

Gouvernement du Québec

O.C. 1521-96, 4 December 1996

An Act respecting the Régie de l'assurance-maladie du Québec
(R.S.Q., c. R-5)

Submission of document by electronic data processing or telecommunication
— Amendments

By-law to amend the By-law respecting the conditions for submitting a document to the Régie de l'assurance-maladie du Québec by means of an electronic data processing system or by telecommunication

WHEREAS under section 16.1 of the Act respecting the Régie de l'assurance-maladie du Québec (R.S.Q., c. R-5), the Board may authorize a person who submits to the Board a notice, report, declaration, statement of fees, claim for payment, statement of account or any other document to do so by means of an electronic data processing system or by telecommunication, on the conditions it determines by by-law, according to the classes of documents indicated therein;

WHEREAS under the same provision, such a by-law must be approved by the Government to come into force;

WHEREAS on 1 June 1994, the Régie de l'assurance-maladie du Québec made the By-law respecting the conditions for submitting a document to the Régie de l'assurance-maladie du Québec by means of an electronic data processing system or by telecommunication and it was approved by Order in Council 534-95 dated 12 April 1995;

WHEREAS on 7 November 1996, the Régie de l'assurance-maladie du Québec made the By-law to amend the By-law respecting the conditions for submitting a document to the Régie de l'assurance-maladie du Québec by means of an electronic data processing system or by telecommunication;

WHEREAS under section 12 of the Regulations Act (R.S.Q., c. R-18.1), a proposed regulation may be approved without having been published as prescribed in section 8 of that Act if the authority approving it is of the opinion that the urgency of the situation requires it;

WHEREAS under section 18 of that Act, a regulation may come into force on the date of its publication in the *Gazette officielle du Québec* or between that date and

the date applicable under section 17 of that Act, where the authority that has approved it is of the opinion that the urgency of the situation requires it;

WHEREAS under sections 13 and 18 of that Act, the reason justifying the absence of prior publication and such coming into force shall be published with the regulation;

WHEREAS, in the opinion of the Government, the urgency due to the following circumstances justifies the absence of prior publication and such a coming into force:

— the proposed regulatory provisions are necessary for the implementation as of 1 January 1997 of the basic prescription drug insurance plan established by the Act respecting prescription drug insurance and amending various legislative provisions (1996, c. 32);

WHEREAS it is expedient to approve that By-law;

IT IS ORDERED, therefore, upon the recommendation of the Minister of Health and Social Services:

THAT the By-law to amend the By-law respecting the conditions for submitting a document to the Régie de l'assurance-maladie du Québec by means of an electronic data processing system or by telecommunication, attached to this Order in Council, be approved.

MICHEL CARPENTIER,
Clerk of the Conseil exécutif

By-law to amend the By-law respecting the conditions for submitting a document to the Régie de l'assurance-maladie du Québec by means of an electronic data processing system or by telecommunication

An Act respecting the Régie de l'assurance-maladie du Québec
(R.S.Q., c. R-5, s. 16.1)

1. The By-law respecting the conditions for submitting a document to the Régie de l'assurance-maladie du Québec by means of an electronic data processing system or by telecommunication, made by Order in Council 534-95 dated 12 April 1995 and amended by the By-law made by Order in Council 504-96 dated 24 April 1996, is further amended by adding the following before section 1:

“DIVISION I

AUTHENTICATED APPLICATION FOR RENEWAL OF REGISTRATION OR FOR REPLACEMENT OF A HEALTH INSURANCE CARD”.

2. Section 1 is amended by substituting the words “by this Division” for the words “by this By-law”.

3. The By-law is amended by inserting the following after section 6:

“DIVISION II

PHARMACIST’S STATEMENT OF FEES OR CLAIM FOR PAYMENT

6.1 The transmitting of a pharmacist’s statement of fees or claim for payment by interactive electronic means, in accordance with the third paragraph of section 22.1.0.1 of the Health Insurance Act (R.S.Q., c. A-29; 1996, c. 32, s. 95), must be done in accordance with the conditions determined in this Division.

6.2 The pharmacist must be authorized by the Board to transmit a statement of fees or a claim for payment to the Board by interactive electronic means. The interactive communication system shall consist in a telecommunication exchange between the pharmacist and the Board at the time of the provision of the insured service. In communicating with the Board by interactive electronic means, the pharmacist must use the identification code assigned to him by the Board.

The pharmacist is responsible for any transmission sent by interactive electronic means with his identification code by any user of his billing system in the pharmacy, and for any ensuing payment that is claimed or received.

6.3 To be authorized by the Board to send his statements of fees or his claims for payment to the Board in such manner, a pharmacist must make a request by completing a form supplied by the Board and in which:

(1) he demonstrates that he uses billing software recognized by the Board and enabling him to access the Board’s interactive communication system;

(2) he acknowledges that the transmitting to the Board, by interactive electronic means, of a statement of fees or a claim for payment with his identification code has the same legal effect as if the transmitting were done by means of a written document that he himself signed;

(3) he acknowledges that the Board’s reproducing on paper of information reflecting the accepted data processing transaction attests to its content for billing and payment purposes.

6.4 A pharmacist who changes his billing software must, before using it, so inform the Board in order to enable the Board to indicate to him whether the software will enable him to access the Board’s interactive communication system.

6.5 The following information, corresponding to the identification and transmission coordinates, must accompany each transaction:

(1) the Board’s identification number in the interactive communication system;

(2) the number of the version used of the Canadian Pharmaceutical Association’s (CPhA) claim standard;

(3) the software developer’s identification number;

(4) the version number of the software used in the pharmacy;

(5) the pharmacy number;

(6) a control number identifying each claim for payment or statement of fees submitted to the Board;

(7) a transaction code.”.

4. A pharmacist who, from 1 January 1997, must transmit his statements of fees or his claims for payment to the Board by interactive electronic means must file his application prior to 13 December 1996.

5. This By-law comes into force on the date of its publication in the *Gazette officielle du Québec*.

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Gouvernement du Québec

O.C. 1522-96, 4 December 1996

Health Insurance Act
(R.S.Q., c. A-29)

**Forms and statement of fees
— Amendments**

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

WHEREAS under subparagraph *a* of the first paragraph of section 72 of the Health Insurance Act (R.S.Q., c. A-29), the Régie de l’assurance-maladie du Québec may make regulations to prescribe the content of the statement of fees or of any other form of the Board which may or must be used by a professional in the field of health, a beneficiary, a resident or deemed resident of Québec, an institution or a laboratory;