## IFHP Benefit Grid - IME and IME Tests

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
IME and IME Tests									
Immigration Medical Exam (IME)	0293CI	1-Apr-19					1 / LT	\$179.44	See NOTE 4
IME Venipuncture	0293V	1-Apr-16					1 / LT	\$9.60	
IME Chest X-Ray	0293CX	5-Nov-14						\$42.10	
IME Lab Exam (urinalysis)	0293L	1-Apr-16					1 / LT	\$2.90	
IME Venereal Disease Research Lab (VDRL)	0293VDRL	5-Nov-14						\$15.75	
IME HIV Lab testing	0293HLT	5-Nov-14						\$21.00	
IME Laboratory Documentation	0293LD	5-Nov-14						\$7.76	See NOTE 3
Furtherance – Panel Physician	0293FPHD	1-Apr-19						\$70.68	See NOTE 4
Furtherance - MD / Specialist	0293FPHM	5-Nov-14				Panel Physicians		\$150.00	See NOTE 5
Furtherance - MD / psychiatrist (Public safety concerns only)	0293F	5-Nov-14				Panel Physicians		\$211.00	See NOTE 5
Sputum Culture and Smear (TB)	0293TB	5-Nov-14						\$28.00	
IME Syphilis Confirmation Tests	0293SCT	5-Nov-14						\$118.00	See NOTE 2
IME Post Test Counselling for HIV	0293PH	5-Nov-14						\$119.95	
IME HIV Confirmation Tests	0293HIV	5-Nov-14						\$156.00	See NOTE 1
HIV RNA concentration (viral load)	0293HVR	5-Nov-14						\$147.00	See NOTE 8
Lymphocyte Subset Enumeration (CD4 count)	0293LS	5-Nov-14						\$255.71	
HCV Serology (Anti HCV IgM / IgG)	0293HCV	5-Nov-14						\$66.45	
Hepatitis B-surface Antigen	0293HB	5-Nov-14						\$14.76	
Lactate Dehydrogenase (LD, LDH)	0293LDH	5-Nov-14						\$5.40	
Aspartate Aminotransferase (AST)	0293AST	5-Nov-14						\$2.59	



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Alanine Aminotransferase (ALT)	0293ALT	5-Nov-14						\$2.59	
GGT (Gamma Glutamyl Transferase)	0293GGT	5-Nov-14						\$2.59	
Creatinine, Serum	0293CR	5-Nov-14						\$2.59	
Albumin / Creatinine Ratio (ACR)	0293ACR	5-Nov-14						\$11.00	
Creatinine clearance	0293CC	5-Nov-14						\$12.00	
Fasting plasma (blood) glucose (FPG/FBG)	0293FPG	5-Nov-14						\$5.25	
Glycosylated hemoglobin - HgbA1	0293HGB	5-Nov-14						\$11.00	
Interferon Gamma Release Assay (IGRA)	0293IGRA	6-May-2019						\$90.00	
Tuberculin Skin Test (TST)	0293TST	6-May-2019						\$45.00	
Electrocardiogram	0293ELC	5-Nov-14						\$31.70	
Cardiac Stress Test	0293CST	5-Nov-14						\$99.13	
Echocardiogram	0293ECH	1-Apr-19						\$169.02	
IME Combination Code - (IME Exam & Urinalysis)	0293EU	1-Apr-19					1 / LT	\$189.29	See NOTE 4, 6
IME Combination Code - (IME Exam, Venipuncture & Urinalysis)	0293EVU	1-Apr-19					1 / LT	\$200.04	See NOTE 4, 7

## NOTES:

NOTE 1 - HIV confirmation test may include Western Blot, Immunoblot, Radioimmunoprecipitation or Immunofluorescence.

NOTE 2 - Syphilis confirmation test may include the following tests: TP-PA, FTA-Abs, INNO-LIA.

- NOTE 3 (a) The patient documentation and specimen handling benefit is limited to 1 per patient, per day.
  (b) Billed by Laboratories only.
  (c) Not applicable to a patient visit as the service is solely to receive instructions or collection containers.
  (d) When multiple tests are ordered for the same patient, for the same day, only one fee is payable.
- NOTE 4 The service can only be performed by a Panel Physician.
- NOTE 5 Furtherance fee can be claimed by MD or specialist only. Referral from a Panel Physician is required. Fee includes review of history, laboratory, x-ray findings, written report and any additional visits.



## **IFHP Benefit Grid - IME and IME Tests**

- NOTE 6 Combined code includes IME Exam and IME Lab Exam Urinalysis. Not payable if claimed together with 0293CI or 0293L.
- NOTE 7 Combined code includes IME Exam, IME Venipuncture and IME Lab Exam Urinalysis. Not payable if claimed together with 0293CI, 0293V or 0293L.
- NOTE 8 May include polymerase chain reaction (PCR), nucleic acid sequence-based amplification (NASBA) or by Branched DNA (bDNA) methods.

