

Billing Processes and PROMIS Registration for Refugee Claimants & Non-BC Residents

This document provides BC Renal Programs with information about hemodialysis (HD) and related billing processes for refugee claimants and non-BC residents. Links to relevant websites and information about registering such patients in PROMIS are also included. The information in this document was compiled from current experiences of BC Renal Programs and relevant websites.

Please note, BC Renal (BCR) does not fund or manage billing processes for non-BC residents or refugee claimants.

Coverage for Refugee Claimants

Group 1: Patients with current valid IFHP coverage

- Patient can apply for Interim Federal Health Program (IFHP) coverage. IFHP provides limited, temporary coverage of health-care benefits to refugee claimants.
- Summary of coverage: <https://www.canada.ca/en/immigration-refugees-citizenship/services/refugees/help-within-canada/health-care/interim-federal-health-program/coverage-summary.html>
- Information Handbook for Healthcare Professionals: https://docs.medaviebc.ca/providers/guides_info/IFHP-Information-Handbook-for-Health-care-Professionals-April-1-2016.pdf
- Coverage starts on the date the eligibility document is issued.
- Coverage ends if patient withdraws refugee claim or the Immigration & Refugee Board of Canada (IRB) rules that claim has been abandoned or is ineligible or patient leaves Canada. Coverage automatically expires 90 days from positive decision on refugee application. The latter group is eligible for BC MSP upon expiry of IFHP coverage.
- Plan will cover inpatient and outpatient hospital services (HD up to \$200/day), physician visits, diagnostic tests and most prescription medications. Physician visits, diagnostic tests, and prescription medications can be billed to the plan on top of HD services.
- Patient provides documentation to health care provider/hospital (e.g. IFHP card/certificate).
- Health care provider/hospital must call a central number or go online to register as a federal health care provider with Medavie Blue Cross. <http://www.medaviebc.ca/en/health-professionals/register>.
- Registering as an approved provider means the provider/hospital can submit claims for patients with IFHP coverage (i.e. Blue Cross coverage).
- Health care provider/hospital can check website whether IFHP coverage is current (must be a registered provider to check).
- Hospital/patient care provider submits form for reimbursement of funds (patient does not have to pay upfront).

Group 2: Patients without current valid IFHP coverage

- No HD treatments, physician visits, diagnostic tests, transplants etc. are covered. Patient must pay.
- Medications on the BCR formulary are not covered. They must have a current legal resident status in Canada and a current BC PHN linked to active MSP for them to be covered.

Registering Refugee Claimants in PROMIS

Group 1: Patients with current valid IFHP coverage

1. When registering the patient in PROMIS, select Refugee Claimant on the Alt. Insurer menu. Then enter their eight-digit client ID in the Alt. Insurer # field.

Patient Identifier

PHN 9XXX XXX XXX

Alt. Insurer Refugee Claimant ✓

Alt. Insurer# 12345678

2. Register the patient in the Other Renal Patient program.

Current Program Details

* Program Other Renal Patient ✓

* Start Date 15-Apr-2019 📅

End Date DD-Mon-YYYY 📅

Group 2: Patients without current valid IFHP coverage

1. When registering the patient in PROMIS, select No Insurance on the Alt. Insurer menu. Leave the Alt. Insurer # field blank.
2. Register the patient in the Other Renal Patient program.

Coverage for Non-BC Residents (No Current BC Personal Health Number)

Group 1: Patients with MSP coverage in another province

- HD treatments, physician visits, diagnostic tests, transplants etc. are covered through the home province. The BC Ministry of Health bills the home province.
- Medications on the BCR formulary are not covered. They must have a current BC PHN for them to be covered.
- When the patient has lived in BC for at least three months, they can apply for BC MSP coverage. When accepted, they would be covered for HD treatments, physician visits, diagnostic tests, transplants, and medications on the BCR formulary.

Group 2: Patients without MSP coverage in another province

- No HD treatments, physician visits, diagnostic tests, transplants etc. are covered. Patient must pay (can be reimbursed if they have private insurance).
- Medications on the BCR formulary are not covered. They must have a current BC PHN for them to be covered.

- When patient has lived in BC for at least three months, they can apply for BC MSP coverage. When accepted, they would be covered for HD treatments, physician visits, diagnostic tests, transplants, and medications on the BCR formulary.

Registering Non-BC Residents in PROMIS

Group 1: Patients with MSP coverage in another province

1. When registering the patient in PROMIS, select their province on the Alt. Insurer menu. Then enter their provincial health number in the Alt. Insurer # field.
2. Register the patient in the Transient Renal Patient program.

Group 2: Patients without MSP coverage in another province

1. When registering the patient in PROMIS, do one of the following:
 - Select No Insurance on the Alt. Insurer menu and leave the Alt. Insurer # field blank.
 - Select the patient's alternate insurer and enter their claimant number in the Alt. Insurer # field.
2. Register the patient in one of the following programs:
 - Other Renal Patient program if they are NOT eligible for PRA
 - Transient Renal Patient program if they are waiting for PRA eligibility

Definitions of Renal Programs in PROMIS

Renal program	Program requirements
Provincial Renal Agency program	Enroll patients in this program if they meet all of the following requirements: • a chronic renal patient receiving CKD/predialysis treatment or dialysis treatment • a BC resident with a valid PHN, or a Yukon resident • is monitored by a BC nephrologist
Transient Renal Patient program	Enroll patients in this program if they meet any of the following requirements: • a chronic renal patient from another province or country and receiving temporary care in BC • a chronic renal patient waiting for MSP coverage (when they receive MSP coverage, remove them from this program and enroll them in the Provincial Renal Agency program) Note: BC patients temporarily receiving care at a centre other than their primary centre are not transient patients.
Other Renal Patient program	Enroll patients in this program if they meet any of the following requirements: • an acute renal patient • a non-renal patient who needs dialysis or plasmapheresis • a transplant patient who needs acute dialysis • a chronic renal patient who does not meet requirements for the Provincial Renal Agency program
General Nephrology program	Enroll patients in this program if they are being seen by a BC nephrologist for general kidney care or research purposes.