32, 41 & 42
Electrocardiography (ECG)	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Non-invasive Cardiology	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Echocardiography	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Dialysis	see comment	5-Nov-14		Yes					See NOTE 32 & 42 Submit bill with provincial health codes.
Sleep Studies	see comment	5-Nov-14	Yes	Yes	Yes				See NOTES 26, 32 & 42 Submit bill with provincial health codes.

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Hyperbaric therapy	see comment	5-Nov-14		Yes	Yes				See NOTES 27, 32 & 42 Submit bill with provincial health codes.
Diagnostic Tests (Laboratory)	see comment	5-Nov-14			Yes				See NOTES 17, 32 & 42 Submit bill with provincial health codes. Prenatal tests do not require an ICD code.
Specialized Products for diagnostic tests (radiopharmaceuticals)	420210	5-Nov-14							See NOTES 32, 34 & 42
Diagnostic Tests (X Ray)	see comment	5-Nov-14			Yes				See NOTE 32 & 42 Submit bill with provincial health codes.
Diagnostic Tests (Ultrasound)	see comment	5-Nov-14			Yes				See NOTE 32 & 42 Submit bill with provincial health codes. Prenatal tests do not require an ICD code.
Molecular genetics, biochemistry genetics and cytology genetic tests	420203	5-Nov-14	Yes	Yes					See NOTES 32, 35 & 42
Nuclear Medicine in Vivo	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes. For clinic visit - referral from a GP or NP is required.
Pulmonary Function Studies	see comment	5-Nov-14		Yes	Yes				See NOTE 32 & 42 Submit bill with provincial health codes. For clinic visit - referral from a GP or NP is required.

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Magnetic Resonance Imaging (MRI)	see comment	5-Nov-14			Yes				See NOTE 32 & 42 Submit bill with provincial health codes. For clinic visit - referral from a GP or NP is required.
Transportation									
Ambulance – Ground	0729E	5-Nov-14						\$350.00	See NOTES 39, 32 & 42
Medical Transportation	0729NE	5-Nov-14	Yes						See NOTES 40, 32 & 42
Standard Immunization									
Immunization - See Notes	249067	5-Nov-14	Yes					\$428/lifetime	See NOTE 32, 36, 37 & 42 Age Restriction: 0-17
Immunization- See Notes	249061	5-Nov-14	Yes					\$446/lifetime	See NOTE 37, 38 & 42 Age Restriction: 18 and older

NOTES:

- NOTE 1 - Hospital charges not covered: (1) The day of discharge from hospital; (2) Television; (3) PST, GST, HST; (4) telephones, etc., 5) Charges from a person who receives a remuneration from hospital.
- NOTE 2 - Facility Fee charges for the following services will be rejected if they occur during the time of the hospital stay: (1) X-rays, (2) Ultrasounds, (3) Pharmaceuticals (excluding chemo drugs), (4) Lab Work, (5) MRI's, (6) CT Scans, (7) Dialysis, (8) Surgical Daycare, (9) Emergency, (10) Outpatient and (11) Home Visits.
- NOTE 3 - Where a fee is claimed together with main or secondary facility fee on the same day, only the facility fee with the highest reimbursement rate can be claimed.
- NOTE 4 - The emergency room facility fee is an all-inclusive rate and includes payment for swabs, bandages, plaster casts, splints, medical supplies and drug packets.
- NOTE 5 - Charges for follow-up visits and accompanying services, must be billed under the appropriate facility fee code.
- NOTE 6 - For professional fees, hospitals must indicate the appropriate provincial / territorial physician fee code(s), plus time units, where applicable.
- NOTE 7 - A day care surgery patient is one who has been pre-booked and registered to receive services from a functional centre that is equipped and staffed to provide day surgery (e.g. an operating room, an endoscopy suite, a cardiac catheterization lab). Includes high cost interventions of hyperbaric oxygen therapy, Video Capsule Endoscopy and cardiac catheterization (both the diagnostic imaging technical and the nursing clinical care components of this procedure). Type of surgery performed should be indicated on the claim form.

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- NOTE 8 - This is a composite fee for all specimens in relation to one patient referred to an institution for laboratory tests or for general radiography for screening or diagnostic purposes. In jurisdictions where provincial codes exist for **laboratory** services, the providers may claim the outpatient lab/ imaging fee or provincial codes but not both. In jurisdictions where provincial codes exist for **radiology** services, the providers may claim the outpatient lab/imaging fee or provincial radiography codes but not both.
- NOTE 9 - Surgery for a cosmetic purpose is not covered.
- NOTE 10 - Excludes the following imaging services: Nuclear Medicine, Fluoroscopy, Ultrasound, Interventional/Angiography studies, which are payable under the standard outpatient code 0155OP.
- NOTE 11 - Examined body/region must be specified on the claim.
- NOTE 12 - Not payable together with per diem.
- NOTE 13 - For professional fees, the appropriate provincial/territorial physician fee code(s), plus time units, (where applicable) must be indicated.
- NOTE 14 - For service performed in a hospital, the name of a referring practitioner is not required.
- NOTE 15 - Laser eye surgery is not covered.
- NOTE 16 - Reversal of sterilization procedures, male circumcision for non-medical reasons and treatment of impotence are not covered.
- NOTE 17 - Allergy tests for uncomplicated seasonal allergies or food allergies are not covered.
- NOTE 18 - Tattoo removal, treatment of uncomplicated acne vulgaris are not covered. Treatment of warts are not covered except
- plantar warts,
 - perianal and genital warts,
 - all warts in immunocompromised patients,
 - warts on the head or neck of a child.
- NOTE 19 - For a clinic visit, referral from a GP or NP is required. Services are available from the following physician Specialties: Anaesthesia, Cardiology, Clinical Immunology, Community Medicine, Cardiovascular & Thoracic Surgery, Dermatology, Endocrinology & Metabolism, Emergency Medicine, Gastroenterology, General Surgery, General Thoracic Surgery, Geriatrics, Haematology, Infectious Disease, Laboratory Medicine, Internal Medicine, Medical Oncology, Neurosurgery, Nuclear Medicine, Nephrology, Neurology, Gynaecology, Otolaryngology, Ophthalmology, Paediatrics, Psychiatry, Respiratory Disease, Rheumatology, Urology, Orthopaedic Surgery, Plastic Surgery, Vascular Surgery, Diagnostic Radiology, Radiation Oncology, Pediatric General Surgery, Allergy, Clinical Immunology and Allergy, Anatomic Pathology, Neonatology, Critical Care Medicine, Cardiac Surgery, Cardiathoracic Surgery, Forensic Medicine, Microbiology, Haematological Pathology, Medical Biochemistry, Neuropathology, Occupational Medicine, Physical Medicine and Rehabilitation, Paediatric Cardiology.
- NOTE 20 - Dermatology - treatment for cosmetic purposes is not covered.
- NOTE 21 - General Surgery - Surgery performed for cosmetic or religious purposes, elective surgery and transsexual surgery are not covered.
- NOTE 22 - Ophthalmology - referral is not required.
- NOTE 23 - Paediatrics - Referral is not required.
- NOTE 24 - Orthopaedic Surgery - Limited to acute care or where the timing of surgery will affect a child's development.
- NOTE 25 - Plastic Surgery - Surgery / treatments solely for the purpose of altering or restoring appearance, except for severe disfigurements / burns, are not covered.
- NOTE 26 - Patients with:
(1) Suspected Sleep Disordered Breathing; Major daytime sleepiness, as identified by an Epworth Sleepiness Scale of 15 or greater (the Epworth Scale can be completed by any health care provider); and a safety critical occupation OR;

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(2) Patients with: (A) Suspected SDB; and (B) One or more of the following:

- Comorbid disease, pregnancy; or
- Overnight home oximetry that reveals greater than 30 oxygen desaturation (4% or greater) per hour.

NOTE 27 - Hyperbaric treatment must be prescribed and supervised by a Medical Doctor (M.D) whose scope of practice includes this treatment and is licensed to practice medicine in the province or territory where the hyperbaric facility is located

Entitlement consideration for the following reasons: (1) Air or gas embolism; (2) Bone infections (osteomyelitis) that have not improved with other treatments; (3) carbon monoxide poisoning; (4) gas gangrene; (5) crush injury; (6) Compartment Syndrome and other acute traumatic problems where blood flow is reduced or cut off (e.g., frostbite); (7) decompression sickness; (8) healing for wounds such as diabetic foot ulcers; (9) exceptional blood loss; (10) intracranial abscess; (11) necrotizing soft tissue infections; (12) delayed radiation injury (e.g., radiation burns that develop after cancer therapy); (13) skin grafts and flaps that are not healing well; and (14) thermal burns (e.g., from fire or electrical sources).

For IFHP coverage, Health Canada guidance must be followed:

- the chamber is properly installed according to municipal and provincial regulations;
- operators and attendants are properly trained; and
- a certified hyperbaric physician is either on site or can be reached easily and quickly.

NOTE 28 - Transfers from hospitals to rehabilitation centres do not require prior approval. In all other cases, clients must have experienced a disabling physical illness or injury including but not limited to: Amputations, Spinal Cord Injuries, Strokes, Lung Disease, Multiple Sclerosis, Chronic Pain.

NOTE 29 - Fertility diagnostic and therapeutic procedures and reversal of sterilisation procedures are not covered.

NOTE 30 - When billing for Chemo drugs or Hormones, please refer to the following benefit code 101729: Injections or Infusions or oral administration of substances.

NOTE 31 - Claims for Integrated Prenatal Screening Tests and Maternal Serum Screening Tests do not require a provincial / territorial health code or ICD code.

NOTE 32 - Services provided to Canadian citizens, including newborns, are not covered.

NOTE 33 - An out-patient is an individual who has been officially accepted by a hospital and receives one or more health services without being admitted as an inpatient. May include the following high cost diagnostic imaging procedures:

- Nuclear medicine including single photon emission computed tomography (SPECT) but excluding nuclear medicine scans superimposed on images from modalities such as CT or MRI (e.g. SPECT/CT), which have their own IFHP service codes.
- Fluoroscopy.
- Ultrasound.
- Interventional/Angiography Studies.

NOTE 34 - IFHP will reimburse for the cost of radiopharmaceuticals (products) to hospitals/lab/imaging clinics:

- a) when product purchased/ordered in advance of a service and the client ceases to be eligible after the product is purchased/ordered but before the scheduled service date.
- b) the product was purchased/ordered within a maximum of 2 weeks before the scheduled procedure, and the client was eligible on the date the product was purchased/ordered (submit the printout of the eligibility query screen with time stamp, copy of a dated order confirmation or receipt).
- c) IFHP will reimburse only for the cost of the product as per invoice amount. All other fees/services will not be reimbursed.
- d) Note: In situations where the client is still covered under the IFHP on the date of service, providers will be reimbursed as per respective P/T fee code or IFHP Standard Outpatient Fee.
- e) The following procedures are eligible:

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Abdominal Scintigraphy
 Adrenal Scintigraphy
 Biliary Scintigraphy
 Bone marrow Scintigraphy
 Bone Scintigraphy
 Brain Scintigraphy
 Calcium absorption
 Calcium absorption/excretion
 Cardioangiography
 CSF Circulation
 Gallium Scintigraphy
 Gastrointestinal (protein/ blood loss, transit)
 Gastro-oesophageal reflux and absorption
 Leukocyte Scintigraphy
 Liver Scintigraphy
 Lymphangiogram
 Malabsorption test

Myocardial Perfusion Scintigraphy
 Myocardial Scintigraphy
 Myocardial Wall Motion
 Parathyroid Scintigraphy
 Perfusion lung Scintigraphy
 Positron Emission Tomography
 Renal Scintigraphy
 Salivary Gland Scintigraphy
 Scintimammography
 Shilling test
 Single-photon emission computed tomography (SPECT)
 Spleen Scintigraphy
 Testicular and Scrotal Scintigraphy
 Thyroid Scintigraphy
 Thyroid uptake and repeat
 Venography
 Ventilation Lung Scintigraphy

- NOTE 35 - Providers must include on the claim a written diagnosis or ICD code that provides clinical information or diagnosis relating to a disease or symptom for which genetic testing is indicated.
- NOTE 36 - Include vaccines: (1) Varicella; (2) Hep B; (3) Hep A; (4) Meningococcal C; (5) Pneumococcal C-7; (6) T-Dap; (7) DTaP; (8) Td; (9) MMR; (10) IPV; (11) Hib ; (12) Influenza vaccine and (13) Combinations/Other. Claims must include rationale for immunization (i.e. no record, inadequate immunization record, unclear history of prior immunization or risk factors).
- NOTE 37 - IFHP will cover immunizations as per NACI guidelines for immunization of persons with inadequate/without immunization records or risk factors. Can be claimed together with: (1) provincial physician fee codes for vaccination; OR (2) injections fee; OR (3) IFHP Nursing Services - Vaccination code. Once max dollar amount is reached, (whether reached during the initial or subsequent service), only professional fees are payable (nursing visits or physician fees).
- NOTE 38 - Include vaccines: (1) Varicella; (2) Meningococcal C; (3) Pneumococcal C-23; (4) T-dap; (5) Td; (6) MMR; (7) Hep B; (8) Hep A; (9) Influenza vaccine and (10) Combinations/Other. Claims must include rationale for immunization (i.e. no record, inadequate immunization record, unclear history of prior immunization or risk factors).
- NOTE 39 - IFHP follows the provincial / territorial fee guidelines. Where no provincial / territorial fee guidelines exist, IFHP will pay up to a maximum \$350 for ground ambulance transportation.
- NOTE 40 - Coverage is limited to circumstances where a health-care professional is required to escort the patient due to the severity of the patient's condition. Physician or Nurse Practitioner recommendation is required. The IFHP will reimburse for medical transportation for the patient and the medical escort (where applicable).
- NOTE 41 - Payable only if billed together with 0155C, 0164IPU, 0164IPO. Submit bill with DIN number or drug name. Chemo drugs must be approved by Health Canada and supported by provincial / territorial Cancer Care Centre's clinical guidelines. For provinces without definitive cancer drug formularies, IFHP will reimburse for the cost of drugs included in the BC Cancer Agency formulary or the Cancer Care Ontario drug formulary.
- NOTE 42 - Services and Products must be provided in Canada.
- NOTE 43 - Payable at the invoiced price of the device (invoice required). Can be claimed together with either the Standard Outpatient or Day Surgery Facility Fees.