

INTERIM FEDERAL HEALTH PROGRAM – SUMMARY

Before June 30, 2012, all refugee claimants and resettled refugees had what is now called “Expanded Health Care Coverage”. Since June 30, there are four types of IFH health care coverage: Expanded Health Care Coverage, Health Care Coverage, Public Health-Public Safety Coverage, and Detainee Coverage.

The cost of some of the services and medications that are no longer covered by the IFH may be covered by the provincial government, so both federal and provincial coverage need to be taken into account.

EXPANDED HEALTH CARE COVERAGE

1. WHO IS COVERED?

- Government assisted refugees (GARs) – First year after arrival
- Privately sponsored refugees (PSRs) who receive Resettlement Assistance Program income support (a minority of PSRs) – First year after arrival
- Victims of trafficking with a temporary resident permit

2. WHAT IS COVERED?

SERVICES

Full coverage of all medical, diagnostic and hospital services that are normally covered by provincial health insurance.

Supplemental services, including limited dental and vision care, psychotherapy by a registered clinical psychologist, speech therapy, midwife services, physiotherapy, occupational therapy, audiology, home care, long-term care.

MEDICATIONS

All prescription medications and vaccines, and most medical supplies, are covered.

HEALTH CARE COVERAGE

1. WHO IS COVERED?

- Refugee claimants

Summary: Currently, all refugee claimants qualify for IFH Health Care coverage. Coverage starts as soon as they are declared eligible to make a refugee claim, and continues until either acceptance or final rejection of their refugee claim. Thus, if the claim is rejected by the Immigration and Refugee Board (IRB), IFH Health Care coverage continues as long as appeal or judicial review proceedings are ongoing.

Details

- IFH coverage does not start until the person is declared eligible to make a refugee claim (may take several weeks). About 98% of persons submitting claims are found to be eligible.
 - IFH Health Care coverage continues until acceptance or final rejection of the refugee claim
 - Rejection of a refugee claim is considered final after:
 - Rejection of judicial review procedures by the Federal Court, or
 - Rejection of appeal procedures by the Refugee Appeal Division of the IRB (not yet in existence), or
 - Expiry of the delay to submit either judicial review (15 days) or appeal procedures (15 working days) against the IRB decision rejecting the person's refugee claim

At this point, a date is set by the Canadian Border Services Agency to deport ('remove') the refused claimant, usually about a month later.
 - During the period between final rejection of the claim and the date set for removal, the person has IFH Public Health - Public Safety coverage
 - If the refused claimant remains in Canada beyond the date set for removal, they no longer have any health care coverage.
 - If the refused claimant comes from a "moratorium" country to which removals have been suspended (currently: Afghanistan, Democratic Republic of Congo, Haiti, Iraq, Zimbabwe), they can remain in Canada indefinitely but will only have access to Public Health/Public Safety coverage.
- Persons whose refugee claim has been accepted (until provincial health insurance starts).
 - Most privately sponsored refugees (PSRs), i.e, those who do not receive income support through the Resettlement Assistance Program – First year
 - Persons who received a positive Pre-Removal Risk Assessment after having made a refugee claim.

2. WHAT IS COVERED?

SERVICES

All medical services and diagnostic tests covered by provincial health insurance are covered by the IFH except for:

- elective surgery (e.g., tubal ligation, vasectomies, conditions that can be managed without surgery)
- rehabilitative and long term care.

Medical services are defined as services provided by doctors or nurses. Therefore, services provided by other health professionals such as psychologists or midwives are not covered by the IFH.

For hospital stays, the IFH reimburses a flat daily rate.

MEDICATIONS

Medications and vaccines are not covered EXCEPT:

- Medications for the prevention or treatment of a condition posing a risk to public health or safety AND
- Medications provided in response to a medical emergency, i.e., an injury or illness that poses an immediate threat to life, limb or function

The same rules apply to in-hospital medications (e.g., chemotherapy drugs are not covered)

PUBLIC HEALTH - PUBLIC SAFETY COVERAGE

1. WHO IS COVERED?

- Refugee claimants from a Designated Country of Origin (DCO)
 - C31, the new federal law on refugees, will allow the Minister of Immigration to place countries on the Designated Country of Origin (DCO) list. However, this provision (section 109.1 of the Act) is not yet in force. It will come into force on a date to be determined by the federal cabinet.
 - When section 109.1 of the Act is in force, the Minister will be able to place countries on the DCO list. He may create the list on the same day that s. 109.1 comes into force, or decide to wait until a later date. He may also add other countries to the list at any time.
 - Once their country is placed on the DCO list, persons who made a refugee claim after the date that section 109.1 of the Act came into force will only be entitled to Public Health – Public Safety coverage. This will apply to medical services received after their country is placed on the DCO list.
 - However, persons who made a refugee claim before the date that s.109.1 comes into force will not be affected. They will continue to have the same “Health Care Coverage” as refugee claimants from non-DCO countries (a grandfathering clause).
 - The grandfathering clause only applies to people who made their claim before s. 109.1 of the Act comes into force. For example, let's say that the Minister places a country on the DCO list 6 months after the day that s. 109.1 comes into force. All individuals from this country who had made a refugee claim since the coming into force of s. 109.1 would be affected (i.e, would have only Public Health-Public Safety coverage), even those who made their claim during the 6 months between the coming into force of s. 109.1 and the day their country was placed on the DCO list.
 - Only medical services provided after the date that the country is placed on the DCO list are affected.
- Refused claimants between final rejection of their refugee claim and the date set for their removal
 - People whose refugee claims have been rejected by the IRB, and who have exhausted all judicial review or appeal procedures, receive an order to leave Canada at a specific date. During this period they have Public Health-Public Safety coverage.

2. WHAT IS COVERED?

There is no coverage of health care services or medication *EXCEPT FOR*:

- Diseases posing a risk to public health, and
- Conditions posing a risk to public safety

A “disease posing a risk to public health” is a communicable disease that is on the list of national notifiable diseases of the Public Health Agency of Canada <http://www.phac-aspc.gc.ca/bid-bmi/dsd-dsm/duns-eng.php> . This includes tuberculosis, HIV, sexually transmitted infections, malaria, measles, chickenpox and other contagious diseases.

A “condition posing a risk to public safety” includes psychotic conditions where a person has been identified as being a danger to others (no clear definition available).

For conditions posing a risk to public health or public safety, the following are covered:

- Medical, diagnostic and hospital services, including screening and prevention;
- Medications, vaccines and similar products

DETAINEE COVERAGE

1. WHO IS COVERED?

Persons detained under the Immigration and Refugee Protection Act, notably persons who have made a refugee claim (pending or rejected)

2. WHAT IS COVERED?

- All medical, hospital and diagnostic services covered by provincial health insurance except for elective surgery, rehabilitation and long term care.
- Prescription medication and vaccines

NO COVERAGE

The following groups have no medical coverage whatsoever.

- Persons who have submitted a refugee claim, but are waiting for their eligibility determination.
- Persons who have withdrawn or abandoned their refugee claim, or who have been found ineligible to make a claim.
- Applicants for a Pre-Removal Risk Assessment who have not previously made a refugee claim
- Nonstatus persons. This includes:
 - Persons who overstay a visa (visitor, student or work visa)
 - Refused refugee claimants who have received a removal order and who do not show up for removal.

Sources

<http://www.cic.gc.ca/english/department/laws-policy/ifhp.asp>

<http://www.cic.gc.ca/english/refugees/outside/summary-ifhp.asp>

<http://www.cic.gc.ca/english/refugees/outside/ifhp-info-sheet.asp>
<http://www.gazette.gc.ca/rp-pr/p2/2012/2012-04-25/html/si-tr26-eng.html>
<http://canadagazette.gc.ca/rp-pr/p2/2012/2012-07-18/html/si-tr49-eng.html>

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Disclaimer: This document has been developed by Canadian Clinicians for Refugee Care, a coalition of clinicians, researchers and community health workers, for the information of health care providers. Although all information has been carefully checked by experts in refugee law and health policy, we cannot guarantee accuracy or completeness.

