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# NATIONAL ASSEMBLY

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FIRST SESSION

FORTY-FIRST LEGISLATURE

Bill 491

**An Act to put an end to accessory costs  
by amending various legislative  
provisions**

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**Introduction**

**Introduced by  
Madam Diane Lamarre  
Member for Taillon**

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## **EXPLANATORY NOTES**

*This bill amends the Health Insurance Act to specify that no payment may be charged to any insured person, directly or indirectly, for costs incurred for insured services provided by a physician.*

*In particular, it prohibits directly or indirectly requiring payment for access to an insured service.*

*The bill increases the fines applicable to health professionals who fail to comply with the provisions governing the remuneration and billing of medical services.*

*The bill permits the Régie de l'assurance maladie du Québec (Board) to notify, using any means it considers appropriate, insured persons of their right to be reimbursed for amounts paid to health professionals or third persons in contravention of the Health Insurance Act.*

*In addition, the deadline for submitting applications for reimbursement to the Board is extended to three years.*

*The Board is now also permitted to inform health professionals and third persons that they have received payment from an insured person in contravention of the Health Insurance Act, and to recover such amounts and the administrative costs prescribed, regardless of whether they have been reimbursed.*

*The bill amends the Act respecting the Régie de l'assurance maladie du Québec to give the Board the power to sue and be sued before the courts and to institute injunction proceedings for the purposes of the Act respecting the Régie de l'assurance maladie du Québec and the Health Insurance Act.*

*Under the bill, the Board's inspection and inquiry powers are increased.*

*Lastly, various consequential amendments are introduced.*

**LEGISLATION AMENDED BY THIS BILL:**

- Health Insurance Act (chapter A-29);
- Act respecting the Régie de l'assurance maladie du Québec (chapter R-5);
- Act respecting health services and social services (chapter S-4.2).



# Bill 491

## AN ACT TO PUT AN END TO ACCESSORY COSTS BY AMENDING VARIOUS LEGISLATIVE PROVISIONS

THE PARLIAMENT OF QUÉBEC ENACTS AS FOLLOWS:

### HEALTH INSURANCE ACT

**1.** Section 22 of the Health Insurance Act (chapter A-29) is amended

(1) by replacing the ninth paragraph by the following paragraphs:

“No payment may be charged to or received from any insured person, directly or indirectly, for costs incurred for insured services provided by a physician. Such costs include those related to

(1) the operation of a private health facility or a specialized medical centre within the meaning of the Act respecting health services and social services (chapter S-4.2);

(2) services, supplies, medications and equipment required during the provision of an insured service;

(3) diagnostic tests performed in connection with the provision of an insured service.

In addition, directly or indirectly requiring an insured person to pay for access to an insured service, and granting an insured person privileged access to such a service in exchange for payment are prohibited.”;

(2) by replacing “\$1,000 to \$2,000” and “to a fine of \$2,000 to \$5,000” in the twelfth paragraph by “\$5,000 to \$50,000” and “the minimum and maximum fines are doubled”, respectively;

(3) by replacing “eleventh” and “ninth” in the twelfth paragraph by “twelfth” and “ninth or tenth”, respectively.

**2.** Section 22.0.0.1 of the Act is amended

(1) by striking out “services, supplies or accessory costs prescribed or provided for in an agreement that the physician may charge an insured person, in accordance with the ninth paragraph of section 22, and the tariff of fees for” in the first paragraph;

(2) by striking out “any accessory services, supplies or costs and for” in the third paragraph;

(3) by replacing “first paragraph of section 22.0.1” in the fourth paragraph by “second paragraph of section 22.0.1”;

(4) by striking out the following sentence in the fifth paragraph: “This also applies to the accessory services, supplies and costs mentioned in the first paragraph.”;

(5) by replacing “\$500 to \$1,000” and “to a fine of \$1,000 to \$2,000” in the sixth paragraph by “\$2,500 to \$25,000” and “the minimum and maximum fines are doubled”, respectively;

(6) by replacing “\$1,000 to \$2,500” and “to a fine of \$2,000 to \$5,000” in the seventh paragraph by “\$5,000 to \$50,000” and “the minimum and maximum fines are doubled”, respectively.

**3.** Section 22.0.1 of the Act is amended by replacing the first and second paragraphs by the following paragraphs:

**“22.0.1.** Whenever the Board believes that a professional in the field of health or a third person has exacted payment from an insured person in contravention of this Act, where nothing in the regulations or agreements so permits, or has claimed an amount exceeding the amount that would have been paid by the Board to a health professional subject to the application of an agreement for insured services furnished to an insured person who failed to present his health insurance card, claim booklet or eligibility card, the Board shall notify the insured person, using any means it considers appropriate, that he is entitled to reimbursement of the amount so paid.

The Board shall reimburse the insured person for the amount paid if the insured person applies for a reimbursement in writing within three years of the date of payment.

The Board shall notify the professional in the field of health or third person in writing that the health professional or third person has received payment from an insured person in contravention of this Act. The Board shall recover that amount and the administrative costs prescribed, by compensation or otherwise, on the expiry of a period of 30 days from the date of the notice regardless of whether they have been reimbursed under the second paragraph.”

**4.** Section 31 of the Act is amended by replacing “\$1,000 to \$2,000” and “to a fine of \$2,000 to \$5,000” in the second paragraph by “\$5,000 to \$50,000” and “the minimum and maximum fines are doubled”, respectively.

## ACT RESPECTING THE RÉGIE DE L'ASSURANCE MALADIE DU QUÉBEC

**5.** Section 2 of the Act respecting the Régie de l'assurance maladie du Québec (chapter R-5) is amended by adding the following paragraph at the end:

“In exercising its powers, the Board may sue and be sued before the courts. It may, in particular, institute injunction proceedings against any person whose actions contravene a provision of this Act or of the Health Insurance Act, in order to cause such actions to cease.”

**6.** Section 20 of the Act is amended by inserting the following after the first paragraph:

“The Board or the persons it appoints as inspectors or investigators may, for instance,

(1) at any reasonable time, enter any premises where a professional in the field of health or provider of goods or insured services carries out duties or activities;

(2) require the persons present to provide, for examination or making copies, any information or document related to the duties or activities of the persons referred to in paragraph 1, including any information or document contained in the file of an insured person within the meaning of the Health Insurance Act.

Any person having custody, possession or control of the documents referred to in this section must make them available, on request, to the person conducting the inspection or inquiry and facilitate their examination.”

**7.** The Act is amended by inserting the following section after section 22.2:

“**22.3.** For the purposes of an inquiry, the Board may obtain personal information contained in an insured person's medical record. In such cases, the Board must ensure that the confidential nature of the medical record is respected.”

## ACT RESPECTING HEALTH SERVICES AND SOCIAL SERVICES

**8.** Section 19 of the Act respecting health services and social services (chapter S-4.2) is amended by inserting the following paragraph after paragraph 8:

“(8.1) to the Board or the persons it appoints as inspectors or investigators for the purposes of sections 20 and 22.3 of the Act respecting the Régie de l'assurance maladie du Québec (chapter R-5);”.

FINAL PROVISION

- 9.** This Act comes into force on (*insert the date of assent to this Act*).