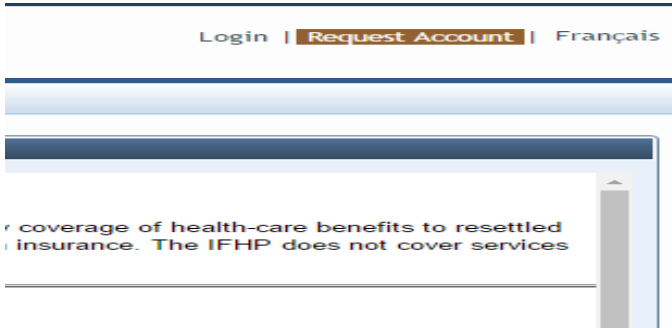


# HOW TO REGISTER AS A PROVIDER WITH THE INTERIM FEDERAL HEALTH PROGRAM:

1. Go to: <https://provider.medavie.bluecross.ca/>

2. → CLICK “Request an Account” (top right corner)



3. → SELECT “Individual” or “Organization” (your billing structure may provide guidance in choosing the designation)

A screenshot of the 'REQUEST ACCESS' form. At the top left is the Medavie Blue Cross logo. Below it is a 'WELCOME' message and a breadcrumb trail 'YOU ARE HERE > REQUEST ACCESS'. The main heading is 'REQUEST ACCESS'. Below this is a instruction: 'Please select whether you are requesting portal access for an individual or an organization and complete the form below.' There is a dropdown menu labeled '\*Request Provider Portal Access for...' with a dropdown arrow. The dropdown menu is open, showing three options: 'Select...', 'An Individual', and 'An Organization'. Below the dropdown is a note: '(Fields marked with \* are mandatory)'. The 'An Individual' option is highlighted in blue.

4. → FILL in “Required Info” and → CLICK “Submit” (bottom right corner)

A screenshot of the 'REQUEST ACCESS' form with all fields filled out. At the top left is the Medavie Blue Cross logo. At the top right are links for 'Login', 'Request Account', and 'Français'. Below the logo is a 'WELCOME' message and a breadcrumb trail 'YOU ARE HERE > REQUEST ACCESS'. The main heading is 'REQUEST ACCESS'. Below this is a instruction: 'Please select whether you are requesting portal access for an individual or an organization and complete the form below.' There is a dropdown menu labeled '\*Request Provider Portal Access for...' with 'An Individual' selected. Below it is a checkbox for '\*Requested Provider Programs' with 'Interim Federal Health Program (IFHP)' selected. The form is divided into two main sections: 'Personal Information' and 'Professional Information'. The 'Personal Information' section includes fields for: '\*First Name', '\*Last Name', '\*Email', '\*Business Address', '\*City', '\*Province' (with 'British Columbia' selected), '\*Postal Code', '\*Telephone (format: (999) 999-9999)', 'Fax Number (format: (999) 999-9999)', and '\*Preferred Language of Correspondence' (with 'English' selected). The 'Professional Information' section includes: '\*Licensing Province' (with 'British Columbia' selected), '\*License / Registration Number', and '\*Specialty' (with 'Select...' selected). Below these sections is an 'Additional Information' section with a large text area. At the bottom left is a note: '(Fields marked with \* are mandatory)'. At the bottom right are 'Reset' and 'Submit' buttons.