

To be entitled to healthcare services insured outside Québec by the Régie de l'assurance maladie, you:

- **must** be eligible for the Québec Health Insurance Plan;
- **must** hold a valid Health Insurance Card.

Persons subject to a waiting period (three months or less) are not covered for services they receive outside Québec during that period.

RESIDENTS OF QUÉBEC

Persons eligible for the Québec Health Insurance Plan as residents of Québec **must not** spend 183 days or more, consecutive or not, outside Québec per calendar year (January 1 to December 31) and **must** be able to supply proof to that effect. *Please note that periods of 21 consecutive days or less are not included in calculating the number of days of absence.*

Special cases

Residents of Québec who spend 183 days or more, consecutive or not, per calendar year outside Québec (in another province or a territory of Canada or abroad) remain eligible for the plan in the following situations:

- Students pursuing a study program at an educational institution outside Québec remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents, for not more than four consecutive calendar years.
- Persons taking full-time unpaid training with:
 - a university institution;
 - a university-affiliated institution;
 - a research institute;
 - a government or international body;

– a company or an organization affiliated with a research institute or with a government or international body;

remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents, for not more than two consecutive calendar years.

Persons taking full-time unpaid training or pursuing studies outside Québec must supply the Régie de l'assurance maladie du Québec with proof that they are enrolled in a recognized training period or study program.

- Persons holding employment or carrying out a contract outside Québec on behalf of a corporation, a company or a partnership to which they are directly accountable and which has its head office or a place of business in Québec, and Canadian government employees posted outside Québec, remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents.
- Self-employed workers whose place of business is in Québec and who are carrying out a contract outside Québec remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents.
- Persons spending time in another province or a territory of Canada to hold temporary employment or to carry out a contract remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents, for not more than 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 remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents.

- Québec government employees posted outside Québec remain eligible for the Québec Health Insurance Plan, as do their spouse and dependents.

Once every seven years, Québec residents eligible for the Québec Health Insurance Plan may spend 183 days or more outside Québec during a calendar year and remain entitled to services insured under the plan.

Persons whose situation corresponds to any of the special cases described above are requested to contact the Régie de l'assurance maladie before leaving Québec, so as to be sure that they will remain eligible for the Québec Health Insurance Plan.

Special conditions apply to persons who have been residents of Québec for less than 12 months.

TEMPORARY RESIDENTS OF QUÉBEC

Persons eligible for the Québec Health Insurance Plan as temporary residents of Québec must be present in Québec for the entire duration of their stay, except periods of 21 consecutive days or less.

Any such persons who leave Québec for more than 21 consecutive days are ineligible for the plan for the duration of their absence from Québec.

SERVICES INSURED IN CANADA

Professional services

If you consult a physician* in another province or a territory of Canada, you must present your Health Insurance Card and it must be valid (the expiry date appears on the card). **If the physician agrees to be paid at the rates in force in Québec**, you are not required to make any payment. The Régie de l'assurance maladie will pay the physician directly.

If the physician refuses to accept payment at Québec rates, you will have to pay the physician's fee, and then submit an application for reimbursement to the Régie de l'assurance maladie du Québec together with the original receipt signed by the physician. The Régie will reimburse you at the Québec rate.

Example of a reimbursement for services received from a physician in Ontario	
Fee charged by physician	\$25
Amount reimbursed by the Régie (Québec rate)	\$16.10
Amount payable by insured person	\$8.90

Pharmaceutical services

The cost of prescription drugs purchased outside Québec is not covered, even if they were prescribed by a physician.

* Or an optometrist or a dentist, if you are eligible for insured services.

The cost of drugs administered during a hospital stay is included in the hospital services.

Hospital services

If, while in another province or a territory of Canada, you are hospitalized or receive treatment at a hospital outpatient clinic, you must present your Health Insurance Card and it must be valid (the expiry date appears on the card). You are not required to pay for the hospital services, since the hospital will bill the health department of its province or territory, which in turn will bill the Régie de l'assurance maladie du Québec. The Régie will pay for services insured under the Hospital Insurance Plan, such as the cost of ward accommodation.

However, if you are required to pay for the hospital services yourself, you will have to submit an application for reimbursement to the Régie de l'assurance maladie du Québec, together with all the necessary supporting documents.

OUTSIDE CANADA

Professional services

If you consult a physician* outside Canada, you will have to pay the physician's fee and then submit an application for reimbursement to the Régie de l'assurance maladie du Québec. However, if you have supplemental insurance covering medical fees, you may arrange with the physician and your insurer to proceed differently. Your reimbursement from the Régie will be equivalent to the fee you actually paid, to a maximum of the rate in force in Québec.

* Or an optometrist or a dentist, if you are eligible for insured services.

Example of a reimbursement for services received from a physician in Florida	
Fee charged by physician	CA \$75
Amount reimbursed by the Régie (Québec rate)	CA \$16.10
Amount payable by insured person	CA \$58.90

Pharmaceutical services

The cost of drugs purchased outside Canada is not insured, even if they were prescribed by a physician.

The cost of prescription drugs administered during a hospital stay is included in the hospital services.

Hospital services

If, while outside Canada, you receive emergency hospital services as a result of **a sudden illness or an accident**, the Régie de l'assurance maladie du Québec will reimburse you, for the cost of these services only, at the rates set by government regulation. In all other cases, the Régie issues no reimbursement.

(a) If you are hospitalized, the Régie will pay a **maximum of CA \$100** per day of hospitalization, including day surgery.

Example of a reimbursement for hospital services received in Florida following a heart attack	
Fee for 10 days of hospitalization	CA \$18 000
Amount reimbursed by the Régie	CA \$1 000
Amount payable by insured person	CA \$17 000

(b) If you receive treatment at a hospital outpatient clinic or emergency ward without being hospitalized, the Régie will pay a **maximum of CA \$50** per day for the treatment received, including diagnostic and therapeutic services (analyses, x-rays, etc.).

Example of a reimbursement for treatment received at a hospital outpatient clinic or emergency ward in the United States for a broken arm	
Fee charged	CA \$465
Amount reimbursed by the Régie	CA \$50
Amount payable by insured person	CA \$415

(c) However, whether you are hospitalized or not, the Régie will pay up to CA \$220 per hemodialysis treatment and the related medication.

(d) The Régie de l'assurance maladie du Québec will pay the entire cost of hospital services in emergency situations (sudden illness or an accident), and 75% of the cost of these services in other situations, for the following persons who spend time outside Canada: students, unpaid trainees, employees of the Québec government, and employees of a non-profit organization that has its head office in Canada who are working abroad within the scope of an international aid or cooperation program recognized by the Minister of Health and Social Services, as well as their spouse and dependents. However, when any of the above-mentioned persons are vacationing away from their usual place of study, training or work (whether before, during or after the period of study, training or work), they are subject

to the general rule governing reimbursements for hospital services received outside Canada.

In all the above cases, fees for professional services received in addition to hospital services will be reimbursed at Québec rates.

TRAVEL INSURANCE

If you plan to leave Québec for a few months, a few days or even a few hours, you should, **before leaving, take out private insurance** to partially or fully cover the costs not paid by the Régie de l'assurance maladie du Québec.

MEDICAL CARE NOT AVAILABLE IN QUÉBEC

If, because of your state of health, you need specialized medical care that is not available in Québec, the Régie de l'assurance maladie du Québec will pay the entire cost of hospital services (ward accommodation, nursing care, diagnostic services, prescription drugs, etc.) and of professional services received in a hospital, **on the condition that the Régie provided you and your attending physician with an authorization prior to your departure.**

In order to study your case, the Régie requires:

- a summary of your medical record;
- a brief description of the specialized medical care required by your condition;
- a written application signed by two Québec physicians with expertise regarding your illness and attesting that the medical care you require is not available in Québec; and
- the name and address of the hospital recommended.

HOW TO APPLY FOR A REIMBURSEMENT

1. Obtain an application for reimbursement from the Régie de l'assurance maladie du Québec (see the addresses and telephone numbers at the end of this pamphlet). The *Health Insurance Infoline* code for ordering the application is **3040**. Or, you can print the application from the Régie's Web site.
2. Complete the form very carefully and include any supporting documents requested (employment contract, attestation of studies, etc.).
3. Attach **the originals of bills and receipts*** if you paid fees to a physician** or to a hospital, and make sure the following information is clearly indicated:

- the name, address and signature of the health professional who rendered the services;
- the name, address and signature of the representative of the hospital at which the services were rendered;
- a detailed description of the services rendered; and
- the date of each service rendered and the fee charged.

4. Mail your completed application and the required documents to:

Régie de l'assurance maladie du Québec
Service de l'application des programmes
PO Box 6600
Québec (Québec) G1K 7T3

N.B. If you received hospital services outside Québec, we suggest that you enclose with your application a summary of your medical record or,

* No documents sent to the Régie will be returned.

** Or an optometrist or a dentist, if you are eligible for insured services.

in the case of major surgery, the operative report, as well as an official French or English translation of these documents if they are not in either of these languages. This will speed up the processing of your application. It may be useful to keep photocopies of documents you send to the Régie.

TIME LIMITS FOR APPLYING FOR A REIMBURSEMENT

The time limits for applying to the Régie for a reimbursement are one year from the service date in the case of professional services and three years from that date in the case of hospital services.

If you change your address, you must inform the Régie.

An efficient way of doing so is through the **Service québécois de changement d'adresse**, available on the Internet at **www.adresse.info.gouv.qc.ca**

If you wish, you may call the Régie or go in person to either of the Régie's offices. The telephone numbers and addresses appear under the heading "Ways to Contact the Régie."

Your Health Insurance Card is valid until the end of the month in which it expires. **It's up to you to check the expiry date.**

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

WAYS TO CONTACT THE RÉGIE

By telephone

Our automated telephone information system keeps you informed 24 hours a day, 7 days a week.
Québec: 418 646-4636
Montréal: 514 864-3411
Elsewhere in Québec, toll-free: 1 800 561-9749

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.

By visiting the Régie's offices

1125, Grande Allée Ouest
Québec (Québec)

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

Office hours

On Mondays, Tuesdays, Thursdays and Fridays from 8:30 a.m. to 4:30 p.m. and on 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: 1 800 361-3939

By mail

Régie de l'assurance maladie du Québec
PO Box 6600
Québec (Québec) G1K 7T3

On the Internet

www.ramq.gouv.qc.ca

Le présent dépliant est aussi publié en français.

Direction des communications

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Moving?
Be sure to let us know.

HEALTHCARE SERVICES INSURED OUTSIDE QUÉBEC

