Regulations and other Acts

Gouvernement du Québec

O.C. 556-2023, 22 March 2023

CONCERNING the amendment to the COVID-19 Selftest Distribution Program

WHEREAS, under paragraph h of section 3 of the Act respecting the Ministère de la Santé et des Services sociaux (chapter M-19.2), the Minister of Health shall in particular promote the development and implementation of programs and services according to the needs of individuals, and families and other groups;

WHEREAS, under the first paragraph of section 2 of the Act respecting the Régie de l'assurance maladie du Québec (chapter R-5), the function of the Board (Régie) is to administer and implement the programs of the health insurance plan instituted by the Health Insurance Act (chapter A-29) and any other program entrusted to it by law or by the Government;

WHEREAS, under the fifteenth paragraph of section 3 of the Health Insurance Act, the Board also assumes the cost of services and goods provided under the programs it administers by virtue of the first paragraph of section 2 of the Act respecting the Régie de l'assurance maladie du Québec according to the conditions and methods provided for under those programs;

WHEREAS, under the first paragraph of section 2.1 of the Act respecting the Régie de l'assurance maladie du Québec, the Board is to recover, from the Ministère de la Santé et des Services sociaux or body concerned, the cost of services and goods it assumes under a program entrusted to it by law or by the Government, to the extent provided for under that program;

WHEREAS, under Order in Council 1539-2021 dated 14 December 2021, the Government of Québec entrusted the Board with the COVID-19 Self-test Distribution Program attached to that Order in Council;

WHEREAS, under Order in Council 319-2022 dated 16 March 2022, the Government has extended the term of this Program to 31 March 2023;

Whereas it is expedient to further amend this Program;

IT IS ORDERED, therefore, on the recommendation of the Minister of Health:

THAT the COVID-19 Self-test Distribution Program entrusted to the Régie de l'assurance maladie du Québec by way of Order in Council 1539-2021 dated 14 December 2021 and amended by the Order in Council 319-2022 dated 16 March 2022, be further amended:

- 1° in the second paragraph of section 1:
- a) by replacing "to be entered into" with "entered into";
- b) by striking out "and Social Services";
- c) by inserting, after "COVID-19", "and its subsequent amendments";
 - 2° by replacing section 2 with the following:
- "2. The self-tests covered by this Program are supplied by a pharmacist, with no prescription required, to any persons eligible because they meet one of the eligibility conditions for the program listed in Schedule A or because they qualify in one of the categories for economically vulnerable categories identified in Schedule B.

The Minister of Health may agree at any time, in an agreement with the Board, to amend the eligibility conditions listed in Schedule A, in particular to reflect the recommendations made by the Institut national d'excellence en santé et en services sociaux, or to amend the categories of economically vulnerable persons identified in Schedule B.";

- 3° in section 3:
- a) by replacing, wherever it is found, "Schedule A" with "Schedule C";
 - b) by striking out "and Social Services";
- 4° by replacing "Schedule A" with "Schedule C" in section 4;
 - 5° by striking out "and Social Services" in section 5;
 - 6° by striking out "and Social Services" in section 10;
- 7° by adding "in the second paragraph of section 2" after "under" in section 11;

- 8° by replacing "2023" with "2024" in section 12;
- 9° by adding, before of Schedule A, the following:

"SCHEDULE A – Eligibility conditions for the program

- a) Unvaccinated or partially vaccinated (incomplete primary vaccination) persons at high risk of COVID-19 complications due to any of the following conditions:
- —persons aged 18 years and over with severe immunosuppression, regardless of vaccination status;
 - -persons aged 60 years and over;
- —persons aged 18 years and over with at least one of the following conditions:
 - -hemoglobinopathy;
 - -chronic renal failure;
 - -chronic hepatic failure;
 - -obesity (increased risk with BMI \geq 35);
 - -diabetes (increased risk if not controlled);
 - high blood pressure (increased risk if not controlled);
 - -atherosclerotic cardiovascular disease;
 - -NYHA functional class II to IV heart failure;
- -chronic pulmonary disease (e.g., COPD, moderate to severe asthma);
- b) persons aged 18 and over with complete primary vaccination at high risk of complications, based on clinical judgment (e.g., very old age [70+] and/or multiple comorbidities and anticipation of suboptimal protection from hospitalization due to the circulating variant, despite a complete primary vaccination or a last dose of vaccine received more than six months ago);
- c) pregnant women with at least one of the risk factors listed below and incomplete primary vaccination or anticipation of suboptimal protection from hospitalization due to the circulating variant, despite a complete primary vaccination or a last dose of vaccine received more than six months ago, and after discussion with an experienced specialist or colleague:
 - -severe immunosuppression;
 - hemoglobinopathy;
 - -chronic renal failure;
 - -chronic hepatic failure;

- -obesity (increased risk with BMI ≥ 35);
- -diabetes (increased risk if not controlled);
- -high blood pressure (increased risk if not controlled);
- -atherosclerotic cardiovascular disease:
- -NYHA functional class II to IV heart failure;
- -chronic pulmonary disease (e.g., moderate to severe asthma);
- d) youth weighing 40 kg or more with at least one of the risk factors listed below and incomplete primary vaccination or anticipation of suboptimal protection from hospitalization due to the circulating variant, despite a complete primary vaccination or a last dose of vaccine received more than six months ago, and after discussion with an experienced specialist or colleague:
 - -severe immunosuppression;
 - -hemoglobinopathy;
 - -chronic renal failure;
 - -chronic hepatic failure;
 - -obesity (increased risk with BMI \geq 35);
 - –diabetes (increased risk if not controlled);
 - -high blood pressure (increased risk if not controlled);
 - -atherosclerotic cardiovascular disease;
 - -NYHA functional class II to IV heart failure;
- -chronic pulmonary disease (e.g., moderate to severe asthma).

For the purposes of the application of this Schedule, severely immunocompromised includes persons who have:

- —undergone a solid-organ transplant with immunosuppressive treatments or other disease treated with two immunosuppressants (e.g., antimetabolites + calcineurin inhibitors);
- —anti-B cell therapy (monoclonal antibodies targeting CD19, CD20, CD22, CD30 and BAFF, e.g., ocrelizumab, rituximab, ofatumumab, alemtuzumab, obinutuzumab, blinatumomab, daratumumab, basiliximab, brentuximab, belimumab, anti-thymocyte globulins);
- —chimeric antigen receptor (CAR) T-cell therapy or hematopoietic stem cell transplant until complete immune reconstitution;

- —primary immunodeficiency on intravenous (IVIG) or subcutaneous (SCIG) non-specific human immunoglobulin replacement therapy (e.g., common variable immunodeficiency, combined immunodeficiency);
- —active treatment for solid tumour or hematological cancer deemed highly immunosuppressive by the treating physician; some targeted biologic therapies are not considered immunosuppressive;
- —untreated stage 3 or advanced human immunodeficiency virus infection or persons with acquired immunodeficiency syndrome (CD4 T cells count less than 200);
- —an alkylating agent in the treatment of rheumatological disease (e.g., cyclophosphamide);
- —treatment with a high dose corticosteroid (i.e., at least 20 mg/day of prednisone, or equivalent) and for at least three weeks;
- —any other condition that results in severe immunosuppression as deemed by the treating physician (e.g., certain untreated hematological or thymic neoplasia).

For the purposes of the application of this Schedule, are not considered as severe immunosuppressed and at very high risk of adverse outcomes, persons taking an immunomodulator (e.g., hydroxychloroquine) or a biotherapy directed against a specific inflammatory mediator or its receptor (such as TNFα, IL-1, IL-6, IL-17/23, integrins) as well as a Janus kinase inhibitor used as monotherapy or a corticosteroid therapy considered non-immunosuppressive or an antimetabolite monotherapy such as methotrexate or a combination of immunosuppressants for which the risk of COVID-19 complications is considered not significant (e.g., combination of biotherapies directed against specific inflammatory mediators or their receptors, combination of methotrexate and biotherapy directed against a specific inflammatory mediator or its receptor).

SCHEDULE B – Categories of economically vulnerable persons

- a) any persons exempted from the payment of any contribution required under section 29 of the Act respecting prescription drug insurance (chapter A-29.01);
- b) any children within the meaning of paragraph 1 of section 17 of that Act who is required to join a group insurance contract or employee benefit plan that is applicable to a group with private coverage within the meaning of section 15.1 of that Act.";

10° by replacing "SCHEDULE A" with the following:

"SCHEDULE C – List of self-tests covered by this Program";

THAT this Order in Council comes into effect on 15 May 2023, with the exception of subparagraph 8 of the first operative paragraph, which comes into effect on 22 March 2023.

YVES OUELLET Clerk of the Conseil exécutif

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Gouvernement du Québec

O.C. 557-2023, 22 March 2023

CONCERNING the amendment to the Community Pharmacy Access Program for Certain COVID-19 and Influenza Pharmaceutical Treatments

WHEREAS, under paragraph h of section 3 of the Act respecting the Ministère de la Santé et des Services sociaux (chapter M-19.2), the Minister of Health shall in particular promote the development and implementation of programs and services according to the needs of individuals, and families and other groups;

Whereas, under the first paragraph of section 2 of the Act respecting the Régie de l'assurance maladie du Québec (chapter R-5), the function of the Board (Régie) is to administer and implement the programs of the health insurance plan instituted by the Health Insurance Act (chapter A-29) and any other program entrusted to it by law or by the Government;

WHEREAS, under the fifteenth paragraph of section 3 of the Health Insurance Act, the Board also assumes the cost of services and goods provided under the programs it administers by virtue of the first paragraph of section 2 of the Act respecting the Régie de l'assurance maladie du Québec according to the conditions and methods provided for under those programs;

Whereas, under the first paragraph of section 2.1 of the Act respecting the Régie de l'assurance maladie du Québec, the Board is to recover, from the Ministère de la Santé et des Services sociaux or body concerned, the cost of services and goods it assumes under a program entrusted to it by law or by the Government, to the extent provided for under that program;