

produced, signed and kept by health professionals. This amendment is due to the fact that the Board will be able to receive, by electronic means, statements of fees from health professionals remunerated by way of fixed fees, whether by the salary, fees or fees for a fixed price method of remuneration.

Study of the matter has revealed no impact on the content of the statement of fees forwarded in that way. The only new element introduced is the obligation to produce, sign and keep the billing statement, which is an identical reproduction of the data forwarded electronically, for those methods of remuneration, in the same manner as professionals with fee-for-service remuneration.

Further information may be obtained by contacting Mr. Jean-L. Lefebvre, advocate, tel.: (418) 682-5172, fax: (418) 643-7312, Régie de l'assurance-maladie du Québec, 1125, chemin Saint-Louis, Sillery (Québec), G1S 1E7.

Any interested person having comments to make is asked to send them in writing, before the expiry of the 45-day period, to the Régie de l'assurance-maladie du Québec, 1125, chemin Saint-Louis, 8<sup>e</sup> étage, Sillery (Québec), G1S 1E7.

ANDRÉ DICAIRE,  
*President and Director General of  
the Régie de l'assurance-maladie du Québec*

## Regulation to amend the Regulation respecting forms and statements of fees under the Health Insurance Act

Health Insurance Act  
(R.S.Q., c. A-29, s. 72, 1<sup>st</sup> par., subpars. a and b)

**1.** The Regulation respecting forms and statements of fees under the Health Insurance Act (R.R.Q., 1981, c. A-29, r. 2), amended by the Regulations approved by Orders in Council 56-82 dated 13 January 1982 (Suppl., p. 123), 1126-82 dated 12 May 1982 (Suppl., p. 126), 3017-82 dated 20 December 1982, 2284-83 dated 16 November 1983, 794-84 dated 4 April 1984, 413-85 dated 6 March 1985, 2331-85 dated 7 November 1985, 655-86 dated 14 May 1986, 1178-86 dated 30 July 1986, 553-87 dated 8 April 1987, 761-88 dated 18 May 1988, 859-90 dated 20 June 1990, 1471-92 and 1472-92 dated 30 September 1992, 1756-92 dated 2 December 1992, 68-94 dated 10 January 1994, 1040-94 dated 6 July 1994 and 1218-95 dated 6 September 1995, is further amended by adding the following after the first paragraph of section 31:

“Notwithstanding the foregoing, for physicians and dentists remunerated by way of fixed fees or salary, and for physicians and dentists remunerated by way of fees for a fixed price or fees, the billing statement produced manually or by computer equipment or hardware must contain the signature of the physician or dentist, as the case may be, or the signature of his duly authorized mandatary, in addition to the signature of the person duly authorized by the institution at which the professional provided the service for which he is submitting the statement of fees, as well as, if they are forwarded, the elements referred to in section 9.2 or 9.3, as the case may be, and the following elements:

in accordance with the technical specifications in the computerized billing instructions forwarded to the physician or dentist, the data corresponding to the following identification or forwarding coordinates:

(1) a reference number for the sending of information forwarded to the Board by means of magnetic recording media or telecommunications media, which must appear on each page;

(2) the number of the data processing agency, where applicable;

(3) the system code and the record code used for forwarding data;

(4) the attestation number for the consignment of requests for payment;

(5) indications of the beginning and end of the forwarding of data.”.

**2.** This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

9823

### Draft Regulation

Hospital Insurance Act  
(R.S.Q., c. A-28)

#### Regulation — Amendments

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (R.S.Q., c. R-18.1), that the Regulation to amend the Regulation respecting the application of the Hospital Insurance Act, the text of which appears below, may be made by the Government upon the expiry of 45 days following this publication.

The purpose of the draft regulation is to amend the maximum amounts that may be reimbursed to a resident who receives, in a hospital centre situated outside Canada, insured health-care services that become necessary because of a sudden illness or an emergency.

Thus, the draft regulation limits to \$100.00 per day the amount that may be reimbursed in the case of hospitalization, and to \$50.00 per day the amount that may be reimbursed in the case of out-patient treatment.

The amount that may be reimbursed for hemodialysis treatments would be \$220.00 per treatment.

The impact that these measures are expected to have on the public is to increase hospital insurance premiums for stays abroad.

Further information may be obtained from Marie-Andrée Pelletier, Régie de l'assurance-maladie du Québec, 1125, chemin Saint-Louis, Sillery (Québec), G1S 1E7, tel.: (418) 682-5172, fax: (418) 643-7312.

Any interested person having comments to make on the draft regulation is asked to send them in writing, before the expiry of the 45-day period, to the undersigned, Ministère de la Santé et des Services sociaux, 1075, chemin Sainte-Foy, 15<sup>e</sup> étage, Québec (Québec), G1S 2M1.

JEAN ROCHON,  
*Minister of Health  
and Social Services*

## Regulation to amend the Regulation respecting the application of the Hospital Insurance Act

Hospital Insurance Act  
(R.S.Q., c. A-28, s. 8)

**1.** The Regulation respecting the application of the Hospital Insurance Act (R.S.Q., 1981, c. A-28, r. 1), amended by the Regulations made by Orders in Council 1036-82 dated 28 April 1982 (Suppl., p. 80), 1180-82 dated 19 May 1982 (Suppl., p. 81), 1490-82 dated 23 June 1982 (Suppl., p. 82), 1314-83 dated 22 June 1983, 1523-83 dated 2 August 1983, 1321-84 dated 6 June 1984, 1768-84 dated 8 August 1984, 197-86 dated 26 February 1985, 1257-87 dated 12 August 1987, 1981-88 dated 21 December 1988, 113-90 dated 31 January 1990, 1100-90 dated 1 August 1990, 668-91 dated 15 May 1991, 696-91 dated 22 May 1991, 744-91 dated 29 May 1991, 498-92 dated 1 April 1992, 315-93 dated 10 March 1993 and 1379-95 dated 18 October

1995, and amended by the indexation applied pursuant to the second paragraph of section 15 of that Regulation, is further amended, in section 15:

(1) by substituting the amount "\$100.00" for the amount "\$509.00" and by substituting "\$50.00 per day" for "\$61.00 per visit" in subparagraph *a* of the first paragraph;

(2) by inserting the following after subparagraph *a* of the first paragraph:

“(a.1) for a hemodialysis treatment, the price of the service, up to the amount of \$220.00 per treatment including medications;” and

(3) by striking out the second paragraph.

**2.** Any resident who left Canada before 1 September 1996 and claims a reimbursement for insured services received during his stay outside Canada in a hospital centre situated outside Canada is governed by section 15 of the Regulation respecting the application of the Hospital Insurance Act as it read before that date.

**3.** This Regulation comes into force on 1 September 1996.

9822

## Draft Regulation

An Act respecting collective agreement decrees  
(R.S.Q., c. D-2)

### Men's Clothing — Amendments

Notice is hereby given, in accordance with the Act respecting collective agreement decrees (R.S.Q., c. D-2), that the Men's Clothing Parity Committee, following its meeting of 25 March 1996, has petitioned the Minister of Labour to recommend to the Government that it approve the Regulation to amend the Levy Regulation of the Men's Clothing Parity Committee. In accordance with sections 10 and 11 of the Regulations Act (R.S.Q., c. R-18.1), the Regulation, the text of which appears below, may be made by the Government at the expiry of the 45 days from this publication.

The purpose of this draft regulation is to reduce the rate of the levy now in effect for employers and employees governed by the Decree respecting the men's clothing industry.