THE QUÉBEC HEALTH INSURANCE PLAN

The Québec Health Insurance Plan, which was established on November 1, 1970, enables eligible persons who are registered with the Régie de l'assurance maladie du Québec to benefit from insured healthcare services and products.

WHO IS ELIGIBLE FOR THE HEALTH INSURANCE PLAN?

The persons eligible for the Québec Health Insurance Plan are those who are residents of Québec within the meaning of the *Health InsuranceAct* and who are present in Québec for at least 183 days per year. These persons consist primarily of:

- . Canadian citizens.
- . Permanent residents with the meaning of the *Immigration* and *Refugee Protection Act* (IRPA).
- . Persons registered as Indians within the meaning of the *Indian Act*.
- Protected persons within the meaning of the IRPA, specifically:
- persons to whom the Immigration and Refugee Board (IRB) has granted the status of refugee within the meaning of the Geneva Convention,
- persons whom the IRB has determined to be in need of protection under the Convention Against Torture,
- persons who have been granted protected person status as a result of a decision by the Minister responsible for the IRB following a pre-removal risk assessment;
- . Persons who, while in Canada, are authorized to submit an application for permanent residence under the IRPA.
- . Persons who hold a temporary resident permit issued by the Canadian immigration authorities for an eventual granting of permanent residence.

Certain temporary residents of Québec and, under certain conditions, their spouse and dependents, may be eligible for the Québec Health Insurance Plan if they meet the requirements of the regulatory provisions. These include:

. Persons who are in Québec mainly for work purposes and who hold an office or employment for more than six months.

- . Foreign nationals who are recipients of study or training scholarships from the ministère de l'Éducation du Québec.
- . Foreign nationals who are taking part in the federal Commonwealth Caribbean Seasonal Agricultural Workers Program or in the federal Mexican Seasonal Agricultural Workers Program.

Except in certain cases, residents of Québec or temporary residents of Québec become eligible for the plan after a waiting period of up to three months.

WHO REMAINS ELIGIBLE DESPITE A PROLONGED ABSENCE FROM QUÉBEC?

The following residents of Québec, as well as their spouse and dependents who accompany them, remain eligible for the Québec Health Insurance Plan even if they spend more than 183 days outside Québec per calendar year, as long as they notify the Régie of their absence:

- . Students enrolled in Québec or outside Québec at a recognized educational institution and pursuing a program of studies outside Québec (maximum duration: four consecutive calendar years).
- Persons taking full-time unpaid training with a university institution or a university-affiliated institution, with a research institute or a government or international body, or with a company affiliated with such an institute or such a body (maximum duration: two consecutive calendar years).
- . Québec government employees posted outside Québec.
- Persons holding temporary employment or carrying out a contract in another province (maximum duration: two consecutive calendar years).
- . Employees of a non-profit organization having its head office in Canada who work abroad within the scope of an international aid or cooperation program recognized by the Minister of Health and Social Services.
- . Persons holding employment or carrying out a contract outside Québec on behalf of a partnership or corporation to which they are directly accountable and which has its head office or a place of business in Québec.
- . Canadian government employees posted outside Québec.

. Self-employed workers who are carrying out a contract outside Québec.

Once every seven years, residents of Québec who are eligible for the Health Insurance Plan may spend more than 183 days outside Québec during the same calendar year and remain eligible for the plan.

WHO CEASES TO BE ELIGIBLE?

- Persons who leave Québec to take up residence in another province cease to be eligible for the Health Insurance Plan on the first day of the third month following the month during which they take up residence in the other province.
- . Persons who leave Québec to take up residence in another country cease to be eligible for the Health Insurance Plan on the date of their departure.
- Persons who spend 183 days or more outside Québec during a calendar year lose their eligibility for the Health Insurance Plan for that year (periods of 21 consecutive days or less are not counted). However, persons unable to return to Québec as a result of being hospitalized may remain eligible in certain cases. Contact the Régie for further information.

WHO IS NOT ELIGIBLE?

The following persons are not considered residents of Québec and are therefore not eligible for the Health Insurance Plan:

- . Visitors, tourists and transients.
- . Students from another province. They are covered by the health insurance plan of their province of origin.
- . Students from another country, except where a social security agreement has been concluded with their country.
- . Refugee claimants.

For further information about eligibility for the Health Insurance Plan, contact the Régie.

WHAT HEALTHCARE SERVICES AND PRODUCTS ARE INSURED?

Insured healthcare services and products include:

- . Medical services.
- . **Prescription drugs** listed on the *Liste de médicaments* (drug formulary), published by the Régie de l'assurance maladie. To be insured, persons registered for the Québec Health Insurance Plan must join a private prescription drug insurance plan if they are eligible for such a plan. If they are not, they must register for the public plan.
- Prescription drugs necessary for the treatment of STDs.
- Prescription drugs necessary for chemoprophylaxis or for the treatment of tuberculosis.
- . **Optometric services,** for persons under age 18, persons age 65 and over, persons who have been employment assistance recipients¹ for at least 12 months, and persons age 18 to 64 who are registered with a rehabilitation centre.
- **Dental services**, for children under age 10 and persons age 10 and over who have been employment assistance recipients for at least 12 months.
- . Certain **oral surgery services** received in hospitals or in university institutions, for persons of any age.
- **Acrylic dental prostheses**, for persons who have been income security recipients for at least 24 months.
- . Devices that compensate for physical disabilities.
- . Visual devices, for the visually impaired.
- . **Hearing devices**, for the hearing impaired.
- . **External breastforms**, for women who have undergone a total or radical mastectomy and for women age 14 and over who have a total absence of breast formation.
- . Ostomy appliances.
- Ocular prostheses, for persons who have undergone an enucleation or an evisceration.
- . **Healthcare services received outside Québec,** the cost of which is reimbursed at up to the current Québec rates.

1. Persons age 60 to 64 receiving a spouse's allowance under the Old Age Security Act and holding a valid carnet de réclamation (claim slip) issued by the ministère de l'Emploi, de la Solidarité sociale et de la Famille are also eligible. The Régie de l'assurance maladie also administers the following programs:

- . Financial assistance persons infected with the hepatitis ${\bf C}$ virus.
- . Financial contributions by accommodated adults.
- . Financial assistance for domestic help services.

For further details, consult the information pamphlets on the above subjects or contact the Régie.

HOW CAN I REGISTER FOR THE HEALTH INSURANCE PLAN OR HOW CAN I HAVE A CHILD REGISTERED FOR THE PLAN?

- . To register a newborn child, all you have to do is have your child's birth recorded with the Directeur de l'état civil and the child will be automatically registered with the Régie. After sending you written confirmation that your child's birth has been recorded in the Register of Civil Status, the Directeur de l'état civil then transmits to the Régie, in the strictest confidence, the information necessary for registering your child for the plan. After verifying the child's eligibility, the Régie issues the child's Health Insurance Card.
- . **To register a child born or adopted outside Québec**, you must call the Régie or visit one of the Régie's offices.
- . **If you are a newcomer to Québec**, you must call the Régie or visit one of the Régie's offices without delay, so as not to delay your eligibility for the plan.

HOW CAN I HAVE A LOST, STOLEN OR DAMAGED HEALTH INSURANCE CARD **REPLACED?**

- . To have your Health Insurance Card replaced, call the Régie or visit one of the Régie's offices.
- To have your Health Insurance Card AND your **Driver's Licence replaced**, go to a service outlet of the Société de l'assurance automobile du Québec and apply to have both your Health Insurance Card and your Driver's Licence replaced.

There is a fee for having your Health Insurance Card or Driver's Licence replaced.

HOW CAN I HAVE MY HEALTH INSURANCE **CARD RENEWED?**

If you live in Québec and are registered with the Régie, you will receive a Renewal Notice three months before your current Health Insurance Card expires.² If you are still eligible for the Health Insurance Plan, your Renewal *Notice* will enable you to renew your registration and obtain a new card.

As soon as you receive your Renewal Notice, check the deadline appearing on it. YOU MUST RENEW YOUR HEALTH INSURANCE CARD BEFORE THE DEAD-LINE IN ORDER TO RECEIVE YOUR NEW CARD ON TIME.

A fee is charged for the renewal of a card that has been expired for more than six months.

2. Certain foreign nationals must have their registration renewed by contacting the Régie or by going to one of the

persons who, while in Canada, are authorized to submit

an application for permanent residence under the Im-

persons who hold a temporary resident permit issued by

the Canadian immigration authorities for an eventual

Régie's offices. These include:

migration and Refugee Protection Act;

granting of permanent residence.

IN WHAT OTHER SITUATIONS MUST I **INFORM THE RÉGIE?**

It is important to inform the Régie of any change of address or any change in family situation. In addition, you must call the Régie in situations such as:

- . Change of address in Québec.
- . Marriage.
- Divorce or separation.
- . Adoption.
- Death outside Québec (the Directeur de l'état civil informs the Régie of deaths that occur within Québec).
- . Renewal of an expired card.
- Replacement of a card (other than a lost, stolen or damaged
- Extension of eligibility.
- . Correction of identity.
- . Departure from Québec.
- . Return to Québec.

is valid until the end of the month in which it expires.

It's up to you to check the expiry date.

IMPORTANT

Your Health Insurance Card is the property of the Régie de l'assurance maladie du Québec. It is prohibited to sell, lend, or give away a Health Insurance Card, under penalty of a fine. Your Health Insurance Card is for your exclusive use, and you are not allowed to have more than one.

You must present your card whenever you consult a health professional. If you do not, you will have to pay for the services you receive and then apply to the Régie for a reimbursement using a form supplied by the health professional.

Remember...

If you change your address, call us and let us know!

Your Health Insurance Card

The information in this pamphlet is neither exhaustive nor applicable in all cases, and does not have force of law.

HOW CAN I CONTACT THE RÉGIE?

By telephone

The Régie's Health Insurance Infoline keeps you informed 24 hours a day, 7 days a week:

Québec: 418 646-4636 Montréal: 514 864-3411

Elsewhere in Québec, toll-free: 1800 561-9749

During office hours, you can speak with an information clerk at the Régie's Service des opérations et des renseignements aux personnes assurées by calling one of the above numbers.

In person

1125, Grande Allée Ouest Québec (Québec)

425, boul. De Maisonneuve Ouest 3rd floor Montréal (Québec)

Office hours

Mondays, Tuesdays, Thursdays and Fridays from 8:30 a.m. to 4:30 p.m. and Wednesdays from 10:00 a.m. to 4:30 p.m.

By TDD

(telecommunication device for the deaf)

Québec: 418 682-3939

Elsewhere in Québec, toll-free: 1800 361-3939

By mail

Régie de l'assurance maladie du Québec Service des opérations et des renseignements aux personnes assurées PO Box 6600

Québec (Québec) G1K 7T3

You can visit the Régie on the Internet at the following address: www.ramq.gouv.qc.ca

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Régie de l'assurance maladie Be sure to let us know. THE **QUÉBEC HEALTH INSURANCE PLAN**



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