



## **SMALL CENTRE TOOLKIT**

# **ACCESS TO SERVICES**

**INTERIM FEDERAL HEALTH  
PROGRAM AND THE ALBERTA  
HEALTH CARE INSURANCE PLAN**

**MARCH 2019**



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## ACKNOWLEDGEMENTS

As we collectively strive to understand the historic and ongoing relationship between settlement and the land on which we are located, AAISA respectfully acknowledges that the province of Alberta is comprised of Treaty 6, Treaty 7, and Treaty 8 territories, and is the traditional lands of First Nations and Métis peoples.

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**Note:** Throughout this document, clicking on underlined text will direct to various websites and resources.

## INTRODUCTION

This section of AAISA's Small Centre Toolkit will provide a brief overview of the two healthcare plans available for newcomers in the province of Alberta. This section will provide a summary of the Interim Federal Health Program (IFHP) and the Alberta Health Care Insurance Plan (AHCIP) and the eligibility criteria, application process, and coverage for each program.

## INTERIM FEDERAL HEALTHCARE PROGRAM

The Interim Federal Health Program (IFHP) provides limited and temporary health-care services to individuals who are not eligible for provincial or territorial health insurance.

For a more detailed description of The Interim Federal Health Program Policy, [click here](#).

## IFHP ELIGIBILITY

The following groups are eligible for coverage under IFHP:

- Resettled refugees
- Protected persons
- Refugee Claimants
- Victims of human trafficking
- Detainees

## APPLYING FOR IFHP

Individuals can apply to get IFHP coverage for the first time, extend their coverage, or request confirmation of coverage if the original document has been lost, stolen or destroyed.

- [Instruction Guide](#) includes tips of when to apply and how to fill out the application)
- [Application form](#)

For additional information and details on how to submit a form, [click here](#).

## COVERAGE UNDER IFHP

The IFHP covers certain medical costs both inside and outside of Canada. Under the IFHP program, coverage for pre-departure medical services overseas include:

- Immigration medical exams and follow-up treatment of health condition that would make someone inadmissible to Canada. For the Immigration and Refugee Protection's Act definition of inadmissibility, [click here](#)
- Vaccinations

- Outbreak management and control
- Medical support needed for safe travel

Within Canada, IFHP coverage includes:

- Basic coverage, similar to healthcare coverage from provincial and territorial plans
- Supplemental coverage, similar to healthcare coverage from provincial and territorial plans
- Prescription drug coverage, similar to healthcare coverage from provincial and territorial plans
- IME and IME Tests
- Dental

For a list of healthcare providers who are registered and provide services to IFHP holders, [click here](#).

## LENGTH OF IFHP COVERAGE FOR ELIGIBLE BENEFICIARIES

ELIGIBLE GROUPS	LENGTH OF COVERAGE
<p><b>Resettled refugees:</b></p> <ul style="list-style-type: none"> <li>• Government-Assisted Refugees (GARs)</li> <li>• Blended Visa Office-Referred Refugees (BVORs)</li> <li>• Privately Sponsored Refugees (PSRs)</li> </ul>	<p><b>Basic coverage:</b> Provided until the individual qualifies for provincial or territorial health insurance.</p> <p><b>Supplemental and prescription drug coverage:</b> Provided if the beneficiary receives income support from the Resettlement Assistance program (RAP) (or its equivalent in Quebec).</p>
<p><b>Protected Persons</b></p>	<p><b>Basic coverage, supplemental and prescription drug coverage:</b> Provided for 90 days from the date of asylum claim or the Pre-Removal Risk Assessment (PRRA) is accepted, or until the individual becomes eligible for provincial or territorial health coverage.</p>
<p><b>Refugee Claimants:</b></p> <ul style="list-style-type: none"> <li>• Refugee claimants awaiting decision</li> <li>• Rejected refugee claimants</li> <li>• Ineligible refugee claimants</li> <li>• Positive PRRA decision</li> </ul>	<p><b>Basic coverage, supplemental and prescription drug coverage:</b> Provided until the beneficiary leaves Canada or becomes eligible for provincial or territorial health insurance. IFHP coverage is immediately cancelled when an individual’s claim is either withdrawn, found to be abandoned by the Immigration and Refugee Board of Canada (IRB), or re-determined as ineligible and the individual isn’t eligible to apply for a PRRA.</p>

<p><b>Victims of human trafficking</b></p>	<p><b>Basic coverage, supplemental and prescription drug coverage:</b> Provided for the duration of the temporary resident permit.</p>
<p><b>Detainees</b></p>	<p><b>Basic coverage, supplemental and prescription drug coverage:</b> Provided for the period that the individual is detained by the Canada Border Service Agency (CBSA) under <u>the Immigration and Refugee Protection Act (IRPA)</u>.</p>

# ALBERTA HEALTH CARE INSURANCE PLAN (AHCIP)

## AHCIP ELIGIBILITY

An individual is eligible for Alberta Health Care Insurance Plan (AHCIP) coverage if they are:

- Legally entitled to be or to remain in Canada and make a permanent home in Alberta
- Committed to being physically present in Alberta for at least 183 days in a 12-month period
- Not claiming residency or obtaining benefits under a claim of residency in another province, territory, or country
- Any other person deemed by the regulations to be a resident or temporary resident, not including a tourist, transient or visitor to Alberta

Non-eligible residents include:

- Members of the Canadian Armed Forces
- Federal penitentiary inmates
- Refugee claimants
- Refused or failed refugee claimants
- Individuals with expired immigration documents
- If you are a temporary resident from outside Canada with AHCIP coverage, there is an expiry date printed on your Alberta personal health card. It should be the same date as the "valid until" date noted on your Canada entry document.

For additional information on AHCIP eligibility criteria, [click here](#).

## APPLYING FOR AHCIP

When applying for AHCIP coverage, an individual must:

1. Download the application form for AHCIP coverage [here](#)
2. Submit the completed application:
  - To an authorized [registry agent office](#) or;
  - By [mail](#)

## COVERAGE UNDER AHCIP

Under the AHCIP, treatments and services that are deemed by a physician to be medically necessary are fully covered, as are hospital stays. For more information on AHCIP coverage, [click here](#).

It is important to note that some medical services are only partially covered under the AHCIP; some key examples of include:

- Optometry
- Dental
- Podiatry

Additional information on non-covered services and partially covered services can be found [here](#).

**Note:** AHCIP coverage can be used across Canada but is limited outside of Alberta. For additional information on out-of-province and out-of-country coverage, [click here](#).