

Draft Regulations

Draft Regulation

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

Devices that compensate for a physical deficiency — Amendment

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 devices which compensate for a physical deficiency and are insured under the Health Insurance Act, appearing below, may be made by the Government on the expiry of 45 days following this publication.

The draft Regulation amends the Regulation respecting devices which compensate for a physical deficiency and are insured under the Health Insurance Act (A-29, r. 0.03) in order to allow an institution or laboratory to send to the Régie de l'assurance maladie du Québec a claim for payment through an online transmission service. The draft Regulation also allows to remove the obligation requiring an institution or laboratory to sign an agreement with the Régie de l'assurance maladie du Québec prior to rendering an insured service.

The proposed amendments contained in the draft Regulation will have a positive impact on institutions and laboratories, since the introduction of an online billing mechanism will accelerate the processing of claims for payment.

Further information may be obtained by contacting Nancy Vallée, Ministère de la Santé et des Services sociaux; telephone: 418 266-8827; fax: 418 266-6854; e-mail: nancy.vallee@msss.gouv.qc.ca

Any person wishing to comment on the draft Regulation is requested to submit written comments within the 45-day period to the undersigned, the Minister of Health and Social Services and the Minister for Social Services, 1075, chemin Sainte-Foy, 15^e étage, Québec (Québec) G1S 2M1.

YVES BOLDUC,
*Minister of Health and
Social Services*

DOMINIQUE VIEN,
Minister for Social Services

Regulation to amend the Regulation respecting devices which compensate for a physical deficiency and are insured under the Health Insurance Act*

Health Insurance Act
(R.S.Q., c. A-29, s. 3, 5th and 9th pars., and s. 69, 1st par., subpar. h)

1. The Regulation respecting devices which compensate for a physical deficiency and are insured under the Health Insurance Act is amended in section 13 by replacing the first paragraph by the following:

“**13.** Any device appearing on the list in Division II of Part II of the Tariff that is no longer used by an insured person owing to the person's death or that has been replaced owing to a change in the person's physical condition must be returned to an institution that operates a rehabilitation centre offering technical aid services for persons with motricity impairment and that holds a permit issued by the Minister under section 437 of the Act respecting health services and social services (R.S.Q., c. S-4.2) or section 136 of the Act respecting health services and social services for Cree Native persons (R.S.Q., c. S-5).”

2. Section 26 is amended by replacing subparagraph 2 of the second paragraph by the following:

“(2) a general practitioner or a physician specializing in pediatrics who holds specific privileges for that purpose in a hospital or in a rehabilitation centre that offers technical aid services for persons with motricity impairment and is operated by an institution holding a permit issued by the Minister under section 437 of the Act respecting health services and social services or section 136 of the Act respecting health services and social services for Cree Native persons, or whose designation by the agency has been approved by the Minister of Health and Social Services in accordance with section 29.”

* The Regulation respecting devices which compensate for a physical deficiency and are insured under the Health Insurance Act, made by Order in Council 612-94 dated 27 April 1994 (1994, G.O. 2, 1589), was last amended by decision 001-2009 dated 12 March 2009 (2009 G.O. 2, 578). For previous amendments, refer to the *Tableau des modifications et Index sommaire*, Québec Official Publisher, 2010, updated to 1 October 2010.

3. Section 27 is amended

(1) by replacing subparagraph 1 of the first paragraph by the following:

“(1) in the case of a device that appears on one of the lists in Part I of the Tariff where it is furnished to an insured person in Québec by an institution in a hospital or in a rehabilitation centre offering technical aid services for persons with motricity impairment or by a laboratory, provided that the institution that operates the hospital or rehabilitation centre or the laboratory, as the case may be, holds a permit issued by the Minister under section 437 of the Act respecting health services and social services, section 136 of the Act respecting health services and social services for Cree Native persons or section 31 of the Act respecting medical laboratories, organ, tissue, gamete and embryo conservation, and the disposal of human bodies (R.S.Q. c. L-0.2), or where it is furnished to an insured person outside Québec by an institution or laboratory recognized under section 13 of the Health Insurance Act;”;

(2) by replacing subparagraph 2 of the first paragraph by the following:

“(2) in the case of a device that appears on one of the lists in Part II of the Tariff where it is furnished to an insured person in Québec by an institution in a hospital or in a rehabilitation centre offering technical aid services for persons with motricity impairment, provided that the institution that operates the hospital or the rehabilitation centre holds a permit issued by the Minister under section 437 of the Act respecting health services and social services or section 136 of the Act respecting health services and social services for Cree Native persons, or where it is furnished to an insured person outside Québec by an institution recognized under section 13 of the Health Insurance Act.”.

4. Section 29 is replaced by the following:

“**29.** In regions where there is no hospital or rehabilitation centre offering technical aid services for persons with motricity impairment, an institution that operates a rehabilitation centre for persons with motricity impairment or a hospital in which there is a practising general practitioner who is empowered to attest to the needs of persons with motricity impairment and who holds specific privileges for that purpose, or in which there is a physician specializing in pediatrics who meets the same requirements, may receive a designation by the agency that is approved by the Minister of Health and Social Services pursuant to sections 347 and 377 and subparagraphs 1

to 3 and 7 of the second paragraph of section 431 of the Act respecting health services and social services, for the purposes of subparagraph 2 of the second paragraph of section 26.”.

5. The following is inserted after section 34.1:

“**34.2.** The Board assumes the cost of a service as well as the cost of the purchase, replacement, fitting or repair of a device or other equipment referred to in this Title only if the institution or laboratory sends to the Board, using the form provided by the Board, the following information, which may vary depending on the medium used or depending on whether the reference “S.C.” appears in place of the purchase or replacement price or the case involves a claim for payment:

(1) the health insurance number, the expiration date indicated on the health insurance card and the information required by the Board to identify the insured person who benefited from the property or service;

(2) the name, permit number and dispenser number of the institution or laboratory, and the prescriber number and the reference number of the claim concerning a device, component or supplement for which the reference “S.C.” appears in place of its purchase or replacement price or of the claim for payment;

(3) a description of the insured person’s physical deficiency and disability, and the information provided for, as the case may be, in sections 4, 23 and 27;

(4) the code of the good or service, side of the body, type, the number of units, the amount claimed, the serial number, the date on which the property was allocated or the service rendered and, in the case of a repair, fitting, replacement or adjustment, the reason therefor, the date of taking possession, the reference code for the property and the manufacturer’s authorization number;

(5) a statement of the labour costs, including the duration of the work and a list of the materials;

(6) a statement by the insured person confirming that the person received the property or service described and authorizing the Board to make the payment;

(7) the necessary information for identifying the recipient of the payment; and

(8) a statement by the person in charge of the institution or laboratory confirming that the information provided is accurate and complete.”.

6. Section 57 is amended by replacing the second paragraph by the following:

“Furthermore, a device that is no longer used by an insured person owing to the person’s death or a change in the person’s physical condition must be returned to an institution that operates a rehabilitation centre offering technical aid services for persons with motricity impairment and that holds a permit issued by the Minister under section 437 of the Act respecting health services and social services or section 136 of the Act respecting health services and social services for Cree Native persons.”.

7. Section 68 is amended by replacing subparagraph 2 of the second paragraph by the following:

“(2) a general practitioner or a physician specializing in pediatrics who holds specific privileges for that purpose in a hospital or in a rehabilitation centre that offers technical aid services for persons with motricity impairment and is operated by an institution holding a permit issued by the Minister under section 437 of the Act respecting health services and social services or section 136 of the Act respecting health services and social services for Cree Native persons, or whose designation by the agency has been approved by the Minister of Health and Social Services in accordance with section 71;”.

8. Section 69 is replaced by the following:

“**69.** In addition to the condition set forth in section 68, the Board assumes the cost of purchase, adjustment, replacement or repair of a device that is determined to be insured or of one or a combination of its components or supplements, where the device, component or supplement, or the service, is furnished to an insured person in Québec by an institution in a hospital or a rehabilitation centre offering technical aid services for persons with motricity impairment, provided that the institution that operates the hospital or the rehabilitation centre holds a permit issued by the Minister under section 437 of the Act respecting health services and social services or section 136 of the Act respecting health services and social services for Cree Native persons, or where it is furnished to an insured person outside Québec by an institution that is recognized under section 13 of the Health Insurance Act.”.

9. Section 71 is replaced by the following:

“**71.** In regions where there is no hospital or rehabilitation centre offering technical aid services for persons with motricity impairment, an institution that operates a rehabilitation centre for persons with motricity impairment or a hospital in which there is a practising general practitioner or a practising physician specializing in pediatrics who is empowered to attest to the needs of persons

with motricity impairment and who holds specific privileges in that rehabilitation centre or hospital for that purpose may receive a designation by the agency that is approved by the Minister of Health and Social Services pursuant to sections 347 and 377 and subparagraphs 1 to 3 and 7 of the second paragraph of section 431 of the Act respecting health services and social services, for the purposes of subparagraph 2 of the second paragraph of section 68.”.

10. The following is inserted after section 75:

“**75.1.** The Board assumes the cost of a service as well as the cost of the purchase, replacement, adjustment, repair or adaptation of a device, component or supplement referred to in this Title only if the institution sends to the Board, using the form provided by the Board, the following information, which may vary depending on the medium used or depending on whether the reference “S.C.” appears in place of the purchase or replacement price or the case involves a request for prior authorization or a claim for payment:

(1) the health insurance number, the expiration date entered on the health insurance card and the information required by the Board in order to identify the insured person who received the property or service;

(2) the name, the permit number and the dispenser number of the institution, and the prescriber number and the reference number of the claim for payment for a device, component or supplement for which the reference “S.C.” appears in place of its purchase or replacement price, of the request for prior authorization or of the claim for payment;

(3) a description of the insured person’s physical deficiency and disability, and the information provided for in section 62;

(4) the code for the good or service, side of the body, type, the number of units, the amount claimed, the serial number, the date on which the property was allocated or the service rendered and, in the case of a repair, fitting, replacement or adjustment, the reason therefor, the date of taking possession, the reference code for the property and the manufacturer’s authorization number;

(5) a statement of the labour costs, including the duration of the work and a list of the materials;

(6) a statement by the insured person confirming that the person received the property or service described and authorizing the Board to make payment;

(7) the necessary information for identifying the recipient of the payment; and

(8) a statement by the person in charge of the institution confirming that the information provided is accurate and complete.”.

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

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Draft Regulation

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

Forms and statements of fees — Amendment

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 forms and statements of fees under the Health Insurance Act, appearing below, may be approved by the Government on the expiry of 45 days following this publication.

The draft Regulation amends the Regulation respecting forms and statements of fees under the Health Insurance Act (A-29, r. 2) in order to allow an institution, laboratory, distributor or hearing aid acoustician to send to the Régie de l'assurance maladie du Québec a claim for payment or reimbursement through an online transmission service.

The proposed amendments contained in the draft Regulation will have a positive impact on institutions, laboratories, distributors and hearing aid acousticians, since the introduction of an online billing mechanism will accelerate the processing of claims for payment or reimbursement.

Further information may be obtained by contacting Nancy Vallée, Ministère de la Santé et des Services sociaux; telephone: 418 266-8827; fax: 418 266-6854; e-mail: nancy.vallee@msss.gouv.qc.ca

Any person wishing to comment on the draft Regulation is requested to submit written comments within the 45-day period to the undersigned, the Minister of Health and Social Services and the Minister for Social Services, 1075, chemin Sainte-Foy, 15^e étage, Québec (Québec) G1S 2M1.

YVES BOLDUC,
*Minister of Health
and Social Services*

DOMINIQUE VIEN,
Minister for Social Services

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, 1st par., subpar. a)

1. The Regulation respecting forms and statements of fees under the Health Insurance Act is amended in section 11 by striking out paragraphs 3 and 5.

2. Section 14 of the Regulation is repealed.

3. Forms 19, 20, 21 and 30 appearing as a Schedule to the Regulation are struck out.

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

1397

Draft Regulation

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

Hearing devices and insured services — Amendment

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 hearing devices and insured services, appearing below, may be made by the Government on the expiry of 45 days following this publication.

The draft Regulation amends the Regulation respecting hearing devices and insured services (A-29, r. 0.02) in order to allow a distributor, hearing aid acoustician or institution to send to the Régie de l'assurance maladie du Québec a claim for payment through an online transmission service. The draft Regulation also allows to remove the obligation requiring a distributor, hearing aid acoustician or institution to sign an agreement with the Régie de l'assurance maladie du Québec prior to rendering an insured service.

* The Regulation respecting forms and statements of fees under the Health Insurance Act (R.R.Q., 1981, c. A-29, r. 2) was last amended by the regulation approved by Order in Council 553-2001 dated 9 May 2001 (2001, G.O. 2, 2219). For previous amendments, refer to the *Tableau des modifications et Index sommaire*, Québec Official Publisher, 2010, updated to 1 October 2010.